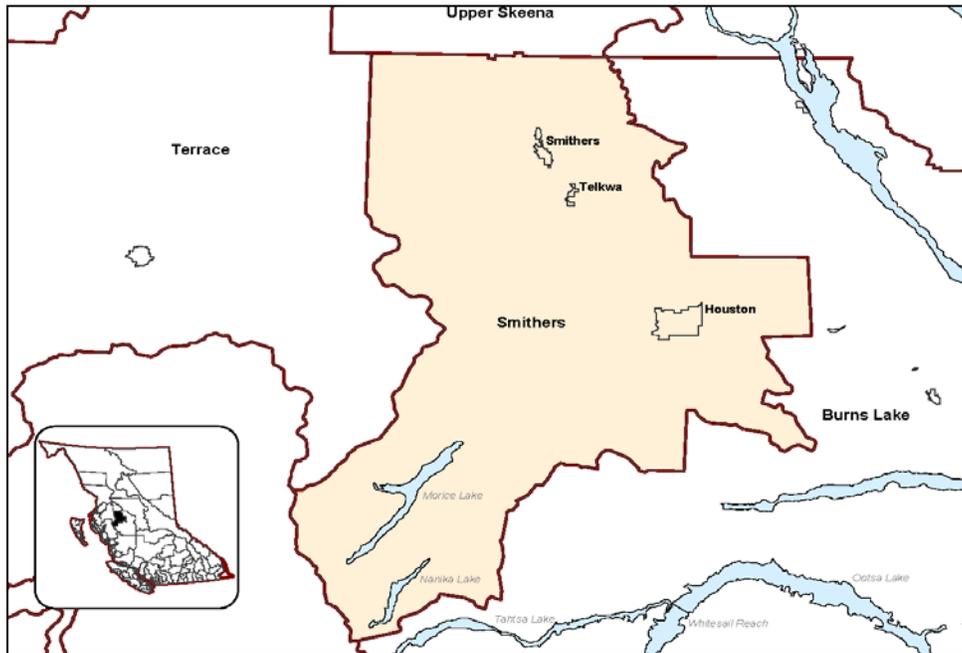


Community Health Synopsis

Smithers, Houston

LHA 54



Creating Healthier Lives and Healthier Communities

Imagine if your community had more places to play. More places to grow and find fresh food. More ways to get from here to there by walking, cycling or using public transportation. What if there were more opportunities to connect with others through shared interests and activities? And imagine if your community protected you from second-hand smoke. How would that affect your life?

Healthy communities make it easier for residents to make healthier choices every day. Choices that over the long term will help them achieve and maintain their best possible health and well-being. And people who are active and healthy will thrive in their communities, and, in turn, their communities will also prosper.

Healthy living habits help reduce two of the leading causes of preventable death and disability among British Columbians: chronic disease and obesity. Fortunately, many BC local governments are already leaders and promoters of healthy living in their communities. To build on that momentum, Northern Health is partnering with local governments in a grass roots effort to help create health promoting environments.

Building healthy, prosperous communities begins with healthy, energetic families.

Here are some of the features of a healthy community:

- Easy access to healthy food; opportunities to learn about healthy eating.
- Protection from exposure to second hand smoke; help for smokers to quit.
- Promotion of good mental health and reduction of problematic substance use.
- Opportunities for all ages and abilities to feel connected and engaged within their community.
- Walk and bicycle-friendly neighbourhoods.
- Convenient and affordable parks, playgrounds and recreation centres.



