



**SDG 3** represents our global approach to ensuring healthy lives and promoting well-being for all.



COMMUNITY  
FOUNDATIONS  
OF CANADA

**The Learning  
Institute**

Many community foundations are exploring the Sustainable Development Goals (SDGs) within their planning, granting, convening, Vital Signs and more. This Fact Sheet is part of a series that focuses on specific SDGs to engage and inspire community foundations of all sizes to deepen their work around these goals.

## What is this approach?

Over the last century, enormous progress has been made in health care with vast improvements in hygiene, medical treatments and life expectancy. However, less than half the world's population has essential health services, and the COVID-19 pandemic is likely to undo decades of improvement ([source](#)). With only 1% of vaccines going to low-income countries, global health inequities threaten to spur new variants and prolong the pandemic ([source](#)). The [targets of SDG 3](#) address these persistent global health challenges including ending epidemics and combatting deadly diseases, ensuring universal health care including reproductive health services, improving mental health and addressing substance abuse, protecting the health of pregnant women and newborns, and reducing deaths from accidents. Canada's strong global performance on SDG 3 conceals "significant health inequalities ( ... ) among Indigenous peoples, sexual and racial minorities, immigrants, and people living with functional limitations" ([source](#)). The COVID-19 pandemic has brought these inequalities into the spotlight as many groups find themselves more vulnerable to the virus. The pandemic has reminded us all that we cannot take our health or our health care systems for granted.

Nationally, Health Canada is the government's lead for SDG 3 with implementation carried out by Canada's provinces and territories and governed by the Canada Health Act.

**While the government does not have an integrated national health strategy, Canada's approach to SDG 3 is guided by several common priorities:**

- Identifying and eliminating inequalities in health outcomes.
- Tackling chronic diseases, e.g., heart disease, cancer, diabetes.
- Working with the social and environmental determinants of health.
- Healthy diets and lifestyles, including tackling substance abuse.
- Improving mental health and preventing mental illness.
- Palliative care.

### Health and Human Rights

Canada is committed to fulfilling the right of everyone to enjoy the highest attainable standard of physical and mental health, in line with the International Covenant on Economic, Social and Cultural Rights. Canada recognizes that fulfilling this right depends on realizing its other human rights commitments, including ensuring freedom from all forms of discrimination and protecting the most vulnerable.

— [CANADA VOLUNTARY NATIONAL REVIEW 2018](#)

The [Pan-Canadian Health Inequalities Reporting Initiative](#) has been established to understand health inequalities and their main drivers in Canada, and the Truth and Reconciliation Committee (TRC) has identified seven Calls to Action that address health inequities caused by colonization and genocide.

**The Calls to Action focus on ([source](#)):**

- Closing the gaps in health outcomes between Indigenous and non-Indigenous communities.
- Respecting and addressing Indigenous peoples' distinct health needs.
- Recognizing and supporting Indigenous health practices.
- Increasing the number of Indigenous health professionals.
- Training in cultural competency and anti-racism for health professionals.

In response, the government has launched [Indigenous Services Canada](#) with the goal of supporting “self-determination of Indigenous peoples, who should control service delivery for their own communities” ([source](#)).

#### WORDS YOU SHOULD KNOW

##### **Health Inequalities**

Health inequalities refer to differences in health status or in the distribution of health determinants between different population groups.

— [KEY HEALTH INEQUALITIES IN CANADA](#)

##### **Health Inequities**

Health inequities refer to the subset of health inequalities that are deemed to be unfair or unjust, that arise from the systematic and intentional or unintentional marginalization of certain groups, and that are likely to reinforce or exacerbate disadvantage and vulnerability.

— [KEY HEALTH INEQUALITIES IN CANADA](#)

At the local scale, the holistic and integrated nature of community health comes into focus along with the diverse ways that health and well-being are experienced. Community approaches to SDG 3 address the social and environmental determinants of health — the ways that our social and natural environments affect our individual and collective health. Examples include clean air and a healthy environment, safe water, good food, connections to nature, appropriate housing, safe and rewarding work, self-esteem, belonging, and freedom from discrimination and systemic racism.

#### **All of these come together in a healthy community through diverse local approaches to SDG 3, which include:**

- Education for healthy lifestyles and diets.
- Personal and community hygiene practices to prevent the spread of disease.
- Road safety education for adults, youth and children.
- Reduction of traffic through residential neighbourhoods.
- Support for Indigenous health practitioners and health centres.
- Creation of community gardens and increased access to healthy foods.
- Environmental campaigns to improve air and water quality.
- Support for public health services and programs so they reach the most vulnerable.
- Mental health services.
- Substance addiction programs and support services.
- Truth and reconciliation conversations and respect for Indigenous culture and practices.
- Welcoming of newcomers to Canada and support for their integration into the community.
- Advocacy and provision of a local living wage.
- Healthy and affordable housing solutions for families.
- Efforts to combat systemic racism and report discrimination and violence.

