

Faculty/Presenter Disclosure

- **Presenter:** Steve Buist, The Hamilton Spectator
- **Relationships with commercial interests:**
 - I have no financial conflicts of interest to declare.

This is my city, Hamilton. It looks like this:



And this:



And this:



Unfortunately, my city also looks like this:



And this:



And this:



We Canadians pride ourselves on many things about our country, and rightfully so.

What's one of the things we take the greatest pride in?

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Our health care system.

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What's one of the things we take the greatest pride in?

Our health care system.

Why is that?

I'm about to show you that there is nothing equal about health care in Canada.

And there's certainly nothing equal about the health of people here in Hamilton.

WEEKEND READER

THE HAMILTON SPECTATOR ■ SATURDAY, APRIL 10, 2010 ■ THESPEC.COM

Worlds apart

Glaring disparities in wealth and health have taken a shocking toll on a huge number of Hamilton's people.

BY STEVE BUIST

Two neighbourhoods, separated by just five kilometres as the crow flies. They might as well be worlds apart. Between these Hamilton neighbourhoods, representing two ends of the spectrum, there's a difference of 21 years in average age at death.

Basically, it's a crude measure of life expectancy across this city, which is important because there's no clearer measure of health than whether you're dead or alive.

Of all the glaring disparities between Hamilton's neighbourhoods uncovered in this groundbreaking health mapping project, the gap in life expectancy is the most disturbing. That 21-year difference represents an entire generation lost between those neighbourhoods at the top and bottom.

At one extreme is the west Mountain neighbourhood bounded by Upper Paradise Road, the Mountain brow, Rice

CODE RED

WHERE YOU LIVE AFFECTS YOUR HEALTH

Avenue and Mohawk Road West, where the average age at death was 86.3 years, based on death statistics collected from 2006 to 2008. That's five years better than Canada's average life expectancy.

At the other extreme is the neighbourhood tucked between Wellington Street North, the harbourfront, Sherman Avenue North and the railway tracks near Barton Street, where the average age at death for the same period was 65.5 years.

Put another way, that same North End neighbourhood would rank 165th in the world for life expectancy, tied with Nepal, just ahead of Pakistan and worse than India, Mongolia and Turkmenistan.

"There's your story right there," said Neil Johnston, a Hamilton health researcher who has collaborated on this project for

three years and acted as the chief data analyst.

The huge gap in life expectancies across the city is one important piece of a much larger story concerning the health of Hamilton's neighbourhoods.

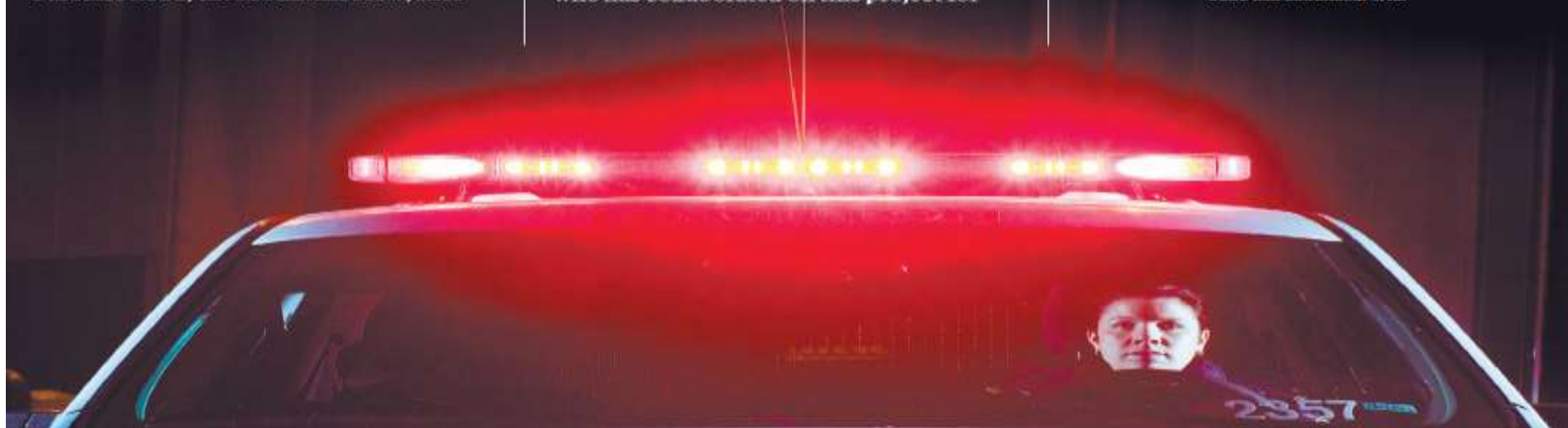
The Spectator's comprehensive analysis of more than 400,000 pieces of hospital and death data for Hamilton residents shows staggering disparities between the best and poorest-performing neighbourhoods.

In parts of the lower-central portion of Hamilton, where poverty is deeply entrenched, some neighbourhoods live with Third World health outcomes and Third World lifespans — all the more shocking in a city with a major medical school and top teaching hospitals, in a country with universal, publicly funded health care.

