

Population Health – Cochrane District



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This document has been put together by the Diversity, Equity, Inclusion, Social Accountability and Anti-Racism (DEISA-A) Committee of the Timmins and District Hospital. Committee members include staff from the hospital and people representing community/community organizations across the Cochrane District.

This document aims to support a greater awareness of the Districts' population served and a population health approach to health service delivery.



What affects peoples' health and well-being?

It is estimated health care accounts for only 25% of what makes Canadians sick. The remaining 75% have to do with other factors.



The conditions and experiences of where we live, work, and play affect our health and well-being. These conditions are referred to as **social determinants of health** and include housing, education, employment, environment, working conditions, impacts of colonization and racism, social support networks, culture, and gender, among others.



Working Through a Population Health Lens

By better understanding the social determinants of health people face in our area, we are able to tailor health care programs and services to be equitable for the population we collectively serve – working through a population health lens.

Taking the time to understand people's living conditions helps to:

Reduce disparities in services related to *access, experience, and outcomes;*

Reflect the communities we serve in our decision-making;



Understand the health inequities that exist;

Result in better health care outcomes for all individuals



What is Health Equity?

Health Equity

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allows people to reach their full health potential and receive high-quality care that is fair and appropriate to them and their needs, no matter where they live, what they have, or who they are.

A high-quality health system



recognizes and respects social, cultural, and linguistic differences and the barriers many people experience due to racism and unconscious bias.

Equity and equality are not the same

Equality refers to the division of resources into equal parts so that everyone gets the same. *Equity* involves people getting the resources they need.

Working through a health equity approach



recognizes that health is not distributed equally and that some people may need more or different services than others in order to be healthy. For example, the health care needs of people who identify as Indigenous, Francophone, Black/ people of colour, LBGTQIA2s+, are older, live in poverty, have mental health or substance use problems will be different because of social barriers or colonial practices that favour white, English speaking, cis-gendered, middle class people.



Population Health Statistics

The following are demographic/population health statistics for the Porcupine Health Unit area, as compared to Ontario overall. We know that people living in this area live with: lower income levels; higher levels of food insecurity; higher rates of heavy drinking and smoking; lower life expectancy; higher rates of opioid deaths; greater inequities experienced by Indigenous people; and poorer access to high-quality health services – in relation to people living in Ontario overall.

Statistic	Porcupine Health Unit Area*	Ontario
Population (2021 Census)	81,195 ¹ 40,470 (female) 40,725 (male)	14,223,942
Area in Square Kilometres	271,922 ²	892,412
Francophone	30,345 (37.8%)	463,120 (3.28%)
Indigenous	16,700 (21%)	406,585 (2.9%)
People aged 60+	22,370 (27.55%)	3,604,285 (25.34%)
Immigrants	2,295 (2.9%)	4,206,585 (30%)
Dependency Ratio	67.90	64.50
Population in Low Income	2535 (3.4%)	738,795 (5.3%)
Households that are Food Secure	81.2%	82.6%
Life expectancy	78.3	82.6
Heavy drinking	28.1%	16.0%
Smoking, daily or occasional	28.2%	14.2%
Overweight or obese (adults 18+)	76.0*	63.5
Rate of opioid-related deaths	50 per 100,000	17.4 per 100,000
Potential years of life lost from avoidable causes (per 100,000 pop)	7333.2	3452.9

The statistics in this chart represent the Porcupine Health Unit whose catchment area closely resembles that of the Timmins and District Hospital (TADH) catchment area. However, it is important to note that TADH receives referrals from community hospitals located in five of Northern Ontario's districts, including: Algoma, Cochrane, Kenora, Sudbury, Temiskaming, and the James and Hudson Bay Coast.

1. It is estimated that the population of TADH catchment area is closer to 105,000 people when taking into account additional communities served by TADH.

2. It is estimated that the total square kilometres of the TADH catchment area is closer to 275,000 when taking into account additional communities served by TADH.



When planning for a new service/program, consider:



- Undertaking a needs assessment and identifying unique needs by reviewing data equity, socioeconomic, Ontario Marginalized Index.
- Identifying key partners to engage and plan with across the community.
- Determining the highest impact interventions.
- Aligning the needed resources to best serve your population of focus and ensure equity-deserving populations are included.
- Implementing the new service with flexibility and an ability to engage and listen to the population so that continual learning and improvements can be made.
- Utilizing a "not about us, without us" approach to ensure that new programs are built with the voices of people who utilize and are impacted by the services.



Embedding a Population Health Approach into Health Programs and Services

At the outset of developing any new program or service, it's important to take the time to get to know the population being served. Review available data and resources– for example:

- Porcupine Health Unit 2021 Health Status Report
- Ontario Marginalization Index (ON-Marg)
- Statistics Canada <u>Timmins Profile</u>
- Fierté Timmins Pride Prism of Opportunities A Needs Assessment for 2SLGBTQ+ Support within the Cochrane & Temiskaming Districts of Northeastern Ontario
- Cochrane District Social Services Administration Board <u>Point-in-Time Count- 2getherWeCount!</u>
- University of Western Ontario <u>A Guide for Inclusive Language</u>
- We Heart Health Literacy CommunicateHealth
- (Life Expectancy, 2015-2017) Statistics Canada
- (Sociodemographic data, 2021 Census) Statists Canada Profile Table
- (Nutrition and Health Weights, 2019-2020) Public Health Ontario
- (Food Security, 2021-2022) <u>Public Health Ontario- Food Security</u>
- Heavy Drinking (2019-2020) <u>Public Health Ontario Alcohol Use</u>
- Smoking Daily or Occasional (2019-2020) Public Health Ontario Smoking Status





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