



RNAO Speaking Notes:

Recession Relief Coalition Hunger Inquiry

Lynn Anne Mulrooney

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Good Morning. My name is Lynn Anne Mulrooney and I am Senior Policy Analyst at the Registered Nurses' Association of Ontario. RNAO is the professional association for registered nurses who practice in all roles and sectors across the province.

Thank you to the Recession Relief Coalition for organizing this Hunger Inquiry on what is literally a life and death issue. From our daily nursing practice and from the overwhelming evidence, nurses know that not having access to nutritious food and affordable shelter is why those with lower incomes are sicker and die earlier compared with those who have more resources. Today we will be hearing from a variety of compelling speakers who will be able to tell us more about some of the evidence linking hunger and poverty with poor health. We will hear from people with direct experience of being hungry, health care providers who witness the negative impacts of short-sighted public policy on the health of their patients, and researchers who are helping us understand the big-picture patterns of what is

happening to large segments of our community because of these harmful policies.

In order to be healthy there are certain conditions that must be in place. The more than thirty thousand registered nurses represented by RNAO believe that access to the conditions that permit health, including access to health services, are fundamental human rights. Although many people attribute their health to genetics, lifestyle choices, or luck, there has been a growing understanding worldwide of the social determinants of health. These social determinants of health are the circumstances in which we are born, grow up, live, work, and age as well as the social and health services that we have access to.

The World Health Organization's Commission on the Social Determinants of Health in their final report pointed out that some people are healthy and others are not because of a lack of social justice in our world. They talk about how "this unequal distribution of health-damaging experiences is not in any sense a 'natural' phenomenon but is the result of a toxic combination of poor social policies and programs, unfair economic arrangements, and bad politics."

RNAO has found the Commission's Social Determinants of Health Conceptual Framework useful as a way for us to understand that we need to be working on the immediate cause of poor health as well as the more upstream cultural, economic, social, and political context. This context is what creates the possibility for predatory market forces, a frayed social safety net, and various kinds of privilege that generate the health inequities that we are going to hear more about today.

The Commission on the Social Determinants of Health had three overarching recommendations:

1. Improve Daily Living Conditions
2. Tackle the Inequitable Distribution of Power, Money, and Resources
3. Measure and Understand the Problem and Assess the Impact of Action

We need to work on all three of these areas to improve health for everyone. As a starting point for discussion, Ontario's nurses call for social assistance rates that reflect the actual local cost of living. The social assistance system needs to be transformed from an incoherent tangle of contradictory rules to a person-centred system that treats everyone with dignity. Since social

assistance rates are so dangerously low, the government must immediately increase social assistance rates by \$100 per month as a first small step towards adequacy. Ensure continued access to the Special Diet Allowance for those who need it. There needs to be action on the promised provincial housing plan and the minimum wage must be increased to \$13.25 immediately. Instead of talking about “taxpayers’ rights” we need to talk about our common rights and responsibilities as people living together in community. We need a progressive tax system and revenue sources so that we can take care of those in need today and leave a healthy planet for generations to come.

The most vulnerable members of our community are often invisible within the corridors of power. Ontario’s nurses are committed to joining with you in helping politicians understand that when the provincial election comes along in October 2011, we will be making our voting decisions based on who is demonstrating the courage to build a more inclusive and vibrant province for all. Thank you!