

# GREATER CAMPBELL RIVER - 432

## Local Health Area Profile



Greater Campbell River Local Health Area (LHA) is one of 14 LHAs in Island Health and is located in Island Health's North Island Health Service Delivery Area (HSDA). The Greater Campbell River LHA is approximately 12,975 square kilometres. It sits at the eastern side of the North Island HSDA, and is bordered by four LHAs: Comox Valley, Alberni-Clayoquot, Vancouver Island West, and Vancouver Island North. Greater Campbell River is served by Highway 19 and Highway 28. It is approximately a 45 minute drive from Courtenay and two and a half hours from Port McNeill. Greater Campbell River has approximately 10 bus routes, a HandyDART service, and BC Ferries service from Campbell River to Quadra Island.



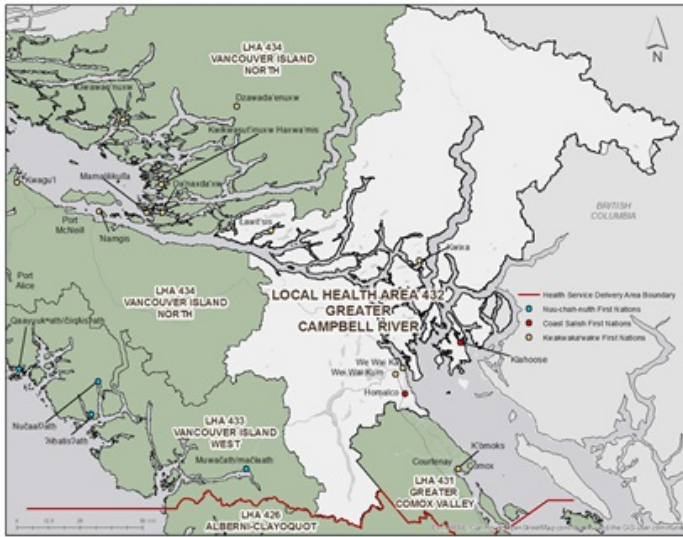
An accompanying Interpretation Guide has been created to assist with the interpretation of indicators.

**The Interpretation Guide should be read with the profiles.**

These profiles are not intended to be used for detailed planning or analysis. As they are updated on an annual basis, there may be more current data available. If you are intending to use these profiles for health planning purposes, if you have detailed questions, or notice a discrepancy, please contact Maritia Gully (Maritia.Gully@viha.ca).



# Population and Demographics

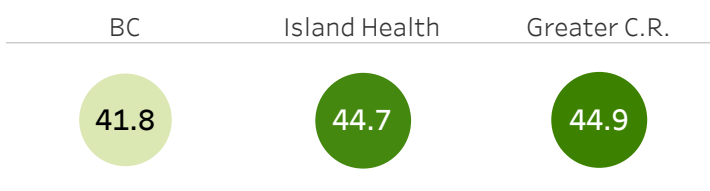


As of 2019, the Greater Campbell River (Greater C.R.) LHA represented 5.5% (46,382 people) of Island Health’s total population of 843,376. According to the 2016 Census, 12.5% of people living in Greater C.R. identified themselves as Indigenous, compared to 7.6% across Island Health and 5.9% in BC. Additionally, 4.4% of people living in Greater C.R. identified themselves as a visible minority, compared to 9.6% across Island Health and 30.3% in BC.

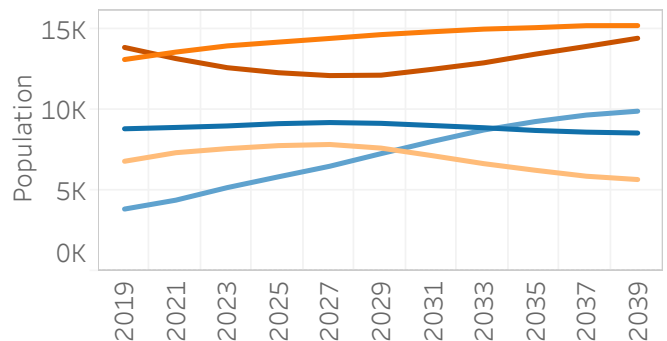
The population of Greater C.R. is older than that of Island Health and BC, with an average age of 44.9 years. The 75+ age group makes up 8.29% of the population, which is lower than Island Health (10.1%), but higher than BC (7.86%) proportions. Currently, the largest population group is between the ages of 45 and 64 years.

The Greater C.R. population is expected to increase by 8.69% to 50,412 by the year 2028; this is lower than the growth expected for Island Health (8.63%) and BC (11.4%). The greatest growth is expected in the 75+ age group, which is expected to more than double from 3,843 to 9,789 over the next 20 years. The 0-19 and 65-74 year age groups are expected to increase over the short term and then decline, while the 20-44 and 45-64 age groups are expected to increase in this 20 year period. See the Population and Demographics summary on page 11 for more information.

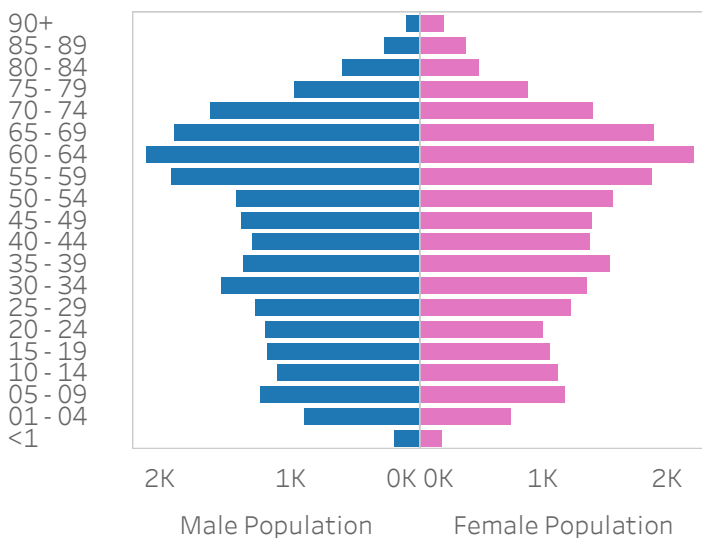
Average Age (2018)



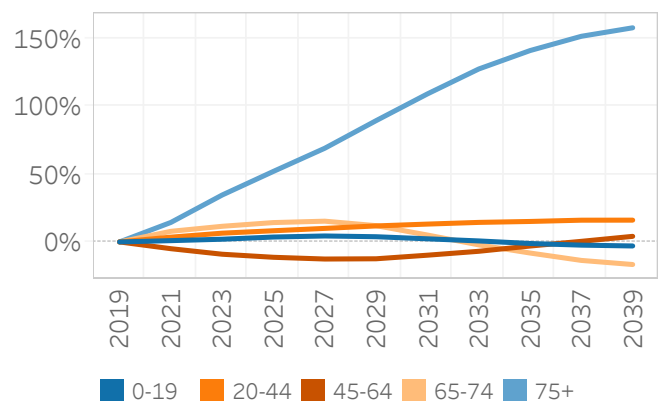
Estimated Total Population - Greater C.R.



Population Pyramid - 2019 - Greater C.R.



Estimated Population Change - Greater C.R.





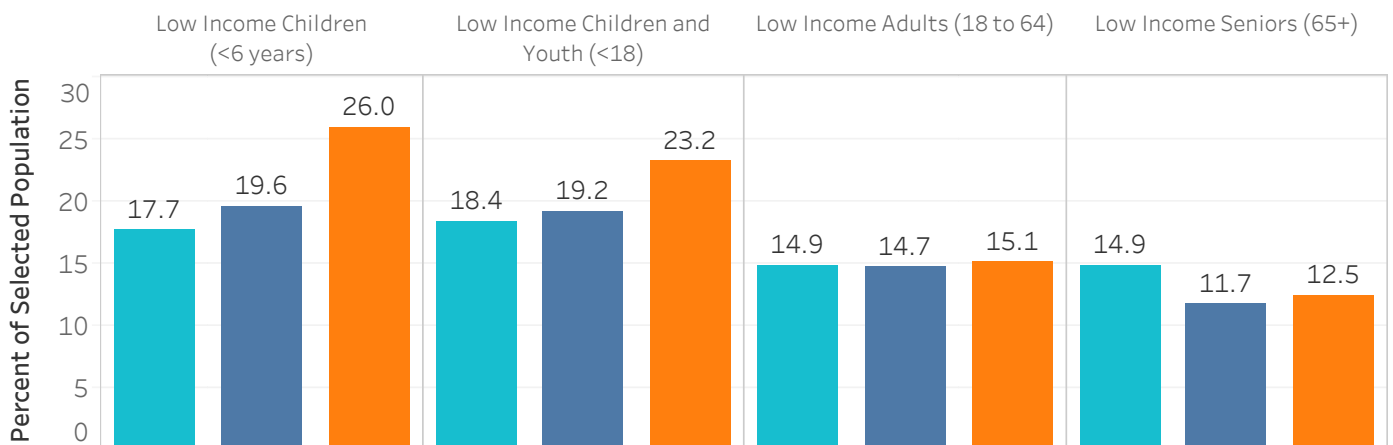
# Determinants of Health

Access to adequate income, affordable housing, healthy food, education, healthy environments, and recreational opportunities influence our health and wellbeing. People who are less well-off generally have poorer health and shorter life expectancies than those who are well-off. By working upstream to improve the conditions in which all people live, work, and play, we can decrease these gaps and improve the health and wellbeing of our population.

## Income and Employment

The median household income for Greater C.R. was \$62,946 in 2016 which is lower than the BC median household income of \$69,979 and Island Health's \$65,735 (median income in this report is a before-tax measure unless specified otherwise). The proportion of persons who are members of a low income household is higher among children, youth, and adults compared to Island Health and BC. The proportion of low income seniors is similar to Island Health overall and less than the BC level. Compared to Island Health and BC, the unemployment rate is higher in Greater C.R. (see also page 12).

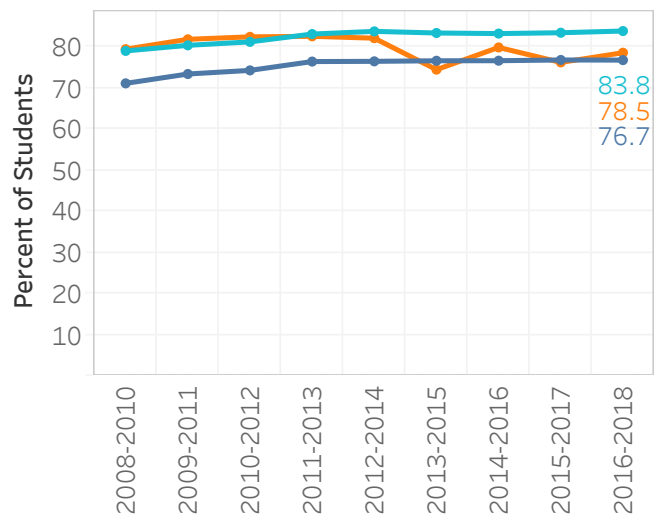
Percent of Population with Low Income in 2015 based on after-tax low-income measure (2016 Census)



## Education

High school completion rates in Greater C.R. are slightly higher than the rates for Island Health, but lower than the BC rate. Also, according to the 2016 Census, a slightly lower proportion of Greater C.R. adult population have completed post-secondary education, compared to Island Health and BC.

