

WESTERN COMMUNITIES - 412

Local Health Area Profile



Western Communities Local Health Area (LHA) is located in Island Health's South Island Health Service Delivery Area (HSDA). It is 1,738 square kilometres, and includes the communities of Langford, Colwood, Sooke, Metchosin, and Highlands. Western Communities LHA borders on four other LHAs: Greater Victoria, Saanich Peninsula, Cowichan Valley South and Cowichan Valley West.

Western Communities can be reached by Highway 1, and is serviced by Highway 14. It is approximately a half an hour drive from Victoria, and a 45 minute drive from Duncan. Western Communities is serviced by more than 10 bus routes and has a handyDART service.



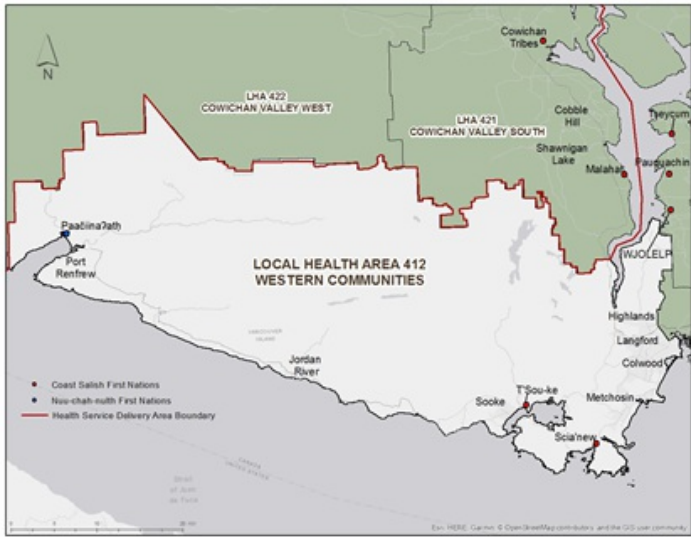
An accompanying Interpretation Guide has been created to assist with the interpretation of indicators.

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 Western Communities LHA represents 10.33% (87,160 people) of Island Health’s total population of 843,376. According to the 2016 Census, 5.9% of people living in the Western Communities identified themselves as Indigenous, compared to 7.6% across Island Health and 5.9% in BC. Additionally, 7.5% of people living in the Western Communities identified themselves as a visible minority, compared to 9.6% across Island Health and 30.3% in BC.

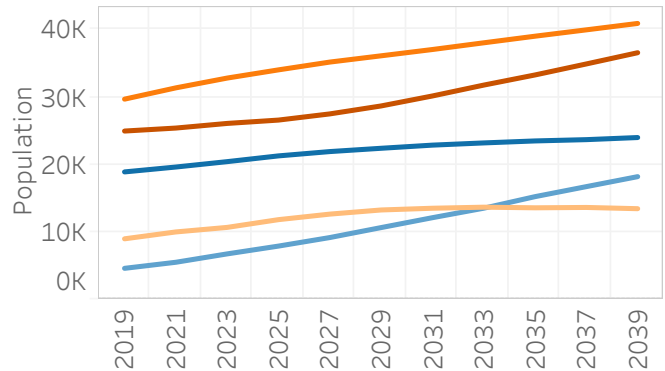
The population of the Western Communities is younger than that of Island Health and BC, with an average age of 39.5 years. The 75+ age group makes up 5.29% of the population, which is lower than Island Health (10.11%) and BC (7.86%) proportions. The largest population group is between the ages 20 and 44 years.

The Western Communities population is expected to increase by 24.82% to 108,793 by the year 2028; this is higher than the growth expected for Island Health (8.63%) and BC (11.4%). Over the next 20 years, the 75+ population of the Western Communities is expected to nearly quadruple (from 4,611 to 17,457). All other age groups are expected to grow as well, albeit more slowly. See the Population and Demographics summary on page 10 for more information.

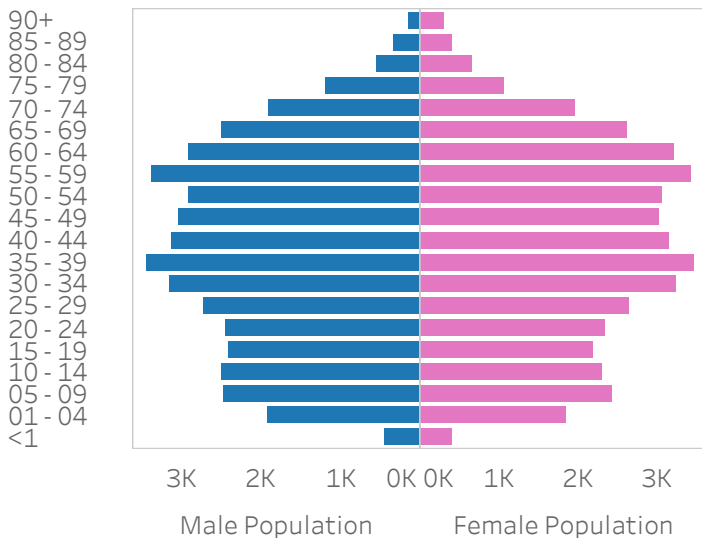
Average Age (2018)



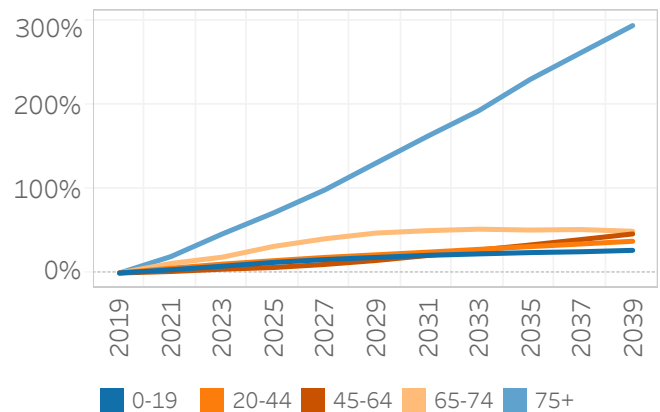
Estimated Total Population - Western Communities



Population Pyramid - 2019 - Western Communities



Estimated Population Change - Western Communities





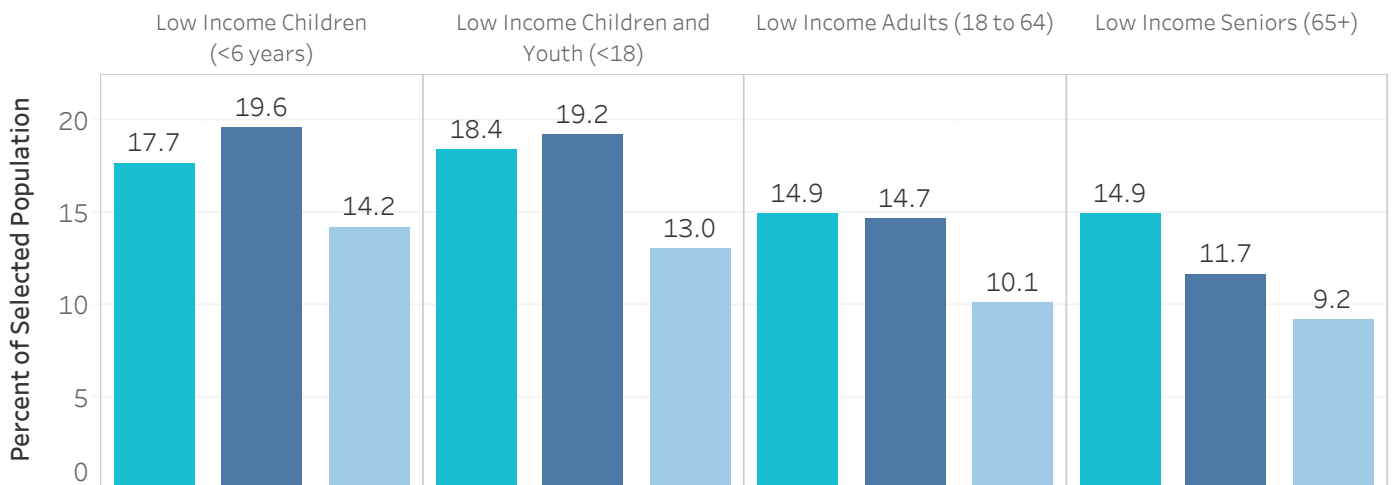
Determinants of Health

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 Western Communities was \$80,320 in 2016, higher than the BC median household income of \$69,979 and Island Health of \$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 lower across all age groups, compared to Island Health and BC. Additionally, the unemployment rate in Western Communities is lower than Island Health and BC (see page 12).