Targets for a Healthy Community



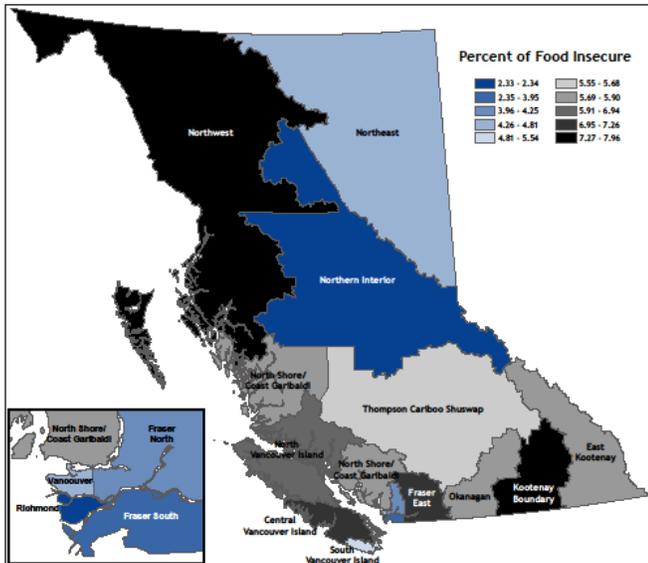
Healthy Eating

Healthy eating is the foundation for a healthy life and healthy communities are places where everyone has access to fresh, nutritious, affordable and culturally acceptable food.

Food nourishes our bodies and gives us the energy to get through our day. Healthy eating is important for a healthy lifestyle at any age. Healthy eating is equally important to reduce our risk for several chronic diseases. Many of us eat too many foods that are high in fat, sodium, sugar and calories and not rich enough in nutrients and fibre. Every day we all make choices - and every day we can make healthier choices.

Health Status Indicators

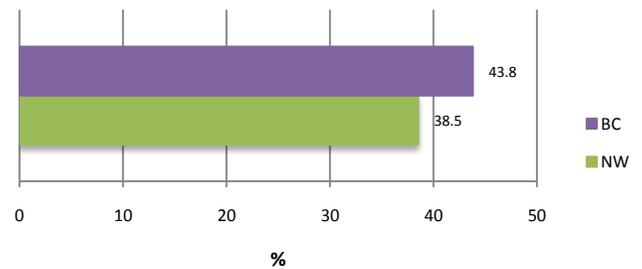
Regional Distribution of Food Insecure Households, BC, 2005^a



DID YOU KNOW?

Children and adolescents who share family meals 3 or more times per week are more likely to have a healthy weight.

Fruit and vegetable consumption 5 times or more per day (%)^b



Tobacco Reduction

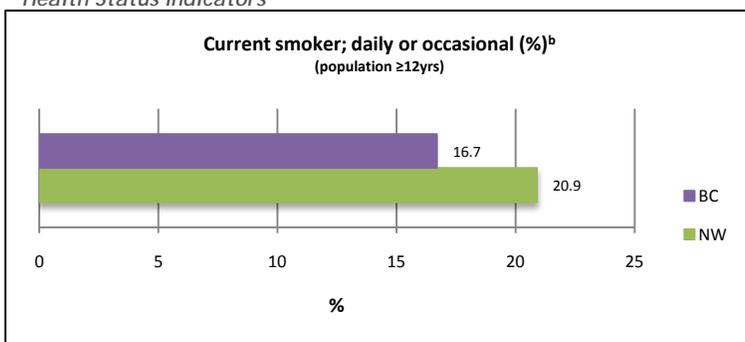
Northern Health promotes tobacco reduction and prevention.

Everyone deserves a healthy and tobacco free environment to live, work, learn and play. All types of tobacco are harmful - cigarettes, cigars, cigarillos and chewing tobacco to name a few.

- In your community, are there shared areas such as playgrounds and skate parks where kids of all ages can play safely and freely without being exposed to tobacco use and second-hand smoke?

When young people try smoking they quickly become addicted. Tobacco free environments are an important prevention strategy. Growing up around respected adults that don't use tobacco will decrease the likelihood of a child using tobacco products in the future.

Health Status Indicators



BC Tobacco Fact

Tobacco-related illness is the leading cause of preventable death in British Columbia. Tobacco use causes up to 6,000 deaths in the province each year, including over 100 non-smokers who die from diseases caused by second-hand smoke. Smoking kills more people in British Columbia than all other drugs, motor vehicle collisions, murder, suicide and HIV/AIDS combined.

Healthy Built Environment

Why are some communities healthier than others? Communities across the North are facing challenges from increases in the rates of chronic diseases; most of these diseases are preventable. Increasing childhood asthma, for instance, is attributed to poor air quality from vehicle emissions, second or third hand smoke and industrial activity. Diabetes and cardiac disease are related to obesity and physical inactivity. The lack of stable, safe, affordable housing severely impacts health. All of these health effects arise in part from our interaction with the built environment - the buildings, parks, schools, road systems and other infrastructure that we encounter in our daily lives.