High School Completion Rate within 6 years of Grade 8 Enrollment (2 yr aggregate)



Population Aged 25 to 64 with Post-Secondary Certificate, Diploma or Degree (%)





# Determinants of Health

## Housing

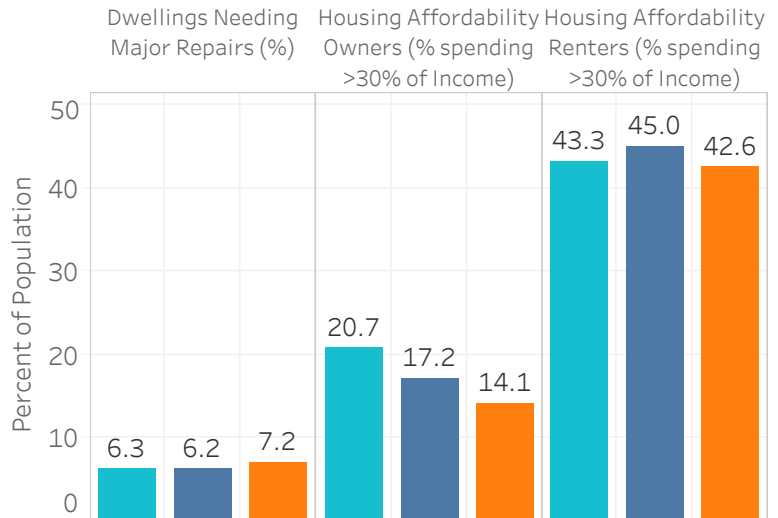
One way to measure affordability of housing is to look at how much of a household's income is spent on shelter. There is a lower percentage of renters and home owners in Greater C.R. spending more than 30% of their income on shelter, than the rest of Island Health and BC. There are fewer crowded family households in Greater C.R. compared to Island Health and BC, and the proportion of households in need of major repairs (e.g. defective electrical wiring) is higher than Island Health and BC rates (see also page 12).

## Early Childhood Development and Determinants of Child and Youth Health

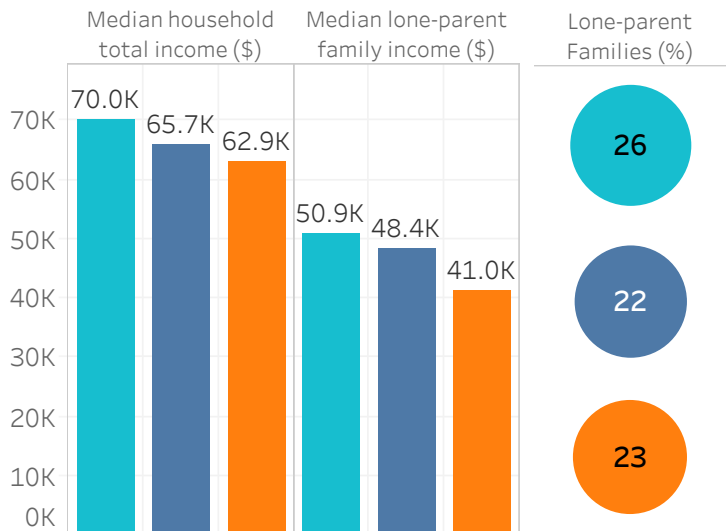
Creating supportive and healthy environments in an equitable way so that all children and youth can grow and thrive is critical to the health of the population. This includes supporting mothers during the pre- and post-natal period, supporting families during early development years, and supporting children and youth to grow, learn, and transition into adulthood.

Greater C.R. has a lower percentage of lone-parent families in comparison to BC, but higher than Island Health. Lone-parent families in this LHA also have a lower median household income than lone-parent families in Island Health and BC overall.

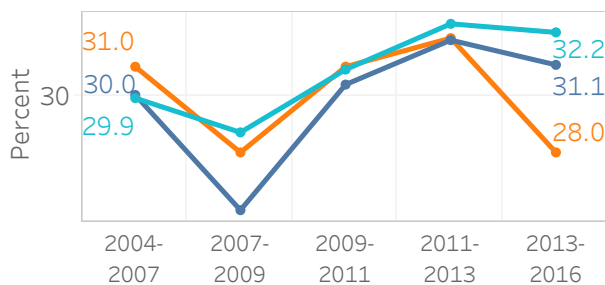
### Selected Household Indicators



### Median Household and Lone-Parent Income, and Percentage of Lone-Parent Families (2016 Census)



### Early Development Instrument (EDI) Percent of Preschool Children Vulnerable in EDI: Vulnerable on ≥1 Domains



The Early Development Instrument (EDI) is used to measure vulnerability in "waves" of kindergarten children across five domains (social, physical, emotional, language, and communication). Increases in the EDI rate are a negative indicator of child health and decreases are a positive indicator. For Island Health overall, vulnerability had increased between 2007/2009 and 2011/2013, but has since decreased. Greater C.R. had higher levels of vulnerability compared to either Island Health or BC, but there has been a large decrease in the last wave (positive indication).

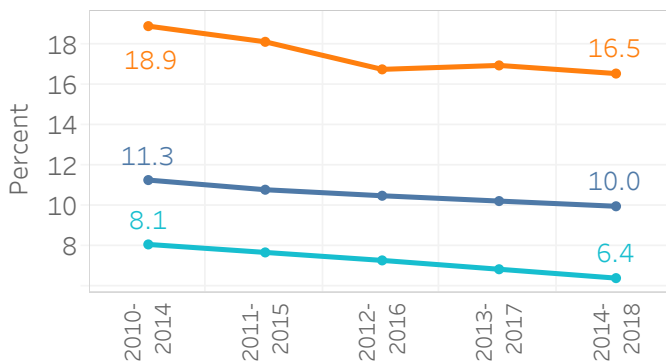


# Determinants of Health

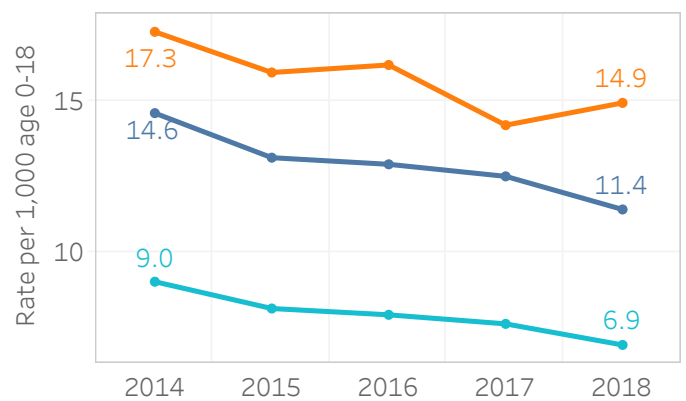
Mothers' smoking during pregnancy has demonstrated negative effects for both mother and baby. Rates of smoking during pregnancy have been decreasing over the past eight years; across Island Health overall rates have been much higher than for BC. In Greater C.R. a higher percentage of mothers reported smoking during pregnancy.

Rates of children and youth in care have decreased over the past five years across Island Health overall, while rates have remained higher than BC. The rate of children and youth in care is higher in Greater C.R. than in Island Health, and more than double the BC rate. See the Determinants of Health summary on page 13 for more information.

**Percent of Pregnant Women who Reported Smoking at Any Time During Current Pregnancy (5 yr aggregate)**

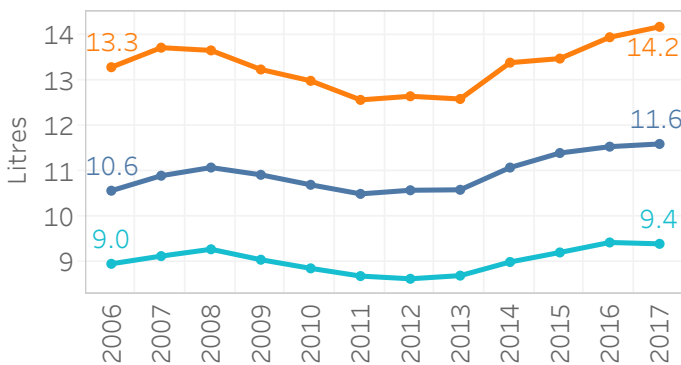


**Children and Youth in Care per 1,000 Children and Youth**



## Healthy Behaviours and Built Environment

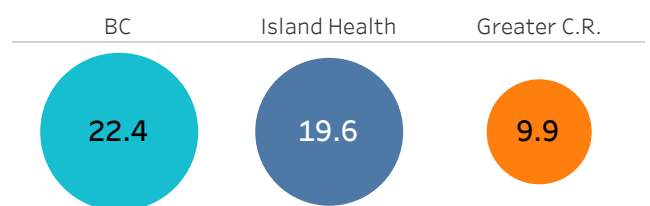
**Alcohol Consumption (litres of absolute alcohol sold per person, 1L=58 standard drinks)**



Preference for healthy behaviours such as healthy eating, exercise, reduction of smoking and alcohol consumption, and social connections contribute to a healthier life. Many of the healthy behaviour indicators are available through the Canadian Community Health Survey (CCHS), but the data is not available at the LHA level. Among LHA-level available data, substance use in Greater C.R., particularly alcohol consumption per capita, is higher than the Island Health and BC level.

Among those who are employed, a lower percentage of the population in Greater C.R. reports using active modes of transportation (walking, cycling, and public transit) to get to work. See the Determinants of Health summary on pages 12 for more information.

**Employed Population Aged 15 and Over Walking, Biking or Busing to Work (%)**





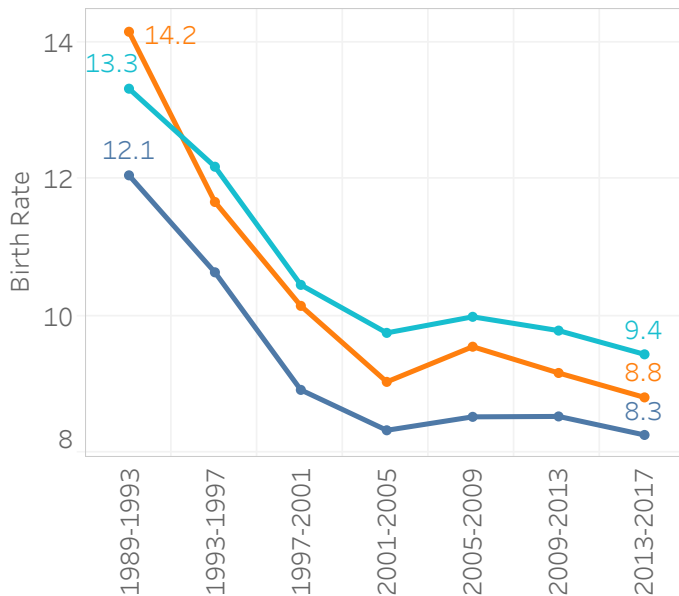
# Health Status

The health status of the population is measured with several indicators such as life expectancy, infant mortality, prevalence of chronic disease, mortality, and premature mortality.

