

Report On The Health Of British Columbians Provincial Health Officer's Annual Report 2001

The Health and Well-being of Aboriginal People in Columbia

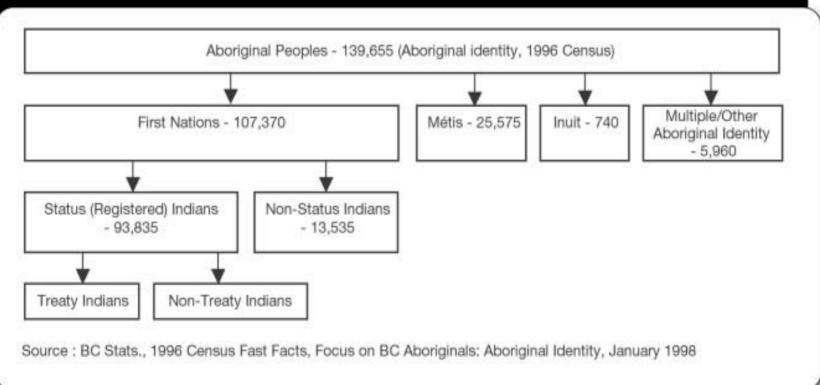


Indicators of Aboriginal Health and Well-Being

Health Status			
Well-Being	General Health	Health Conditions	S Deaths
Community Environments			
Employment	Income	Educational	Participation and
		Attainment	Social Integration
Healthy Growth and Development			
Healthy Child	Learning	Healthy Choices	Healthy
Development	Opportunities		Connections
District Environment			
Physical Environment			
Housing and	Air	Water	Environmental
Infrastructure			Change
Health Services			
Accessibility Doing the Right Things Right Culturally-Appropriate Service			Appropriate Services
Disease and Injury Prevention			
Non-Communicable Disease	e Communica	Communicable Disease	

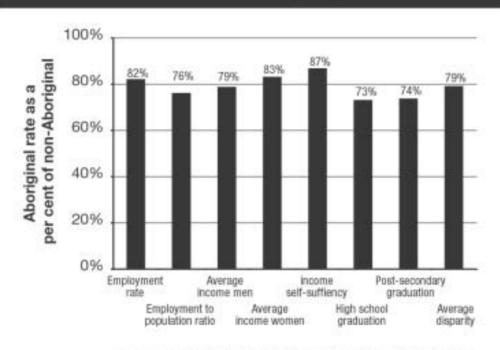


Terminology Used to Describe Aboriginal People in Canada and B.C. Population, 1996





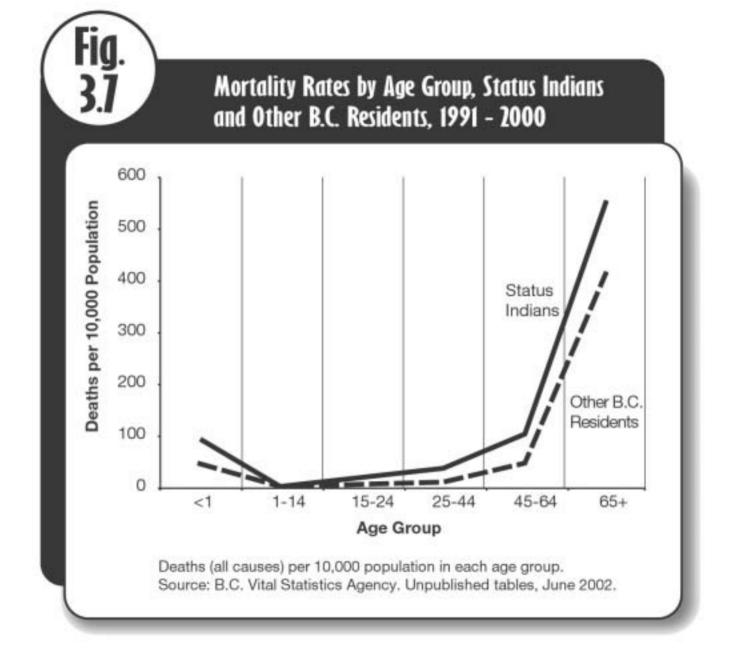
Disparity between Aboriginal and Non-Aboriginal Population, Seven Census Measures of Socioeconomic Conditions, B.C., 1996