Research from around the world now shows that we can improve health and reduce illness through different approaches to planning our communities. The way we choose to develop highways, shape land use policies, and ensure access to nutritious food are just a few examples of community planning decisions that can help or hinder health goals.

A healthy built environment is the foundation to healthy living. Our programs work to promote health by collaborating with local government, planners, community groups and other stakeholders to promote positive change in the environment, as well as empowering individuals to strengthen their skills to take control over their health and environment. In particular, Northern Health is partnering on issues that include:

- The environment, including indoor and outdoor air quality and buying "green" consumer products.
- Local food security.
- Land use decisions that affect housing and social wellness.
- Physical activity and obesity, which is affected by transportation, zoning and recreation choices.
- Healthy transportation alternatives.
- Injury prevention.
- Supporting the development of livable, disability-friendly, age-friendly, universally designed and inclusive communities.

Health Status Indicators^b

Characteristics	NW	BC	NW vs BC % diff
Health Conditions			
Injury hospitalization (per 100000 population)	1078	567	90.1
Obesity (%) aged 18 and over	20.7	13.5	53.3
Obesity (%) aged 18 and over - Female	22.7	11	106.4
Overweight or Obese (%) aged 18 and over	62.1	44.7	38.9
Health Behaviours			
Bike helmet use (%)	40.1	60	-33.2
Effectiveness			
Ambulatory care sensitive conditions (per 100,000 population)	525	251	109.2
30-day acute myocardial infarction (AMI) in-hospital mortality (rate)	11.3	8.4	34.5
30-day stroke in-hospital mortality (rate)	21.1	16.9	24.9
Self-injury hospitalizations (per 100000 population)	174	77	126.0
Living and Working Conditions			
High school graduates aged 25 to 29 (%)	73.5	88.1	-16.6
Post-secondary graduates aged 25 to 54 (%)	49.9	62.7	-20.4
Unemployment (%)	10.3	7.6	35.5
Long-term unemployment (%)	6.3	2.8	125.0
Community			
Seniors: 65 years and over: as a proportion of total population (%)	11.7	15	-22.0
Aboriginal population (%)	30	4.8	525.0
Lone-parent families (%)	18.4	15.1	21.9
Health System			
Mental illness hospitalization rate (per 100000 population)	1145	600	90.8
Mental illness patient days (per 10000 population) - Male	981	736	33.3
Deaths (per 100,000 population)			
Total: all causes of death	660	523	26.2
All cancers	171	153	12.4
Colorectal cancer - Female	21.2	12.7	66.9
Lung cancer - Male	64.6	46.9	37.7
Prostate cancer;	11.7	8.4	39.3
Circulatory diseases	197	154	27.7
Ischaemic heart diseases	88.6	72.8	21.7
Cerebrovascular diseases	39.2	35	12.0
All other circulatory diseases	68.7	46.1	49.0
Respiratory diseases	62.5	45.3	38.0
Pneumonia and influenza	17.8	13.8	29.0
Bronchitis; emphysema and asthma	4.5	2.8	60.7
All other respiratory diseases; deaths - Female	37.7	23	63.9
Unintentional injuries	39.5	25.6	54.3

Colour indicates % difference from BC Value

0%	±25%	±50%
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Physical Activity

Physical activity is essential to the good health of individuals, families and communities. A community that supports active lifestyles will improve both the physical and mental health and well-being of their residents when the active choice becomes the easy choice and activity becomes the norm rather than the exception.

- Does your community support active transportation?
 - Is it easy to get from one place to another by walking or cycling?
 - Creating walking and cycling friendly neighbourhoods provide not only increased health benefits through activity, but also through air quality improvement.
- Does your community have easily accessible green space, recreation centers, parks and playgrounds?
 - Everyone in the north is at risk for Vitamin D, the sunshine vitamin, deficiency, but we also need to think about Vitamin G, or the green space connection. Connection to nature provides health and wellness benefits to everyone and is a key area where sedentary activity, which is often indoor, can be swapped for outdoor activity.

People who are connected to and involved in their community will thrive and their communities will thrive with them. Physical activity and social connectedness help to build strong healthy communities. Supporting opportunities for people of all ages to get out of their homes and participate in social, cultural and physical activities where they live, work, learn and play is a foundational building block of healthy communities.