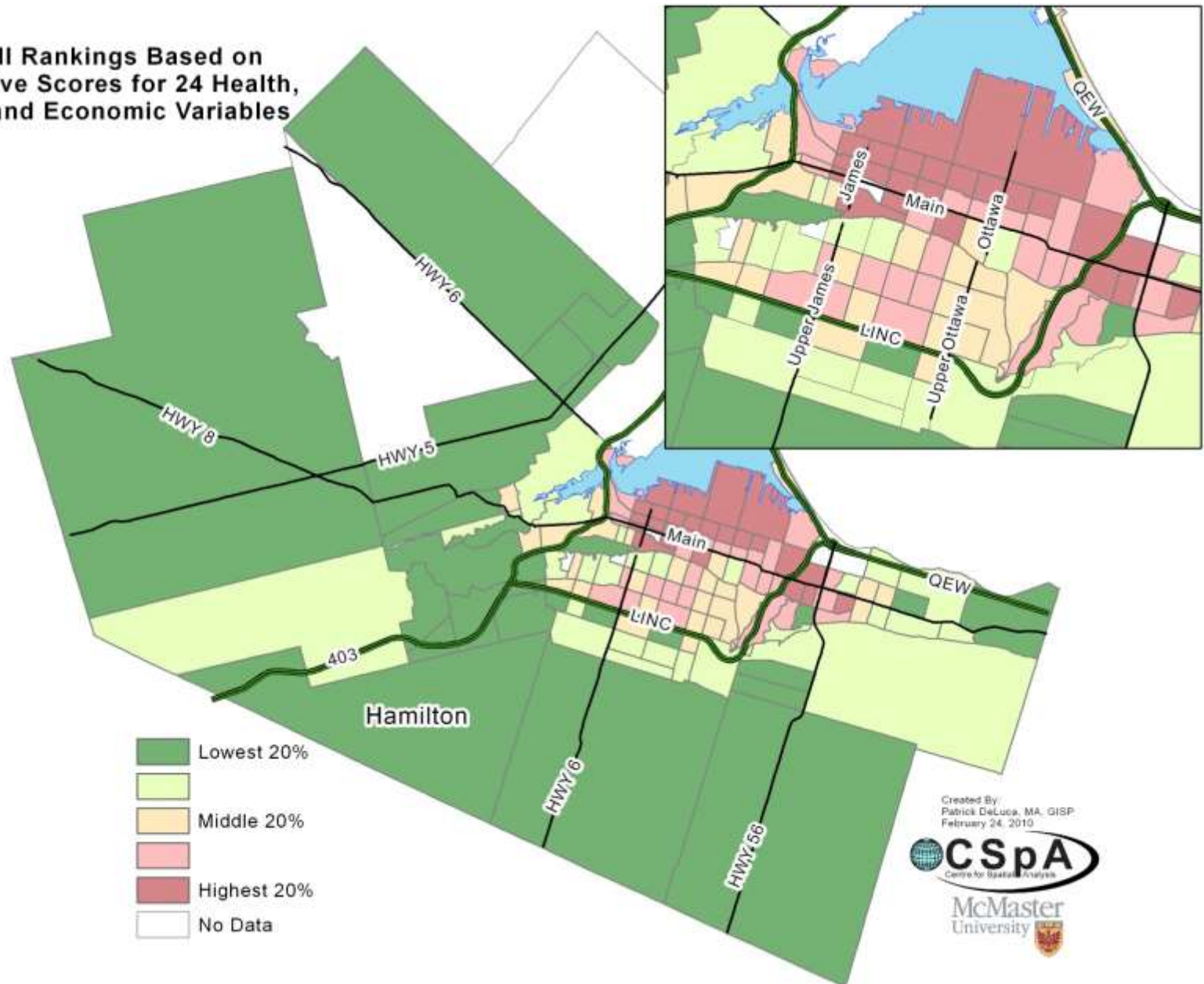
"It's absolutely appalling," said Johnston, an expert in analyzing and mapping health data.

"In the current circumstances, it may not be avoidable and that's the tragedy."