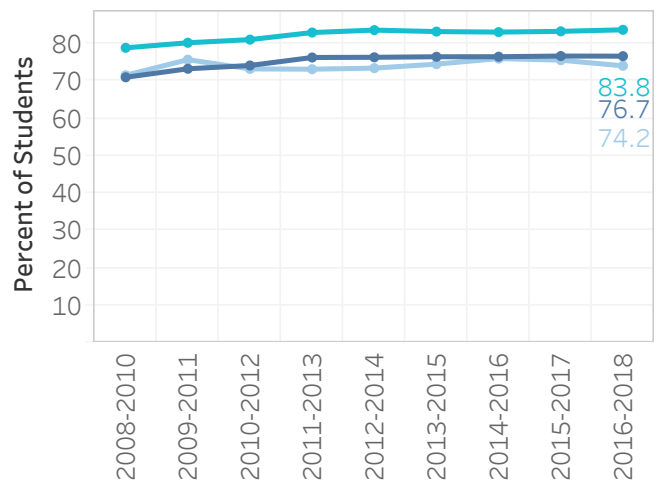
Percent of Population with Low Income in 2015 based on after-tax low-income measure (2016 Census)



Education

High school completion rates in the Western Communities are similar to the rates for Island Health, but lower than BC. Also, according to the 2016 Census, a lower proportion of the Western Communities adult population have completed post-secondary education.

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

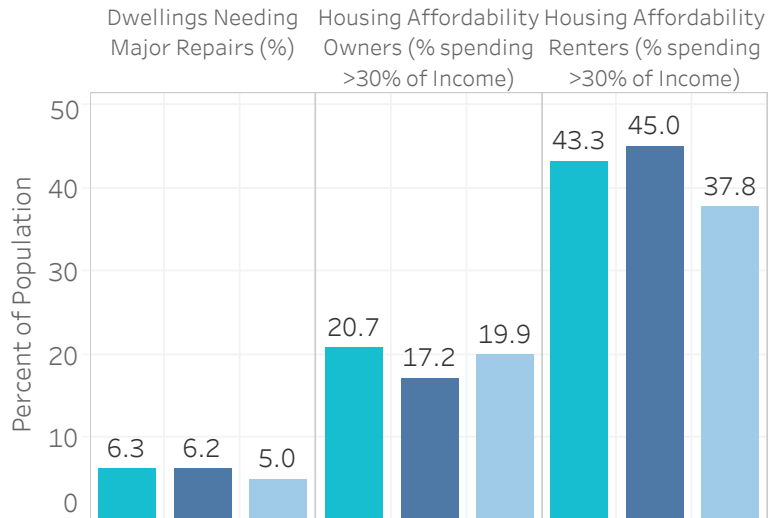
One way to measure the affordability of housing is to look at how much of a household's income is spent on shelter. The proportion of renters spending more than 30% of income on housing in Western Communities is lower than Island Health and BC. The proportion of owners spending more than 30% of incomes on housing in Western Communities sits between BC and Island Health level. There are fewer crowded family households in Western Communities than Island Health and BC (page 12). The percentage of households in need of major repairs (e.g. defective electrical wiring) is lower than Island Health and BC rates.

Early Childhood Development and Determinants of Child and Youth Health

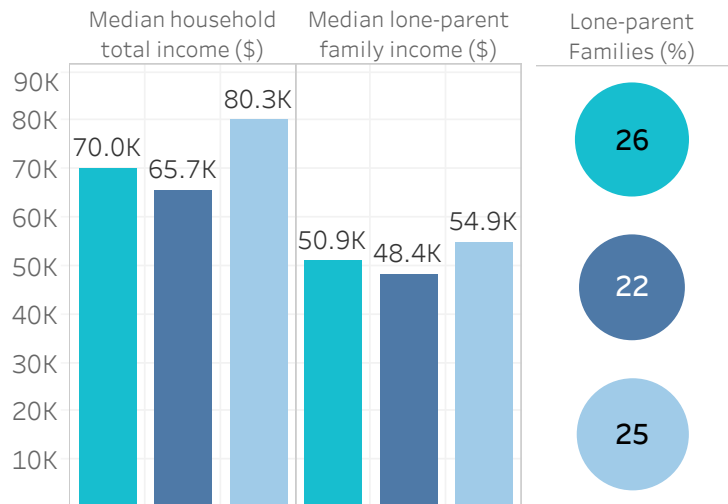
Creating supportive and healthy environments in an equitable way so that all children and youth can grow and thrive is critical to the health of the population. This includes supporting mothers during the pre- and post-natal period, supporting families during early development years, supporting children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

Western Communities has a lower percentage of lone-parent families than BC, but higher than Island Health. The median household income is higher for Western Communities compared to both Island Health and BC, lone-parent families have a higher income in Western Communities compared to Island Health and BC.

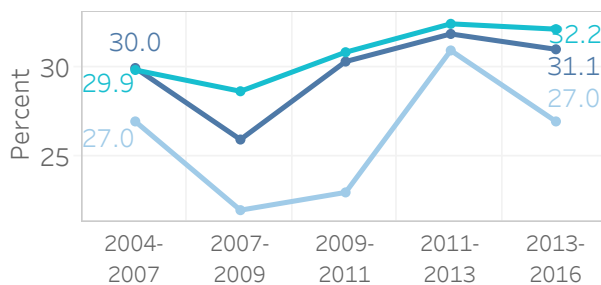
Selected Household Indicators



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 decreased in the most recent wave. Western Communities has lower levels of vulnerability for preschool children than Island Health and BC and have reversed a negative trend in the most recent wave.

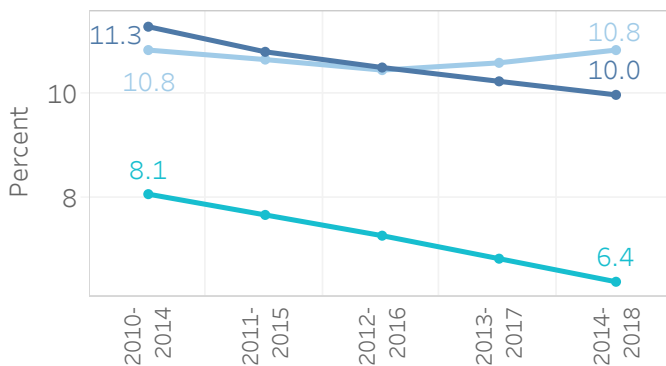


Determinants of Health

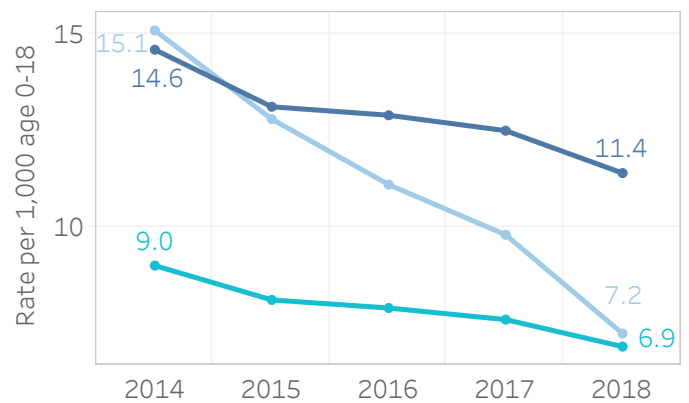
Mothers' smoking during pregnancy has demonstrated negative effects for both mother and baby. Overall, rates of smoking during pregnancy have been generally decreasing over the past eight years; however, across Island Health rates have been much higher than for BC. Rates for Western Communities have moved above the Island Health rate in the most recent years, well above BC values.

Rates of children and youth in care have decreased over the past five years; across Island Health overall rates have been much higher than for BC. Rates for Western Communities are lower than Island Health and comparable to provincial values. 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)

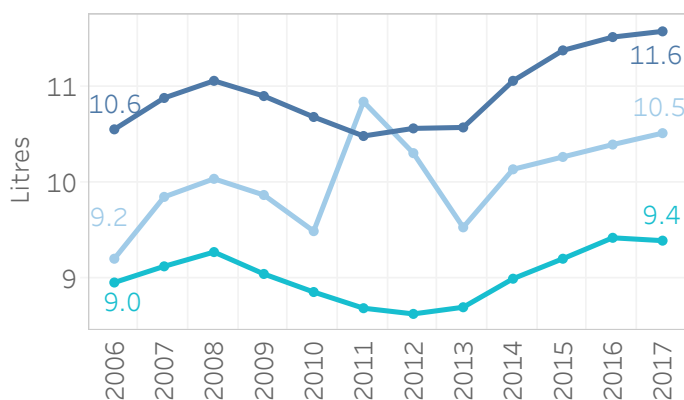


Children and Youth in Care per 1,000 Children and Youth



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, not smoking, reducing alcohol consumption, and maintaining social connections contribute to a healthier life. Many 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 Western Communities, particularly alcohol consumption per capita, falls in between the Island Health and BC average.

