

# Healthy Northern Communities 2011

*Village of Fraser Lake*

Revised  
January 31, 2012



**northern health**  
*the northern way of caring*

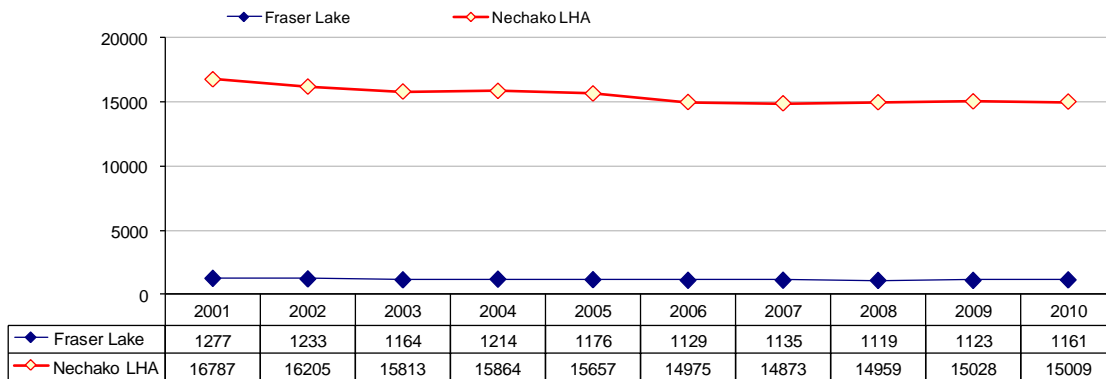
## Village of Fraser Lake

The Village of Fraser Lake was incorporated in 1966. The Village of Fraser Lake is located 71 km east of Burns Lake and 58 km west of Vanderhoof.<sup>1</sup>

Fraser Lake is also situated within the Bulkley Nechako Regional District, within both the Nechako Local Health Area (LHA 056) and the Northern Interior Health Service Delivery Area of Northern Health. Fraser Lake is served by School District No. 91.

This area is the traditional territories of the Dakelh (Carrier) peoples. First Nations in this large geographic area include the Stellat'en First Nation and Nadleh Whut'en.<sup>2, 3</sup>

Populations - Fraser Lake Village and Nechako Local Health Area



The estimated 1,161 people within the Village of Fraser Lake account for approximately 7.7 % of the Nechako LHA population (1,161 / 15,066 persons) and for 2.9 % of the Bulkley Nechako Regional District population (1,161 / 39,183 persons).<sup>4, 5, 6</sup>

During the 2009 calendar year, there were 21 births, 15 deaths and 11 marriages to the residents of Fraser Lake. The average life expectancy for Fraser Lake residents was 77.1 years. This was less than the BC average life expectancy of 81.4 years.<sup>7</sup>

### Community Information

Village of Fraser Lake: <http://www.fraserlake.ca/>

Village of Fraser Lake, Official Community Plan (see bylaws)  
<http://stuartnechako.ca/fraser-lake/municipal-hall/bylaws/>

Bulkley Nechako Regional District: <http://www.rdbn.bc.ca/>

Stellat'en First Nation: <http://www.stellaten.ca/>

Aboriginal Canada Portal – First Nation Community Profiles  
[http://www.aboriginalcanada.gc.ca/acp/community/site.nsf/index\\_en.html](http://www.aboriginalcanada.gc.ca/acp/community/site.nsf/index_en.html)

BC Community Facts: <http://www.bcstats.gov.bc.ca/data/dd/facsheet/facsheet.asp>

Northern BC, Community Health Information Portal <http://chip.northernhealth.ca>

## What Determines Health?

A good strong start in life, early and enriching experiences, educational opportunities and achievement, a sufficient and equitable distribution of employment and income, housing, food, interactions with the natural and human built environments, our choices towards certain risk factors and lifestyles, as well as access to high quality health services, are just a few of the many determinants of health and wellbeing.<sup>8, 9</sup>