- Does your community encourage opportunities for people to connect with others through shared activities and interests?
 - Connection to school, family and community contributes to good mental health and is the foundation for overall health and well-being.
 - Good mental health enables people to be creative, productive members of their communities and make healthy decisions about alcohol and other substances.
 - Having the opportunity to be physically active for little to no cost, such as through parks and playgrounds, helps to make the active choice the easy choice and to encourage individuals, families and community groups to swap sedentary activities for increased physical activity.

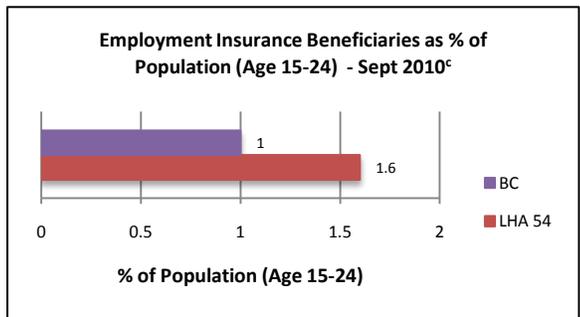
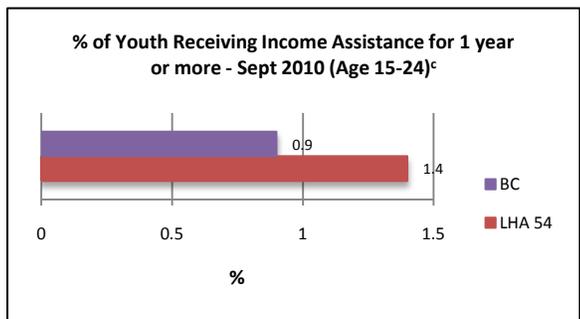
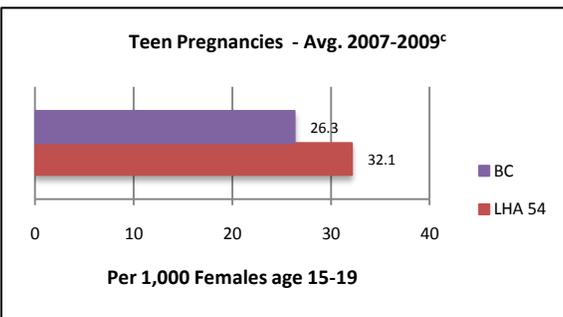
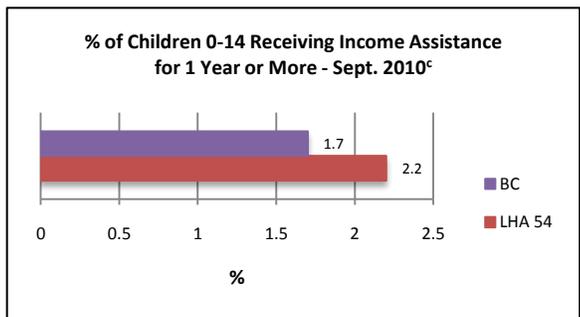
Inequities

Health Status Indicators

As observed from the graphs on this and the following page, Health status indicators consistently show that residents in LHA 54 are not as healthy as the rest of BC.

There are many factors that work together to affect health outcomes, including education, socioeconomic status and social supports, to name a few. In LHA 54, there are more youth and children receiving income assistance, and higher serious juvenile crime rates compared to BC values. In addition, there are less 25-54 year olds with post secondary credentials, higher rates of teen pregnancies, and higher hospitalization rates for respiratory diseases. Life expectancy is also shorter in LHA 54, when compared to all of BC.

