

Highlights

# Québec report



on  
comparable  
health  
indicators

## Highlights

### Québec report on comparable health indicators

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## HIGHLIGHTS

The *Rapport du Québec sur les indicateurs comparables dans le domaine de la santé* (Québec report on comparable health indicators) presents a selection of indicators grouped under three key objectives:

- health status and lifestyle;
- access to health services;
- satisfaction with services provided.

The Report is mainly intended for the general public and is aimed at presenting valid, reliable and comparable data at the provincial and national levels.

Most of the data used for these indicators come from surveys conducted by Statistics Canada.

### HEALTH STATUS AND LIFESTYLE

Several indicators can be used to examine the state of health and well-being of the population. Some deal directly with health status (mortality, morbidity, disabilities) while others are more related to behaviour or habits that have repercussions on health.

#### Québeckers' perception of their health

- In 2003, almost 59% of the Québec population aged 12 or over rated their health as excellent or very good, a profile similar to that of the Canadian average.
- In Québec, more men (59%) than women (55%) rate their health as excellent or very good.
- The great majority of young people rate their health as excellent or very good (66% of 12 to 19 year-olds and 70% of 20 to 34 year-olds), but only 34% of people aged 65 or over have this perception.

#### Life expectancy of Québec men and women based on their health status

- In 2001, Québec ranked highest in Canada in terms of life expectancy at birth (LEB) according to health status, and this was true for both women and men. However, Québec's rank declines from age 65 onwards, becoming similar to that of several provinces.
- The distribution of the population by income group shows significant differences in life expectancy at birth according to health status. In Québec, the most financially-advantaged group has better results than the least advantaged group, that is, nearly five more years of life for men and three more years of life for women. These variations are similar to those observed in Canada.

### Factors influencing the Québec population's health status

- In 2003 as well as in 2000-2001, Québec had more young smokers aged 12 to 19 than Canada as a whole. Just as many girls as boys aged 12 to 19 stated that they smoke, whether occasionally or on a regular basis.
- In 2003, 48% of Québeckers aged 12 or over stated that they engage in a recreational physical activity, a percentage that is slightly lower than the Canadian average (51%). Between 1994-1995 and 2003, the proportion of physically-active Québeckers increased from 34% to 48%, and remained lower than the Canadian average. However, recreational physical activity declines with age, dropping from 69% in the 12 to 19 year-old group to 37% for those aged 65 or over.
- Half of the Québec population aged 18 or over have a normal weight. Although in Québec, more people have a normal weight and fewer suffer from obesity than the Canadian average (48%), the proportion of people with excess weight (overweight and obesity) has been increasing since 2000-2001. More men (55%) than women (38%) are affected by excess weight, and more than half of people aged 45 or over are overweight.
- In Québec, the proportion of people aged 65 or over who had been vaccinated within the past year increased between 1996-1997 and 2000-2001 and stabilized in 2003; more than half of the people (55%) in this age group were vaccinated against the flu in 2003 -- a slightly lower vaccination rate than that in Canada as a whole (62%). As many Québec men as women aged 65 or over have been vaccinated against the flu. More people aged 75 or over than those aged between 65 and 74 have been vaccinated during the past year (59% vs. 53%).

- In Québec, the prevalence of diabetes is slightly lower (4.7%) than the Canadian average (4.8%). However, it increases among both men and women until a very advanced age and subsequently decreases. The prevalence of diabetes reaches a peak of 19% among men aged 75 to 79 and 16% among women aged 80 to 84.

## ACCESS TO HEALTH SERVICES

Access to health services is a key issue among the population as well as in the current health care debate in Québec and elsewhere in Canada. As a general rule, the population would like to have access to the appropriate resources, when and where they need them. However, many people have problems accessing health services and the wait times give rise to worry, stress and anxiety.

### Problems of access to health services expressed by the Québec population

- In 2003, 20% of Québec men and women aged 15 or over who needed basic health services stated that they had problem obtaining them at any time of the day.
- Of the people who asked for information or advice on health matters in 2003, 15% had problem obtaining them at any time of the day. This compares favourably with the Canadian average (16%).
- In 2003, approximately one out of four people who needed immediate care for a minor health problem had problem obtaining it.
- In 2003, of the people who had recourse to diagnostic tests, half waited less than two weeks, and the majority (61%) were able to access these services within a period of four weeks.

### Québec population's expenditures for prescription drugs

- In 2002, 4% of Québec households estimated having spent more than 5% of their net income on prescription drugs. This rate is slightly higher than the Canadian average (3%) but is still lower than that of several provinces. From 1997 to 2002, the percentage of Québec households whose personal outlays for prescription drugs exceeded 5% of their net income increased from 3.6% to 4%. During this same period, a rising trend was also observed in Canada as a whole.

## Preventable hospitalizations in Québec

- The Québec hospitalization rate for health problems due to diabetes, alcoholism and drug addiction, neurotic depression, hypertension and asthma is 9% lower than the Canadian average, making it the second lowest rate in Canada.
- The Québec and Canadian hospitalization rates for health problems due to diabetes, alcoholism and drug addiction, neurotic depression, hypertension and asthma have decreased continuously; in Québec, the rate decreased from 447 hospitalizations per 100,000 population in 1995-1996 to 314 hospitalizations per 100,000 population in 2001-2002.