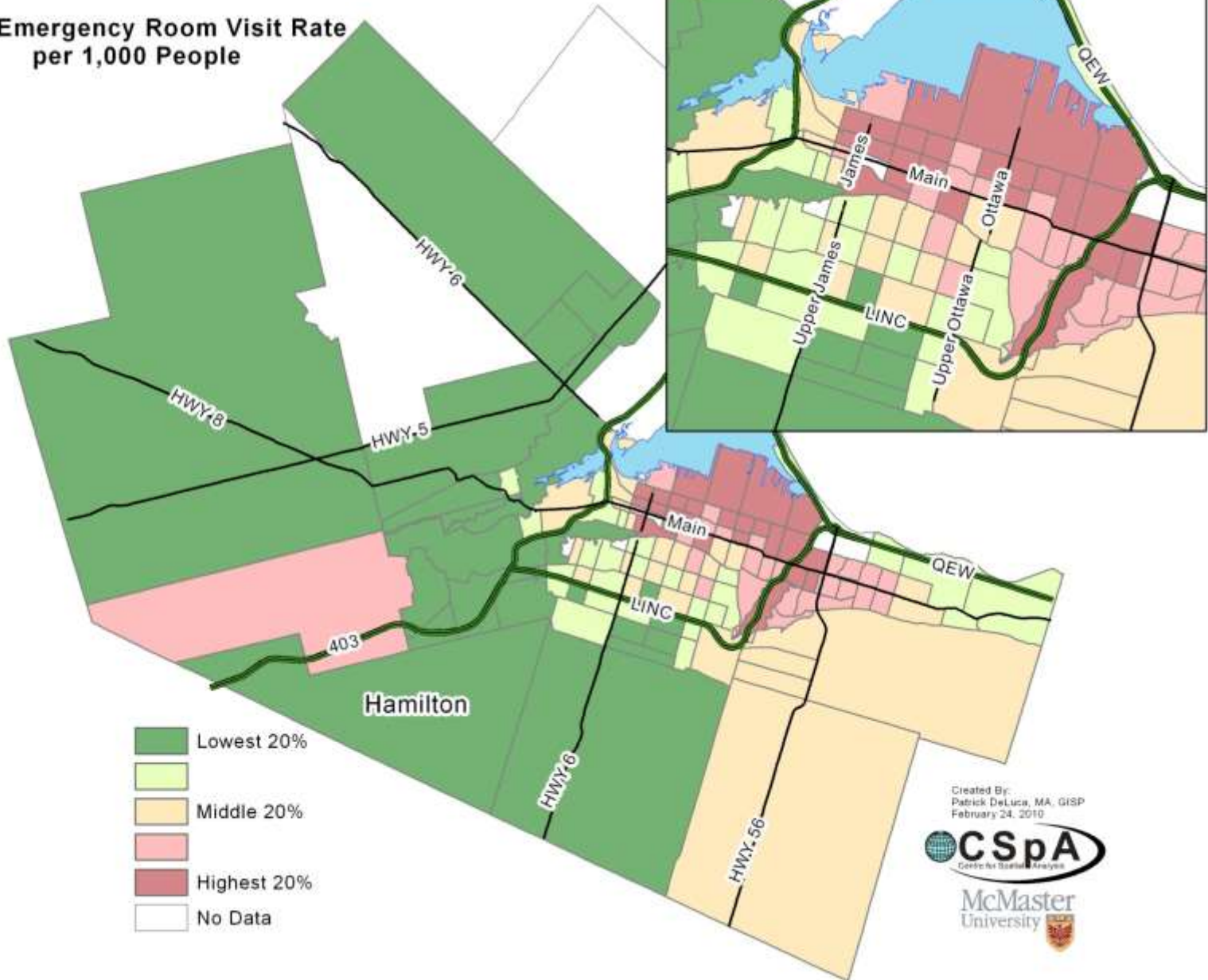
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**Overall Rankings Based on
Cumulative Scores for 24 Health,
Social and Economic Variables**