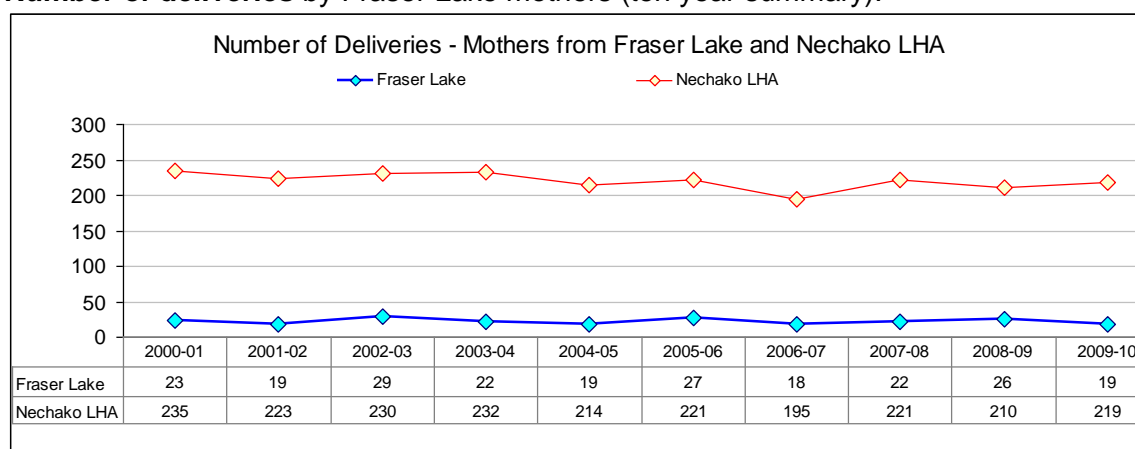
Selected Determinants of Health			
Demographics	Fraser Lake <sup>10</sup>	LHA <sup>11</sup>	BC <sup>12</sup>
Percent of population who are 0 – 19 yrs old	27.7	28.5	23.2
Percent of population who are ages 65+	12.0	12.7	15.0
Percent of population who are Visible Minorities	1.0	3.5	24.5
Percent of population who are Aboriginal Identity	18.0	22.1	4.8
<b>Income</b>			
Percent of families earning < \$20,000 per year	4.8	11.4	8.0
Percent of families earning from \$20,000 - \$80,000 per year	42.8	50.8	53.8
Percent of families earning > \$80,000 per year	52.3	37.7	38.1
* Percent of population receiving Income Assistance > 1 yr.	nca	1.5	1.0
<b>Early Development and Educational Achievement</b>			
Percent of kindergarten children vulnerable on 1 or more EDI scales <sup>13</sup>	32.9	32.3	28.6
† Percent of Grade 4 & 7 students below standard on FSA - Reading	nca	28.3	20.7
† Percent of Grade 4 & 7 students below standard on FSA - Writing	nca	27.8	17.9
† Percent of Grade 4 & 7 students below standard on FSA - Math	nca	35.0	23.4
† Grade 10 Provincial-exam non-completion rate - English	nca	27.1	15.9
† Percent of 18 yr olds who did not graduate	nca	25.1	29.0
Percent of persons ages 25 to 54: without high school completion	nca	24.7	11.1
Percent of persons ages 25 to 64: with university degree or above	9.7	10.2	24.1
<b>Housing</b>			
Percent of households that are renting	34.0	20.3	30.4
Percent of tenants paying 30 % or more of income towards housing	9.0	29.7	43.4
Percent of owners paying 30 % or more of income towards housing	6.0	12.1	22.7
<b>Children and Youth at Risk</b>			
* Children (ages <15) receiving Income Assistance > 1 year	nca	2.5	1.7
* Youth (ages 15 - 24) receiving Income Assistance > 1 yr	nca	2.0	0.9
Children in care rate per 1,000 population, ages 0 – 18	nca	19.5	9.2
Teen pregnancies per 1,000 women ages 15 – 19 (2007-2009)	nca	68.0	26.3
<b>Other Indicators</b>			
Alcohol sales per capita in 2010 (Dollars Spent)	nca	933	790
Alcohol sales per capita in 2010 (Litres Consumed)	nca	158	107
nca = means this level of data detail or data aggregation is “not currently available.”			
EDI = the Early Development Index is an early child development assessment tool. <a href="http://www.earlylearning.ubc.ca">http://www.earlylearning.ubc.ca</a>			
LHA = Local Health Area. In this table we are referring to the Nechako Local Health Area (LHA - 056).			
* Income Assistance figures may be understated as they do not include Aboriginal people who are living on reserve.			
† education measures shown are an average for the period 2007/08 - 2009 /10. The LHA and BC figures were obtained from <a href="http://www.bcstats.gov.bc.ca/reporting/">BC Stats Socio-economic profiles</a> . Please also see BC Ministry of Education <a href="http://www.bced.gov.bc.ca/reporting/">http://www.bced.gov.bc.ca/reporting/</a>			

