

Voices Project: Introduction to Social Determinants of Health

"A woman's health has to do with her life and the world in which she lives,

it has to do with her socioeconomic situation, with her level of learning and whether she is able to make healthy decisions on her behalf. A woman's health has to do with the community in which she lives, with the cultural conditions and what her worth in society is seen to be.

A woman's health has to do with women being able to say what their needs are and what services are required.

It has to do with all of us - women and men, professionals and lay persons - thinking about the many factors which affect the lives of women, their development and their health" (Canadian Advisory Council on the Status of Women, 1995).

Aside from the obvious biological indicators and lifestyle behaviors that influence the health of individual women, there are myriad social circumstances that leave some women more vulnerable to illness and disease than others. These "social determinants" may take the form of inequalities related to age, race, ethnicity, language, ability status, sexual orientation, social status, income, education, housing as well as access to health care and social supports. Of these, income and social status represent the two most important constituents of women's health.

For many Canadian women, racial discrimination, ageism, anglocentrism and homophobia represent major determinants of their overall health and well-being. For many women, poverty leads to a lack of social status as well as inadequate housing and education, or creates barriers to accessing health care and support networks. Inequality, in any form, diminishes women's perceived control and increases

The narrow approach taken by those involved in women's health research, does not take into account the diversity of women's lived experiences. Although we recognize the importance of understanding the experiences women share, it is equally important to acknowledge the differences

their stress which, among other things, can lead to greater vulnerability to disease. Essentially, inequality translates into less access to the resources that facilitate the maintenance and improvement of health.

In recent years, there has been a developing interest in women's health and well-being as well as in the social basis of women's health. Yet, significant gaps in our understanding of the social determinants of women's health remain. Gender sensitive research recognizes the powerful social, economic and political factors that influence the quality of women's health. Historically, the exclusion of women from health research resulted in a view of health that was predicated on a male model. This exclusion has significant implications for the management of all women's health in that it encourages assumptions that health and well-being hold the same meaning for women and men, and that interventions will have the same positive health outcome for women.

among women. We know that women view their health and well-being within an inter-relational framework that encompasses social, cultural, psychological, spiritual and biological dimensions. For this reason, it is essential that we begin to

address women's health and well-being from the standpoint of women themselves.

We have organized this resource document in a way that, we hope, reflects the various circumstances of women's lives. Although we have identified diverse conditions under which women live, it is not our intent to isolate women into particular categories. However, in order to identify specific health issues, we must first discover how divergent paths lead women from diverse backgrounds to the same destination in terms of their health. Recognition of the complex and multi-faced nature of women's life experiences as well as the powerful underlying determinants of health, which traditionally fall outside the scope of health research, is central to the improvement of women's health.