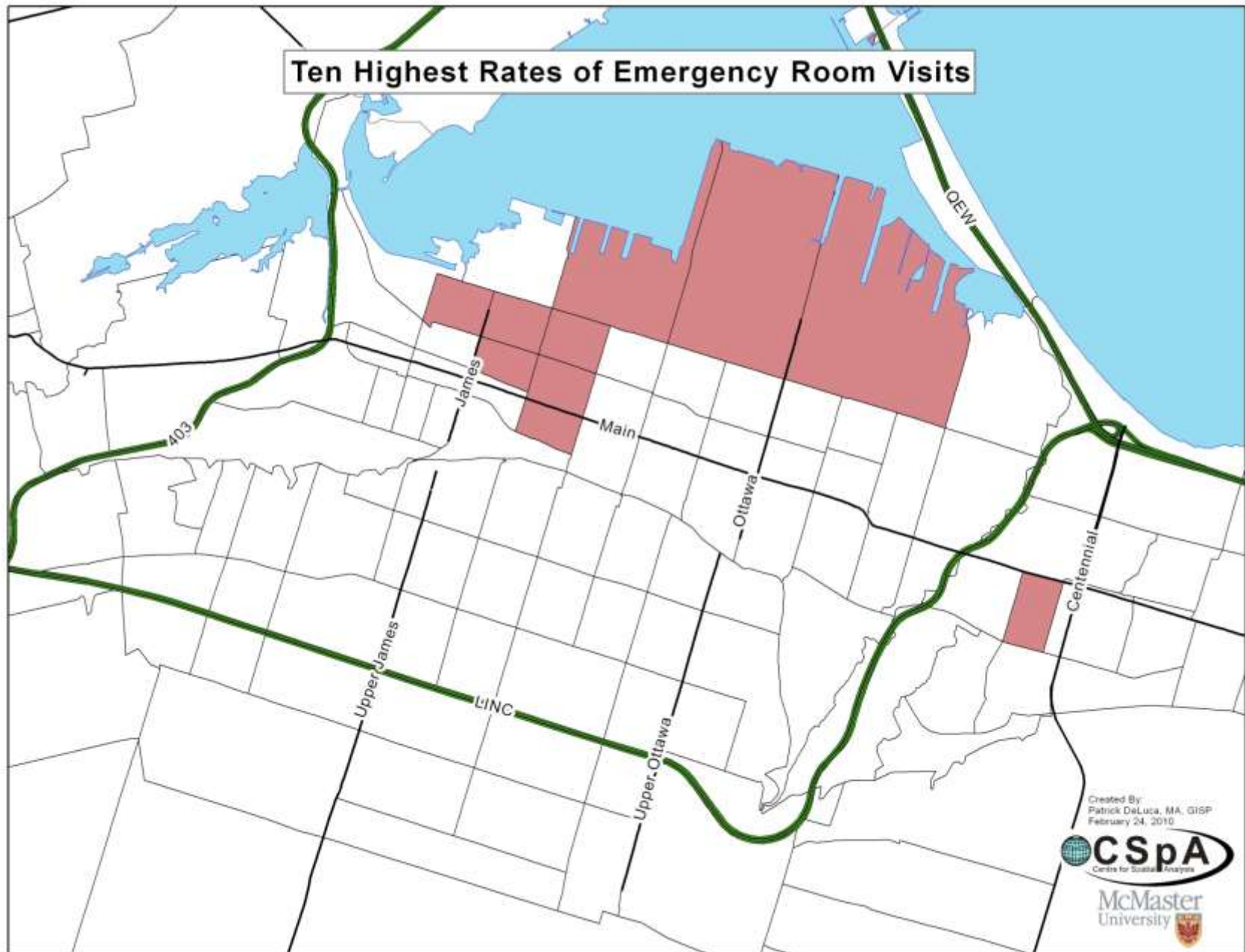


Total Emergency Room Visit Rate per 1,000 People

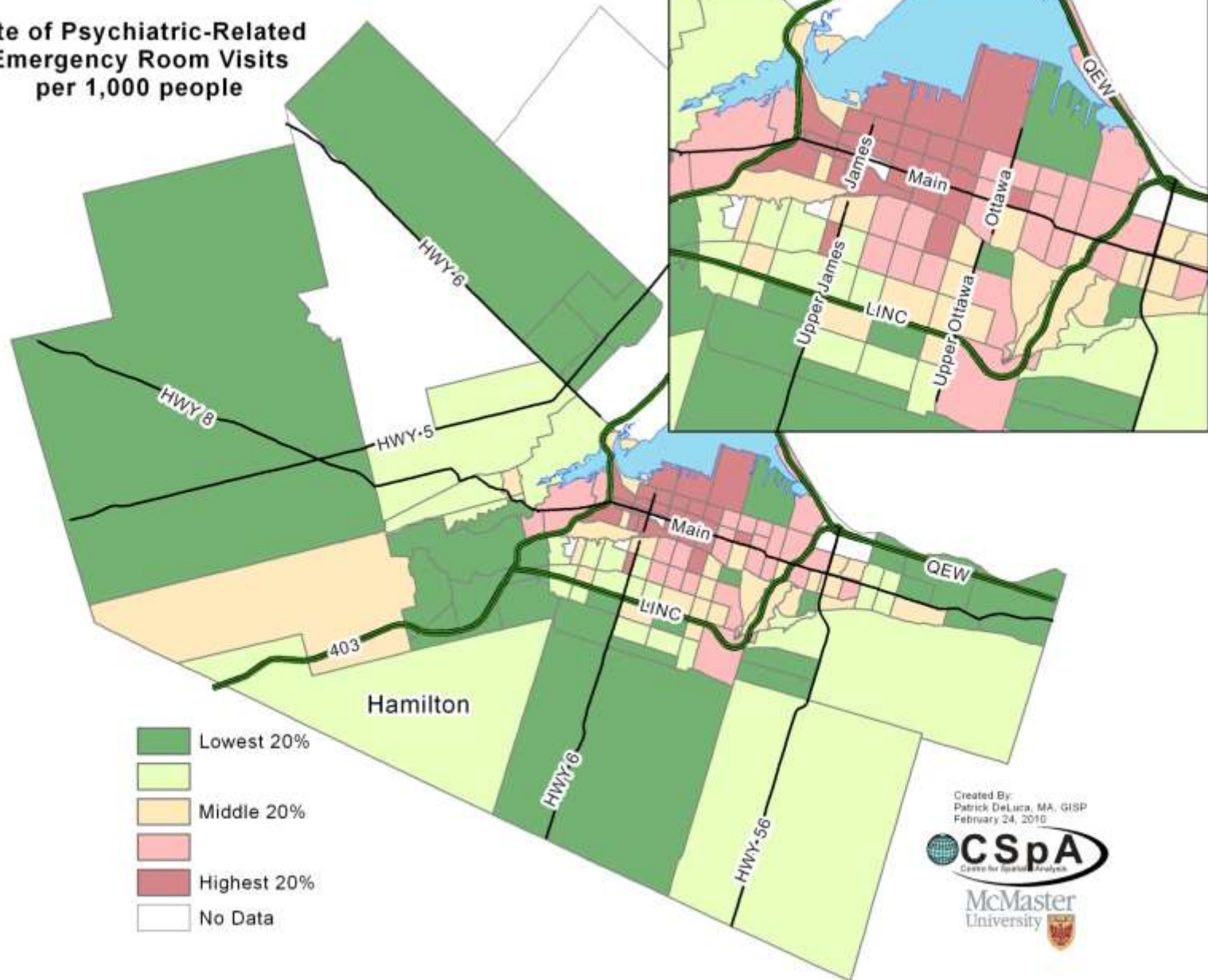


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Patrick DeLuca, MA, GISP
February 24, 2010

