Backgrounder - Making the Case for Justice & Health Partnerships

Justice & Health Partnerships, also known as Medical-Legal Partnerships, are collaborations between health care providers and legal professionals designed to build legal awareness and literacy, facilitate access to legal services for patients, reduce health disparities, and improve health outcomes.[1] The building blocks of these partnerships are community-oriented primary care, public health, and preventive law.[2] These partnerships operate in a number of different ways,[3] but are all designed to target legal problems arising at the interface of the social determinants of health (SDOH) and clinical practice.

The SDOH have been described as the "causes of causes" of health.[4] Income is one example: poverty has a significant impact on chronic health, with evidence that it increases the risk for cardiovascular disease, diabetes, chronic obstructive pulmonary disease (COPD), and arthritis. [5] Poverty also increases the risk for mental illness and cancer mortality. [6] Poor quality or precarious housing is another SDOH that may influence health in a myriad of ways, contributing to chronic illness, asthma and stress.

It is clear that the SDOH underlie many health conditions, and that patient health could be improved by treating the SDOH themselves; however treating the SDOH is often beyond the expertise of the most experienced health practitioner. However it is important to recognize that many of SDOH issues are in fact legal issues, and addressing these legal issues lies well within the skill set of Ontario's legal clinics that are mandated to provide free legal assistance to low income individuals. Legal clinics can assist patients to enforce their rights to safe, properly maintained homes and to access certain income benefits. Engaging legal help to address the SDOH can thereby address the root causes of the patient's ill-health.[7]

These partnerships recognize that it can be difficult to treat patients' health concerns without addressing the underlying social conditions that give rise to poor health,[8] and that many societal causes of poor health can be remedied with the assistance of legal professionals.[9] They provide a special opportunity for interdisciplinary work and knowledge transfer. Integrating legal help to the healthcare setting helps to create seamless points of access to legal services, promoting the "no wrong door" approach to justice and helping patients attain better health outcomes. JHPs reap results both for individual patients and in the context of systemic advocacy and reform.

We recognize that these partnerships may have added value in rural areas, where a number of factors negatively influence communities' capacity to access justice and health care.[10] These partnerships in rural areas can be expected to ameliorate financial and social issues related to unmet legal needs for low income residents, in turn improving health outcomes and overall quality of life.[11]

Through this project, we hope to accomplish the following:

1. Improve access to justice for low-income clients, particularly in rural and remote areas;
2. Support early intervention in and the prevention of escalating legal problems, thereby improving clients' health outcomes.

158 George Street, Level 1
Belleville, ON K8N 3H2
Tele: (613) 966 8686
Toll Free: 1 877 966 8686
Fax: (613) 966 6251
TTY: (613) 966 8714

References:

[1] See generally Edward Paul et al, "Medical-Legal Partnerships: Addressing Competency Needs Through Lawyers" (2009) 1:2 Journal of Graduate Medical Education 304–09; Barry Zuckerman, "Medicine and Law: New Opportunities to Close the Disparity Gap" (2012) 130:5 Pediatrics 943-44; Ellen Cohen et al, "Medical-Legal Partnership: Collaborating with Lawyers to Identify and Address Health Disparities" (2010) 25:2 Journal of General Internal Medicine at 136.

[2] James Teufel et al, "Rural Health Systems and Legal Care: Opportunities for Initiating and Maintaining Legal Care After the Patient Protection and Affordable Care Act" (2014) 35:1 Journal of Legal Medicine 81 at 95.

[3] Peter Noble, "Advocacy-Health Alliances: Better Health Through Medical-Legal Partnerships" (2012) online: National Center for Medical-Legal Partnership <http://medical-legalpartnership.org>

[4] Paula Braveman & Laura Gottlieb, "The Social Determinants of Health: It's Time to Consider the Causes of the Causes" (2014) 129:2 Public Health Reports 19-31.

[5] Gary Bloch, "Poverty: A Clinical Tool for Primary Care in Ontario" (2013) online: Ontario College of Family Physicians <http://ocfp.on.ca/cpd/povertytool>.

[6] *Ibid*.

[7] Cohen et al, *supra* note 1.

[8] Jeffrey David Colvin, Brooke Nelson & Katie Cronin, "Integrating Social Workers into Medical–Legal Partnerships: Comprehensive Problem Solving for Patients" (2012) 57:4 Social Work at 1.

[9] Cohen et al, *supra* note 1.

[10] These factors include geographic remoteness, low population densities, fewer health care providers, poor weather conditions, and reduced socioeconomic status. See Lisa R Pruitt & Bradley E Showman, "Law Stretched Thin: Access to Justice in Rural America" (2014) 59 South Dakota Law Review 465 at 476. See also Ontario Ministry of Health and Long-Term Care, "Rural and Northern Health Care Framework/Plan: Stage 1 Report; Final Report" online: <http://www.health.gov.on.ca>.

[11] James A Teufel et al, "Rural Medical-Legal Partnership and Advocacy: A Three-Year Follow-up Study" (2012) 23:2 Journal of Health Care for the Poor and Underserved 705-714.