Among those who are employed, a lower percentage of the population in Western Communities report using active modes of transportation (walking, cycling, and public transit) to get to work. See the Determinants of Health summary on pages 12 and 13 for more information.

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





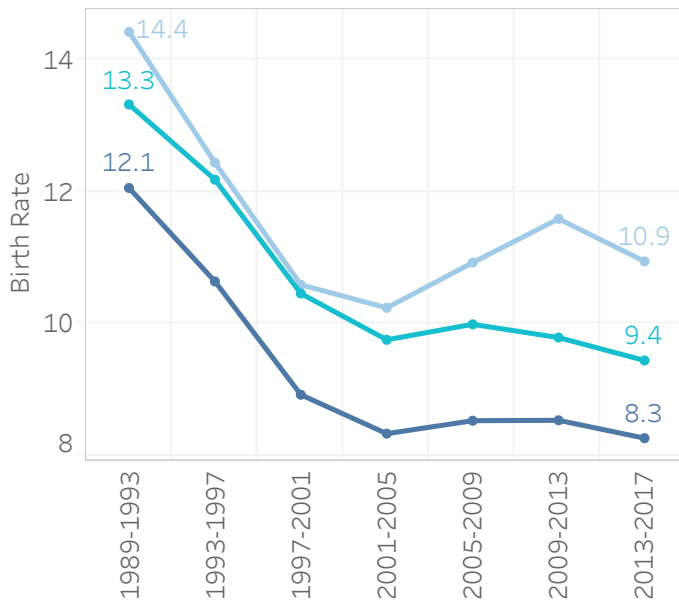
Health Status

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 Western Communities is higher than Island Health and BC. Compared to Island Health there are proportionately fewer births to older (35 years and over) mothers and fewer births to mothers under the age of 20 years. The rate of low birth weight babies and the rate of pre-term births (those born at less than 37 weeks) is similar to Island Health and BC. There is a slightly higher number of cesarean sections compared to Island Health, but a similar level to BC.

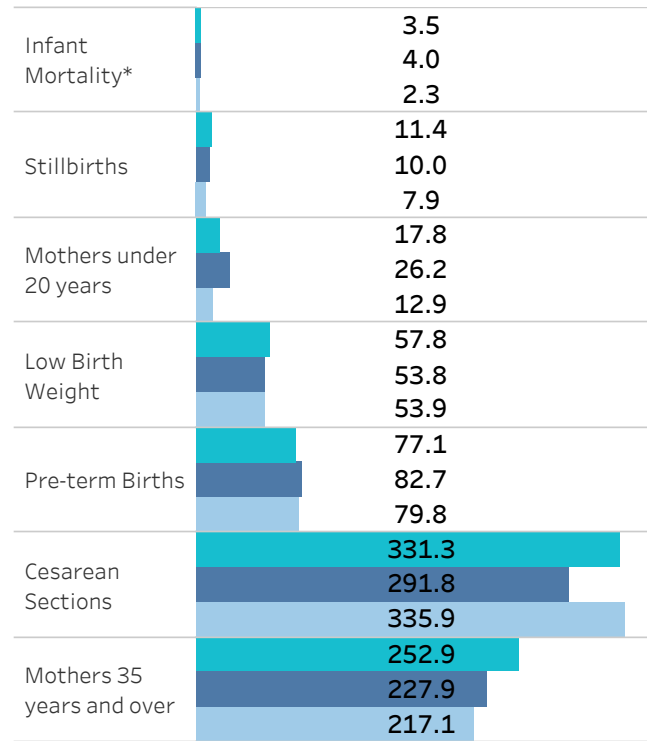
Birth Statistics
Live Births per 1,000 Population
(1989-1993 to 2013-2017)



Mortality Statistics

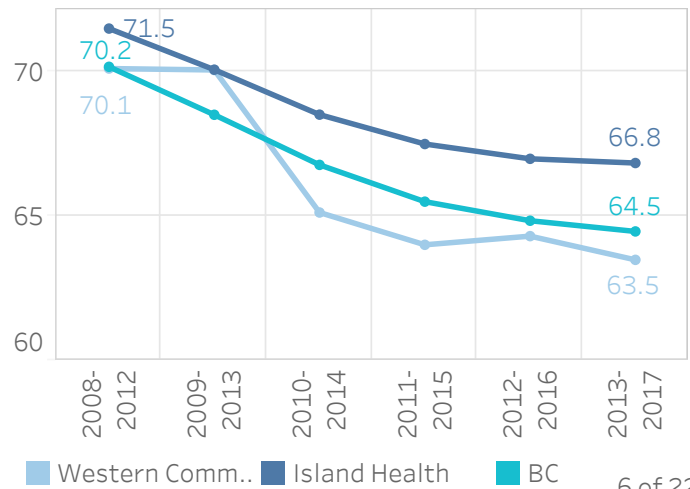
Mortality rates have decreased steadily over the last decade in all areas. The age-standardized all-cause mortality rate for Western Communities is similar to the Island Health and BC rates.

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

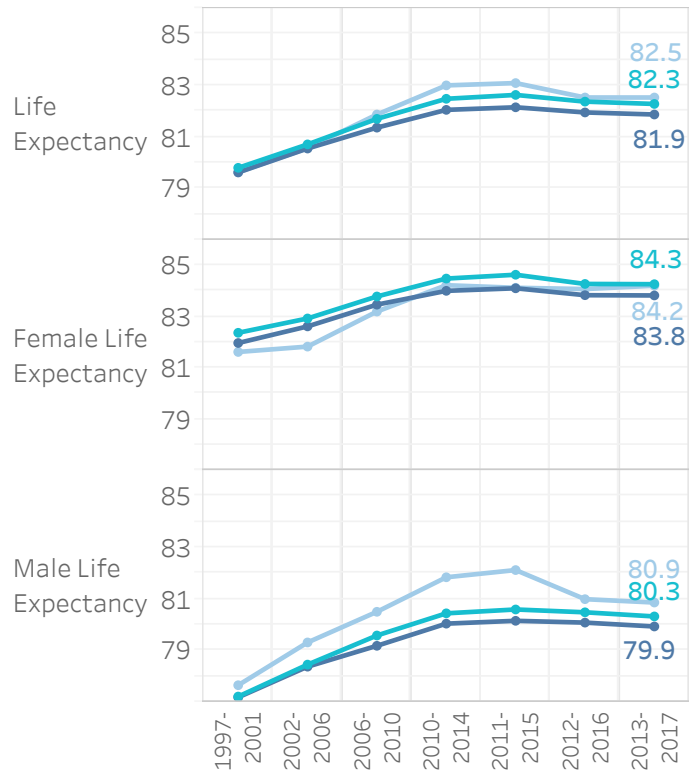
Potential years of life lost (PYLL) is a measure of premature mortality (an estimate of the average years a person would have lived if they had not died before the established life expectancy of 75 years). The PYLL in Western Communities due to lung/tracheal cancer and malignant neoplasms are greater than BC and Island Health. A complete list of PYLL by cause can be found on page 16.

Life expectancy has been increasing over the last few decades, but has decreased in the last few years due to overdose deaths at younger ages. Western Communities' population tends to have a similar life expectancy for both males and females to that of both Island Health and BC.

Chronic Disease

Chronic disease prevalence rates tend to be lower for Western Communities in comparison to Island Health, with the exception of asthma. Compared to BC, only asthma and episodic asthma are more prevalent. See the Health Status summary on page 15 for more information.

Life Expectancy



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

	BC	Island Health	Western Communities
Heart Failure	19.4	17.7	18.2
Alzheimer's Disease and Other Dementia	20.3	21.3	17.2
Chronic Kidney Disease	23.2	22.2	23.3
Chronic Obstructive Pulmonary Disease	51.1	52.5	50.4
Episodic Asthma	49.9	52.9	55.6
Ischemic Heart Disease	69.4	60.5	60.1
Diabetes	80.3	69.5	77.8
Osteoarthritis	84.9	91.1	86.9
Asthma	123.1	130.7	133.3
Hypertension	224.7	212.1	225.6



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 discussions of 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

Although many chronic diseases have a similar prevalence in the Western Communities in comparison to Island Health and BC, many conditions related to mental health have higher rates than BC and Island Health overall. The most notable conditions are schizophrenia and delusional disorders, where Western Communities prevalence is much lower than BC and Island Health overall. Western Communities has a higher prevalence in all of the other mental health conditions compared to BC and Island Health.