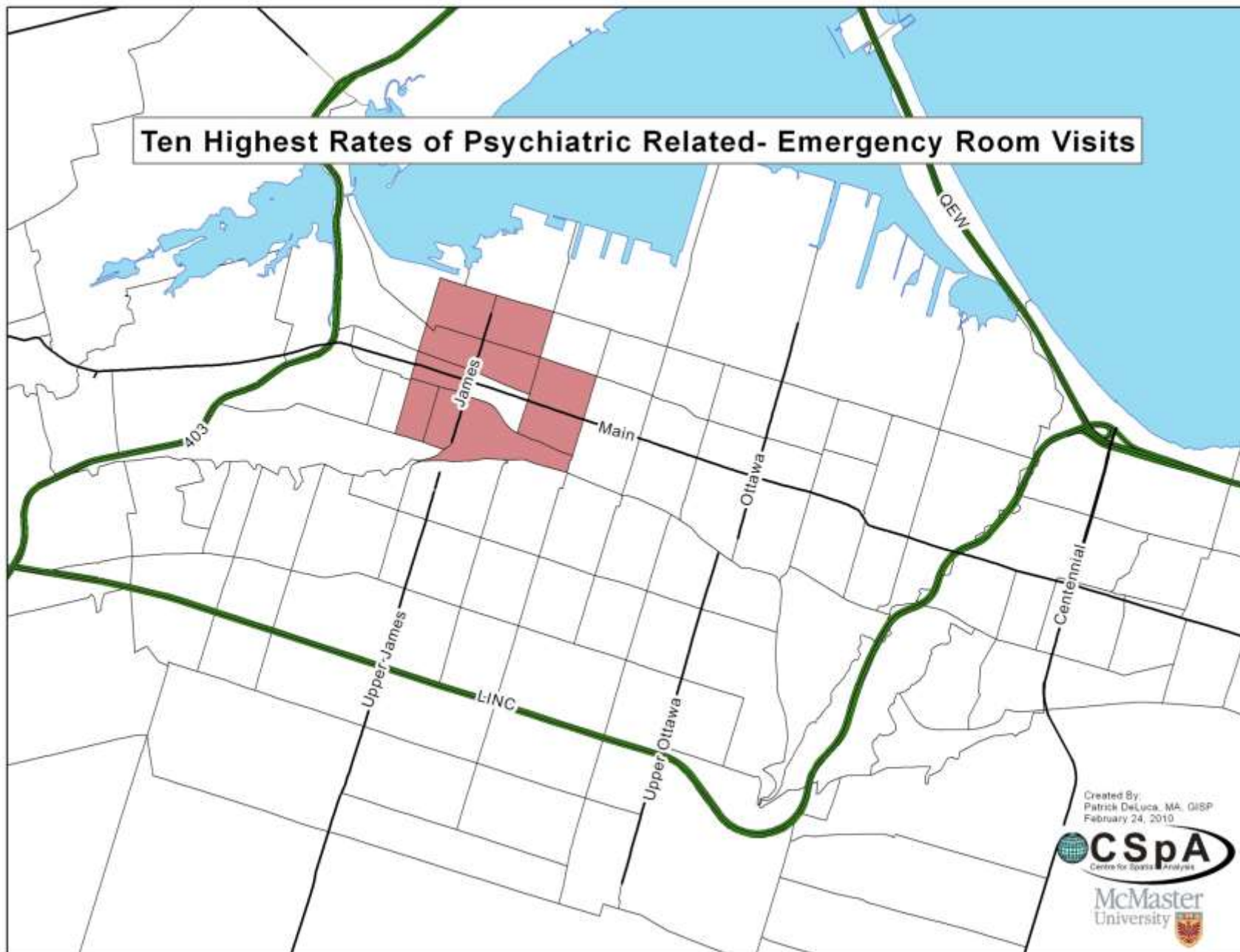
Ten Highest Rates of Emergency Room Visits



