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PURSUING HEALTH: UNDERSERVED POPULATIONS IN CANADA

[PHOTOS MY OWN]
OBJECTIVES

PURSUING HEALTH BOOK
TERMINOLOGY
DETERMINANTS OF HEALTH
INTERVENTIONS & DIRECTIONS
Focus on health care and public health interventions to improve the health of special populations in Canada.

Over 40 authors: scholars, front-line health care providers, and individuals from affected populations.

Stakeholder review process to incorporate feedback of individuals from populations discussed in the book.

Combining primary research, evidence reviews and personal stories.
Due to variances in the social, biological and political determinants in health, certain populations have lower health status.
SPECIAL POPULATIONS

• In healthcare, populations with this worsened health status related to the determinants of health are often termed *marginalized, vulnerable* or *underserved*.

• In public health, these differences have often been called health disparities, inequalities or inequities.
Special Populations

Vulnerable

Underserved

Marginalized
Approximately 1.2 million Canadians self-identify as Aboriginal (62% First Nations, 34% Métis and 4% Inuit) (Stats Can 201)

Mental health, chronic disease and injury rates are higher for many diseases for Indigenous populations.
Homelessness remains a critical issue in Canada, with 235,000 Canadians experiencing homelessness every year (Gaetz, Gulliver, and Richter 2014).

A further 3.3 million Canadians are precariously housed (Canada Without Poverty 2015).

Men who are precariously housed live 7-10 years less than the Canadian average (Hwang et al. 2009).
REFUGEES

• Canada accepts approximately one in ten of the nearly 100,000 refugees resettled in countries around the world annually (Government of Canada 2015).

• In 2012, there were 5412 Government-assisted refugees, 4212 privately-sponsored refugees, and 8578 successful claimants (Scholtens 2015).

• In 2013, 10,380 people made claim to asylum (Government of Canada 2015).
<table>
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<tr>
<th>Source</th>
<th>Cited examples of vulnerability in human subjects research</th>
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<tr>
<td>Belmont report</td>
<td>- Racial minorities&lt;br&gt;- The economically disadvantaged&lt;br&gt;- The very sick&lt;br&gt;- The institutionalized</td>
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<tr>
<td>45 CFR 46</td>
<td>- Children&lt;br&gt;- Prisoners&lt;br&gt;- Pregnant women and foetuses</td>
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<td>Declaration of Helsinki</td>
<td>- Incompetent persons&lt;br&gt;- Persons susceptible to coercion&lt;br&gt;- Persons who will not derive direct benefits from participation&lt;br&gt;- Persons for whom research is mixed with clinical care</td>
</tr>
<tr>
<td>CIOMS</td>
<td>- Those with limited capacity or freedom to consent or to decline to consent ... [including] children, and persons who because of mental or behavioural disorders are incapable of giving informed consent,&lt;br&gt;- Junior or subordinate members of a hierarchical group ... [such as] medical and nursing students, subordinate hospital and laboratory personnel, employees of pharmaceutical companies, and members of the armed forces or police,&lt;br&gt;- Elderly persons,&lt;br&gt;- Residents of nursing homes,&lt;br&gt;- People receiving welfare benefits or social assistance and other poor people,&lt;br&gt;- The unemployed,&lt;br&gt;- Patients in emergency rooms,&lt;br&gt;- Some ethnic and racial minority groups,&lt;br&gt;- Homeless persons,&lt;br&gt;- Nomads,&lt;br&gt;- Refugees or displaced persons&lt;br&gt;- Prisoners&lt;br&gt;- Patients with incurable disease&lt;br&gt;- Individuals who are politically powerless&lt;br&gt;- Members of communities unfamiliar with modern medical concepts</td>
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<td>ICH tripartite guidelines</td>
<td>- Members of a group with a hierarchical structure such as medical, pharmacy, dental, and nursing students, subordinate hospital and laboratory personnel, employees in the pharmaceutical industry, members of the armed forces, and persons kept in detention&lt;br&gt;- Patients with incurable diseases&lt;br&gt;- Persons in nursing homes&lt;br&gt;- Unemployed or impoverished persons&lt;br&gt;- Patients in emergency situations,&lt;br&gt;- Ethnic minority groups,&lt;br&gt;- Homeless persons&lt;br&gt;- Nomads,&lt;br&gt;- Refugees,&lt;br&gt;- Minors,&lt;br&gt;- Those incapable of giving consent</td>
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Ref: Hurst 2008
“THE CATEGORIES OF VULNERABLE POPULATIONS HAVE BEEN EXPANDED SO WIDELY THAT ALMOST EVERYBODY IS INCLUDED”

