



National Collaborating Centre
for Determinants of Health

Centre de collaboration nationale
des déterminants de la santé

LEARNING FROM PRACTICE: ADVOCACY FOR HEALTH EQUITY - GENERATION SQUEEZE



BACKGROUND

Advocacy is a vital role for public health practitioners in Canada. Engaging in advocacy helps us build and capitalize on collective action to support systemic change, and offers significant potential to foster the conditions that support greater health equity in our communities.¹

There is no single way to design and implement advocacy to address health inequities. Selecting an approach depends on the local or broader context, practitioners' own philosophies or preferences for practice, and the dominant values within the organization.

Despite the wide variety of approaches that can be used in advocacy, there are some essential elements:²

- Clear, specific policy goals;
- Solid research and science base;
- Values linked to fairness, equity and social justice;
- Broad-based support through coalitions;
- Mass media used to set public agenda and frame issues; and
- Use of political and legislative processes for change.

This practice example was created by the National Collaborating Centre for Determinants of Health with the founder of Generation Squeeze to demonstrate the application of advocacy in Canadian public health practice. Visit www.nccdh.ca for other documents on advocacy in the Learning from Practice series.

While advocacy is an important part of public health practice, many public health practitioners are hesitant to engage in challenging, complex and wicked issues³ associated with health equity. Practitioners need support to fully embrace advocacy as a legitimate public health strategy, and the opportunity to work in conjunction with other sectors and organizations that might have a complementary vision. Sharing ideas and successes by providing examples from communities across Canada is an important way for public health practitioners to learn about this vital component of our professional role.^{4,5}

Generation Squeeze provides an example of effective advocacy from which other workers in the public health sector can learn many lessons.

GENERATION SQUEEZE

“Global AgeWatch ranks Canada among the very best countries on the planet to grow old, while UNICEF ranks Canada among the least generous industrialized countries for investing in the generations raising young children. It’s time for Canada to be a leader at investing in the social determinants of health across all life course stages.”

Generation Squeeze is a national, non-partisan, science-based political voice for the interests of Canadians in their 20s, 30s and 40s, and their children. It was founded in 2011 by Dr. Paul Kershaw, a professor at the School of Population and Public Health at the University of British Columbia, in response to a variety of issues that disproportionately affect younger generations.⁶ Examples include the difficulty of finding a good

job, the rising cost of owning a home and increased student debt—as well as, critically, a lack of government support to help address these problems. Kershaw refers to the combination of these factors as “the squeeze.”

The social determinants of health play a key role in how Generation Squeeze approaches its advocacy work. Canadians typically associate health with doctors and hospitals, rather than the conditions into which we are born, grow, play, work and age. Since science shows that these conditions drive individual and population health, Generation Squeeze organizes its activities to shine a light on how the conditions have been deteriorating for younger generations, along with the slow pace of policy response by governments. For example, Generation Squeeze features evidence that governments annually invest three times more per person age 65+ compared to each Canadian under age 45. The organization urges Canadians to be inspired to protect the spending on seniors while asking, “are we investing enough in younger Canadians?”

The organization mobilizes evidence about the social determinants of health for younger Canadians via two broad strategies: *Spread Out* and *Suit Up*. *Spread Out* aims to grow a large coalition of tens of thousands of allies who grow awareness about, and show support for, the evidence-based policy proposals advanced by Generation Squeeze. Activities include meet-ups, engaging online, petitions, letter-writing, rallies and phone calls. The intention is to mobilize clear calls for non-partisan political action in which Generation Squeeze builds and showcases a broad coalition that encourages public officials to report the age distribution of government spending, and implement research-informed policy adaptations to ensure that Canada works for all generations.



Suit Up activities engage directly with policy makers by giving evidence-based presentations to public officials about the age distribution in government spending – identifying strengths, weaknesses, and opportunities for policy change. These presentations generally include members of the Generation Squeeze network so that they can share their experiential expertise in combination with the organization’s academic expertise.

Generation Squeeze’s model is inspired by the Canadian Association of Retired Persons (CARP), a very successful lobby group for Canadian seniors that currently has more than 300,000 members and nearly 50 chapters across the country.⁷ CARP’s approach, which includes building a membership base and providing those members with benefits (e.g., discounts at local businesses), has proven to be an effective way to approach advocacy work. Dr. Kershaw was therefore inspired to attempt building something similar for Canadians in their 20s, 30s and 40s.

“We know health care systems don’t make people healthy. They treat our illness. What makes us healthy are the policies that promote the determinants of health.”