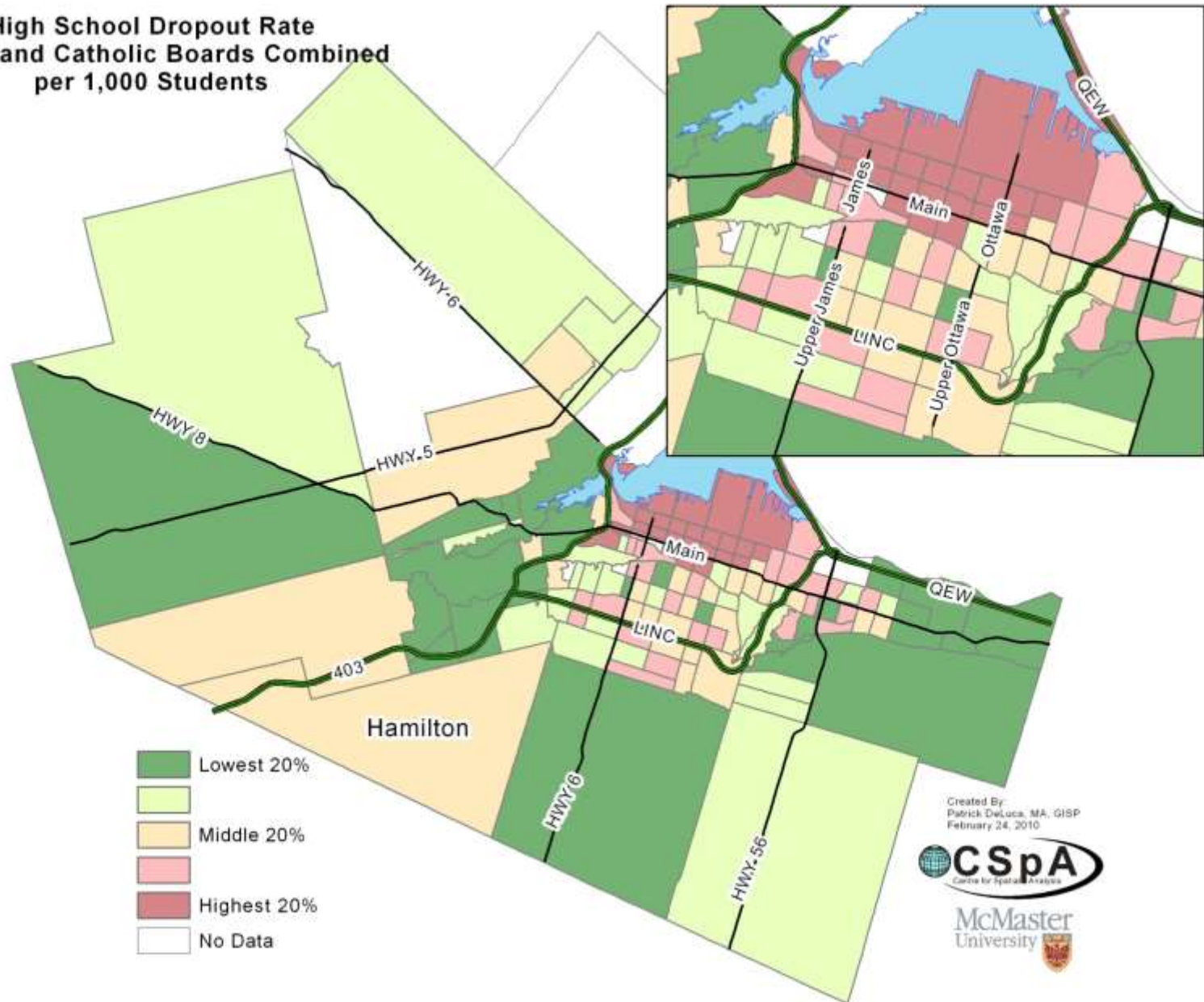
Rate of Psychiatric-Related Emergency Room Visits per 1,000 people