## Birth Statistics

The overall birth rate for the Greater C.R. is lower than BC, but higher than Island Health; however, there are proportionately fewer births to older (35 years and over) mothers and more births to younger mothers (under 20 years). The rate of low birth weight babies is similar to Island Health, and lower than BC, and the rate of pre-term births (those born at less than 37 weeks) is slightly lower.

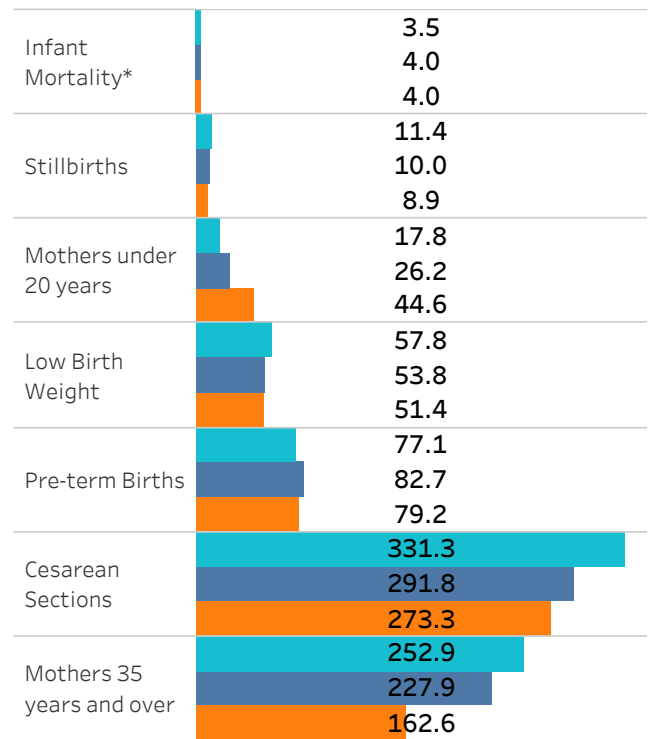
**Birth Statistics**  
Live Births per 1,000 Population  
(1989-1993 to 2013-2017)



## Mortality Statistics

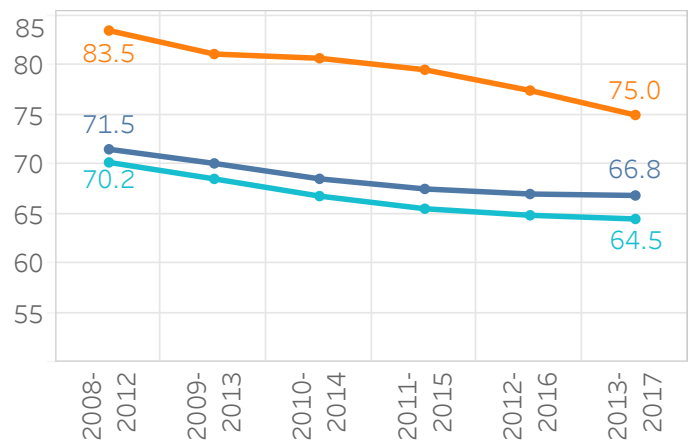
Mortality rates have decreased steadily over the last decade. The age-standardized all-cause mortality rate for Greater C.R. is higher than the Island Health and BC rates. See the Health Status summary on page 15 for cause-specific mortality rates.

**Birth Statistics**  
Per 1,000 Live Births (2013-2017)



\*It is important to note that caution should be exercised when dealing with a small number of cases as an increase or decrease may indicate random variation rather than a significant change in rates.

**Mortality (Age Standardized Rate per 10,000)**





# Health Status

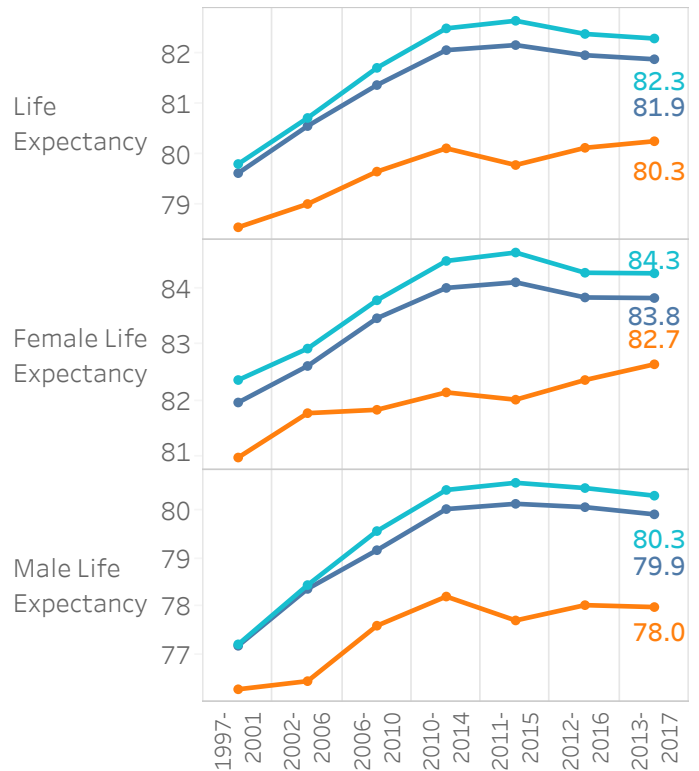
Potential years of life lost (PYLL) is a measure of premature mortality (an estimate of the average years a person would have lived if they had not died before the established life expectancy of 75 years). The PYLL in Greater C.R. for suicides, lung/tracheal cancers, diseases of the respiratory system, diseases of the digestive systems, cerebrovascular, and chronic lower respiratory diseases are higher than the BC and Island Health PYLL. A complete list of PYLL by cause can be found on page 16.

Life expectancy has been increasing over the last few decades, but Greater C.R. population tends to have a shorter life expectancy. Both males and female life expectancy is shorter than that of Island Health and BC overall.

## Chronic Disease

Chronic disease prevalence rates tend to be similar or higher for the Greater C.R. in comparison to Island Health and BC rates, with the exception of Alzheimer's disease and dementia. See the Health Status summary on page 14 for more information.

Life Expectancy



Chronic Disease Age Standardized Prevalence in 2018 Per 1,000 Individuals

	BC	Island Health	Greater C.R.
Heart Failure	19.4	17.7	23.9
Alzheimer's Disease and Other Dementia	20.3	21.3	20.0
Chronic Kidney Disease	23.2	22.2	23.0
Chronic Obstructive Pulmonary Disease	51.1	52.5	70.2
Episodic Asthma	49.9	52.9	58.7
Ischemic Heart Disease	69.4	60.5	77.7
Diabetes	80.3	69.5	82.5
Osteoarthritis	84.9	91.1	109.5
Asthma	123.1	130.7	146.8
Hypertension	224.7	212.1	226.9



# Health Status

## Mental Health and Substance Use

Over recent years, many of the LHAs across Island Health have been working to address the ongoing opioid public health emergency and to discuss how to improve mental health and wellbeing. In light of this ongoing health emergency, this page highlights several measures that are directly or indirectly related to the crisis at hand.

### Mental Health Conditions

Coinciding with higher chronic diseases in Greater C.R., conditions related to mental health have tended to be higher since 2010 compared to BC and Island Health rates. Most notably, the prevalence of depression, episodic depression, episodic mood and anxiety disorders, and mood and anxiety disorders are higher than the rates of Island Health and BC. The prevalence of schizophrenia and delusional disorders are lower than Island Health and BC rates.

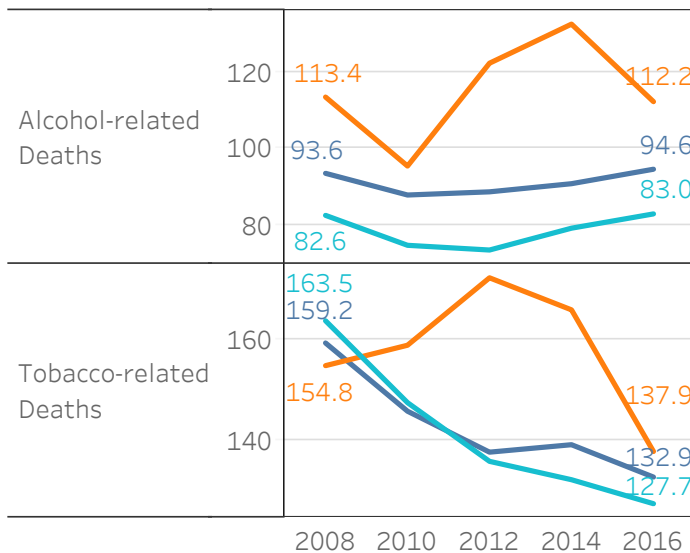
### Substance Use

The Greater C.R. substance-related death rates remain higher or similar to Island Health and BC rates, noting that tobacco-related and illicit drug toxicity death rates have decreased significantly in recent years. The indicators directly below have combined deaths that are partially or entirely attributed to the substance being measured; for more details visit <http://aodtool.cfar.uvic.ca/aod/about.php>. Also, see hospitalization rates on page 15.