## Why is it important for grantmakers?

Community health and well-being is a common priority for grantmakers across Canada. Even before the pandemic, SDG 3 received the highest amount of funding from Canadian foundations in comparison to all other SDGs, with over \$6 billion provided in 2016/2017 ([source](#)). Health remains a priority for communities, with Canadians ranking SDG 3 second equal in their top Sustainable Development Goals ([source](#)). Most foundations are addressing this priority with one or more funds dedicated to community health and well-being.

When the pandemic hit, community foundations provided essential support through COVID-19 funds, followed by 177 foundations participating in the government's \$350 million [Emergency Community Support Fund](#) (ECSF). The response from community foundations highlights the multidimensional nature of the health crisis and the need for a whole-of-community approach. Community foundations did not just provide funding for health care initiatives, they gave to food banks, supported the redesigning of public spaces and transport, confronted systemic racism, helped businesses adapt and respond, and funded digital solutions to help community members stay connected in the face of isolation, anxiety and depression.

### WORDS YOU SHOULD KNOW

#### Social and Environmental Determinants of Health

Social and environmental determinants of health are the full set of social and physical conditions in which people live and work, including socioeconomic, demographic, environmental and cultural factors, along with the health system.

— [SOCIAL AND ENVIRONMENTAL DETERMINANTS OF HEALTH AND HEALTH INEQUALITIES IN EUROPE: FACT SHEET](#)

### The following are examples of innovative, inclusive and holistic responses to the COVID-19 crisis funded through the ECSF:

- In Newfoundland and Labrador, an ECSF grant supported the Craft Council in providing personal protective equipment to communities in need.
- In Prince Edward Island, the Cooper Institute provided legal support and health and safety information for temporary foreign workers to navigate the COVID-19 crisis.
- In British Columbia, the Atira Women's Resource Society worked with women living in single-room hotels and micro-units by providing meals, cleaning supplies and masks.

Supporting SDG 3 is not just about responding to crises but also about contributing to long-term community health. Doing so requires confronting systemic barriers including racism, worker exploitation and gender discrimination. Despite good national performance on SDG 3, life expectancy is between 7 and 12 years less for Indigenous peoples, and infant mortality is three times higher for First Nations and Inuit communities ([source](#)). The mental health of all Canadians has declined, with youth experiencing the largest decline, while only 37% to 58% of 2SLGBTQ+ Canadians report their mental health as very good or excellent ([source](#)). Thirty percent of women report having been sexually assaulted compared to 8% for men ([source](#)), and tuberculosis rates are 20 times higher for foreign-born Canadians ([source](#)). Many grantmakers are responding to these challenges with a focus on "health equity," which addresses the unfair or unjust health outcomes that arise from the "systematic and intentional or unintentional marginalization of certain groups," ([source](#)) including Canadians who are Black, Indigenous or people of colour (BIPOC), people with disabilities, youth, newcomers, women and gender-diverse.

**The principles that CFC developed for the ECSF also apply to grantmaking approaches that advance SDG 3 while addressing persistent health inequities:**

- Use participatory decision-making processes to shift power so that vulnerable populations inform and are included in funding decisions.
- Learn from, and follow the lead of, those on the frontlines of challenging inequalities and those who are building more equitable, sustainable and just communities.
- Challenge the broad social and economic power imbalances that give some people privileges, while disadvantaging and oppressing others.
- Pursue the work with truth, reconciliation and decolonizing practices in our hearts and minds, as well as in our collective outreach, grantmaking and communications efforts.
- Fund organizations led by the people they represent and act on the concept of “nothing about us, without us.”
- Place trust and confidence in applicants including funding projects at their full request — applicants know best what support they need.

**The importance of innovative and equitable approaches to community health can be seen in the work of community foundations across Canada, including:**

- The Winnipeg Foundation partnering in the Investment Readiness Program and supporting the [Clan Mothers Turtle Lodge](#) to build a [land-based Healing Village](#) for Indigenous women who are suffering from systemic racism.
- The [Community Foundation of Lethbridge and Southwestern Alberta](#), which is developing new relationships with Indigenous communities, including through funding for the Kainai Basketball Association, to foster the health and well-being of the community.
- Multiple community foundations that are funding [Community Health Centres](#), which address the social determinants of health, health equity and social justice.
- [Hamilton Community Foundation](#)’s Community Health, Education and Research Fund, which supports innovative participatory research in community health.
- The [Windsor-Essex Community Foundation](#), which adopted an SDG focus in their Vital Signs, identified oral health priorities and partnered to support Windsor’s only pay-what-you-can dental program.
- The many community foundations that are supporting access to healthy and nutritious food, with [a 2014 survey revealing that 91% of respondents supported food-related work](#).
- The Edmonton Community Foundation’s support for youth mental health through an ECSF grant to the [Alberta Integrated Youth Services Initiative](#), which has helped create a digital platform for young people and their families/caregivers.
- The many community foundations that fund local sports programs, which promote belonging, inclusion and physical fitness. See the Vital Signs report on [Sport and Belonging](#).