## Promoting Health and Delivering High Quality Services

**A good strong start in life** is more likely if infants, children and family members are healthy. Towards this, we consider community characteristics (Determinants of Health), the number of mothers delivering infants and where these infants are being delivered.

This type of information informs services such as prenatal education, parenting skills programs, post delivery follow-ups for moms, immunizations, as well as the screening services intended to detect and address vision, hearing and dental health concerns.

### Number of deliveries by Fraser Lake mothers (ten year summary).<sup>14</sup>



### Delivery locations for Fraser Lake mothers (five year summary).<sup>15</sup>

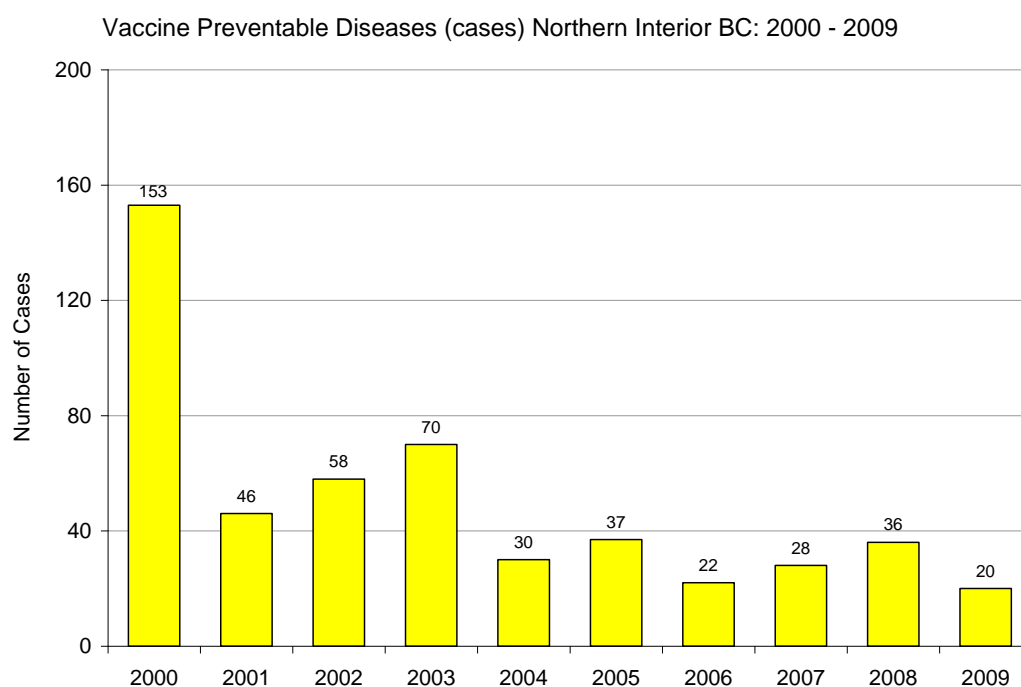
Mother's community or Regional District area	Delivery Location: 2005/06 – 2009/10					
	Vanderhoof	Ft St James	Prince George	Other BC Location	Home Births	Total Deliveries
Bulk-Nechako RD (D)	2	0	0	0	1	3
Bulk-Nechako RD (C)	4	0	5	0	0	9
Fraser Lake (VL)	88	0	18	6	0	112
Fort Fraser (Nautley)	39	0	3	1	1	44
Ft St James (DM)	148	97	53	10	0	308
Vanderhoof (DM)	530	0	52	7	1	590
<b>Total Deliveries</b>	<b>811</b>	<b>97</b>	<b>131</b>	<b>24</b>	<b>3</b>	<b>1,066</b>