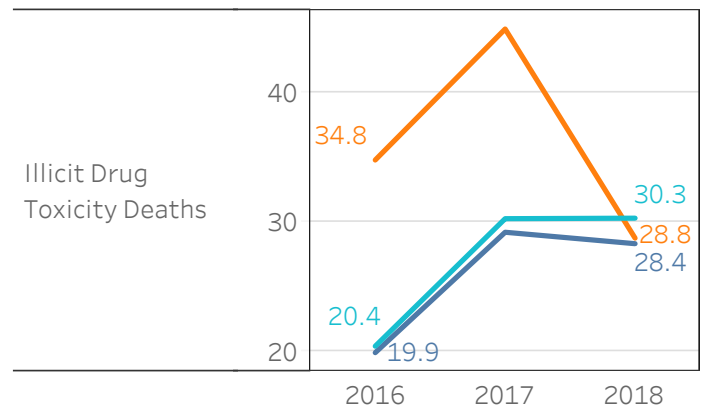
Chronic Disease Age Standardized Prevalence Per 1,000 Individuals

Depression	280	281.1	278.3
	260	246.0	
Episodic Depression	90	90.8	85.8
	80		
Mood & Anxiety Disorders	70	72.2	
	360	355.8	342.7
Episodic Mood & Anxiety Disorders	340		
	320		
Schizophrenia & Delusional Disorders	300	301.9	
	130	130.8	122.1
	120		
	110		
	100	101.6	
	11	11.6	11.0
	10		
		9.4	

Substance-Related Deaths (Age Standardized Rate per 100,000)



Illicit Drug Toxicity Deaths (Crude Rate per 100,000)



For the most up to date data on Illicit Drug Toxicity Deaths, visit: <https://www2.gov.bc.ca/gov/content/life-events/death/coroners-service/statistical-reports>



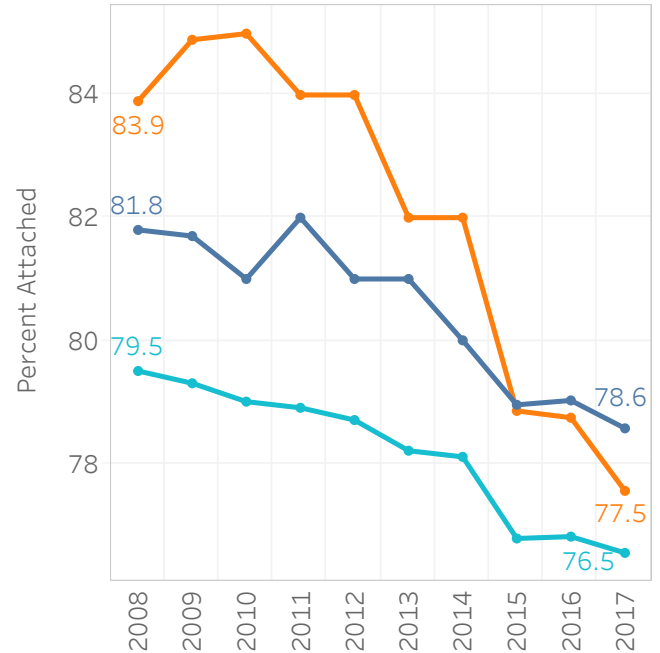


# Health Service Use

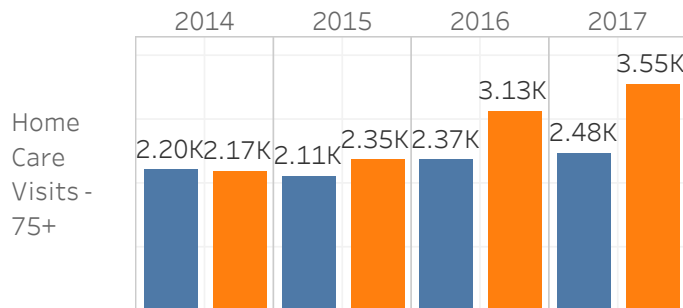
Access to primary care services plays an important role in the use of emergency department and inpatient services. The population attached to physicians at the practice level is calculated by the Ministry of Health and indicates the percentage of population who have a regular physician or regular physician practice. A slightly higher percentage of the Greater C.R. population has a physician at the practice level compared to BC, but this percentage is now lower than Island Health overall.

There is a higher rate of home care visits and home support hours for the 75 years of age and over population for Greater C.R. compared to Island Health. When we look at the number of clients among those 75 years and over, the Greater C.R. rates are higher than Island Health's rate. See the Health Service Use summary on page 18 for more information on these topics

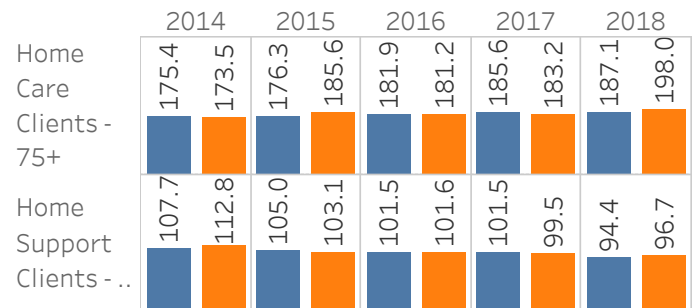
Population Attached to Physician at the Practice Level (%)



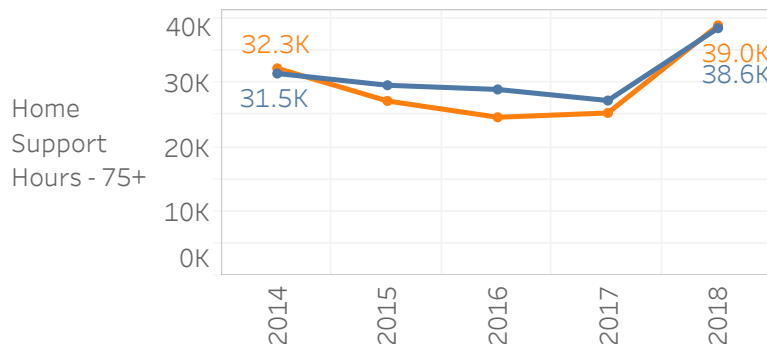
Home Care Visits  
Rate per 1,000 Population



Home Care and Home Support Clients  
Rate per 1,000 Population



Home Support Hours  
Rate per 1,000 Population





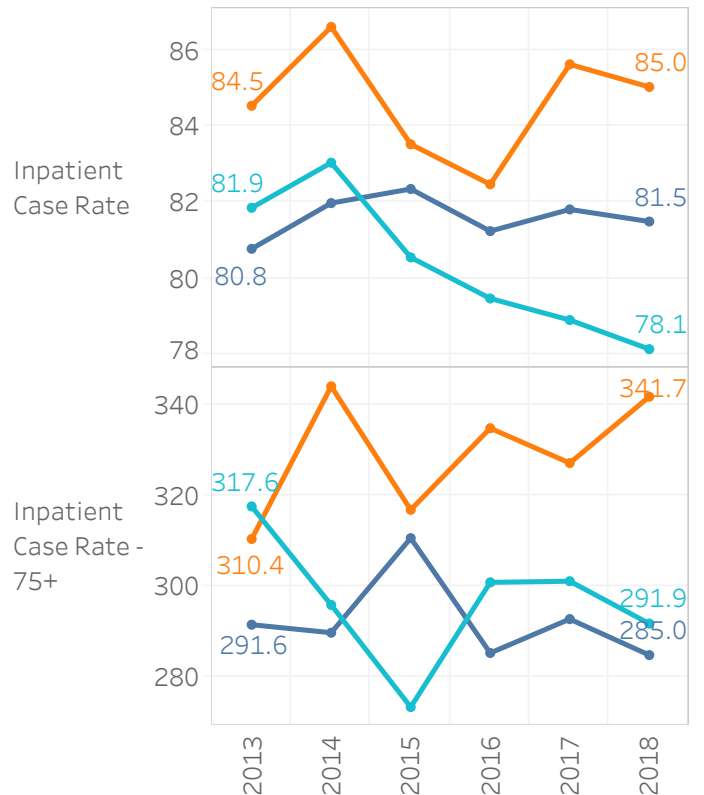
# Health Service Use

The age standardized hospitalization rate (inpatient admissions) for the Greater C.R. population is higher than Island Health and BC, both overall and for the population aged 75 and over.

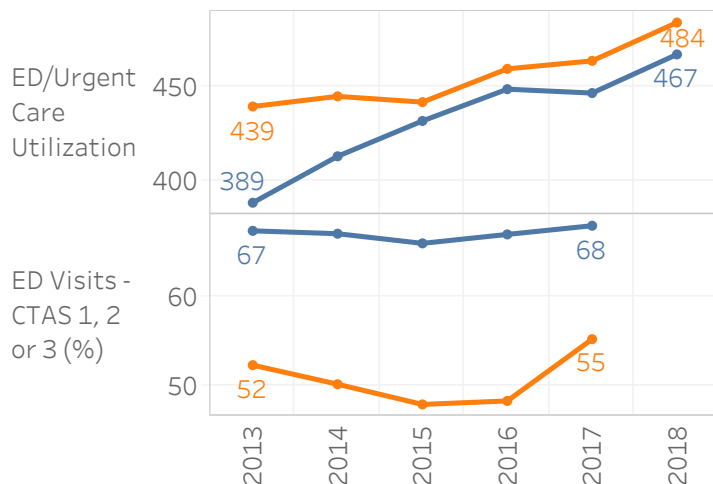
The hospital admission rate for Ambulatory Care Sensitive Conditions (ACSC) – conditions that can be treated in the community if services are available and would not necessarily require hospitalization – has been higher in Greater C.R. and has increased in the last fiscal year.

Emergency/urgent care visit rates are higher in Greater C.R. compared to Island Health. However, the rate of higher urgency visits is lower in Greater C.R.. Health service usage is based on where the user resides rather than where the service is provided. See the Health Service Use summary on page 16 for more information on these topics.

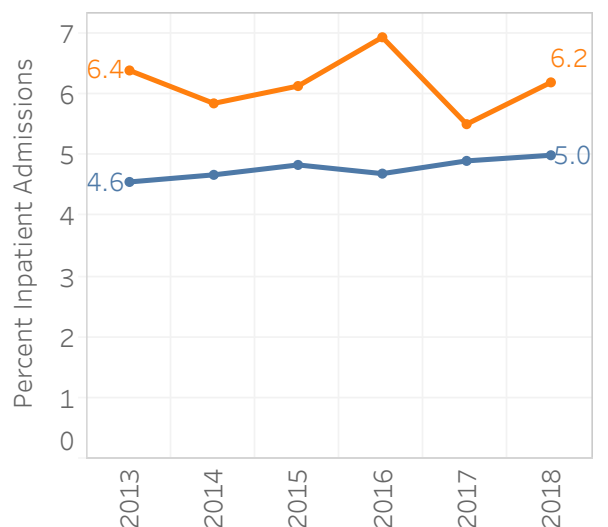
**Acute Care Inpatient Cases  
(Age Standardized Rate per 1,000)**



**Unscheduled Emergency and Urgent Care Centre  
Visits Rate per 1,000 Population and Percent of  
Higher Urgency  
(Canadian Triage and Acuity Scale (CTAS) 1, 2 or 3)**