## SATISFACTION WITH THE SERVICES PROVIDED

Patient satisfaction is an additional source of information in assessing the quality of services and care. Through surveys conducted on the population to assess their level of satisfaction, governments gather information that helps them to make decisions and develop their strategic planning.

### Québec population's level of satisfaction with the services provided

On the whole, the rates of satisfaction with the services provided are quite high. More specifically:

- 87% of the Québec population aged 15 or over stated that they were very or quite satisfied with the way in which health services were delivered in 2003. This satisfaction rate is higher than the Canadian average (85%). In general, the satisfaction level increases with age. Thus, people aged 65 or over are the most satisfied with the health services received.
- in 2003, nine out of ten Québeckers aged 15 or over were very or quite satisfied with the health care received in the community. This proportion is higher than the Canadian average. People aged 65 or over are the most satisfied with the health services received;
- the proportion of Québeckers aged 15 or over who were very or quite satisfied with the Info-Santé service reached 84% in 2003, or exactly the same as the Canadian average. Men seem to be more satisfied with this service than women, and in particular those aged 35 to 64, whose satisfaction rates exceed 95%;

- in 2003, 83% of Québeckers aged 15 or over were very or quite satisfied with the way in which hospital services were delivered. This rate is higher than the Canadian average (81%). In general, men aged 35 or over appear to be the most satisfied clientele with hospital services, with a satisfaction rate exceeding 90%;
- in 2003, more than 93% of the Québec population aged 15 or over were very or quite satisfied with the services received from a family physician or another physician. As a general rule, men 's satisfaction rate is higher than that of women, regardless of age. People aged 65 to 74 are the most satisfied (96%) with the care received from a family physician or another physician.

# QUÉBEC REPORT ON COMPARABLE HEALTH INDICATORS

OBJECTIVE/INDICATOR	QUÉBCC	CANADIAN
<b>Health status and lifestyle</b>		
1. Self-rated health: very good or excellent (2003)	58.6%	59.6%
2. Health-adjusted life expectancy at birth		
• Life expectancy at birth adjusted for health status (2001): MEN	69.0 years	68.3 years
• Life expectancy at birth adjusted for health status (2001): WOMEN	72.0 years	70.8 years
• Health-adjusted life expectancy at age 65 (2001): MEN	12.8 years	12.7 years
• Health-adjusted life expectancy at age 65 (2001): WOMEN	14.8 years	14.4 years
3. Smoking rates:		
• Adolescents who smoke on a regular basis or occasionally (2003)	20.0%	14.8%
• Adolescents who smoke on a regular basis (2003)	12.5%	9.1%
4. Physical activity		
• Proportion of people aged 12 or over who stated that they are physically “active” during leisure time (2003)	47.8%	51.0%
• Proportion of people aged 12 or over who stated that they are physically “inactive” during leisure time (2003)	49.9%	46.4%
5. Body mass index		
• Proportion of people aged 18 or over who are underweight (2003)	3.1%	2.8%
• Proportion of people aged 18 or over who have a normal weight (2003)	50.0%	47.8%
• Proportion of people aged 18 or over who are overweight (2003)	31.8%	32.4%
• Proportion of people aged 18 or over who are obese (2003)	13.4%	14.5%
6. Proportion of people aged 65 or over vaccinated against the flu within the past year	55.0%	62.1%
7. Relative prevalence of diabetes adjusted for people aged 20 or over – 1999-2000	4.7%	4.8%
<b>Access to health services</b>		
8. Difficulties accessing routine or ongoing health services		
• Percentage of people aged 15 or over who had difficulties accessing routine or ongoing health services at any time of the day – 2003	19.8%	16.4%
9. Difficulties obtaining health information or advice		
• Percentage of people aged 15 or over who had difficulties obtaining health information or advice at any time of the day – 2003	14.5%	15.8%

OBJECTIVE/INDICATOR	QUÉBEC	CANADIAN
10. Difficulties obtaining immediate care • Percentage of people aged 15 or over who had difficulties obtaining immediate care for a minor health problem at any time of the day – 2003	25.6%	23.8%
11. Reported median waiting times (in weeks) for diagnostic tests, population aged 15 or over – 2003 Distribution of waiting times for diagnostic tests, population aged 15 or over, under one month (2003) Distribution of waiting times for diagnostic tests, 1-3 months (2003)	2 weeks 61.1% 28.8%	2 weeks 58.3% 28.9%
12. Percentage of households having spent more than 5% of their net income on prescription drugs – 2002	4.0%	3.0%
13. Hospitalization rates for ambulatory care sensitive conditions – per 100,000 hospitalizations – 2001-2002	314	346
<b>Satisfaction with services provided</b>		
14. Percentage of people aged 15 or over who were very or quite satisfied with the health services provided – 2003	87.1%	84.9%
15. Percentage of people aged 15 or over who were very or quite satisfied with the health services received in the community – 2003	88.6%	83.0%
16. Percentage of people aged 15 or over who were very or quite satisfied with the Info Santé service – 2003	83.7%	83.7%
17. Percentage of people aged 15 or over who were very or quite satisfied with the hospital services provided – 2003	83.2%	81.1%
18. Percentage of people aged 15 or over who were very or quite satisfied with the services received from a family physician or another physician	93.4%	91.4%