

**Guysborough Antigonish Strait
Health Authority:
Health Status and District Profile
Update, June 2005**

“Health Determinants” are interrelated factors and conditions that have a strong influence on our health. These factors and conditions include social, economic and physical environments, personal health practices and coping skills, human biology, early childhood development, gender, culture, and health services.

Trends in Our Aging Population: Adults and Seniors



In 2002, GASHA published the Health Status and District Profile with a commitment to update our communities annually on some of the factors that determine our individual health and the health of our communities. This is the third update and it focuses on the health of our adults and seniors.

Population

- In 2001, the total population of GASHA was 47,154 residents, representing slightly greater than 5% of the population of Nova Scotia. Census figures indicate a gradually decreasing population with a 5.9% decline since 1991.
- GASHA has a higher percentage of older adults (aged 50 years and older) than Nova Scotia as a whole: 35% of males and 37% of females are over fifty years of age, compared to only 31% of males and 34% of females over fifty years of age in Nova Scotia.
- According to 2003 data, 7.11% of GASHA's population is aged 75 years and older, and the percentage of this age group is expected to increase to 9.02% by 2016.

Health Status: Well-being

- Self-reported life stress among residents within the district (including Pictou County) is similar to levels of stress reported throughout the province.
- Self-reported health rates show a greater discrepancy between perceived health in the province and GASHA: 16.3% rate their health as 'excellent' compared to 18.4% in Nova Scotia. In addition, 15.6% self-rate their health as 'fair or poor' compared to 13.8% in the province as a whole.

Health Status: Disease/Mortality

- The total (age-standardized) mortality rate for GASHA is 938.7 per 100,000 compared to the provincial rate of 895.2.
- Potential life years lost (per 100,000 people aged 0-74 years old) for selected causes of death (including deaths due to cancer, cardiovascular disease, respiratory disease, suicides and self-inflicted injuries, unintentional injuries, and HIV/AIDS) are higher within our district (including Pictou County) with 11,211 years lost compared to 10,807 years lost in Nova Scotia and 10,992 years lost in Canada.
- From 1995 to 1999, there was a higher incidence rate per 100,000 of lung cancer among males and females in GASHA, 529 and 388 new cases respectively, compared to 510 new cases among males and 378 for females throughout the province.
- In 2003, among individuals aged 45-64 in the district (including Pictou County), there were more cases of hypertension in males (4327 cases) compared to 3144 cases in females. The opposite is true among individuals aged 65 and older where there were 2112 cases reported among males and 3412 among females.
- With a standardized prevalence rate of 5.3%, GASHA has the second highest prevalence rate of diabetes in Nova Scotia.

Health Status: Health Behaviours

- Compared to national reports, residents in GASHA have slightly higher levels of physical inactivity and moderate activity and report slightly lower physically active levels.
- In 2000, 84.5% of residents of long-term care facilities in GASHA were immunized against influenza
- Compared to provincial rates of 67.5% and national rates of 62.4% for immunization among people aged 65 and older, 60.1% of people in this age group report being immunized in GASHA in 2003.
- Alcohol is reported by 72% of women and 93% of men to be the substance most used in GASHA.
- In GASHA, 8% of adult males and 9% of adult females are treated for problem gambling.
- Between 1991-2001, 57% of women aged 50-60 years old in GASHA and the Cape Breton District Health Authority reported to have had a mammogram.

Working Together for a Healthy Community

Determinants of Health: Working and Living Conditions

- The mean total personal income from all sources (e.g. employment, investments, social assistance, etc.) for residents in the district is, on average, \$23,765 compared to the provincial average of \$27,711.
- In 2000, the unemployment rate for persons 15 years of age and older in the district (including Pictou County) was 12.5%, significantly higher than the provincial rate of 9.7% and the Canadian rate of 7.2%.
- 44% of residents between the ages of 45 and 64 have less than a high school diploma compared to 33.7% of all Nova Scotians. Within the district (including Inverness County) there are also fewer people aged 45-64 possessing either a high school diploma, college diploma or university degree than in the rest of the province.
- Self-perceived levels of social support (e.g. having someone to confide in, having someone to count on in a crisis, having someone to count on for advice and having someone to share worries and concerns with) as reported by the population, show the majority of residents in the district (including Pictou County) and Nova Scotia reporting high perceived levels of social support, 88.4% and 85.1 respectively. Fewer residents reported low and medium levels of social support compared to provincial levels with combined percentages reported at 9.8% in the district compared to 11.8% in Nova Scotia.
- 10.3% of respondents aged 65 and over in the district (including Pictou County) report exposure to second hand smoke compared to 8.5% provincially and 6.4% nationally. For people aged 45 to 64, district residents report higher levels of exposure at 9.1% compared to national levels of 8.9%, but lower levels of exposure than provincial levels at 10.3%.
- Approximately 53% of adults in Atlantic Canada report limited literacy, making it an important health issue throughout GASHA.

Health System Resources

- There are 361 nursing home licensed beds, forty residential care facility licensed beds and six respite beds in GASHA.
- GASHA has the second highest number of nursing home beds per 1000 population aged 75 years and older.
- In 2000-2001, among individuals who felt that they needed health care in the past 12 months, 85.5% of residents in the district (including Pictou County) aged 45-64 and 94.2% of residents aged 65 and older, reported that their health care needs had been met. For the age group 65 and older, provincial rates were lower with 92.6% reporting that their health care needs were met.
- There are fewer family physicians per 100,000 population in GASHA than in Nova Scotia (81 family physicians compared to 102); however, national statistics on the number of family physicians are also lower than Nova Scotia numbers reporting 95 physicians per 100,000 population.
- GASHA's emergency room expenditures in 2003-2004 accounted for 6% of provincial ER expenditures which totaled \$51,548,649.
- Between April 2000 to March 2001, our Mental Health Out-Patient Services indicated that mood disorders and anxiety disorders accounted for the greatest percentage of total cases for adults nineteen years of age and over, representing 37% and 17.8% of total cases, respectively.
- In 2003-2004, GASHA's alternative level of care (ALC) days accounted for 10% of total patient care days, comparable to the percentage rate in all of Nova Scotia.
- In 2003-2004, there were seventy adult protection intakes within GASHA, accounting for 5.4% of the 1288 total adult protection intakes in Nova Scotia.
- As of March 2005, there were 834 chronic home care clients in GASHA, 83% of which were 65 years and older.
- Home support worker visits accounted for 70% of total home care visits in 2004-2005. Considerably less home care visits are provided by registered nurses in GASHA compared to elsewhere in the province.
- In GASHA, 41% of total home support hours are spent providing personal care and 26% are spent providing family relief/respite hours.
- As of May 2005, there is an approximate mean waiting period of five months for both males and females to be admitted to one of the seven nursing homes located within GASHA.

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H e a l t h A u t h o r i t y :
H e a l t h S t a t u s a n d D i s t r i c t P r o f i l e
U p d a t e , J u n e 2 0 0 5**

“A Population Health Approach” addresses the entire range of individual and collective factors that determine health. Population health strategies are designed to affect whole groups or populations of people.

The overarching goals of a population health approach are to maintain and improve the health status of the entire population and to reduce inequities in health status between population groups.