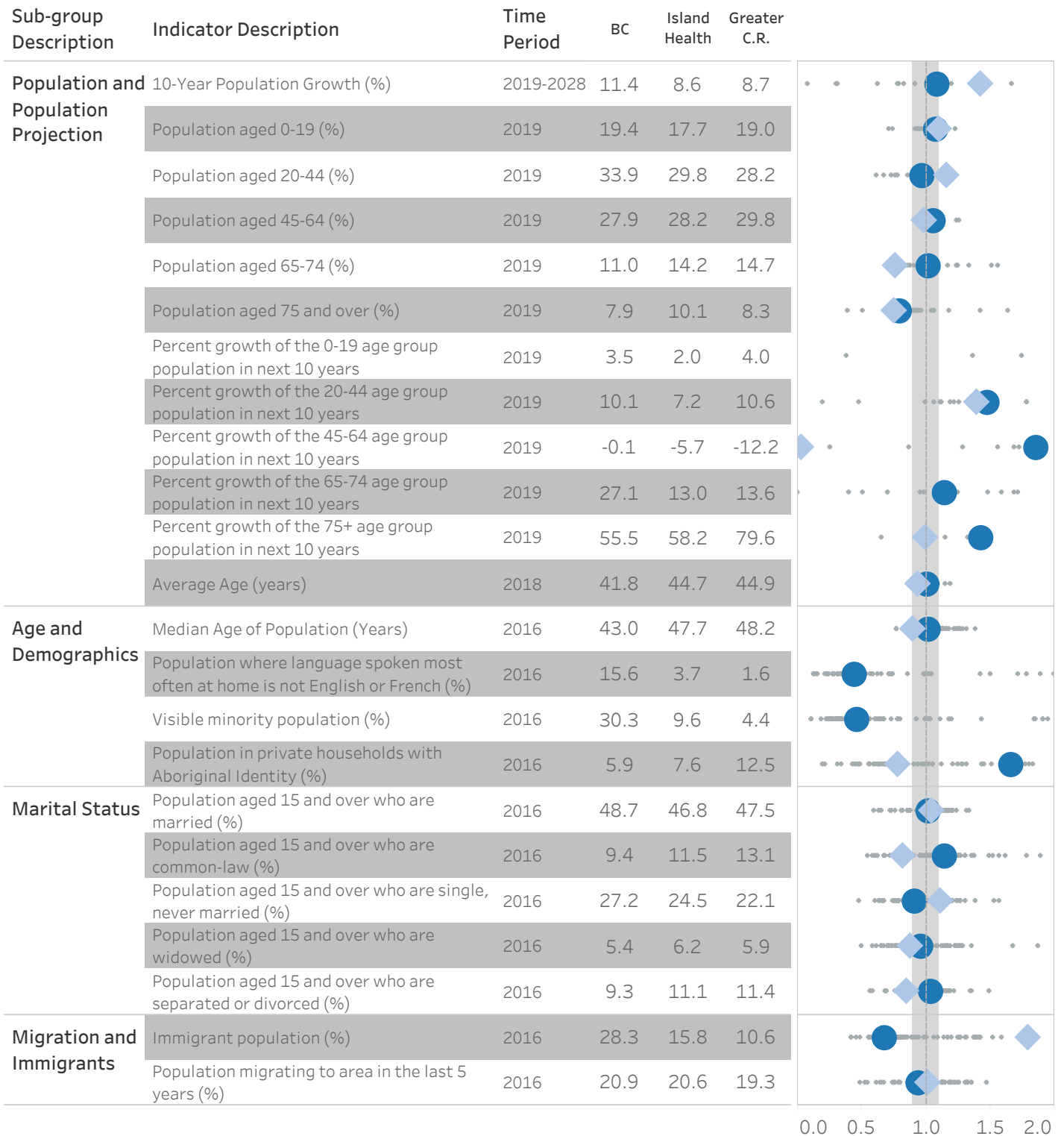
**Ambulatory Care Sensitive Conditions  
(% of Admissions)**



● LHA 
 ● LHA Better than Island Health 
 ● LHA Worse than Island Health 
 ◆ BC Rate, when available 
  Range 
 ● Other LHAs 
  Island Health Value with ±10%

The chart below shows how various indicators for this LHA compare with the rest of Island Health. This LHA's result for each indicator is shown with a large circle. Green identifies results better than Island Health; red identifies results worse than Island Health. These results do not necessarily reflect statistical significance. Island Health's value is shown by the black dotted line, which is always at the centre of the chart. Light gray shading encompasses small grey circles indicates the range of the other LHA values and the dark gray shading shows ±10% from the Island Health value. This is meant to show the relative magnitude of the LHA compared to Island Health, and in some cases extends beyond the chart display.

## Population and Demographics Summary



● LHA 
 ● LHA Better than Island Health 
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  Island Health Value with ±10%

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## \$ Determinants of Health Summary

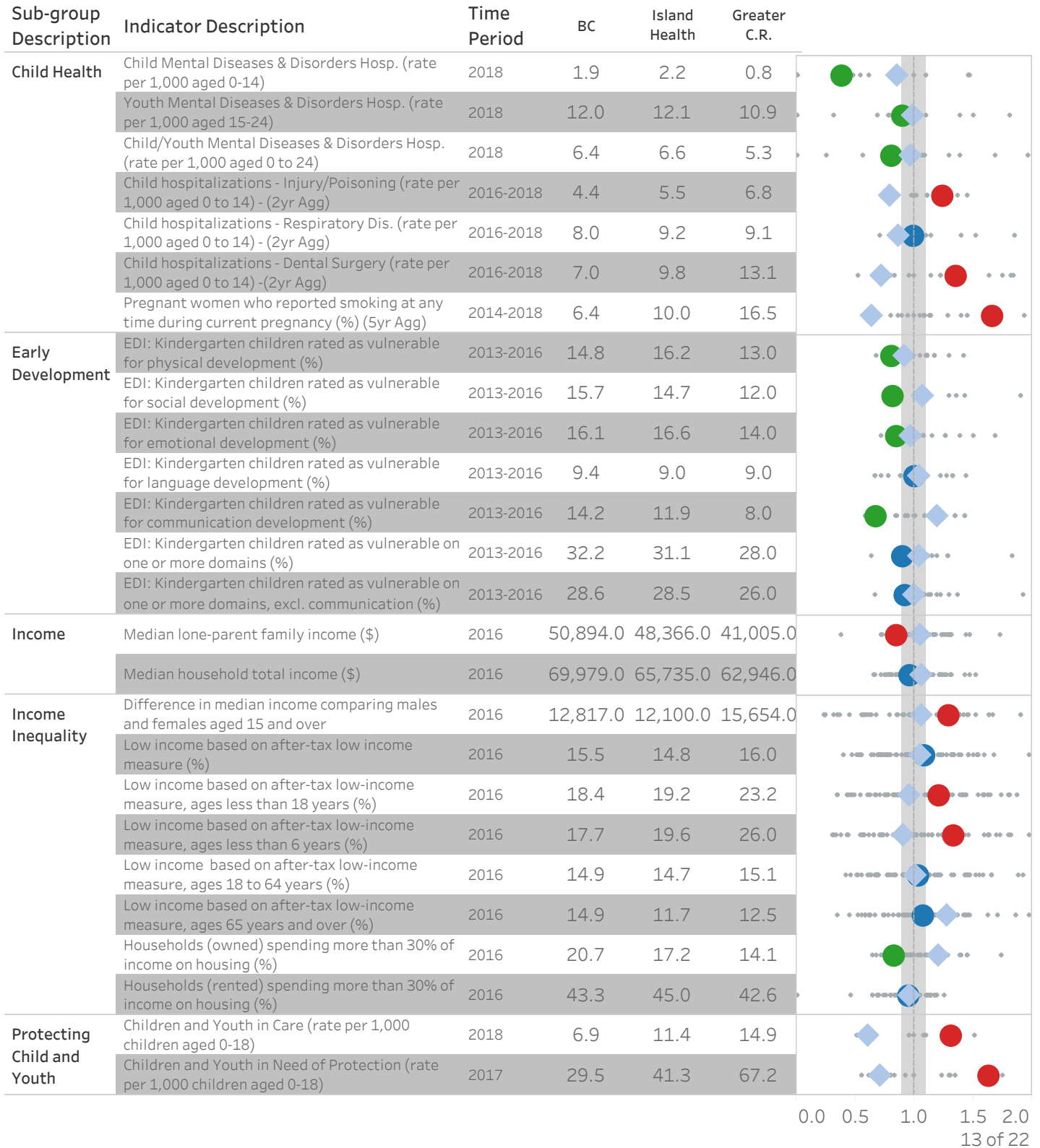
Sub-group Description	Indicator Description	Time Period	BC	Island Health	Greater C.R.	
Education	Population aged 25 to 64 with post-secondary certificate, diploma or degree (%)	2016	63.9	63.7	56.8	
	Grade 12 completion among students entering Grade 12 for the first time (%) (2yr Agg)	2015-2017	80.2	73.5	77.1	
	Students completing high school within six years of enrollment in Grade 8 (%) (2yr Agg)	2016-2018	83.8	76.7	78.5	
Employment	Population aged 15 and over who are unemployed (%)	2016	6.7	6.8	9.8	
Health Behaviours	Alcohol consumption (litres of absolute alcohol sold per person, 1L=58 standard drinks)	2017	9.4	11.6	14.2	
Household	Lone-parent family households (% of census families with children)	2016	25.5	22.0	22.7	
	Private households with multiple families (%)	2016	3.0	1.5	1.4	
	Private households with 5 or more persons (%)	2016	8.3	5.3	5.2	
	Dwellings rated as needing major repairs by renter or owner (%)	2016	6.3	6.2	7.2	
	Private households that are owner-occupied (%)	2016	68.0	69.1	73.4	
Morbidity	Alcohol-related hosp. (age std. rate per 100,000)	2016	397.0	440.6	472.8	
	Cannabis-related hosp. (age std rate per 100,000)	2016	27.8	31.4	17.5	
	Opioid-related hosp. (age std rate per 100,000)	2016	45.8	49.9	48.6	
	Tobacco-related hosp. (age std rate per 100,000)	2016	491.5	443.4	550.6	
Transportation	Employed Population Aged 15 and Over Walking, Biking or Busing to Work (%)	2016	22.4	19.6	9.9	

0.0 0.5 1.0 1.5 2.0

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## 💰 Determinants of Health Summary (Continued)



● LHA 
 ● LHA Better than Island Health 
 ● LHA Worse than Island Health 
 ◆ BC Rate, when available 
  Range 
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  Island Health Value with ±10%