(GANGULI-MITRA AND BILLER-ANDORNO 2011)
“TOO NEBULOUS TO BE MEANINGFUL”

(Levine et al. 2004)
“AS A RESULT, THE SPECIAL PROTECTION RESERVED FOR GENUINELY VULNERABLE POPULATIONS IS BEING LOST”

(Schroeder and Gefenas 2009)
Special Populations

Vulnerable

Underserved

Marginalized
The implications of each of these terms is significantly different, although at times they are used interchangeably.
TERMINOLOGY: VULNERABLE

• With it’s Latin origins meaning ‘to wound’, vulnerable at its most basic refers to a susceptibility to being harmed (Schroeder and Gefenas 2009).

• Within the context of health, vulnerability refers to an “increased likelihood of incurring additional or greater wrong” (Hurst 2008).

• Others have elaborated to include individuals “susceptible being harmed, wronged, mistreated, discriminated against or advantage of in the context of healthcare and research” (Ganguli-Mitra and Biller-Andorno 2011)

• Or whom have “an inability to protect themselves, either physically or emotionally” (Schroeder and Gefenas 2009)
TERMINOLOGY: MARGINALIZED

- Marginalized is a term that may capture similar individuals to those identified as vulnerable, yet carries distinct connotations.

- The Oxford Dictionary defines marginalize as to “Treat (a person, group, or concept) as insignificant or peripheral” ("Marginalize" 2015).

- Lynam and Cowley describe marginalization as “a sense of being overlooked, categorized or misrepresented. It curtails opportunities for capacity building, and constrains ways in which relationships are established” (Lynam and Cowley 2007).

- Many individuals that might be considered vulnerable may also be considered marginalized, yet marginalization emphasizes a societal isolation of the individual as ‘other’, pushed to the periphery or margins (Lynam and Cowley 2007).
**TERMINOLOGY: UNDERSERVED**

- Underserved implies a lack of adequate provision of service to an individual or group.

- It refers to “an increased likelihood that individuals who belong to a certain population (and people can belong to more than one) may experience difficulties in obtaining needed care, receive less care or a lower standard of care, experience different treatment by health care providers, receive treatment that does not adequately meet their needs, or that they will be less satisfied with health care services than the general population” (Bowen 2001).

- Whereas vulnerable or marginalized identify the problem within the individual, underserved points to an unmeet need of an individual or group by a system (Reeder 1999).

- Underserved also creates an avenue for rectifying this issue, by way of bridging the gap between needs and services through the creation of a more appropriate or adequate service.
TERMINOLOGY RECOMMENDATIONS

1. Carefully reflect on the semantics of terms being utilized.

2. Consider the term ‘underserved’ if taking a health system reform lens; or ‘special populations’, which in and of itself carries none of the implications of the aforementioned term.

3. Avoid the pitfalls of generalizations; always recognize the heterogeneity in populations.
DETERMINANTS OF HEALTH

- Health System Failures
- Mental Health, Trauma and Addictions
- Poverty, Housing, Hazardous Environments
- Racism/Discrimination

Racism/Discrimination
Poverty, Housing, Hazardous Environments
Health System Failures
Mental Health, Trauma and Addictions
COMMONALITY

• Must recognize heterogeneous populations, unique circumstances and needs.

• Overlapping root causes of the social determinants of health including: poverty, housing, mental illness, cultural differences

• Need healthcare providers who can provide culturally safe patient care, and advocate for their patients.

• Health system reform to address underservice and systemic failures, such as institutional racism.
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REFERENCES