## Promoting Health and Delivering High Quality Services

**Immunizations** are some of the best health investments that we can make. Along with better sanitation and clean drinking water, immunizations have been responsible for the huge increases in life expectancy that we have seen around the world.<sup>16, 17</sup>

Because they are such a good investment and the protection they provide to individuals and communities as a whole is so important, we actively monitor whether certain target populations are fully immunized. For example, we know that the percent of 2 year old children in the Fraser Lake area, who are fully immunized, is 87.5%.<sup>18</sup>

**Vaccine Preventable Diseases** are illnesses that may have been avoided if individuals and communities were sufficiently immunized. These cases are summarized below.



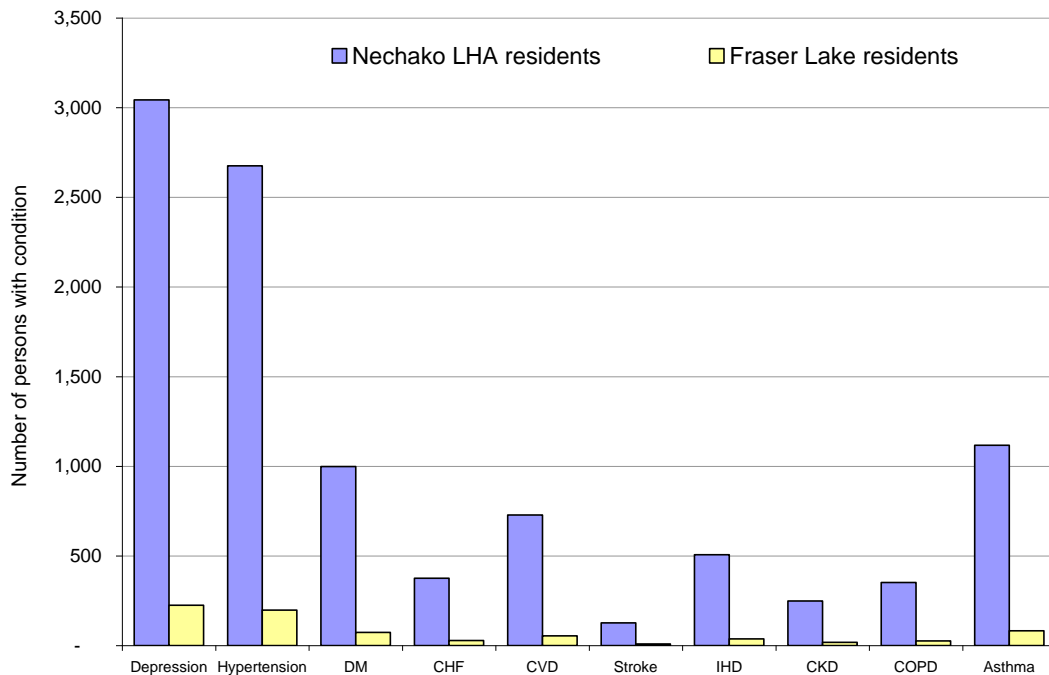
Vaccine Preventable Diseases (cases) in Northern Interior BC: 2000 - 2009 <sup>19</sup>											
Community	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	Total
Burns Lake	0	1	26	1	0	4	0	0	1	2	35
Ft. St. James	3	2	2	0	0	1	3	2	2	0	15
Fraser Lake	0	0	0	5	0	1	0	0	1	0	7
Mackenzie	1	0	0	1	0	0	1	0	0	1	4
McBride	0	1	0	0	0	0	0	0	0	0	1
Prince George	129	35	26	52	26	22	17	19	31	13	370
Quesnel	18	6	1	5	4	9	1	4	1	4	53
Valemount	0	0	0	4	0	0	0	0	0	0	4
Vanderhoof	2	1	3	2	0	0	0	3	0	0	11
<b>Total</b>	<b>153</b>	<b>46</b>	<b>58</b>	<b>70</b>	<b>30</b>	<b>37</b>	<b>22</b>	<b>28</b>	<b>36</b>	<b>20</b>	<b>500</b>