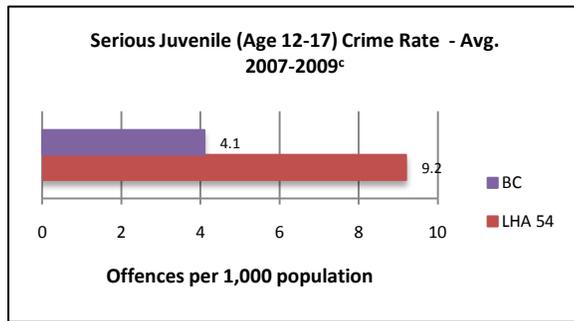
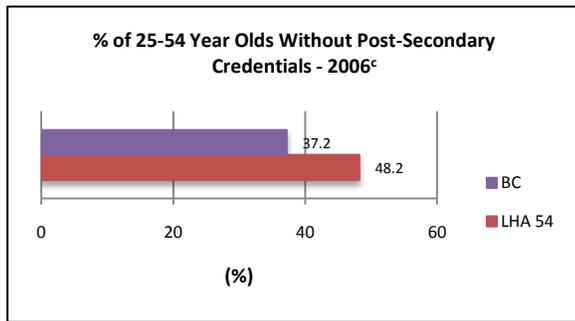
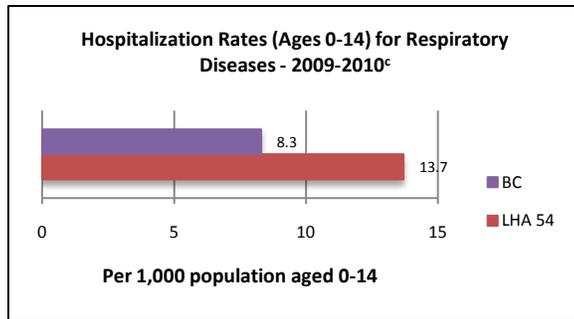
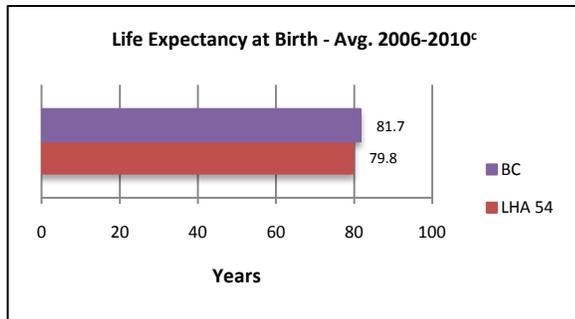
Children and Youth at Risk



DID YOU KNOW?

Chronic diseases are the largest cause of premature death in BC. About 80 per cent of British Columbians report having at least one or more risk factors for chronic disease which include smoking, being physically inactive, eating an unhealthy diet or being overweight or obese.

Other Indicators

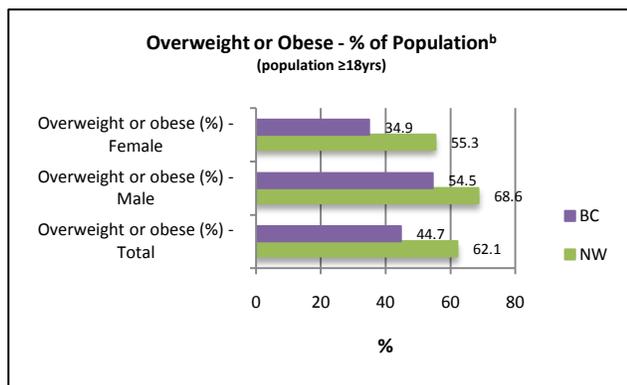
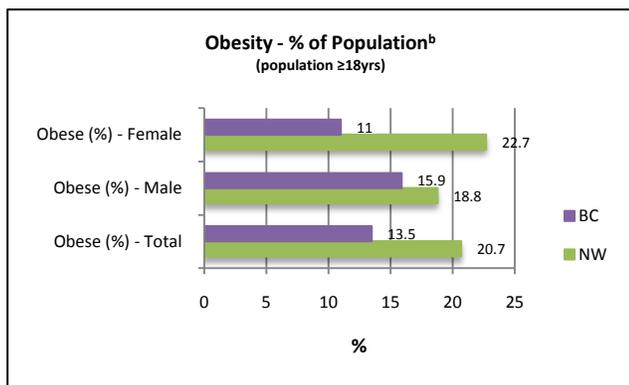


Overweight & Obesity

The rising statistics of overweight and obesity in northern BC are a cause for significant concern at many community and government tables. Unhealthy weight can lead to the development of risk factors for long-term chronic disease. Obesity is a chronic health condition that is complex and multi-faceted. Just as there is not one cause for the risk of becoming overweight or obese, there is not one simple solution or treatment that will prevent it. Preventing and reducing the occurrence of unhealthy weight and the development of obesity will require multi-sectoral partnerships. Developing partnerships and working relationships to address health issues from grassroots to government help build better physical, social and emotional environments that support community members to be the healthiest they can be.