A “Better Generational Deal”

For working Canadians, life in the 21st century is very different than it was for previous generations. Housing prices across the country have skyrocketed, while job prospects in many sectors have dwindled.⁶ Full-time work pays, on average, thousands of dollars less than a generation ago, even though today’s younger Canadians are twice as likely to have post-secondary education than their predecessors. Generation Squeeze analyzes the various ways that Canadians in their 20s, 30s and 40s are being “squeezed” by new demands on their time, budgets, and schedules.

“The goal is to narrow the gap between what science tells us about the importance of investing in the social determinants of health for younger generations, and what society actually does in our government budgets.”

Closing the age gap in social spending

Currently, governments across Canada spend more than \$33,000 on benefits and services per retiree annually, compared to less than \$12,000 per person under the age 45.⁶ The Generation Squeeze theory of change is simple: if younger Canadians had a science-based, non-partisan organization with clout that matched CARP, governments would more likely to adopt policies to address the squeeze on younger generations with the same conviction they adopt for the aging population. It therefore advocates for all political parties, at all levels, to report and acknowledge this age gap in their annual budgets, and to help reduce it by annually investing an extra \$1,000 in each Canadian under age 45—bringing the total annual investment to around \$13,000.⁸

Recommended policies

The additional \$1,000 per person under age 45 would be pooled to invest in evidenced-based policies to improve the social determinants of health. Although improving the factors that shape well-being for an entire generation of people can seem daunting, Generation Squeeze’s website includes a list of targeted, practical policies that they believe are the best and most achievable ways of helping balance the scales for Canadians in their 20s, 30s, 40s, and their children.⁸ Generation Squeeze only integrates recommendations into its vision for a *Better Generational Deal* if they are supported by research. For example, the *New Deal for Families*, the flagship policy proposal that calls for longer parental leaves per household, \$10-per-day child care, and shorter work weeks, is based on a synthesis of peer-reviewed literature, including years of research conducted in-house by Dr. Kershaw and senior researcher Lynell Anderson.⁹

Influencing political platforms in the 2015 federal election

Generation Squeeze uses a comprehensive evaluation framework to improve the intervention by adapting its implementation over time. [Our model \(metrics overlay\)](#) contains a complete interactive map of its metrics. These metrics include the following:

- Number of Generation Squeeze allies: the larger the network of allies, the greater the opportunity to create political incentives for governments to act on

science-based social determinants of health policy recommendations;

- Number of and dollar value of earned media;
- Number of electoral districts with operating volunteer groups;
- Number of and dollar value of volunteer hours; and
- Number of political party commitments, leading ultimately to the number of policy victories that align with science about the social determinants of health.

The organization piloted the implementation of its current theory of change in 2015 in advance of the federal election.

Outcomes achieved during the pilot included:

- all four national party platforms integrated components of the Generation Squeeze three-part *New Deal for Families*, which recommends improvements to parental leave; child care; and flex-time. The Liberal and Green parties adopted the language of all three policy recommendations. The NDP adopted the language of longer leave, and \$15-per-day child care. The Conservatives adopted the language of extending parental leave to 18 months.
- two of the four national parties explicitly cited Generation Squeeze research in their platform backgrounders about child care and other family policy; and a third explicitly consulted with Generation Squeeze during the campaign when finalizing the design of its parental leave recommendation.

THE LEARNING FROM PRACTICE SERIES

Learning from Practice is a series started in 2014 as easy-to-read practice examples to demonstrate the integration of health equity into public health practice. This series includes examples on targeting within universalism, influenza, organizational capacity, advocacy and more.

To download the **Learning from Practice** series, visit www.nccdh.ca



BACKGROUND

Universal public health programs—programs that apply to an entire population—are based on the belief that each member of society should have access to the same services to maintain or improve his or her health. Targeted public health interventions apply to prioritized sub-groups within a broader, defined population. Targeted interventions often address specific needs or issues resulting from social, economic or geographic disadvantages. Each approach has its strengths and challenges. A challenge for the universal approach is that it can widen health gaps if some people are not able to or do not access and benefit from the intervention. On the other

hand, targeted approaches may have little effect on leveling the health gradient if the structural causes of disadvantage are not addressed.

Targeting within universalism is an approach that blends aspects of universal and targeted interventions in order to close the gap between the most and least healthy, and reduce disparities along the socio-economic gradient. With this approach, public health can modify and orient interventions and services to meet the needs of the entire population, while addressing the additional needs of population groups that experience marginalization.