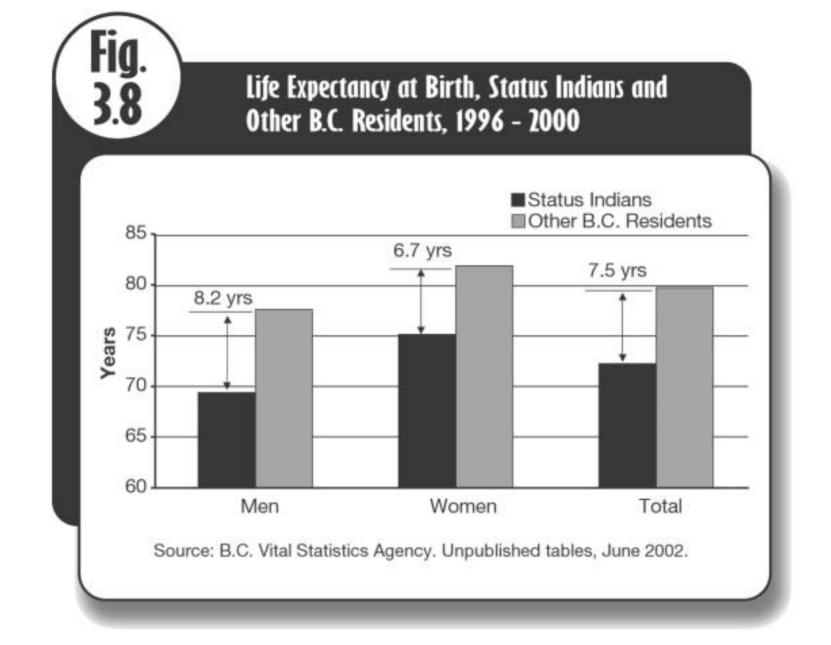


Employment rate: Proportion of labour force age 15 and over employed. Employment to population ratio: Proportion of population age 15 and over employed,

Average income: Average employment income among fullyear full-time workers age 15 and over.

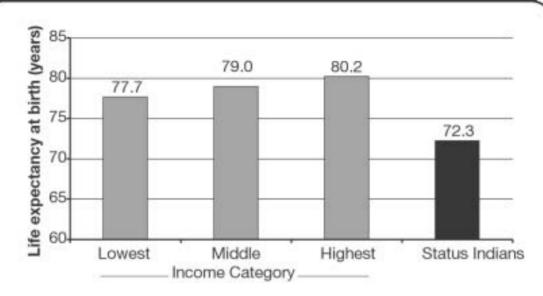
Income self-sufficiency: Proportion of total income that comes from sources other than government transfer payments. Source: Statistics Canada, 1996 Census, Semi-Custom Area Profile. Data obtained from the Health Data Warehouse, B.C. Ministry of Health Services.





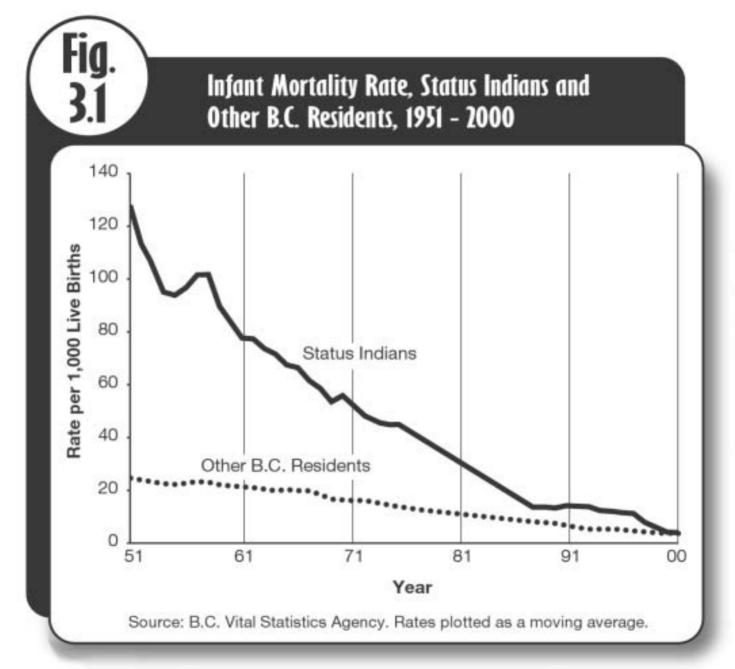


Life Expectancy at Birth by Neighbourhood Income Category, B.C. Population, 1996 and Status Indians, B.C., 1996-2000



