

An open letter from [BC's front line social service leaders](#) on the prescription for BC to reduce medical and affordability pressures

Dear BC Politicians,

As leaders in designing and delivering community-based supports for British Columbians of all ages and abilities since 1982, we are taking this opportunity to emphasize the importance of investing in the building blocks for a healthy society – like affordable housing, child care and poverty reduction.

We were pleased to see the 2024 [Budget Strategic Plan](#) affirm the contributions our work makes to the health of British Columbians:

“[H]ealth goes well beyond the clinic or hospital. It starts when we invest in affordable homes, livable incomes, affordable child care, healthy communities and a clean environment.”

We also welcomed the acknowledgment that helping all British Columbians get ahead means “strengthening healthcare, and making improvements in child care, education, post-secondary and housing.”

Federation members strongly support these strategic insights. We know from first-hand experience that so long as British Columbians can't access safe homes, good incomes and quality child care, medical care alone will never be enough to prevent us from dying early. We are on the frontlines, delivering community services that make people healthy.

As we head towards a provincial election, we urge all parties to turn these evidence-based budget insights into concrete action.

Canadian and global research point to a clear starting point – one prescribed by [Get Well Canada](#): assess investments in social supports and education relative to investments in medical care, and track the resulting ratio over time. This ratio is a simple, proven tool to begin to align fiscal planning with the principles in your strategic plan.

We are concerned both with the living costs and medical access pressures facing the people we serve. Research shows that [better balancing spending on medicine with other priorities critical to our wellbeing](#) is the solution to both of these problems.

Building from the province's successful efforts to [recruit and retain](#) physicians, the data make clear that more doctors aren't a silver bullet. BC already has more physicians per capita than ever. [Canadian Institute for Health Information](#) data confirm that there were 162 physicians for every 100,000 BC residents in 1976 – today there are 270. BC has more physicians, including family doctors, than any other province in Canada. Risk of burnout among medical professionals is real, but a narrow focus on the number of doctors ignores a root cause of the problem: the number of patients.

[Health science](#) overwhelmingly concludes that the conditions in which we are born, grow, live, work and age matter more for our health than the medical care we receive. This means that to decrease patient-loads, we must reduce key [root causes of ill health](#) – like financial insecurity and housing precarity. As echoed by your Strategic Plan, the first stops for good health are found in our neighbourhoods, jobs, child cares and schools, not in clinics and hospitals.

The ratio of social/education spending to medical spending (SE/M ratio) should become the province’s north star for recalibrating investments. Following this prescription will permit politicians and voters alike to judge whether we are budgeting in line with health science evidence. This evidence shows that growing investments in the building blocks for a healthy society *more urgently* than investments in medical care is the better path to improved health outcomes. In brief, the province should be guided by the old adage, ‘an ounce of prevention is worth a pound of cure’.

The following table reveals how provincial spending on the building blocks for a healthy society have fallen behind spending on medical care.

Table 1: BC’s SE/M ratio over time

SE/M ratio: 1976	SE/M ratio: 2000	SE/M ratio: 2010*	SE/M ratio: 2016	SE/M ratio: 2021	SE/M ratio: 2023	SE/M ratio: 2026 (projected)
1.22 Social & education 22% more than medical	0.98 Social & education 2% less than medical	0.96 Social & education 4% less than medical	0.90 Social & education 10% less than medical	0.88 Social & education 12% less than medical	0.92 Social & education 8% less than medical	0.87 Social & education 13% less than medical

*Between 2000 and 2010, there is a change in the data set. Data for 2010 over-estimate the SE/M ratio by comparison with data prior to 2010.

Organizations like ours that sustain British Columbians’ health and wellbeing are under-resourced by comparison with colleagues and allies who offer the medical services residents need when their living conditions erode. **Measuring and tracking the SE/M ratio will help BC find the optimal balance for future investments in social supports and education relative to medical care.** We look forward to seeing this commitment in your election platforms.

Federation of Community Social Services of BC Member Signatories