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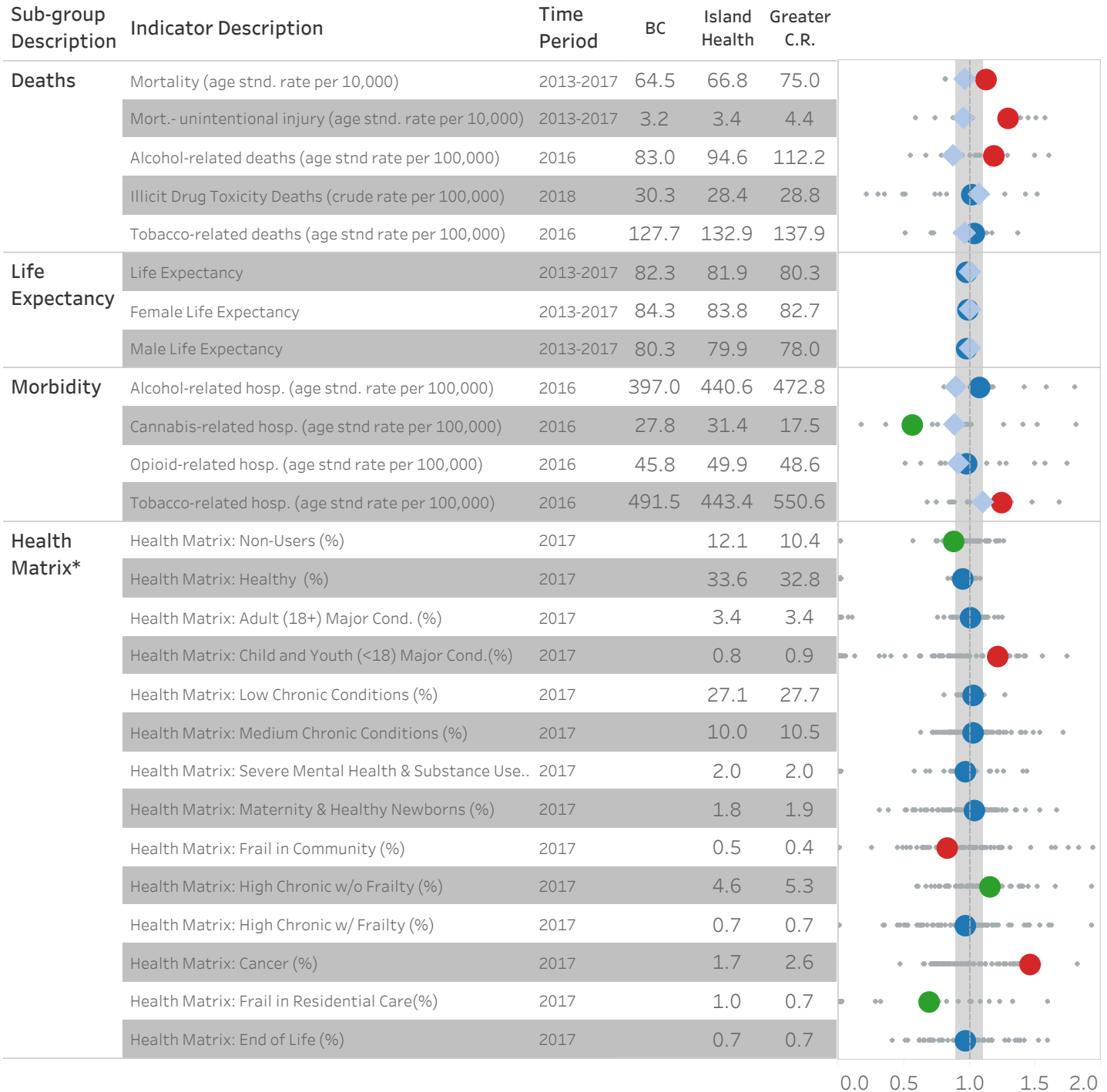
## Health Status Summary

Sub-group Description	Indicator Description	Time Period	BC	Island Health	Greater C.R.
Births	Live Birth Rate (rate per 1,000 population)	2013-2017	9.4	8.3	8.8
	Stillbirths (rate per 1,000 births)	2013-2017	11.4	10.0	8.9
	Infant Mortality - deaths of infants under 1 year of age (rate per 1,000 live births)	2013-2017	3.5	4.0	4.0
	Low Weight Births - less than 2,500 grams (rate per 1,000 live births)	2013-2017	57.8	53.8	51.4
	Cesarean Sections (rate per 1,000 live births)	2013-2017	331.3	291.8	273.3
	Pre-term Births - gestational age less than 37 weeks (rate per 1,000 live births)	2013-2017	77.1	82.7	79.2
	Mothers under 20 - live births to mothers under 20 years of age (rate per 1,000 live births)	2013-2017	17.8	26.2	44.6
	Mothers 35 and over - live births to mothers aged 35 and over (rate per 1,000 live births)	2013-2017	252.9	227.9	162.6
Morbidity	Alzheimer's Disease and Other Dementia - Prevalence (age-standardized rate per 1,000)	2018	20.3	21.3	20.0
	Asthma - Prevalence (age-standardized rate per 1,000)	2018	123.1	130.7	146.8
	Chronic Kidney Disease - Prevalence (age-standardized rate per 1,000)	2018	23.2	22.2	23.0
	Chronic Obstructive Pulmonary Disease - Prevalence (age-standardized rate per 1,000)	2018	51.1	52.5	70.2
	Mood and Anxiety Disorders - Prevalence (age-standardized rate per 1,000)	2018	301.9	342.7	355.8
	Depression - Prevalence (age-standardized rate per 1,000)	2018	246.0	278.3	281.1
	Diabetes - Prevalence (age-standardized rate per 1,000)	2018	80.3	69.5	82.5
	Heart Failure - Prevalence (age-standardized rate per 1,000)	2018	19.4	17.7	23.9
	Hypertension - Prevalence (age-standardized rate per 1,000)	2018	224.7	212.1	226.9
	Ischemic Heart Disease - Prevalence (age-standardized rate per 1,000)	2018	69.4	60.5	77.7
	Osteoarthritis - Prevalence (age-standardized rate per 1,000)	2018	84.9	91.1	109.5
	Episodic Asthma - Prevalence (age-standardized rate per 1,000)	2018	49.9	52.9	58.7
	Episodic Depression - Prevalence (age-standardized rate per 1,000)	2018	72.2	85.8	90.8
	Episodic Mood & Anxiety Disorders - Prevalence (age-standardized rate per 1,000)	2018	101.6	122.1	130.8
	Schizophrenia & Delusional Disorders - Prevalence (age-standardized rate per 1,000)	2018	11.0	11.6	9.4

● LHA 
 ● LHA Better than Island Health 
 ● LHA Worse than Island Health 
 ◆ BC Rate, when available 
  Range 
 ● Other LHAs 
  Island Health Value with ±10%

The chart below shows how various indicators for this LHA compare with the rest of Island Health. This LHA's result for each indicator is shown with a large circle. Green identifies results better than Island Health; red identifies results worse than Island Health. These results do not necessarily reflect statistical significance. Island Health's value is shown by the black dotted line, which is always at the centre of the chart. Light gray shading encompassing small grey circles indicates the range of the other LHA values and the dark gray shading shows ±10% from the Island Health value. This is meant to show the relative magnitude of the LHA compared to Island Health, and in some cases extends beyond the chart display.

## Health Status Summary (Continued)

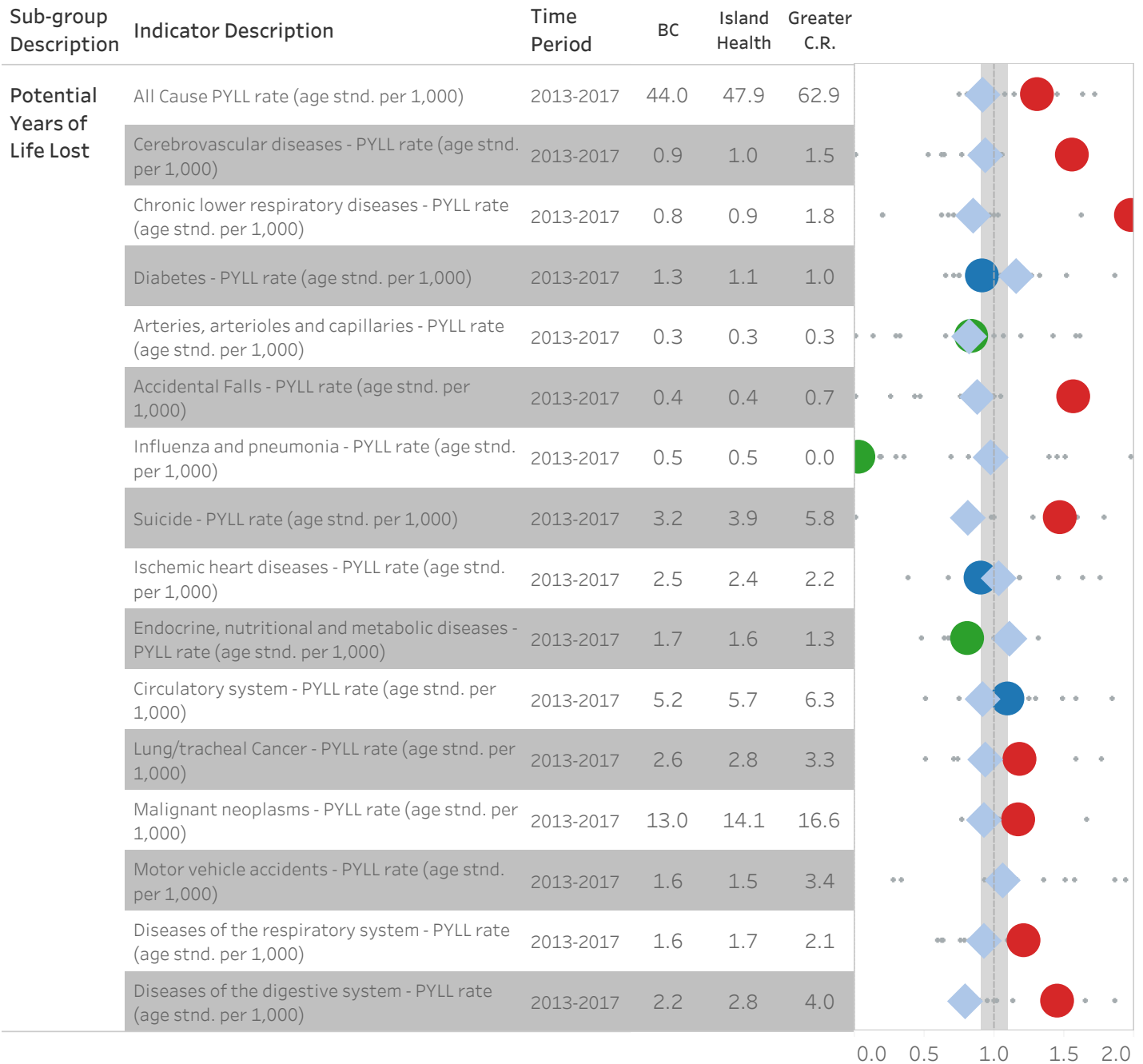


\*The Health Matrix is a way of categorizing the population into different groups based on their health service utilization patterns. These categories are mutually exclusive and add up to 100% - in other words, everyone is placed into one of the categories, going from low or no utilization to high utilization at end of life; people who may meet the criteria for more than one category would be placed into the higher utilization category - for example, someone with medium complex chronic conditions who was also living in residential care would be counted in the Frail, Living in Residential Care category. For more information on the Health Matrix, see <https://www2.gov.bc.ca/assets/gov/health/forms/5511datadictionary.pdf>

● LHA 
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  Island Health Value with ±10%

The chart below shows how various indicators for this LHA compare with the rest of Island Health. This LHA's result for each indicator is shown with a large circle. Green identifies results better than Island Health; red identifies results worse than Island Health. These results do not necessarily reflect statistical significance. Island Health's value is shown by the black dotted line, which is always at the centre of the chart. Light gray shading encompasses small grey circles indicates the range of the other LHA values and the dark gray shading shows ±10% from the Island Health value. This is meant to show the relative magnitude of the LHA compared to Island Health, and in some cases extends beyond the chart display.