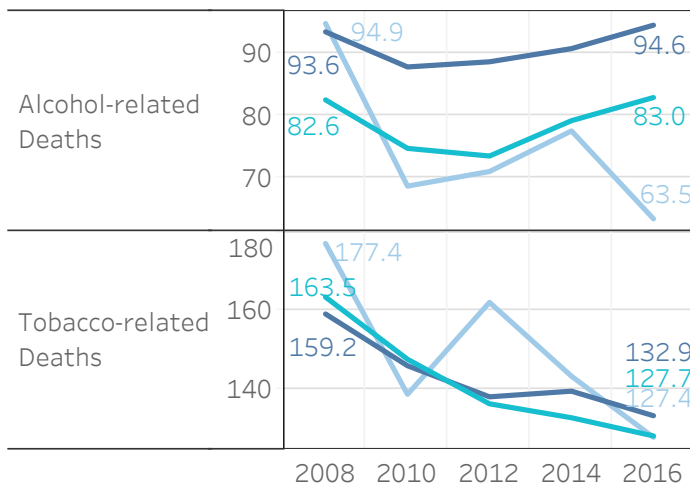
Substance Use

Alcohol and tobacco-related death rates in Western Communities have been variable over the last decade and are currently on a downward trend. Illicit drug toxicity deaths have increased over the last few years, but are below Island Health and BC rates. 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.

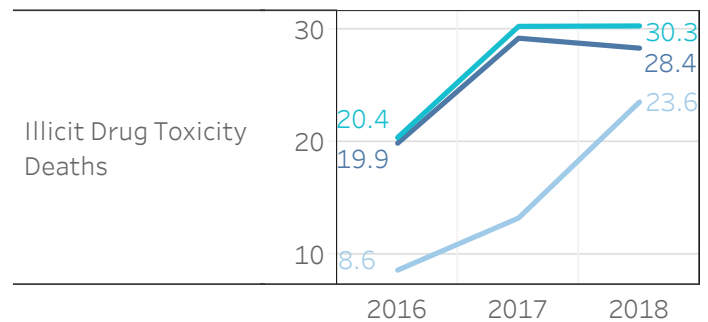
Chronic Disease Age Standardized Prevalence Per 1,000 Individuals

Depression	280	● 288.6
	260	● 278.3
Episodic Depression	90	● 91.0
	80	● 85.8
	70	● 72.2
Mood & Anxiety Disorders	340	● 346.7
	320	● 342.7
	300	● 301.9
Episodic Mood & Anxiety Disorders	120	● 123.7
	110	● 122.1
Schizophrenia & Delusional Disorders	100	● 101.6
	12	● 11.6
	10	● 11.0
	8	● 7.5

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>.

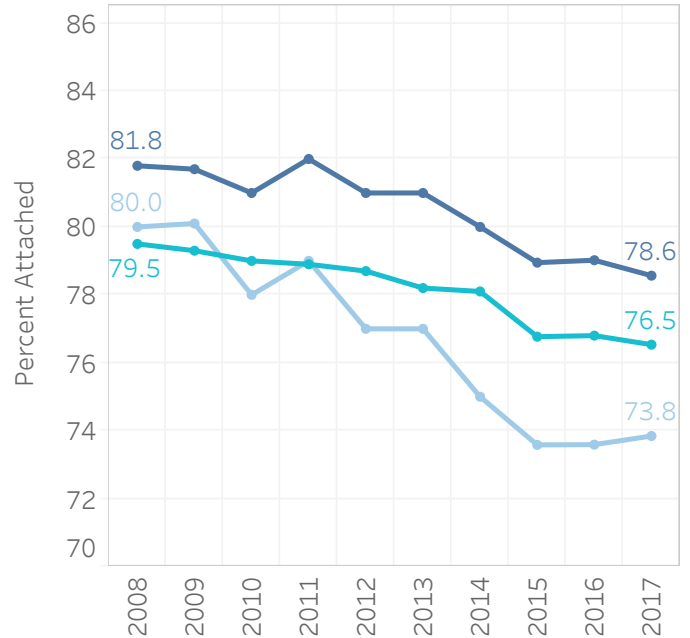


Health Service Use

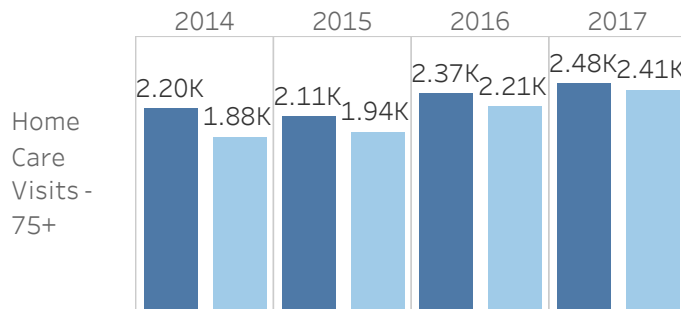
Access to primary care services plays an important role in the use of emergency department and inpatient services. The population attached to physicians at the practice level is calculated by the Ministry of Health and indicates the percentage of the population who have a regular physician or regular physician practice. Compared to Island Health overall, a lower percentage of the Western Communities population has a physician at the practice level.

There is a higher rate of home care and home support clients for the 75+ age group in the Western Communities compared to Island Health. The number of home care visits for those age 75+ in Western Communities is lower than Island Health overall, but the LHA has a much higher use of home support services. See Health Service Use summary on page 17 for more information on these topics.

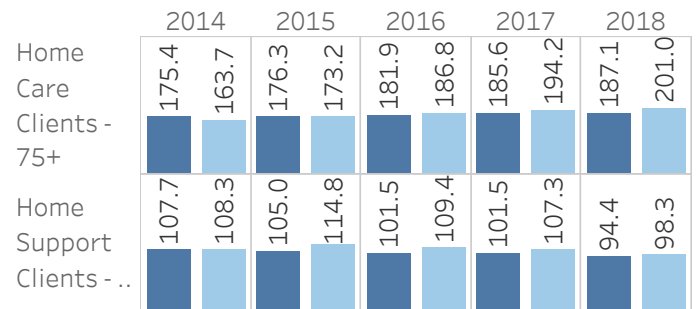
Population Attached to Physician at the Practice Level (%)



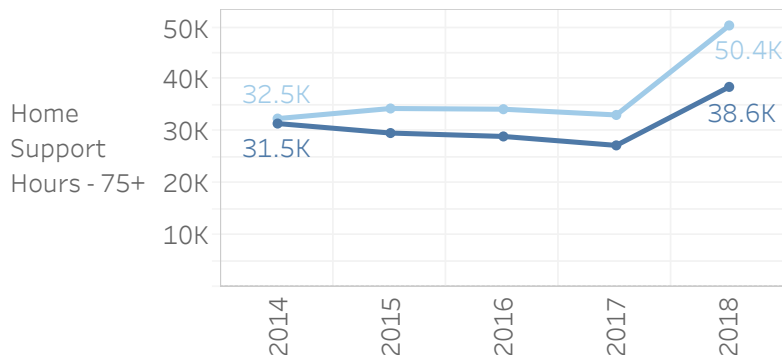
Home Care Visits
Rate per 1,000 Population



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



Home Support Hours
Rate per 1,000 Population





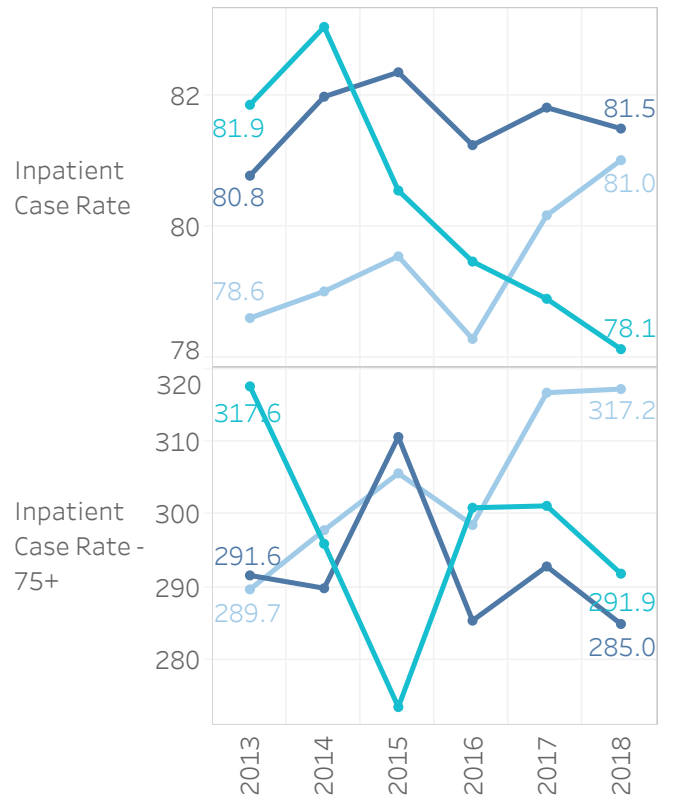
Health Service Use

The age standardized hospitalization rate (inpatient admissions) for the Western Communities population is between that of Island Health and BC, but has a higher rate overall for the population aged 75 and over.