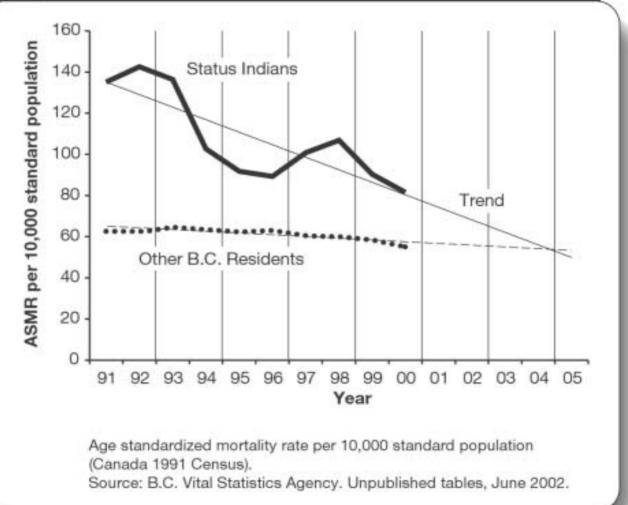
Neighbourhood income category - the B.C. population was grouped into 3 categories (terciles), after ranking enumeration areas by income per single-person equivalent within each Census Metropolitan Area.

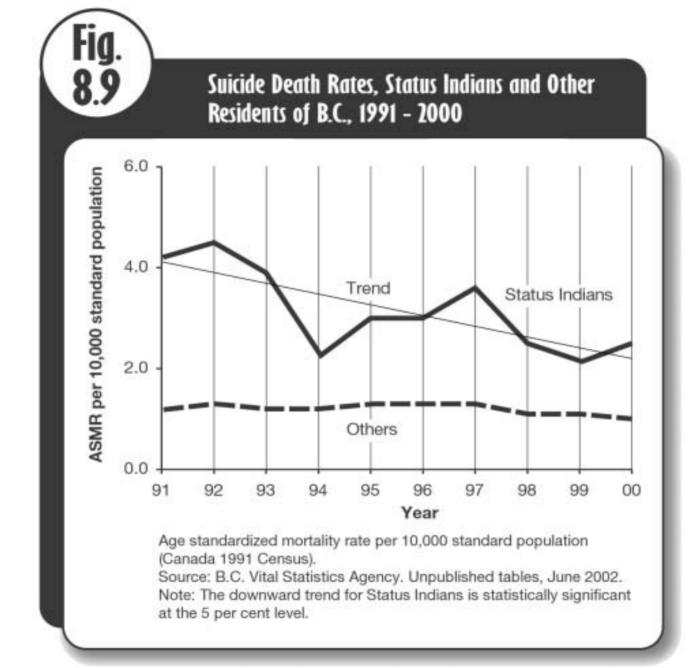
Sources: (1) BC Population: Statistics Canada. (May 2002). Life Expectancy at Birth, by Neighbourhood Income Tercile, Canada and Provinces, 1996, Unpublished table provided by Russell Wilkins, Health Analysis and Measurement Group. Original Data Source: Deaths 1996-97. Census Population 1996, Statistics Canada. (2) Status Indians: Life expectancy at birth, 1996-2000. B.C. Vital Statistics Agency. Unpublished tables, June 2002.





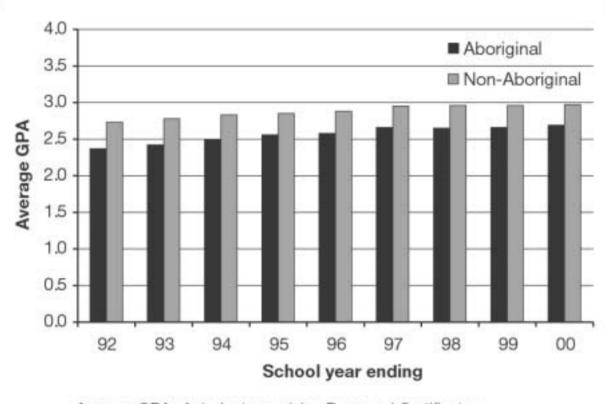
Mortality Rates for All Causes of Death, Status Indians and Other B.C. Residents, 1991 - 2005 (projected)







