

Determinants *of*  
Indigenous Peoples' Health

Beyond the Social

Second Edition

Introduction to the Second Edition:  
Rethinking (Once Again)  
Determinants of  
Indigenous Peoples' Health

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# Social Determinants of Health (SDOH)

- Recent: Emerged in mainstream health discussions only in past 2 decades
  - WHO report *Social Determinants of Health: The Solid Facts* (Wilkinson & Marmot, 1998)
- Challenges mainstream biomedical model
- *But...* basic premises of SDOH mirror what Indigenous peoples have known for millennia:
  - individual and community well-beings are linked to broad dynamics; humans are more than biology (or pathology)

# SDOH & Indigenous Health

- SDOH approaches useful for contextually nuanced analyses of Indigenous peoples' health



# SDOH & Indigenous Health

Three important insights on SDOH as it relates to Indigenous peoples' health:

1. Colonialism still needs to be fully accounted for as a significant determinant of health
2. SDOH for Indigenous peoples are unique and different from other populations, and thus should be considered independently—not as a subset—of general SDOH discussions
3. Most research/writing about SDOH and Indigenous peoples continues to be carried out by non-Indigenous peoples



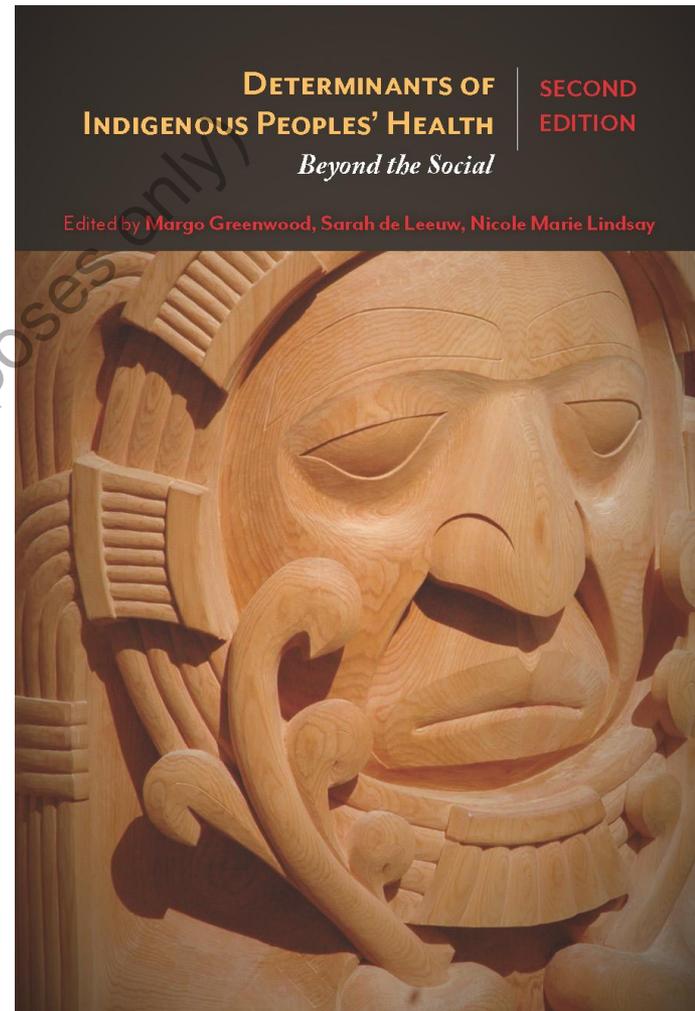
# Beyond the Social: Broadening SDOH Discussions

- Thinking beyond the social to include the full range of health determinants experienced by Indigenous peoples
  - colonialism is a central, over-arching determinant; enduring historical and contemporary dynamics emerge & change over time
- Other determinants (including those considered within SDOH frameworks) impact Indigenous peoples in unique ways
  - should be analyzed from a perspective of Indigenous knowledge, prioritizing Indigenous experiences and Indigenous voices

# Beyond the Social: Broadening SDOH Discussions

Objective of the book:

“to broaden the way Indigenous peoples’ health is understood, harnessing new ideas and new voices that challenge theorizations about health inequalities as being purely socially determined. ... [T]he authors in this collection show that health is multiply and complexly determined by a myriad of factors that, although they invariably unfold within a colonial reality, are always unique to a specific time and place.”  
(p. xxiii)



# SDOH Background

- 1986: WHO International Conference on Health Promotion (Ottawa); Ottawa Charter signed
  - Recommended public health policy and research focus on “upstream” factors like healthy environments and social context
  - Health Canada’s population health promotion (PHP) model aimed to focus on family, community and socio-cultural health interventions based on SDOH

# SDOH Background

- SDOH research shows influence of upstream factors
  - Income disparities, early childhood development, social inclusion/exclusion, social safety nets, employment and working conditions
- SDOH approaches adopted
  - At international level: WHO international conferences, publications
  - In Canada: Analysis of persistent health disparities between Indigenous and non-Indigenous peoples

# SDOH & Indigenous Knowledge

- Given ongoing health disparities and dominance of SDOH approaches, how well are Indigenous ways of knowing and being served?
- Do SDOH approaches eclipse other types of determinants not captured in standard models?

# SDOH and Indigenous Knowledge

“The subsuming of historic, geographic... environmental, economic, political, and even cultural drivers into a ‘social’ determinants framework... results in understandings about health that may not be nuanced enough to fully conceptualize the disparities and inequities lived by Indigenous peoples.” (pp. xxvi–xxvii)

# Questions for Reflection/Discussion

1. Research an Indigenous thinker, researcher, or writer and analyze their central arguments in relation to the health of Indigenous peoples. What can mainstream SDOH learn from their body of work?
2. Reflect on the standard determinants of health addressed by mainstream SDOH approaches. What other determinants are relevant for understanding the health realities of Indigenous peoples that aren't usually considered in SDOH approaches?
3. Colonialism is considered a significant, overarching determinant of health for Indigenous peoples. Discuss how colonialism operates as a determinant of health, or a cause of the causes of poor health, for Indigenous peoples.

# Additional Readings

Adelson, N. (2005). The embodiment of inequality: Health disparities in Aboriginal Canada. *Canadian Journal of Public Health, 96*, S45-S61.

Battiste, M. (2011). *Reclaiming Indigenous voice and vision*. Vancouver: UBC Press.

Loppie Reading, C. and Wien, F. (2013). *Health inequalities and social determinants of Aboriginal peoples' health*. Prince George, B.C.: National Collaborating Centre for Aboriginal Peoples' Health.

Richmond, C.A. and Ross, N.A. (2009). The determinants of First Nation and Inuit health: A critical population health approach. *Health & Place, 15*, 403–411.

Truth and Reconciliation Commission of Canada

Honouring the truth, reconciling for the future: summary of the final report.

[http://www.trc.ca/websites/trcinstitution/File/2015/Honouring\\_the\\_Truth\\_Reconciling\\_for\\_the\\_Future\\_July\\_23\\_2015.pdf](http://www.trc.ca/websites/trcinstitution/File/2015/Honouring_the_Truth_Reconciling_for_the_Future_July_23_2015.pdf)

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