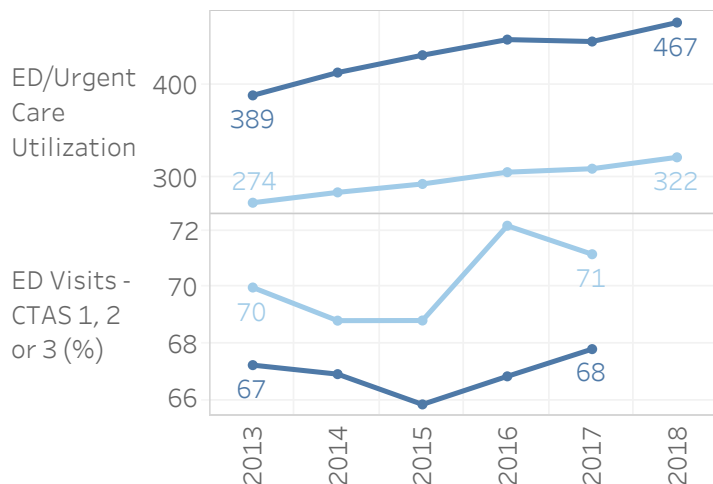
The hospital admission rate for Ambulatory Care Sensitive Conditions (ACSC) – conditions that can be treated in the community if services are available and would not necessarily require hospitalization – is similar between Island Health and Western Communities, although the rate has been increasing over the last five years.

Emergency/urgent care visit rates are lower for Western Communities compared to Island Health and BC. However, the percentage of emergency/urgent care visits that are triaged as highly urgent is slightly higher when compared to Island Health. 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.

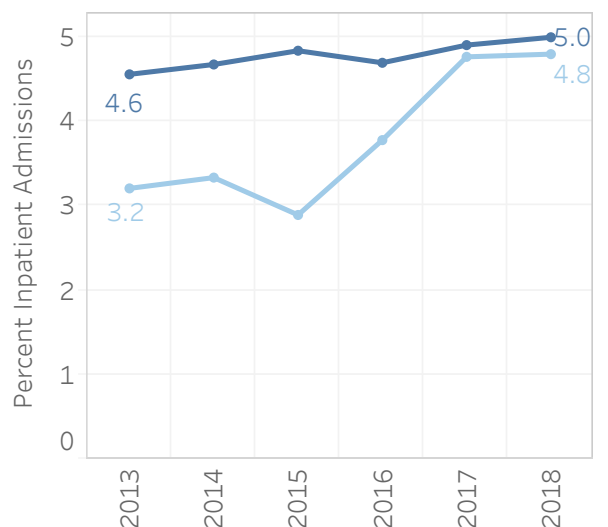
**Acute Care Inpatient Cases
(Age Standardized Rate per 1,000)**



**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)**



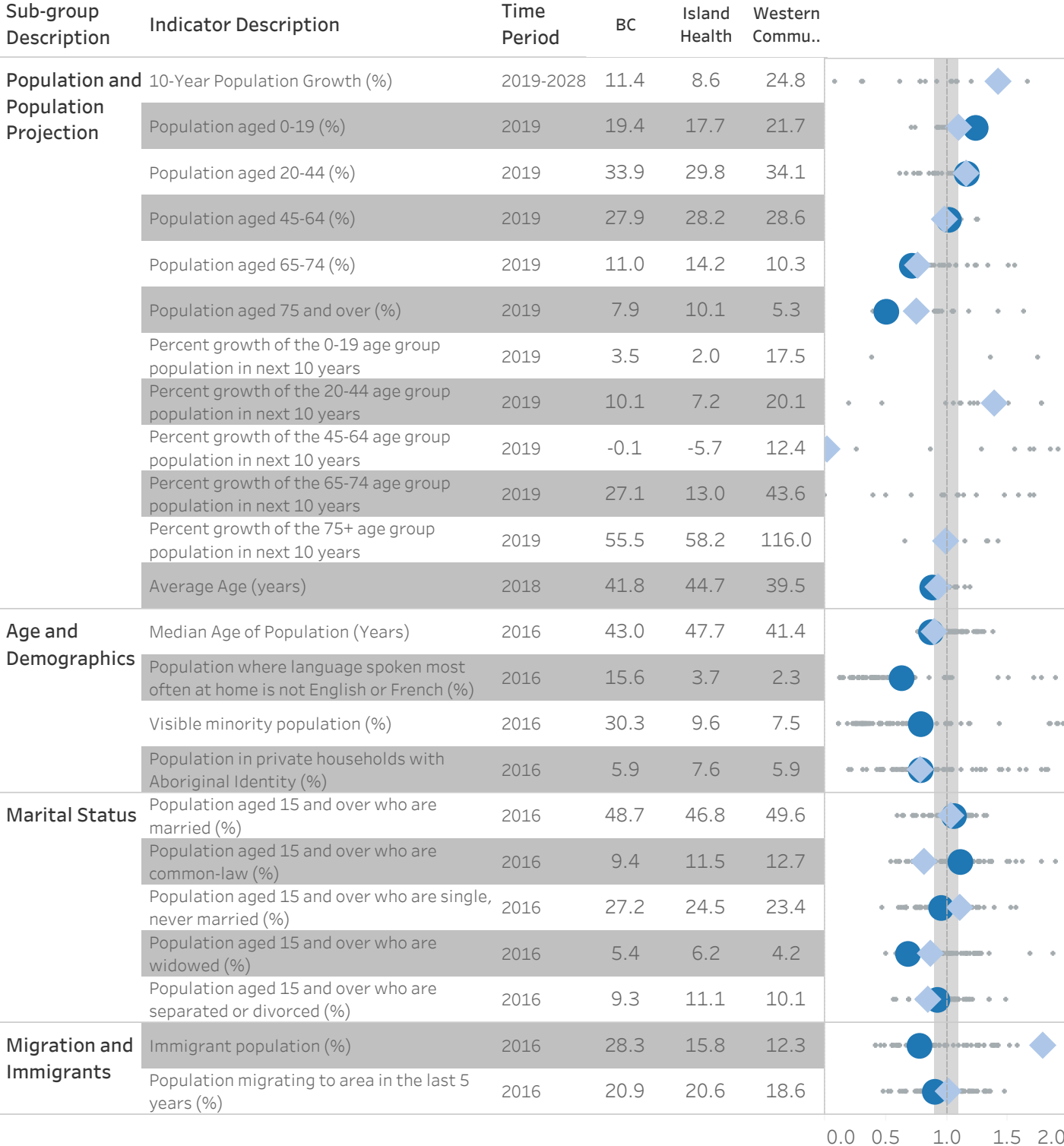
**Ambulatory Care Sensitive Conditions
(% of Admissions)**



● 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.