## Promoting Health and Delivering High Quality Services

We know that many factors influence our health. Our choices in lifestyle and towards a handful of well known risk factors: tobacco use; physical inactivity; poor dietary choices; obesity; inappropriate alcohol and drug use; certain sexual activities; and, excessive sun exposure can greatly determine whether we remain healthy and free from certain types of cancers and other chronic illnesses.<sup>20, 21, 22, 23</sup>

### Chronic Disease Estimates

Estimated number of existing or treated cases of selected chronic conditions  
Nechako LHA and Fraser Lake residents: 2009 - 2010



Selected Chronic Conditions	Existing or treated cases		New cases / yr		Cost per patient / year
	Fraser Lake	LHA	Fraser Lake	LHA	
Depression	225	3043	14	193	\$2,884
Hypertension	198	2676	12	157	\$4,067
Diabetes	74	998	6	84	\$5,342
Congestive Heart Failure (CHF)	28	376	3	47	\$11,174
Cardiovascular Disease (CVD)	54	728	5	68	\$8,067
Stroke	9	127	1	19	\$14,414
Ischemic Heart Disease (IHD)	38	507	3	36	\$7,794
Chronic Kidney Disease (CKD)	18	249	3	42	\$14,221
COPD	26	352	4	52	\$7,020
Asthma	83	1117	4	60	\$1,571

Community level estimates are based upon each community's relative share of the total Local Health Area (LHA) population and reflect what "might be expected" at the community level, given the known experience of the larger LHA.

## Promoting Health and Delivering High Quality Services

**Healthy and independent** northerners is what we want to see when we look around northern BC communities. Indeed, that is a large part of what we do see. However, we know that our population is aging very quickly and that with increasing age there often comes an accumulation of chronic health conditions that inhibit independence.

Long-term home support and other services provided by northern health intend to keep people healthy and independent. During 2011, there were 856 residents of the northern interior receiving home-support services. Here is a clinical profile of these residents.<sup>25</sup>

<b>Male</b>	36 %	<b>Married</b>	28 %	<b>Aged 75+</b>	72 %
<b>Female</b>	64 %	<b>Widowed</b>	44 %	<b>Aboriginal</b>	6 %
<b>Frequently Noted Health Conditions</b>					
Hypertension	56 %	Depression	27 %	Osteoporosis	22%
Arthritis	46 %	Diabetes	24 %	Chronic Arterial	20 %
<b>Clients with Multiple Health Conditions</b>					
≤ 3 Conditions	28 %	3 - 5 Conditions	37 %	≥5 Conditions	34 %
<b>Clients with Cognitive Impairment (Cognitive Performance Score)</b>					
No impairment	39 %	Borderline /mild	49 %	Mod - Very Severe	12 %
<b>Clients with independence difficulty in 1- 3 daily activities (IADL Difficulty Scale)</b>					
No difficulty	28 %	Some difficulty	22 %	Great difficulty	50 %

## How do we compare to the rest of Canada?

The most frequently reported chronic conditions affecting Canadian seniors overall are:

- Hypertension (47%)
- Arthritis (27%)
- Hypertension and arthritis (14%)
- Hypertension and heart disease (12%)
- Hypertension and diabetes (11%)

The amount of health care that Canadian seniors need as they age is largely driven by the number of chronic conditions that they have, not their age.<sup>26</sup>