While obesity is complex, it is preventable and it is treatable. A healthier future for the citizens of northern BC is possible. Community has a key role to play in the construction of supportive environments that make active transportation, active living and access to healthy food choices the easy choice. Removing barriers that prevent healthy lifestyles within a community as well as building community-driven healthy public policy in key areas to support healthy eating and active living are an important first step to stem the growing tide of obesity in our northern communities.

Health Status Indicators

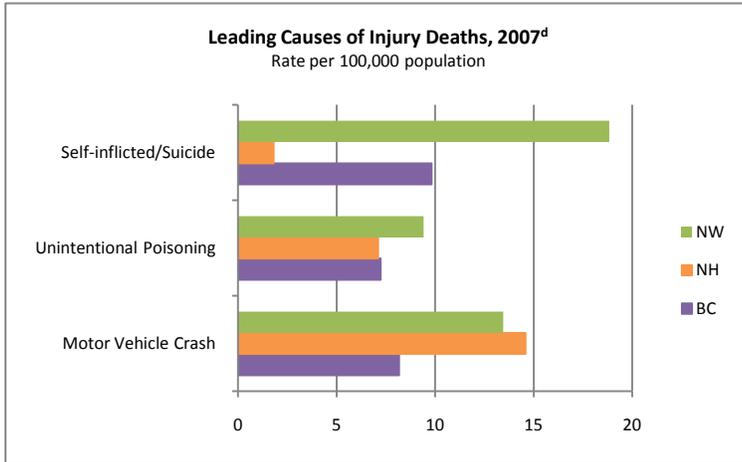


Fast Fact
 More than 50 per cent of adults and 25 per cent of kids in BC are obese or overweight.

Preventing Injuries

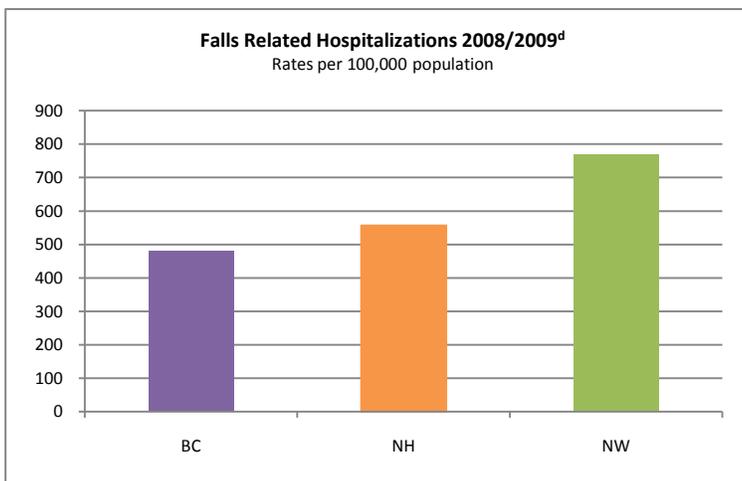
Every person across Northern BC has the right to live, work and play injury-free. Yet every hour of every day, people suffer an injury as a result of a motor vehicle crash, suicide, fall, poisoning, drowning or other activities. The good news is that injuries can be prevented. Working together, we can develop environments, programs and policies that support the prevention of injuries across the ages.

Health Status Indicators



DID YOU KNOW?

Injury is the leading cause of death to those 1-44 years of age in Northern Health. Every month more than 365 people are injured enough to need medical attention; 13 will die as a result of a preventable injury during that month.



Determinants of Health & Risk Factors that influence Health in the NorthWest

Many "Determinants of Health" influence health and well being: living conditions, income, employment, education, gender, housing, cost and access to fresh produce, environment, personal choices and behaviours, and the ability to access high quality integrated health care services. First Nation's communities are further influenced by unique factors such as cultural continuity, control, viable councils, and having women as part of governance.

The main behavioural risk factors associated with chronic disease, some mental health disorders, and injury in Northern BC includes:

- Physical inactivity.
- Unhealthy eating (sugar beverages, sodium intake).
- Obesity.
- Tobacco use.
- Problematic use of alcohol.
- Risk-taking behaviours (young males).