These examples of the influence Generation Squeeze had over multiple party decisions in the federal election campaign coincided with all four parties proposing between \$4 billion and \$7 billion in additional annual spending on the generations raising children. Regardless of which party won the election, all of the parties committed to what would equal the single largest annual increase in spending on families in over a decade. While it cannot be claimed that Generation Squeeze caused these party promises, the above evidence of influence suggests the intervention supported an evolution in the world of Canadian politics that resulted in all parties beginning to prioritize the needs of generations raising children more than they had in the past.

ADVOCACY ROLES FOR PUBLIC HEALTH

“In the Canadian cultural context, anytime people hear health they think of the health care system. They think hospitals, doctors, illness treatment. And it’s just so difficult to shift people to consider the conditions that shape well-being if we remain determined to use the phrase social determinants of health.”

When it comes to advocating and influencing public policy, public health organizations can learn from the range of roles Generation Squeeze plays.

Framing the issue

Framing the issue is vital for identifying a problem, selecting a solution, and developing a communication strategy. To that end, Generation Squeeze rarely uses the language of “social determinants,” because it finds this terminology is misinterpreted by, or confusing for, the general public. Instead it uses plain language to focus directly on specific determinants by talking about earnings, education, housing and child care.

The Generation Squeeze frame also purposefully engages people to think at the population level —and deliberately avoids words and phrases that trigger a more individual-based mindset about health. For example, focus group research conducted by Generation Squeeze found that participants were far more likely to associate “vulnerable children” with parents who are individually failing as opposed to larger structural problems like stagnant incomes and rising housing costs. In response, the organization stopped leading its communication with reference to early child vulnerability, and adopted the name *Generation Squeeze* to draw people’s attention to population-level trends affecting all Canadians in their 20s, 30s, 40s and the children they are raising. These trends result in the vast majority feeling squeezed either for time, money, services, and/or by the risks of climate change, dirty soil, air and water. This Generation Squeeze experience reveals that it is one thing for health scholars to produce evidence but it’s an entirely different thing to ensure that the general public makes meaning of the evidence accurately. Building narratives that make accurate meaning of the evidence is critical for knowledge translation and mobilization, which are key components in advocacy work.

Gathering and disseminating data

Using data in advocacy means using information to assess needs, bring together potential partners, and identify a strategy for action. The analysis and policies recommended by Generation Squeeze are the result of many years of research from the University of British Columbia, and informed by the school’s Human Early Learning Partnership. Generation Squeeze has also analyzed dozens of provincial and federal budgets, and found that younger Canadians are being “squeezed” all across the country in similar ways: earning less money than previous generations, spending more time at work, and facing higher costs of living. As part of its *Spread Out* activities, the organization then disseminates its findings through a variety of tactics including press releases, infographics, short animated videos, direct email to allies, and posts on social media; which in turn leads to increased public awareness and media attention all across the country.



Working in collaboration and developing alliances

Advocacy is most powerful when it is undertaken by an alliance of many diverse individuals and groups working together. Generation Squeeze has built a coalition that now surpasses 26,000 people and a variety of organizational allies. Generation Squeeze uses a broad range of tactics to attract and retain the attention of allies. Early allies have been asked to reach out within their networks to spread word of Generation Squeeze activities, and encourage joining in support of the *Better Generational Deal*. But Generation Squeeze has also negotiated discounts at several businesses across the country, including insurance, car shares, and cell-phone providers, in order to attract people's attention by speaking directly to their self-interest to save money, and showcasing that organizing together can yield results in the marketplace as well as the world of politics. This has created a broader range of opportunities by which potential allies may come to hear about the Generation Squeeze work, and decide to join the coalition. It is a strategy that is used by other large advocacy groups, including CARP.

Generation Squeeze's organizational allies include funders like the United Way of the Lower Mainland and the Vancouver Foundation, which partner with Generation Squeeze in service of their own organizational missions. Vancity Credit Union provides funding and seconds an employee to Generation Squeeze because it is aligned in terms of values, the objective to keep housing prices in reach for what people can earn, and because the Credit Union aspires to support social innovations. Landlord BC partners with Generation Squeeze because the two organizations share common goals to increase the supply of purpose-built rental as a policy adaptation to ease the housing squeeze. The Canadian Alliance of Students Associations has partnered with Generation Squeeze because the latter offers another vehicle to grow political will in support of policy priorities identified by the student alliance. Finally, Generation Squeeze is also in the process of establishing working groups of researchers and other experts to develop or refine specific policy recommendations based on the organization's already-established research themes.

Generation Squeeze has learned that collaborations with individuals and organizations are important because knowledge mobilization requires channels by which to distribute the evidence and invite people to get involved. These channels require resources to build and networks in order to expand.