Ten Highest Rates of Psychiatric Related- Emergency Room Visits

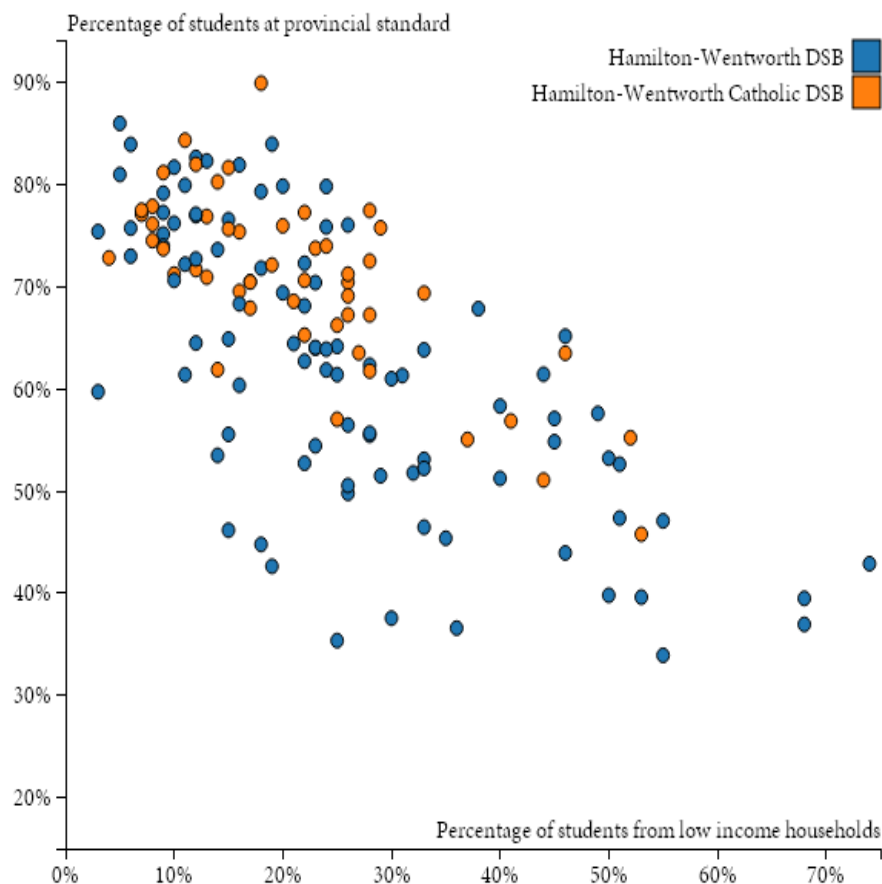


High School Dropout Rate Public and Catholic Boards Combined per 1,000 Students





Shifting scores



Highlight a school

Percentage of students meeting provincial standard on EQAO tests, on average, from 2008-2013.

Subject

Filters

Grade 3

Reading
Writing
Math
Overall

University Education
Low Income
Special Education
ESL

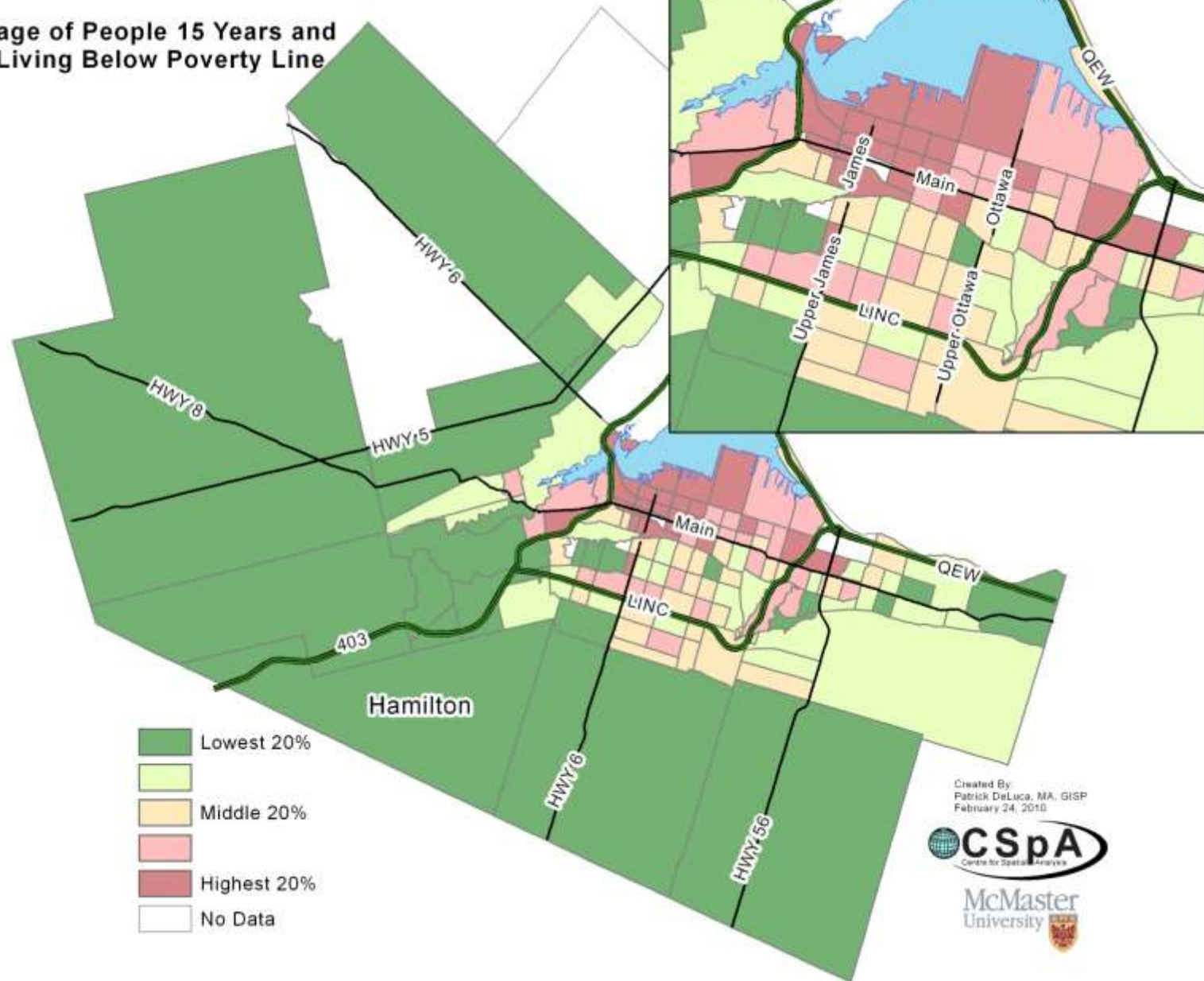
Grade 6

Reading
Writing
Math
Overall

Gr 3 and Gr 6

Overall

Percentage of People 15 Years and Older Living Below Poverty Line



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BORN

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A tale of two cities

The Golden Horseshoe is a study in contrasts, with Hamilton's lower city posting one of the highest urban teen mother rates in the province while neighbouring Burlington has one of the lowest.