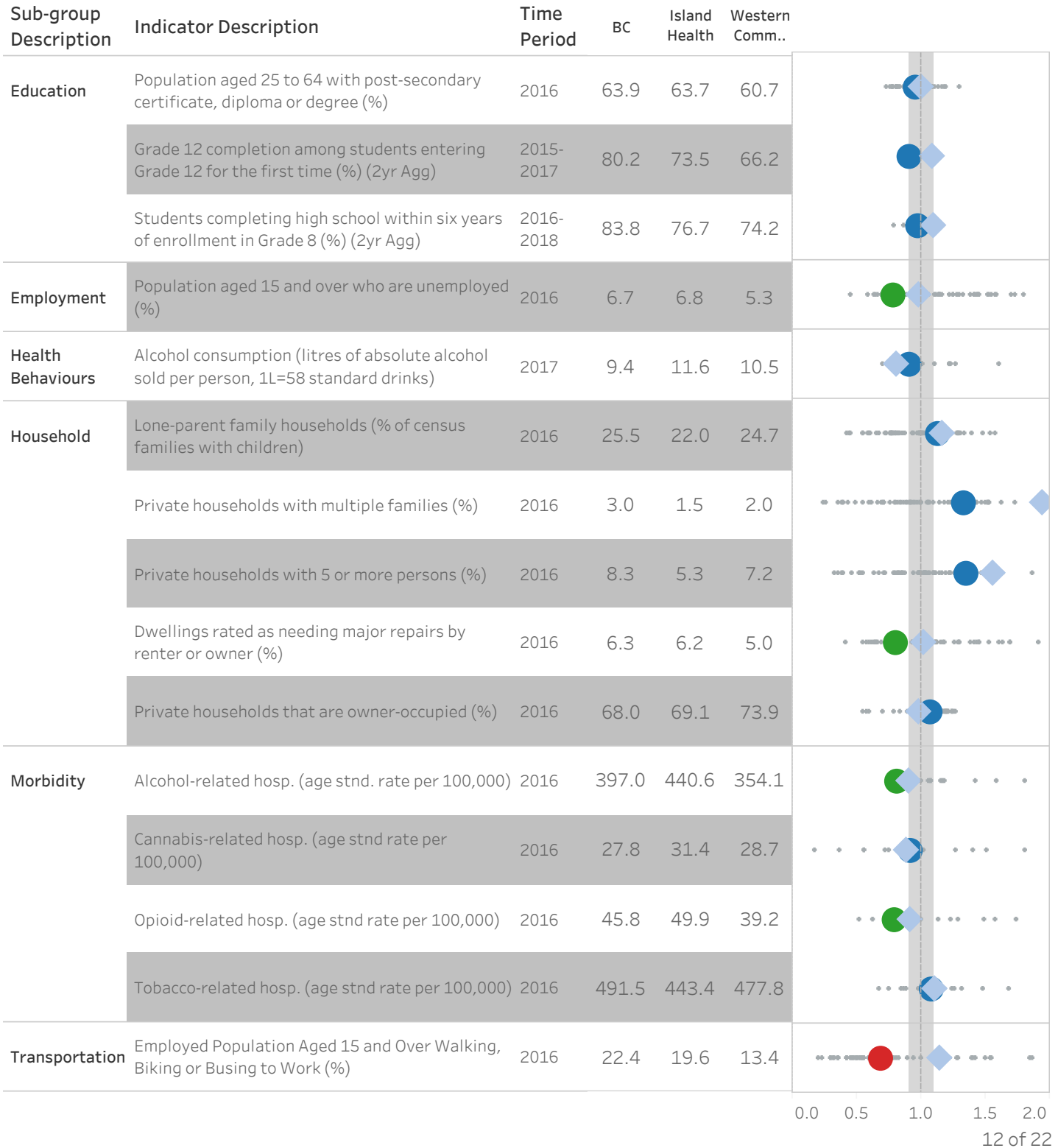
Population and Demographics Summary



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\$ Determinants of Health Summary



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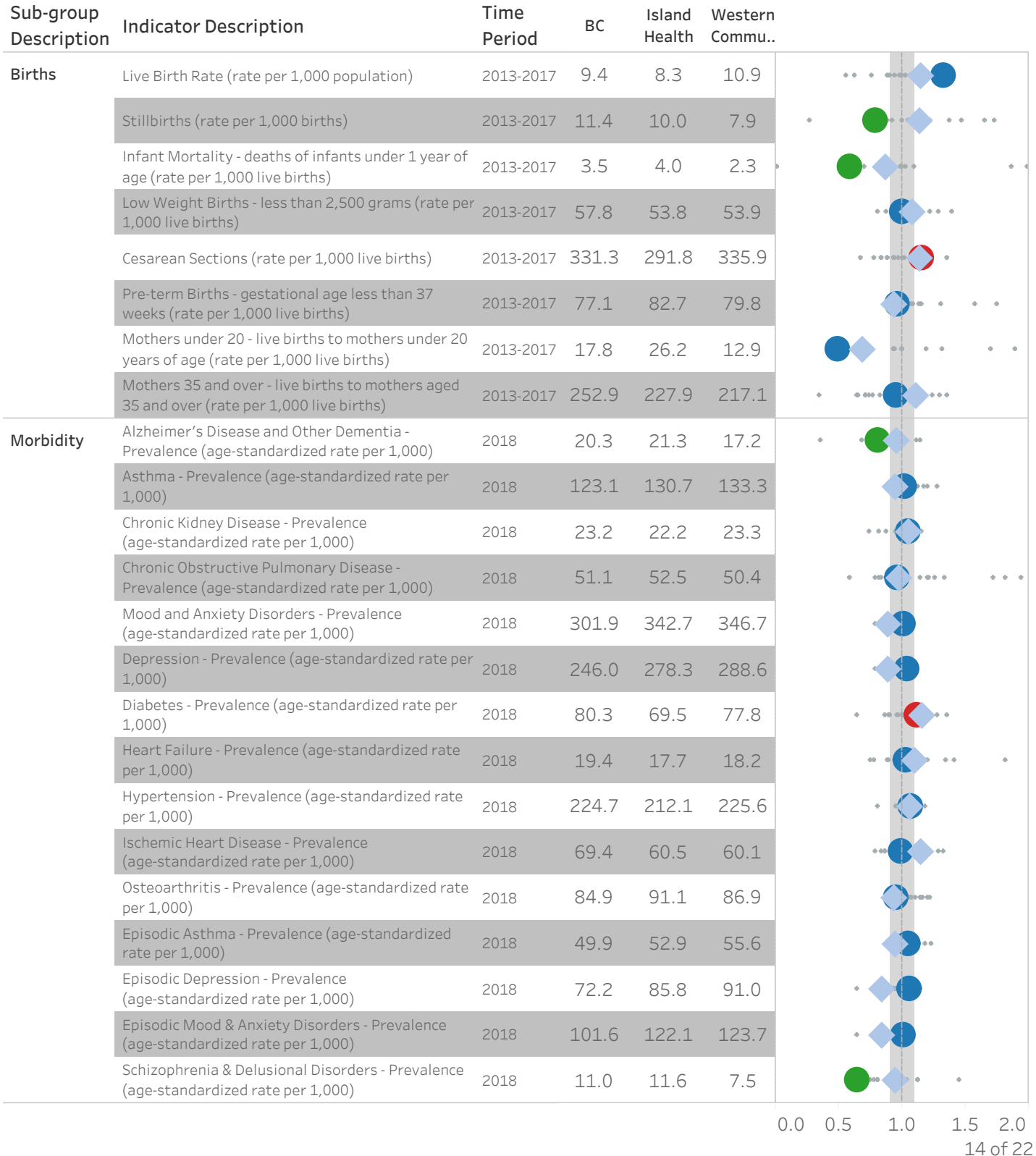
\$ Determinants of Health Summary (Continued)

Sub-group Description	Indicator Description	Time Period	BC	Island Health	Western Commun..	
Child Health	Child Mental Diseases & Disorders Hosp. (rate per 1,000 aged 0-14)	2018	1.9	2.2	1.4	
	Youth Mental Diseases & Disorders Hosp. (rate per 1,000 aged 15-24)	2018	12.0	12.1	9.4	
	Child/Youth Mental Diseases & Disorders Hosp. (rate per 1,000 aged 0 to 24)	2018	6.4	6.6	5.0	
	Child hospitalizations - Injury/Poisoning (rate per 1,000 aged 0 to 14) - (2yr Agg)	2016-2018	4.4	5.5	4.6	
	Child hospitalizations - Respiratory Dis. (rate per 1,000 aged 0 to 14) - (2yr Agg)	2016-2018	8.0	9.2	8.2	
	Child hospitalizations - Dental Surgery (rate per 1,000 aged 0 to 14) - (2yr Agg)	2016-2018	7.0	9.8	7.9	
	Pregnant women who reported smoking at any time during current pregnancy (%) (5yr Agg)	2014-2018	6.4	10.0	10.8	
Early Development	EDI: Kindergarten children rated as vulnerable for physical development (%)	2013-2016	14.8	16.2	14.0	
	EDI: Kindergarten children rated as vulnerable for social development (%)	2013-2016	15.7	14.7	13.0	
	EDI: Kindergarten children rated as vulnerable for emotional development (%)	2013-2016	16.1	16.6	15.0	
	EDI: Kindergarten children rated as vulnerable for language development (%)	2013-2016	9.4	9.0	7.0	
	EDI: Kindergarten children rated as vulnerable for communication development (%)	2013-2016	14.2	11.9	10.0	
	EDI: Kindergarten children rated as vulnerable on one or more domains (%)	2013-2016	32.2	31.1	27.0	
	EDI: Kindergarten children rated as vulnerable on one or more domains, excl. communication (%)	2013-2016	28.6	28.5	25.0	
Income	Median lone-parent family income (\$)	2016	50,894.0	48,366.0	54,931.0	
	Median household total income (\$)	2016	69,979.0	65,735.0	80,320.0	
Income Inequality	Difference in median income comparing males and females aged 15 and over	2016	12,817.0	12,100.0	15,896.0	
	Low income based on after-tax low income measure (%)	2016	15.5	14.8	10.6	
	Low income based on after-tax low-income measure, ages less than 18 years (%)	2016	18.4	19.2	13.0	
	Low income based on after-tax low-income measure, ages less than 6 years (%)	2016	17.7	19.6	14.2	
	Low income based on after-tax low-income measure, ages 18 to 64 years (%)	2016	14.9	14.7	10.1	
	Low income based on after-tax low-income measure, ages 65 years and over (%)	2016	14.9	11.7	9.2	
	Households (owned) spending more than 30% of income on housing (%)	2016	20.7	17.2	19.9	
	Households (rented) spending more than 30% of income on housing (%)	2016	43.3	45.0	37.8	
Protecting Child and Youth	Children and Youth in Care (rate per 1,000 children aged 0-18)	2018	6.9	11.4	7.2	
	Children and Youth in Need of Protection (rate per 1,000 children aged 0-18)	2017	29.5	41.3	26.7	