Using the legal and regulatory system

Advocacy can have an even greater effect when it is combined with existing legal and regulatory systems. For Generation Squeeze, in keeping with its 2015 pilot, that means using its research and media attention to directly influence government budget decisions to invest in social policy that can improve the lives of Canadians in their 20s, 30s, 40s and their children.

“If you want to shape the determinants of health, you need to shape the policy decisions that guide those determinants.”

SUPPORTS AND CHALLENGES

There are many factors that have supported Generation Squeeze’s work over the years. These include the wealth of scientific data on the subject of health equity, in Canada and beyond, and the institutional support for research and knowledge mobilization offered by the University of British Columbia to Dr. Kershaw’s lab. Much of this information is easily accessible on the Generation Squeeze website.

But advocacy is not without its challenges. While Generation Squeeze looks to emulate groups like CARP in its efforts to amass political influence, it has struggled with the logistics of building an infrastructure where none currently exists, and sustaining relations with a network of over 25,000 on a budget that can employ less than two full time equivalent positions. The lack of person-power can make it difficult to perform effective, non-partisan, science-based knowledge mobilization in the world of politics, and is a focus for improvement in the future. Similarly, despite influencing political platforms in the federal election, Generation Squeeze organizers know there remains a large gap between governments adopting the language of policy recommendations, and following through with sustained, adequate budget investments.

LESSONS LEARNED

The staff at Generation Squeeze have learned many things from their advocacy work. These lessons include:

- ***Make sure you have a strong research base*** – Many Canadians may agree with a group like Generation Squeeze on an intuitive level, but it’s critical to have scientific research to back up each of your policy recommendations. If someone is skeptical, you can point to the research as proof that your suggested policies are carefully considered and should be taken seriously.
- ***Research on its own isn’t enough*** – People typically don’t change their behaviour or thinking just because they are

given the correct information. To really effect meaningful change on a personal level, you have to consider what values and interests might be competing with your evidence-based messages. At a governmental level, it’s important to be anticipate other political factors—from budgets to timing, optics and ideology—that might get in the way of strong health equity policies.

- ***Framing matters*** – Framing refers to the specific language, metaphors, and ideas that we use to to make meaning of the evidence for others. Health researchers and practitioners should anticipate that the time and energy required to produce sound scientific evidence will be matched by comparable amounts of time and energy to develop framing strategies to support target audiences to accurately interpret research findings.
- ***Policy makers respond to those who organize and show up*** – Groups like CARP show that organizing a large constituency under one banner can be extremely influential in the world of politics. It took a while for Generation Squeeze to learn this lesson. When it first started in 2011, it prioritized raising awareness about the squeeze on younger generations without building political influence for its constituency. In those early years, it raised lots of public awareness via earned media and supporting community organizations to hold a range of innovative events. But the organization struggled to close the gap between its evidence-based policy recommendations and government priorities. The gap remained because strong scientific evidence was a necessary, but not a sufficient, incentive for decision makers.

Upon changing tactic to grow a constituency that now numbers in the thousands, Generation Squeeze has been better able to garner the attention and interest of policy makers across the ideological spectrum. However, building and funding the organizational infrastructure to sustain and grow a large coalition remains an ongoing challenge.

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Acknowledgements

This case story was researched and written by Michael Hingston, writer/editor at Alberta Health Services with guidance and feedback from Sume Ndumbe-Eyoh, NCCDH. Review was provided by Lesley Dyck and Connie Clement, NCCDH. Special thanks to Dr. Paul Kershaw who was interviewed for this case story. The interview was conducted by consultant Victoria Barr. Thank you to Alberta Health Services who supported the collaboration with NCCDH.

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The National Collaborating Centre for Determinants of Health (NCCDH), hosted by St. Francis Xavier University, is one of six National Collaborating Centres (NCCs) for Public Health in Canada. Funded by the Public Health Agency of Canada, the NCCs produce information to help public health professionals improve their response to public health threats, chronic disease and injury, infectious diseases and health inequities. The NCCDH focuses on the social and economic factors that influence the health of Canadians and applying knowledge to influence interrelated determinants and advance health equity. Find out more at www.nccdh.ca.

Please cite information contained in the document as follows: National Collaborating Centre for Determinants of Health. (2017). *Learning from Practice: Advocacy for health equity – Generation Squeeze*. Antigonish, NS: National Collaborating Centre for Determinants of Health, St. Francis Xavier University.

ISBN: 978-1-987901-61-0

Production of this document has been made possible through a financial contribution from the Public Health Agency of Canada through funding for the National Collaborating Centre for Determinants of Health.

The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

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