Where do we go from here?

Behaviours such as smoking, alcohol use, lack of exercise and poor eating habits contribute heavily to the excessive burden of disease experienced by the residents in LHA 54, which in turn are treated by our acute care services. Many of these conditions are preventable. Effective and cost effective collaborations must include the following:

- Research and understand health issues unique to LHA 54, and their underlying causative factors.
- Make this information available for others to make informed decisions affecting their health, and the health of those they have responsibilities to protect.
- Inform and work collaboratively with all stakeholders including individuals, community groups, local government, health sector, schools and employers. Complex chronic disease issues can only be addressed through multi-sectoral partnerships.
- Develop individual and community capacity and empower stakeholders to tackle issues locally.

What can Northern Health do to support this process?

- Develop and maintain health status reports.
- Develop comprehensive lists of community action strategies proven to effectively support targeted improvements.
- Facilitate health status and action planning meetings.
- Facilitate development of multi-sectoral partnerships for projects and events, including Northern Health staff.
- Ongoing research into community health status and risk factors.
- Evaluation of effectiveness of strategies.

Success Stories - LHA 54

Within LHA 54, communities have already been actively involved in building the foundation for a healthier community. A few of the highlights include:

Smithers

- Perimeter trail network, including improvements to trail connections and overall accessibility.
- Continued development of a compact, walkable downtown.
- Successful Farmer's Market in the summer months at Central Park.
- Increase in housing options and affordability. Bylaw change allows for secondary suites in all single family homes.
- Town is a funding partner of the Smithers and District Transit System.
- Working in partnership with community groups to continue developing and improving parks and trails. Examples include the Smithers Mountain Bike Association's Bike Park, Turner Way Park, Rotary Club sponsored bridge on the perimeter trail and the Duck Unlimited Wetland Detention Area.

Houston

- Circle Pathway. The DoH has rebuilt dykes, and created/improved trails making them more wider and safer.
- Leisure Facility. Encouraging physical activity by offering special incentives and programs, including: toonie swims, child care for guardians using fitness room, subsidized prices for caregivers, and the "Biggest Loser" challenge with 3 month free membership.
- Successful Farmer's Market and Community Garden, growing yearly.

We look forward to working together with communities on projects and initiatives that address their unique health needs. It is through this collaboration where we can truly make long-term, sustainable changes that reflect a more vibrant and healthier community.

For a more comprehensive report on the Health Status of the community, including additional statistics and health status indicators, please visit Northern Health's "Community Health Information Portal" (CHIP) at:
<http://chip.northernhealth.ca/CommunityHealthInformationPortal.aspx>

Other links of interest include:

Healthy Families BC - Healthy Communities:	http://www.healthyfamiliesbc.ca/healthy-communities.php
BC Stats:	http://www.bcstats.gov.bc.ca/
Stats Canada - Health Profiles:	http://www12.statcan.gc.ca/health-sante/82-228/index.cfm?Lang=E
Northern Health	http://www.northernhealth.ca/
PHSA Health Built Environment	http://www.phsa.ca/HealthProfessionals/Population-Public-Health/Healthy-Built-Environment/default.htm

Data sources

⁴Provincial Health Officer's Special Report, "Investing in Prevention - Improving Health and Creating Sustainability", 2010. Retrieved on January 19th, 2012, from: http://www.health.gov.bc.ca/library/publications/year/2010/Investing_in_prevention_improving_health_and_creating_sustainability.pdf

⁵Statistics Canada, Health Profiles by HSDA - October 2011. Retrieved on January 19th, 2012, from: <http://www12.statcan.gc.ca/health-sante/82-228/index.cfm?Lang=E>

⁶BC Stats, Socio-Economic Profiles, by LHA. Retrieved on January 19th, 2012, from: <http://www.bcstats.gov.bc.ca/StatisticsBySubject/SocialStatistics/SocioEconomicProfilesIndices/Profiles.aspx>

⁷BC Injury Research and Prevention Unit (BC IRPU). Online Datatool. Retrieved on March 30th, 2012, from: <http://www.injuryresearch.bc.ca/DataAnalysis.aspx>

Note: Document will be updated with current statistics as sources become available.