## Common principles to get started

The social and environmental determinants of health provide multiple entry points for community foundations to support SDG 3 by monitoring community health performance, funding strategic health interventions and collaborating with partners to address health inequities and promote long-term community well-being for all.

### 01 Learn and understand

- Learn from the lessons of the COVID-19 pandemic and prepare for the next health crisis by reading CFC's report [When a Crisis Strikes](#).
- Use Vital Signs to gather information on community health and well-being, including data on the different health outcomes of community members.
- Learn about Indigenous health practices by visiting the [First Nations Health Authority](#) website and explore SDG 3 from an Indigenous perspective by reading [The United Nations Sustainable Development Goals and Indigenous Peoples in Canada](#).
- Read the [Key Health Inequalities in Canada report](#) and visit the website of the [National Collaborating Centre for Determinants of Health](#) to learn more about tackling health inequities in your community.

### 02 Strategic grantmaking

- Use information from Vital Signs to identify funding priorities for community health and well-being, including funding to improve social and environmental determinants of health.
- Create a disaster preparedness fund that can be used for immediate disaster response, including future pandemics or health crises.
- Support the creation and work of [community health centres](#) that focus on the social determinants of health and address health inequities.

- Engage at the systems level by supporting community health frameworks, such as the work of the [Kate B. Reynolds Charitable Trust](#) in North Carolina.
- Consider leveraging impact investing for supporting community health. Terrapin has produced [a report that looks at the connection between social finance and the social determinants of health](#).
- Consider targeted grants to support Indigenous health practitioners and Indigenous health centres in your community.

### 03 Lead and collaborate

- Convene Vital Conversations to discuss what health and well-being mean for your community, identify local SDG 3 priorities, and prepare for future health crises.
- Build relationships with organizations working on different aspects of health and well-being in the community to support future collaboration.
- Share Vital Signs data on community health and well-being with decision makers and stakeholders in order to build partnerships and support health equity. See the work of [The County Foundation](#) in monitoring the impacts of the COVID-19 pandemic.
- Consider partnering in collective impact work for advancing health outcomes: connect with the local health authority, universities, institutes, and existing community NGOs and health centres. See the example of the [North West Health Equity Forum](#).
- Advocate for health equity. In the US, there is a growing movement to declare racism a public health crisis, driven by [39 health care systems across the nation](#).

## Resource list

### **Action on Social Determinants of Health Through Social Finance: An Evidence Review**

- Pages 17–29 look at linkages between social finance and social determinants of health.
- Pages 30–36 present approaches to expand social finance to address social determinants of health.

### **When a Crisis Strikes: A Guide for Community Foundations**

- A guide that outlines the role of community foundations during times of crisis, including lessons learned from the COVID-19 pandemic.
- Pages 5–12 look at the unique role of community foundations during times of crisis with examples from the pandemic.
- Pages 13–19 provide general guidelines for community foundations in times of crisis.

### **Prescription for a Healthy Canada: Towards a National Environmental Health Strategy**

- A report produced by the David Suzuki Foundation that examines key environmental health issues in Canada.
- Pages 9–36 provide an overview of the health effects of environmental hazards.
- Pages 53–60 look at the intersection between inequity and environmental health hazards.

### **National Collaborating Centre for Determinants of Health**

- The NCCDH works to advance social determinants of health and health equity through public health practice and policy.
- The Learn section of the website has an introduction to social determinants of health with links to key documents.
- The same section also has a resource page with a range of reports related to achieving health equity and working with social determinants of health.

### **Canadian Association of Community Health Centres**

- Organizational website that introduces the concept and principles of community health centres (CHCs).
- The Policy and Advocacy section has an introduction to CHCs, evidence of impact and resources for advocacy.

### **The United Nations Sustainable Development Goals and Indigenous Peoples in Canada**

- A report produced by the National Collaborating Centre for Aboriginal Health that explores how the SDGs relate to Indigenous peoples in Canada.
- Pages 14–34 look at how Indigenous peoples are experiencing progress toward the SDGs in Canada including health data.

### **Key Health Inequalities in Canada: A National Portrait**

- A 413-page report that covers key health inequities in Canada released in 2018.
- Pages 57–151 cover inequities in key Canadian health outcomes.