Grade Point Average of High School Graduates, 1992 - 2000



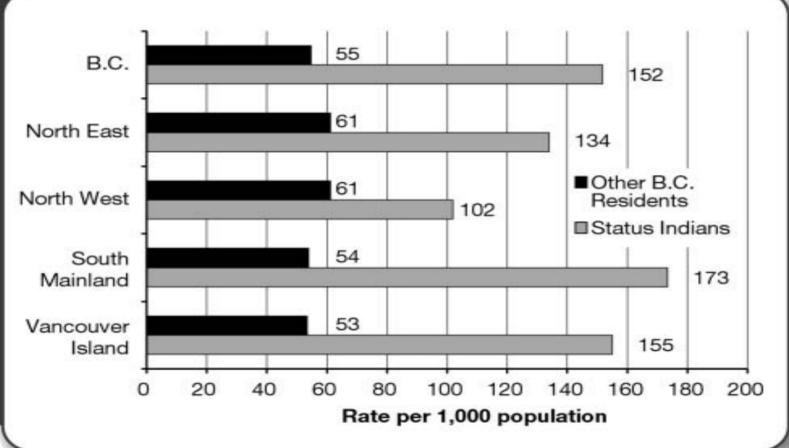
Average GPA of students receiving Dogwood Certificates.

Source: B.C. Ministry of Education. How are we Doing? An Overview of Aboriginal Education Results for Province of BC 2001.

Health Indicators

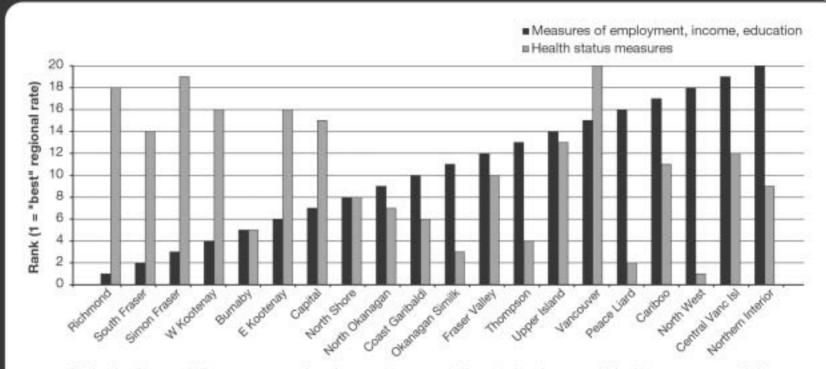
- 20 are improving; health-related areas like heart disease and stroke, respiratory diseases and non-health related areas like housing quality, community control and high school graduation.
- 7 stayed the same; youth in justice system immunizations, dental procedures, mental health follow-up, TB, lung cancer and arthritis.
- 3 have worsened; percent and number of children in care, alcohol related deaths and HIV/AIDS deaths.
- 25 are without trend data
- 5 relate to health care utilization and suggest deficiencies







Relationship between Socioeconomic Measures and Health Status, Aboriginal Population B.C. Health Regions

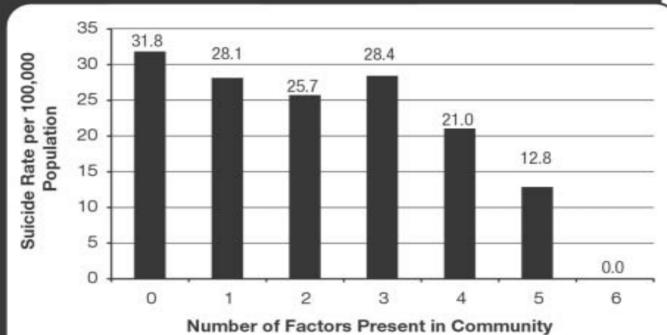


Regional rankings on 7 Census measures of employment, income, and educational attainment and 5 health status measures (infant mortality, life expectancy of men and women, and potential years of life lost due to natural and external causes). Scores were calculated based on a formula that considers how much each region differs from the median value.

Sources: (1) Statistics Canada. 1996 Census. (2) B.C. Vital Statistics Agency, Ministry of Health Services.



Suicide Rates by Number of Protective Factors Present, First Nations Communities in B.C.

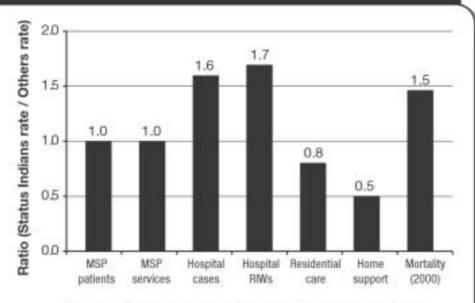


Protective factors: progress toward self-government and land claims, local control over community health services, education, and police and fire services, and presence of cultural facilities.