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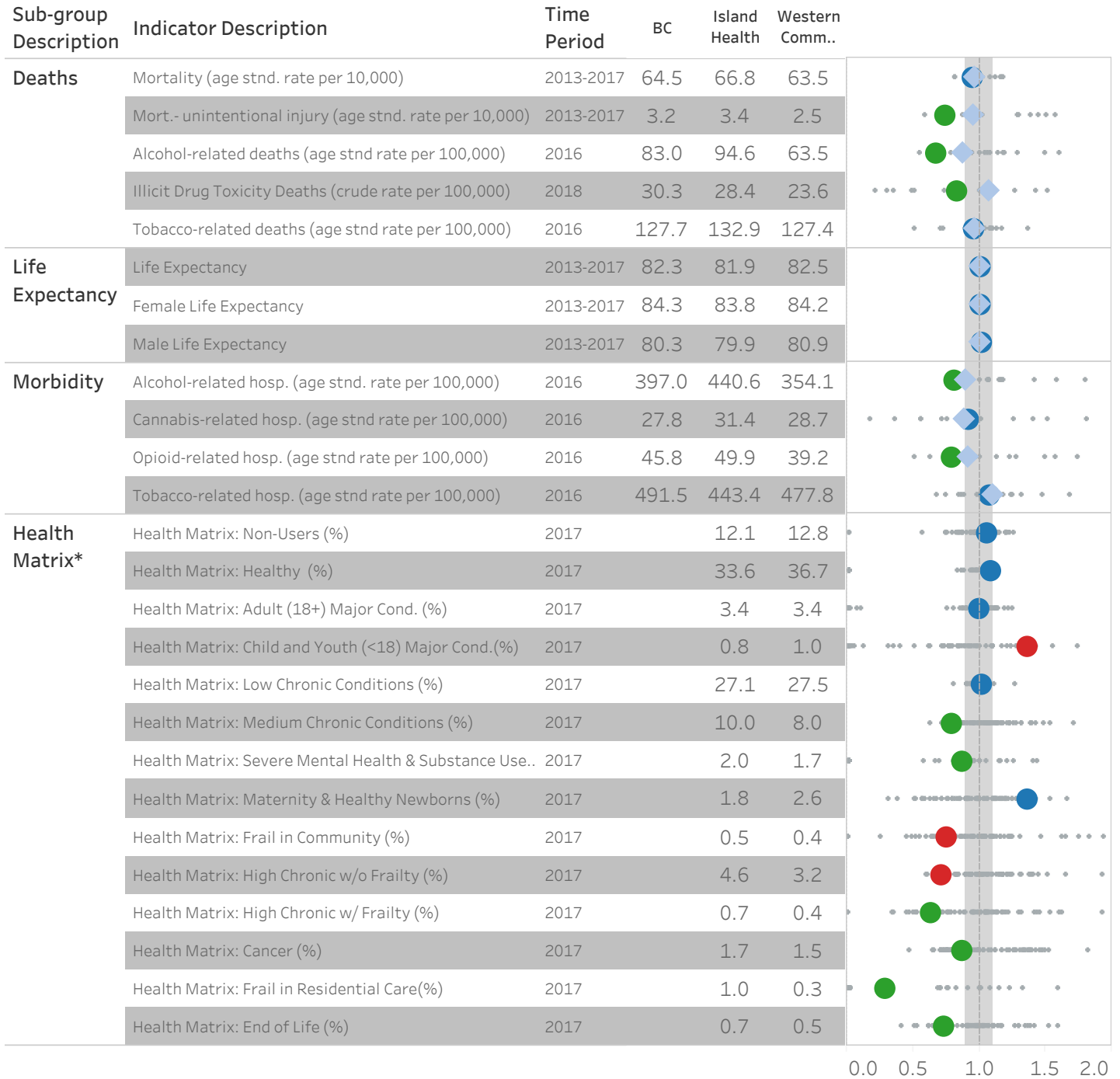
Health Status Summary



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Health Status Summary (Continued)

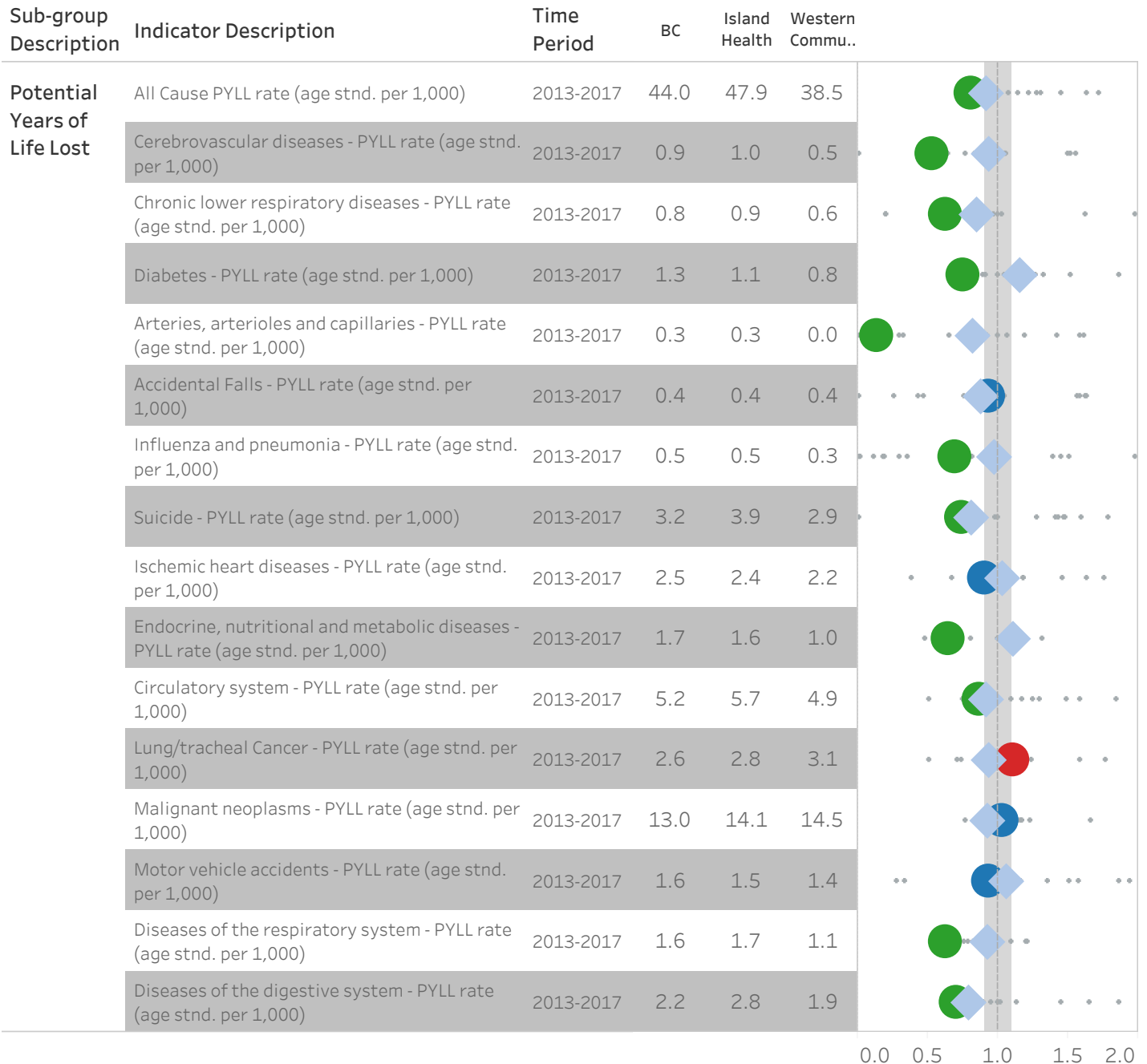


*The Health Matrix is a way of categorizing the population into different groups based on their health service utilization patterns. These categories are mutually exclusive and add up to 100% - in other words, everyone is placed into one of the categories, going from low or no utilization to high utilization 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/551datadictionary.pdf>

● 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.