## ⦿ Potential Years of Life Lost (PYLL) from life expectancy of 75 years

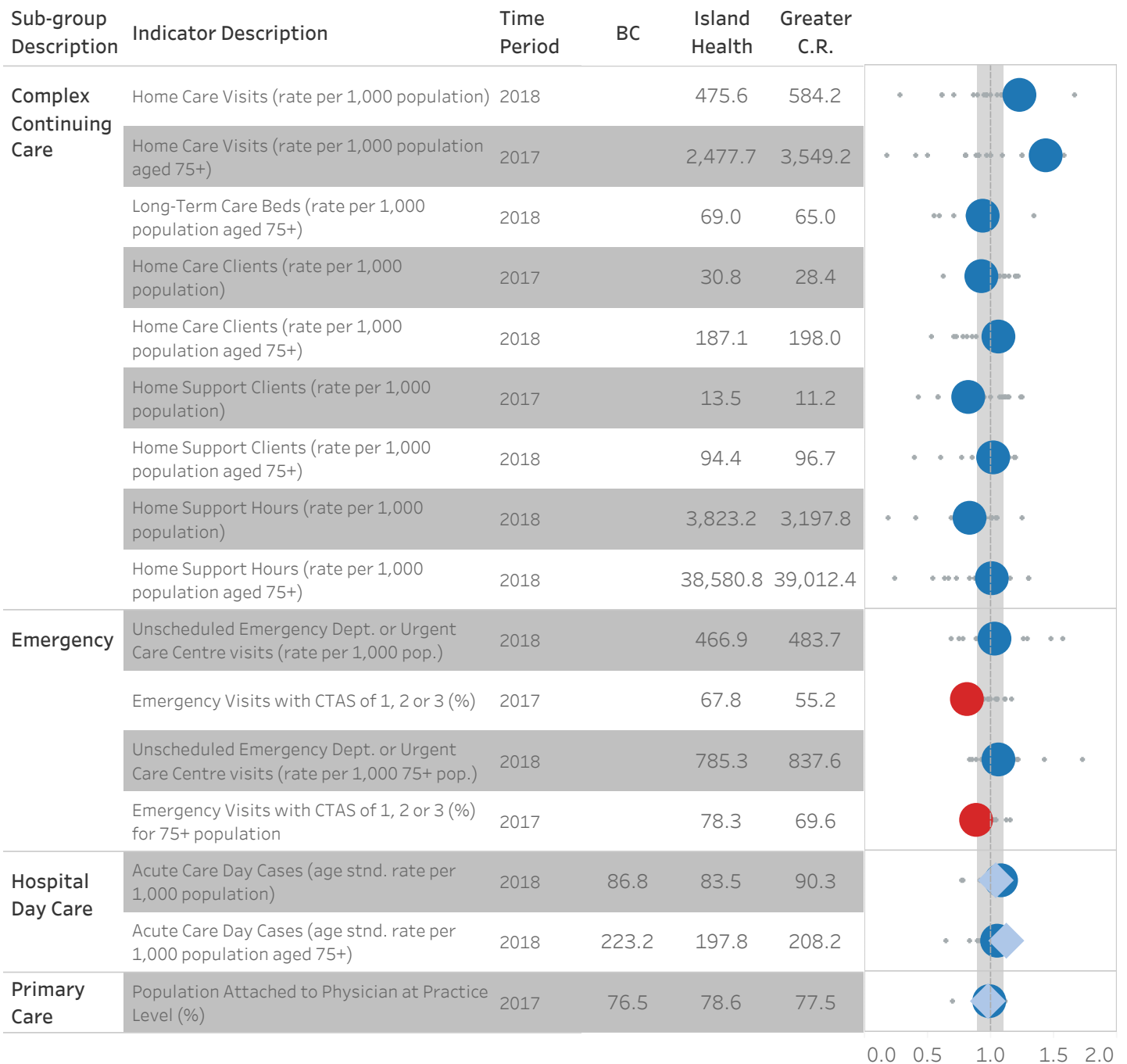




● LHA 
 ● LHA Better than Island Health 
 ● LHA Worse than Island Health 
 ◆ BC Rate, when available 
  Range 
 ● Other LHAs 
  Island Health Value with ±10%

The chart below shows how various indicators for this LHA compare with the rest of Island Health. This LHA's result for each indicator is shown with a large circle. Green identifies results better than Island Health; red identifies results worse than Island Health. These results do not necessarily reflect statistical significance. Island Health's value is shown by the black dotted line, which is always at the centre of the chart. Light gray shading encompasses small grey circles indicates the range of the other LHA values and the dark gray shading shows ±10% from the Island Health value. This is meant to show the relative magnitude of the LHA compared to Island Health, and in some cases extends beyond the chart display.

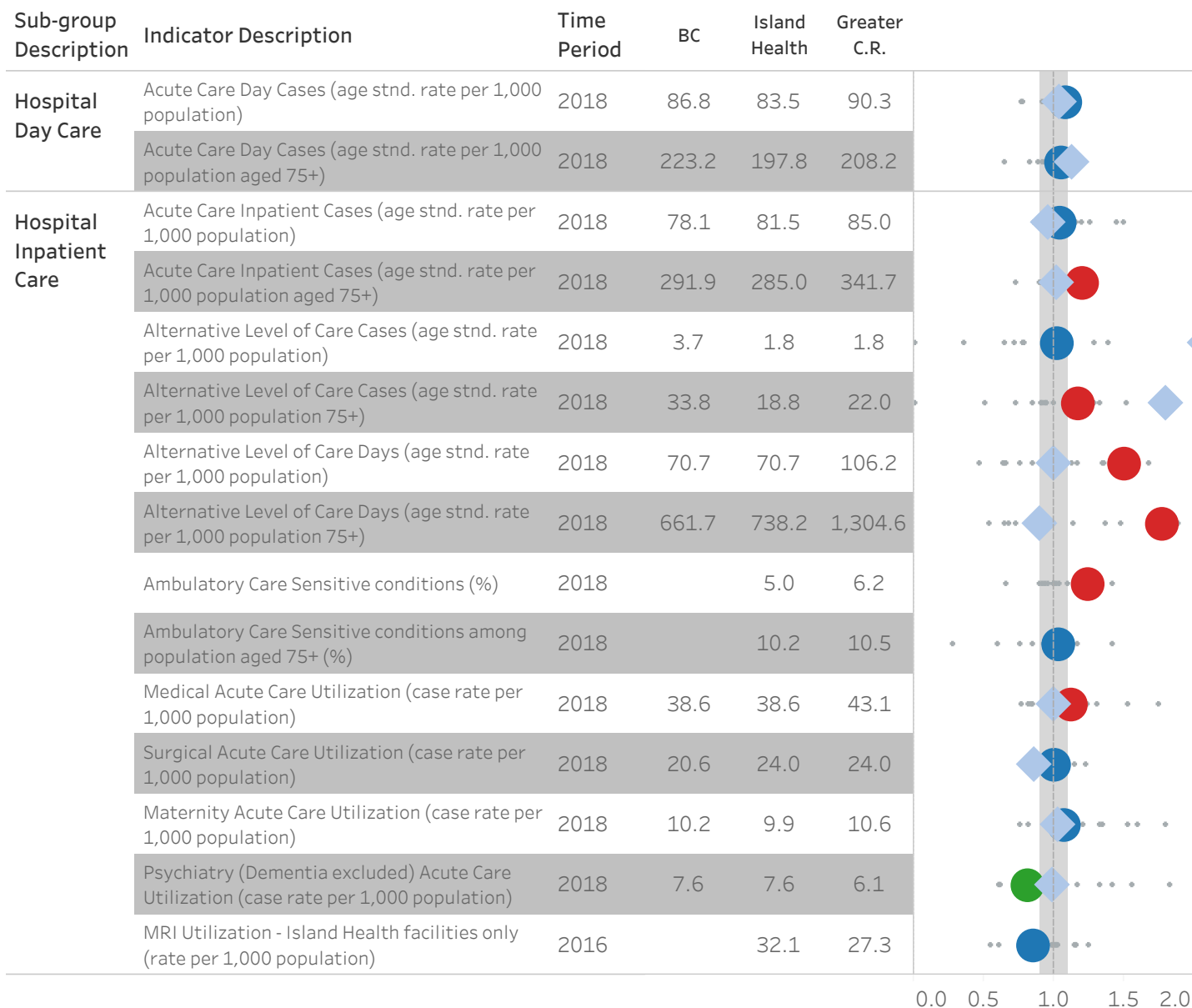
## Health Service Use Summary



● LHA 
 ● LHA Better than Island Health 
 ● LHA Worse than Island Health 
 ◆ BC Rate, when available 
  Range 
 ● Other LHAs 
  Island Health Value with ±10%

The chart below shows how various indicators for this LHA compare with the rest of Island Health. This LHA's result for each indicator is shown with a large circle. Green identifies results better than Island Health; red identifies results worse than Island Health. These results do not necessarily reflect statistical significance. Island Health's value is shown by the black dotted line, which is always at the centre of the chart. Light gray shading encompasses small grey circles indicates the range of the other LHA values and the dark gray shading shows ±10% from the Island Health value. This is meant to show the relative magnitude of the LHA compared to Island Health, and in some cases extends beyond the chart display.

## Health Service Use Summary (Continued)



# Data Sources

## Population and Demographics

### Population and Population Projection

Average Age: BC Statistics, 2018 | Population Pyramid: BC Statistics - P.E.O.P.L.E. 2019 | Estimated Total Population - 2039: BC Statistics - P.E.O.P.L.E. 2019 | Estimated Population Change - 2039: BC Statistics - P.E.O.P.L.E. 2019 | 10 Year Population Growth (%): BC Statistics - P.E.O.P.L.E. 2019 | Population aged 0-19 (%) - BC Statistics - P.E.O.P.L.E. 2019 | Population aged 20-44 (%) - BC Statistics - P.E.O.P.L.E. 2019 | Population aged 45-64 (%) - BC Statistics - P.E.O.P.L.E. 2019 | Population aged 65-74(%) - BC Statistics - P.E.O.P.L.E. 2019 | Population aged 75 and over (%) - BC Statistics - P.E.O.P.L.E. 2019 | Percent growth of the 0-19 age group population in next 10 years - BC Statistics - P.E.O.P.L.E. 2019 | Percent growth of the 20-44 age group population in next 10 years - BC Statistics - P.E.O.P.L.E. 2019 | Percent growth of the 45-64 age group population in next 10 years - BC Statistics - P.E.O.P.L.E. 2019 | Percent growth of the 65-74 age group population in next 10 years - BC Statistics - P.E.O.P.L.E. 2019 | Percent growth of the 75+ age group population in next 10 years - BC Statistics - P.E.O.P.L.E. 2019