These are just a few of the many findings contained in the report: *Seniors and the Health Care System: What is the Impact of Multiple Chronic Conditions?*

January 2011

**Seniors and the Health Care System: What is the Impact of Multiple Chronic Conditions?**  
Analysis in Brief

**Introduction**

Concern about chronic condition care is growing as the prevalence of chronic conditions such as diabetes and high blood pressure increases in Canada.<sup>1</sup> For many chronic conditions, prevalence increases with age, causing a disproportionate health burden on seniors—Canadians age 65 and older.<sup>2</sup> Patients with chronic conditions—in particular multiple chronic conditions, also called comorbidity—typically have poorer quality of life and require considerable health care resources. Effective prevention and management of chronic conditions is required, especially in the face of Canada's large boomer generation entering the senior age category.

This study examined the reported experiences of seniors in Canada being treated for chronic conditions in primary health care (PHC) settings. The results of the study can be used to enhance our understanding of patients' use of health care services and health status, the quality of patient-provider communication, patient self-management and medication management. This report is focused on seniors because they are more likely than younger people to have chronic conditions, especially comorbidities that can be complex and difficult to manage.

**Key Findings**

**Healthy seniors need less health care. The amount of health care services seniors will use is largely driven by the number of chronic conditions they have, not their age.**

- In each of the age groups (65 to 74, 75 to 84, and 85 and older), seniors with three or more reported chronic conditions had nearly three times the number of health care visits than seniors with no reported chronic conditions.

**Who We Are**

Established in 1991, CCR is an independent, not-for-profit organization that provides expertise in research on Canada's health system and the health of Canadians. Funded by federal, provincial and territorial governments, we are guided by a shared vision of the needs of all health system users across the country.

**Our Vision**

To help improve Canada's health system and the well-being of Canadians, we will continue to provide research, analysis and expertise in health care and public health issues that will make a positive impact on the health of all Canadians.

Federal Identity Program  
Production of this report was made possible by financial contributions from Health Canada and provincial and territorial governments. The views expressed herein do not necessarily represent the views of Health Canada or any provincial or territorial government.

www.ccr.ca

## Promoting Health and Delivering High Quality Services

We employ the best available information related to community characteristics and the determinants of health, population trends, disease occurrences, health needs and health services utilization when assessing services and when planning for the future.

These tables provide a glimpse into some of the inpatient and facility activity.