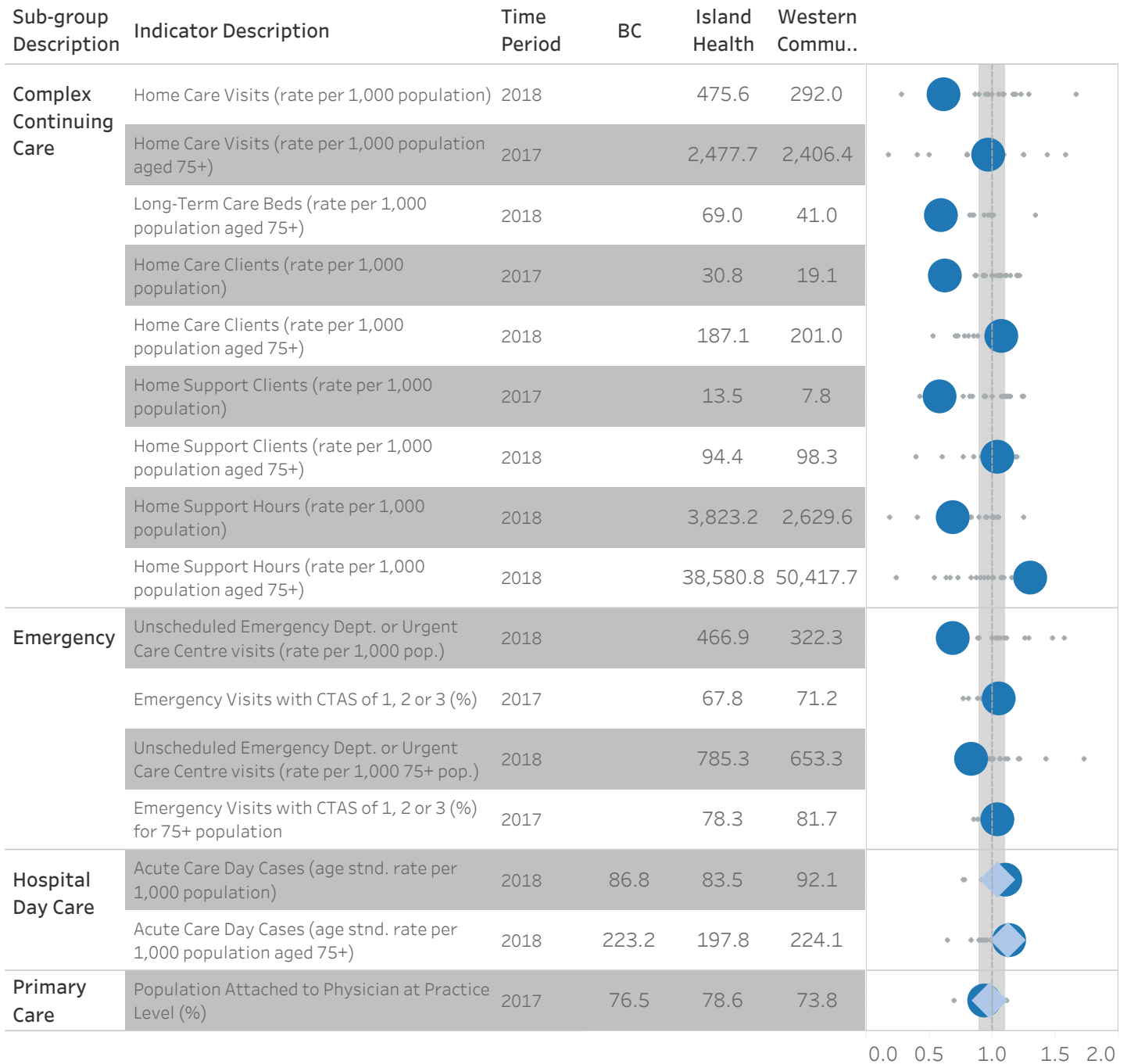
⦿ Potential Years of Life Lost (PYLL) from life expectancy of 75 years



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

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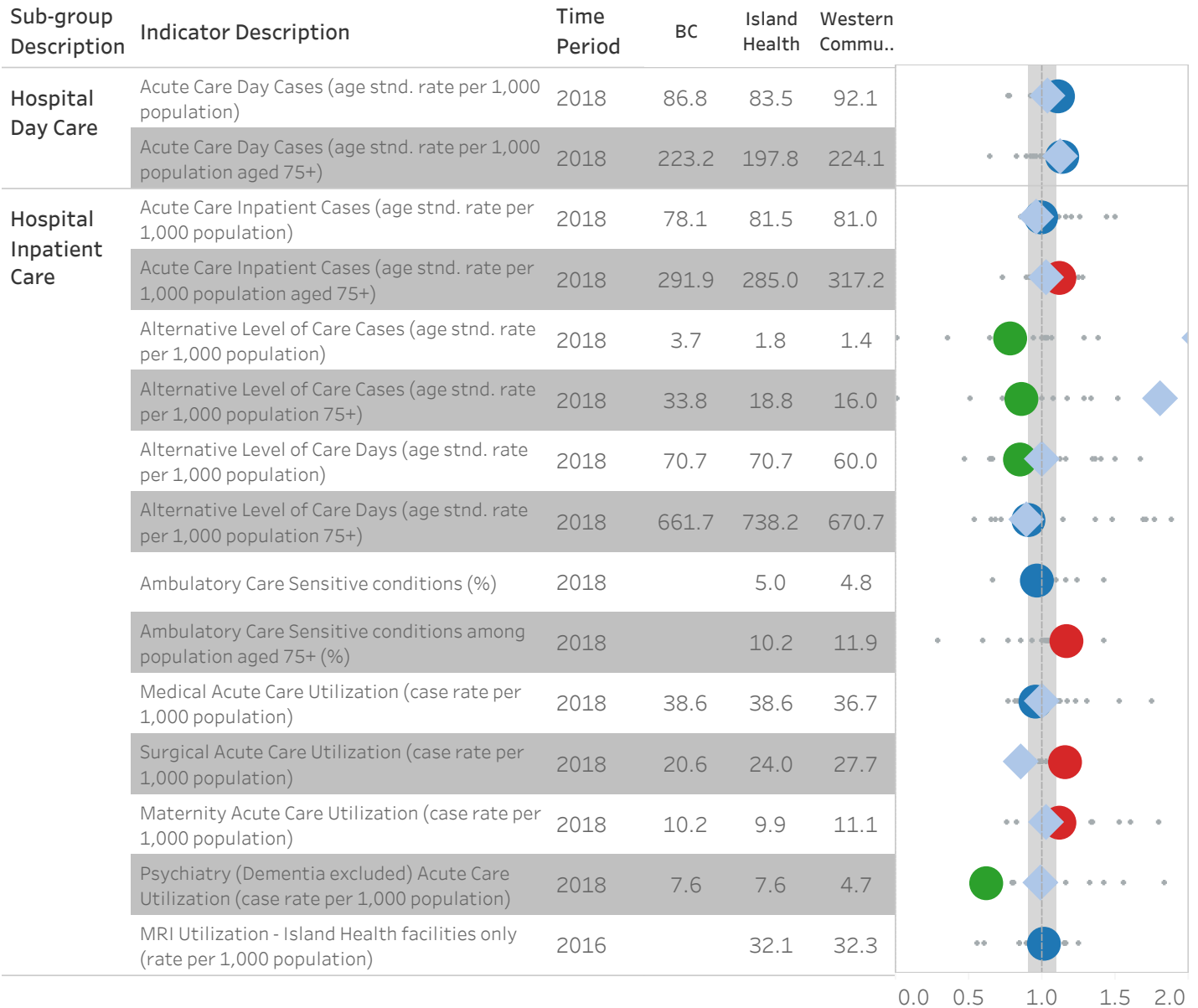
Health Service Use Summary



● 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