Source: Suicide Rates Among First Nations Persons in British Columbia, 1993 - 2000. Prepared by Christopher E. Lalonde for the Office of the Provincial Health Officer, 2001.



Use of Health Services, Status Indians Compared to Other B.C. Residents, 2000-01

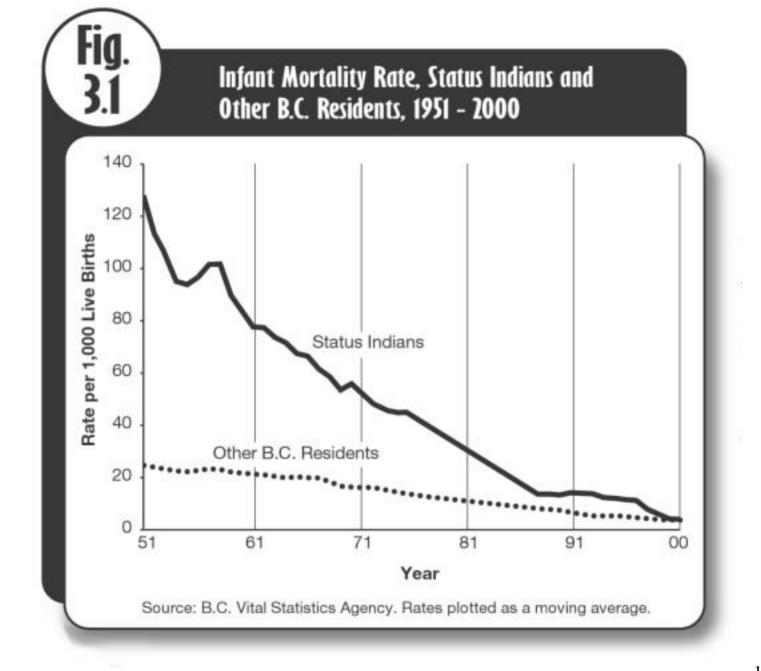


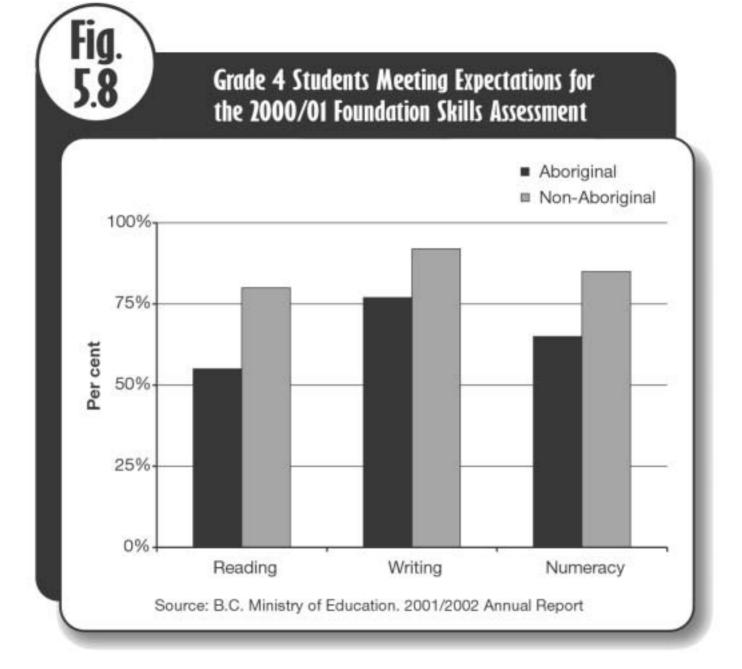
This chart shows the ratio of age standardized utilization rates for Status Indians compared to other B.C. residents. A ratio of 1.6 means that the Status Indian population used 60 per cent more services than others. MSP patients refer to the number of individuals who saw at least one physician (including medical health professionals such as chiropractors and physiotherapists) in 2000-01. RIWs are Resource Intensity Weights, weighted units of hospital activity used to estimate the relative costs of treating different types of patients. Residential care and home support refer to days of care in long-term care facilities and hours of home support services. Mortality is the ratio of age standardized mortality (death) rates in 1999.