### Age Demographics & Marital Status

Median Age of Population - Census, 2016 | Population where language spoken most often at home is not English or French (%) - Census, 2016 | Visible minority population (%) - Census, 2016 | Population in private households with Aboriginal Identity (%) - Census, 2016 | Population aged 15 and over who are married (%) - Census, 2016 | Population aged 15 and over who are common-law (%) - Census, 2016 | Population aged 15 and over who are single, never married (%) - Census, 2016 | Population aged 15 and over who are widowed (%) - Census, 2016 | Population aged 15 and over who are separated or divorced (%) - Census, 2016

### Migration and Immigrants

Immigrant population (%): Census, 2016 | Population migrating to area in the last 5 years (%): Census, 2016

## Determinants of Health

### Education & Employment

Population aged 25 to 64 with post-secondary certificate, diploma or degree (%) - Census, 2016 | Grade 12 completion among students entering Grade 12 for the first time (%) (2yr Agg) - Ministry of Education, 2017 | Students completing high school within six years of enrollment in Grade 8 (%) (2yr Agg) - Ministry of Education, 2018 | Population aged 15 and over who are unemployed (%): Census, 2016

### Health Behaviours

Alcohol consumption (litres of absolute alcohol sold per person, 1L=58 standard drinks)- AOD: CISUR, 2017

### Household

Dwellings rated as needing major repairs by renter or owner (%) - Census, 2016 | Lone-parent family households (% of census families with children) - Census, 2016 | Private households that are owner-occupied (%) - Census, 2016 | Private households with 5 or more persons (%) - Census, 2016 | Private households with multiple families (%) - Census, 2016 | Households (owned) spending more than 30% of income on housing (%) - Census, 2016 | Households (rented) spending more than 30% of income on housing (%) - Census, 2016

### Income & Income Inequality

Median household total income (\$) - Census, 2016 | Median lone-parent family income (\$) - Census, 2016 | Difference in median income comparing males and females aged 15 and over - Census, 2016 | Households (owned) spending more than 30% of income on housing (%) - Census, 2016 | Households (rented) spending more than 30% of income on housing (%) - Census, 2016 | Low income based on after-tax low income measure (%) - Census, 2016 | Low income based on after-tax low-income measure, ages 18 to 64 years (%) - Census, 2016 | Low income based on after-tax low-income measure, ages 65 years and over (%) - Census, 2016 | Low income based on after-tax low-income measure, ages less than 6 years (%) - Census, 2016 | Low income based on after-tax low-income measure, ages less than 18 years (%) - Census, 2016

# Data Sources

## Determinants of Health

### Morbidity

Alcohol-related hospitalizations (age-standardized rate per 100,000) - CISUR, 2016 | Cannabis-related hospitalizations (age-standardized rate per 100,000) - CISUR, 2016 | Opioid-related hospitalizations (age-standardized rate per 100,000) - CISUR, 2016 | Tobacco-related hospitalizations (age-standardized rate per 100,000) - CISUR, 2016

### Transportation

Employed population aged 15 and over walking, biking or using to work (%) - Census, 2016

### Child Health

Child hospitalizations - Dental Surgery (rate per 1,000 aged 0 to 14) -(2yr Agg): Ministry of Health Health Ideas, 2016-2018 | Child Hospitalizations - Injury/Poisoning (rate per 1,000 aged 0 to 14) - (2yr Agg): Ministry of Health Health Ideas, 2016-2018 | Child hospitalizations - Respiratory Dis. (rate per 1,000 aged 0 to 14) - (2yr Agg): Ministry of Health Health Ideas, 2016-2018 | Child Mental Diseases & Disorders Hospitalizations (Indirect Age Standardized rate per 1,000 aged 0-14): Ministry of Health Health Ideas, 2018 | Child/Youth Mental Diseases & Disorders Hospitalizations (Indirect Age Standardized rate per 1,000 aged 15-24): Ministry of Health Health Ideas, 2018

### Early Development

EDI: Kindergarten children rated as vulnerable for social development (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable for communication development (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable for emotional development (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable for language development (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable for physical development (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable on one or more domains (%) - Early Development Instrument, 2016 | EDI: Kindergarten children rated as vulnerable on one or more domains, excluding communication (%) - Early Development Instrument, 2016

### Protecting Children and Youth

Children and Youth in Care (rate per 1,000 children aged 0 to 18) - Ministry of Children and Family Development, 2018 | Children and Youth in Need of Protection (rate per 1,000 children aged 0 to 18) - Ministry of Children and Family Development, 2017

## Health Status

### Life Expectancy

Female Life Expectancy - BC Statistics, 2017 | Male Life Expectancy - BC Statistics, 2017 | Life Expectancy - BC Statistics, 2017

### Deaths

Mortality (age-standardized rate per 10,000) - Vital Statistics, 2017 | Mortality due to unintentional injuries (age-standardized rate per 10,000) - Vital Statistics, 2017 | Alcohol-related deaths (age-standardized rate per 100,000) - CISUR, 2016 | Tobacco-related deaths (age-standardized rate per 100,000) - CISUR, 2016 | Illicit Drug Toxicity Deaths (crude rate per 100,000) - BC Coroner's Service, 2018

### Health Matrix

Health Matrix: Healthy (%) - Blue Matrix and People, 2017 | Health Matrix: Adult (18+) Major Conditions (%) - Blue Matrix and People, 2017 | Health Matrix: Child and Youth (<18) Major Conditions (%) - Blue Matrix and People, 2017 | Health Matrix: Low Chronic Conditions (%) - Blue Matrix and People, 2017 | Health Matrix: Medium Chronic Conditions (%) - Blue Matrix and People, 2017 | Health Matrix: Severe Mental Health & Substance Use (%) - Blue Matrix and People, 2017 | Health Matrix: Maternity & Healthy Newborns (%) - Blue Matrix and People, 2017 | Health Matrix: Frail in Community (%) - Blue Matrix and People, 2017 | Health Matrix: High Chronic w/o Frailty (%) - Blue Matrix and People, 2017 | Health Matrix: High Chronic w/ Frailty (%) - Blue Matrix and People, 2017 | Health Matrix: Cancer (%) - Blue Matrix and People, 2017 | Health Matrix: Frail in Residential Care (%) - Blue Matrix and People, 2017 | Health Matrix: End of Life (%) - Blue Matrix and People, 2017

# Data Sources

## Health Status

### Births

Live Birth Rate (rate per 1,000 population) - Vital Statistics, 2017 | Stillbirths (rate per 1,000 births) - Vital Statistics, 2017 | Infant Mortality - deaths of infants under 1 year of age (rate per 1,000 live births) - Vital Statistics, 2017 | Low Weight Births - less than 2,500 grams (rate per 1,000 live births) - Vital Statistics, 2017 | Cesarean Sections (rate per 1,000 live births) - Vital Statistics, 2017 | Pre-term Births - gestational age less than 37 weeks (rate per 1,000 live births) - Vital Statistics, 2017 | Mothers under 20 - live births to mothers under 20 years of age (rate per 1,000 live births) - Vital Statistics, 2017 | Mothers 35 and over - live births to mothers aged 35 and over (rate per 1,000 live births) - Vital Statistics, 2017

### Morbidity

Alzheimer's Disease and Other Dementia - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Asthma - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Chronic Kidney Disease - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Chronic Obstructive Pulmonary Disease - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Mood and Anxiety Disorders - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Depression - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Diabetes - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Heart Failure - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Hypertension - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Ischemic Heart Disease - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Osteoarthritis - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Episodic Asthma - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Episodic Depression - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Episodic Mood & Anxiety Disorders - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018 | Schizophrenia & Delusional Disorders - Prevalence (age-standardized rate per 1,000) - MoH - Chronic Disease Registries, 2018

### Complex Continuing Care

Home Care Visits (rate per 1,000 population) - Island Health - Ideas, 2018 | Home Care Visits (rate per 1,000 population aged 75 and over) - Island Health - Ideas, 2017 | Long-Term Care Beds (rate per 1,000 population aged 75 and over) - Island Health - Ideas, 2018 | Home Care Clients (rate per 1,000 population) - Island Health - Ideas, 2017 | Home Care Clients (rate per 1,000 population aged 75 and over) - Island Health - Ideas, 2018 | Home Support Clients (rate per 1,000 population) - Island Health - Ideas, 2017 | Home Support Clients (rate per 1,000 population aged 75 and over) - Island Health - Ideas, 2018 | Home Support Hours (rate per 1,000 population) - Island Health - Ideas, 2018 | Home Support Hours (rate per 1,000 population aged 75 and over) - Island Health - Ideas, 2018

### Emergency

Unscheduled Emergency Department or Urgent Care Centre visits (rate per 1,000 population) - Island Health - Ideas, 2018 | Emergency Visits with CTAS of 1, 2 or 3 (%) - Island Health - Ideas, 2017 | Unscheduled Emergency Department or Urgent Care Centre visits for 75+ (rate per 1,000 75+ population) - Island Health - Ideas, 2018 | Emergency Visits with CTAS of 1, 2 or 3 (%) for 75+ population - Island Health - Ideas, 2017

### Hospital Day Care

Acute Care Day Cases (age-standardized rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Acute Care Day Cases (age-standardized rate per 1,000 population aged 75 and over) - Ministry of Health Health Ideas, 2018

### Primary Care

Population attached to physician at the practice level (%) - Ministry of Health, 2017

# Data Sources

## Health Status

### Potential Years of Life Lost

Accidental Falls - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | All Cause Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Arteries, arterioles and capillaries - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Cerebrovascular diseases - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Chronic lower respiratory diseases - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Circulatory system - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Diabetes - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Diseases of the digestive system - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Diseases of the respiratory system - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Endocrine, nutritional and metabolic diseases - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Influenza and pneumonia - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Ischemic heart diseases - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Lung/tracheal Cancer - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Malignant neoplasms - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Motor vehicle accidents - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017 | Suicide - Potential Years of Life Lost rate (age standardized per 1,000): Vital Statistics, Calendar year ending 2013-2017

### Hospital Inpatient Care

Acute Care Inpatient Cases (age-standardized rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Acute Care Inpatient Cases (age-standardized rate per 1,000 population aged 75 and over) - Ministry of Health Health Ideas, 2018 | Alternative Level of Care Cases (age-standardized rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Alternative Level of Care Cases (age-standardized rate per 1,000 population aged 75 and over) - Ministry of Health Health Ideas, 2018 | Alternative Level of Care Days (age-standardized rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Alternative Level of Care Days (age-standardized rate per 1,000 population aged 75 and over) - Ministry of Health Health Ideas, 2018 | Ambulatory Care Sensitive conditions (%) - Island Health - Ideas, 2018 | Ambulatory Care Sensitive conditions among population aged 75+ (%) - Island Health - Ideas, 2018 | Medical Acute Care Utilization (case rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Surgical Acute Care Utilization (case rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Maternity Acute Care Utilization (case rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | Psychiatry (Dementia excluded) Acute Care Utilization (case rate per 1,000 population) - Ministry of Health Health Ideas, 2018 | MRI Utilization - Island Health facilities only (rate per 1,000 population) - Island Health, 2016