### Location: where inpatient hospital services were received.<sup>27</sup>

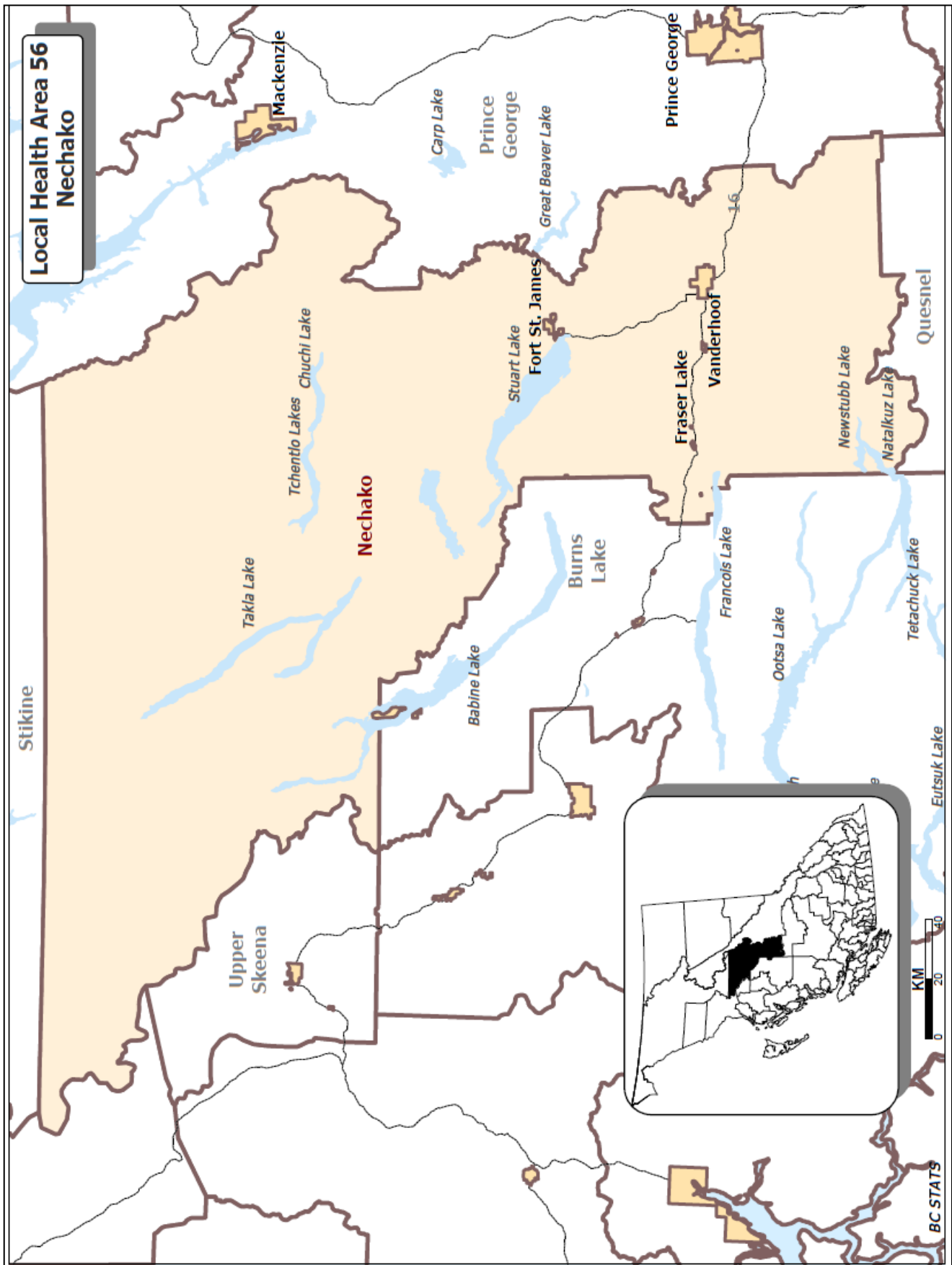
For Fraser Lake / Ft. Fraser residents during the five year period: 2005/06 - 2009/10.							
Number of Cases and Days	Location of Hospital Care						
	Vanderhoof	Prince George	Fort St James	Other NH	Other BC	OOP	Total
Cases	1,229	591	0	44	190	14	2,068
Days	4,817	3,816	0	148	1,598	109	10,488

- Cases These are inpatient cases - client was admitted to the facility.
- Days These are inpatient days - does not include days attributable to ALC.
- Other NH Care was received at a Northern Health facility other than those shown.
- Other BC Care was received at a non Northern Health facility in BC.
- OOP Care was received Out of Province – in most cases this means Alberta.
- ALC Alternate Level of Care. Clients who no longer need acute services and who are waiting to be discharged to a setting more appropriate to their needs.<sup>28</sup>

### Facility and Patient Activity (selected measures).<sup>29</sup>

No. 758 - Fraser Lake Community Health Centre					
Selected Measures	2006/07	2007/08	2008/09	2009/10	2010/11
Ambulatory visits (excl E/R).	0	0	2,227	2,443	2,994
Emergency visits (excl ambul)	5,470	4,879	5,349	5,134	5,003
Medical Imaging Tests	989	986	1,156	988	1,582
Lab Tests (excludes respiratory)	33,630	41,641	44,020	28,639	10,244
Note: Decrease in Lab tests for 2010 / 11 is due to staffing shortages					





# Bulkley-Nechako Regional District



**Legend**

- Designated Placename
- Locality
- Highway
- Reserve
- Municipality
- Regional District Electoral Area

Prepared by BC Stats  
Source: 2006 Census  
Statistics Canada

## References

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