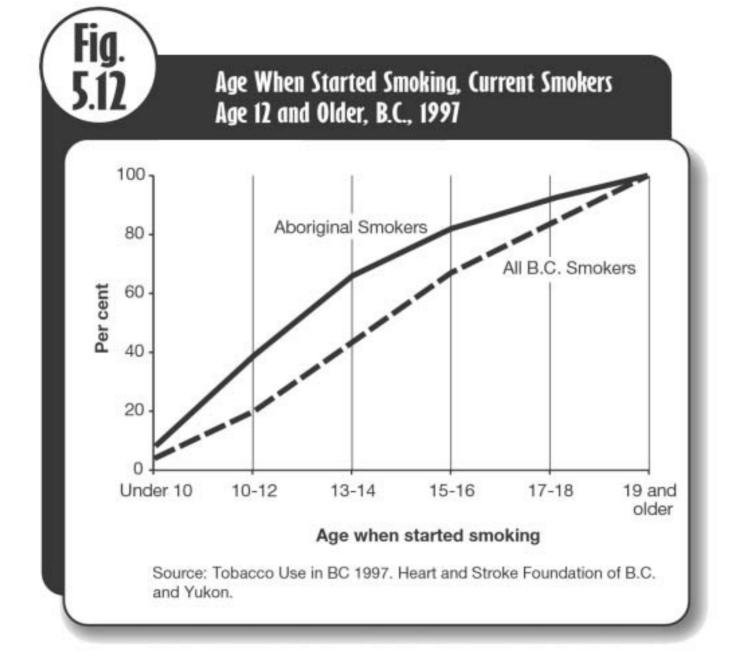
Sources: (1) Utilization data prepared by Information Support, B.C. Ministry of Health Services, Project 2001-288. (2) Mortality data are from B.C. Vital Statistics Agency, July 2001.

Solutions

- Formal Commitments to achieve comparable health status
- Improve Standard of Living
- More Recognition and Respect
- More Holistic Approach
- More Autonomy
- More Representation



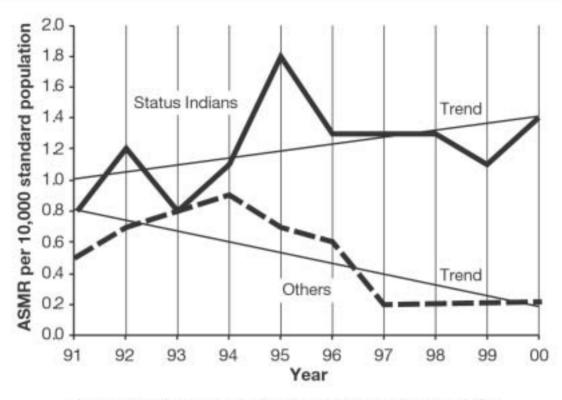






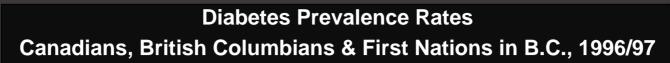


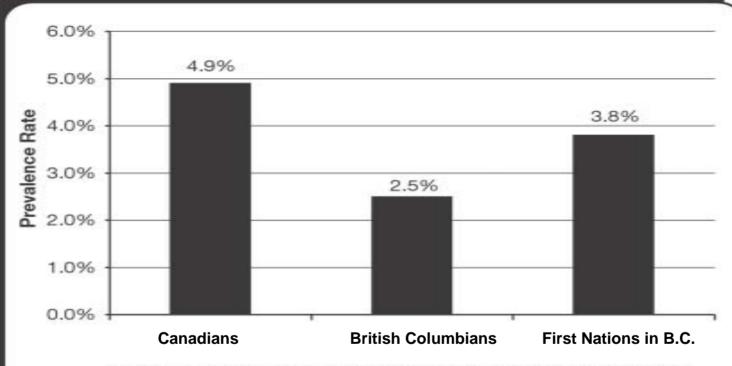
HIV/AIDS Mortality Rates, Status Indians and Other Residents of B.C., 1991 – 2000



Age standardized mortality rate per 10,000 standard population (Canada 1991 Census).

Source: B.C. Vital Statistics Agency. Unpublished tables, June 2002. Note: The downward trend for Others is statistically significant at the 5 per cent level.





Rate for Canada is unadjusted. Rates for B.C. and First Nations in B.C. are adjusted for age and gender.

Sources: 1996/97 National Population Health Survey, Statistics Canada and An Overview of the Canadian Diabetes Strategy, First Nations Chiefs' Health Committee, March 2001.