The Orchard

Median household income: **\$105,653**
 Female lone-parent families: **4.7%**
 Residents below poverty line: **6.5%**
 Children below poverty line: **12.1%**
 No high school (ages 25-64): **4.6%**
 University degree (ages 25-64): **44.5%**

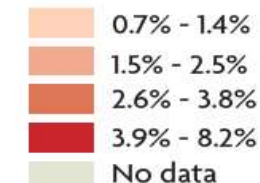
Teen mother rate: **0%**

The core of the problem

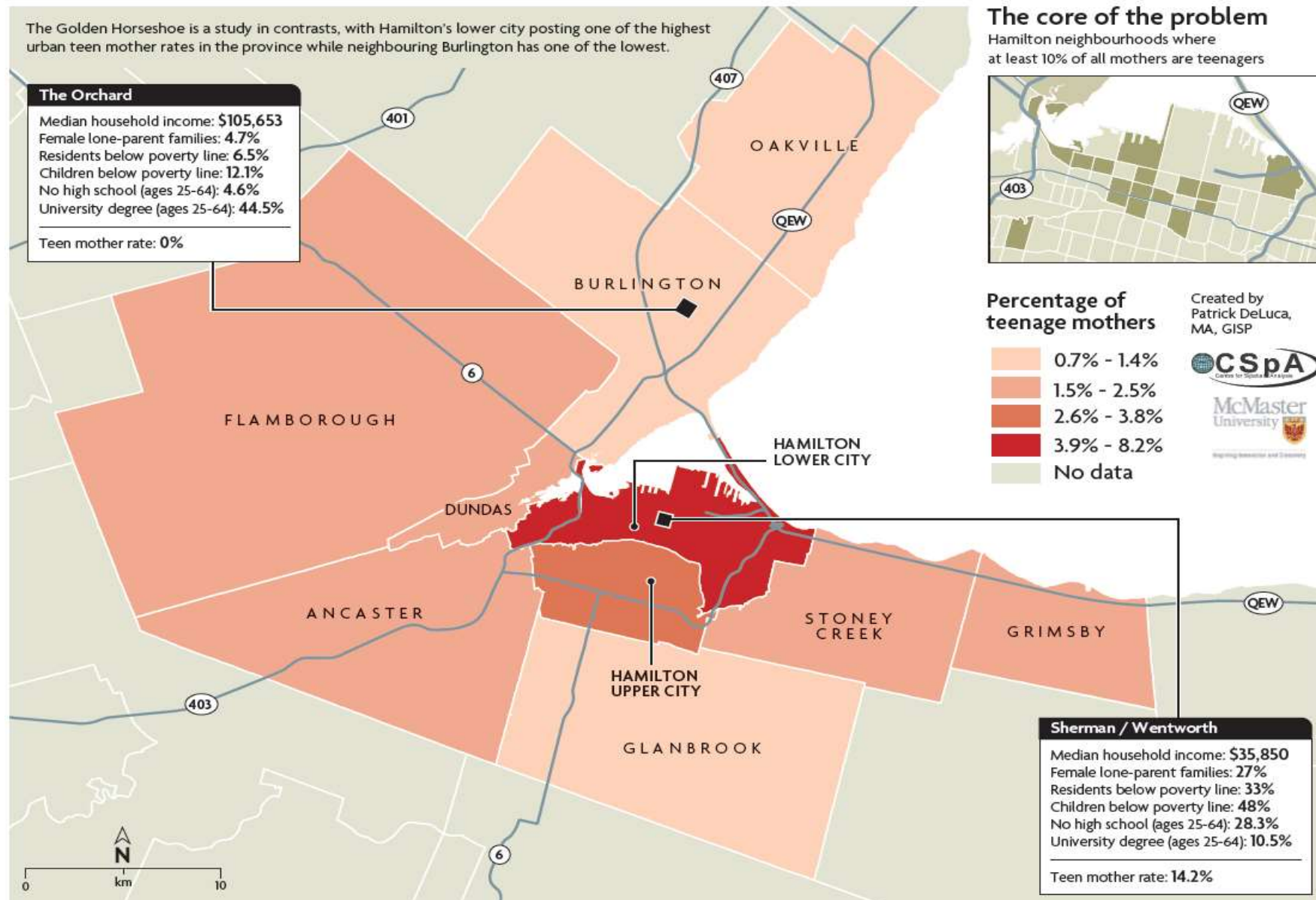
Hamilton neighbourhoods where at least 10% of all mothers are teenagers



Percentage of teenage mothers



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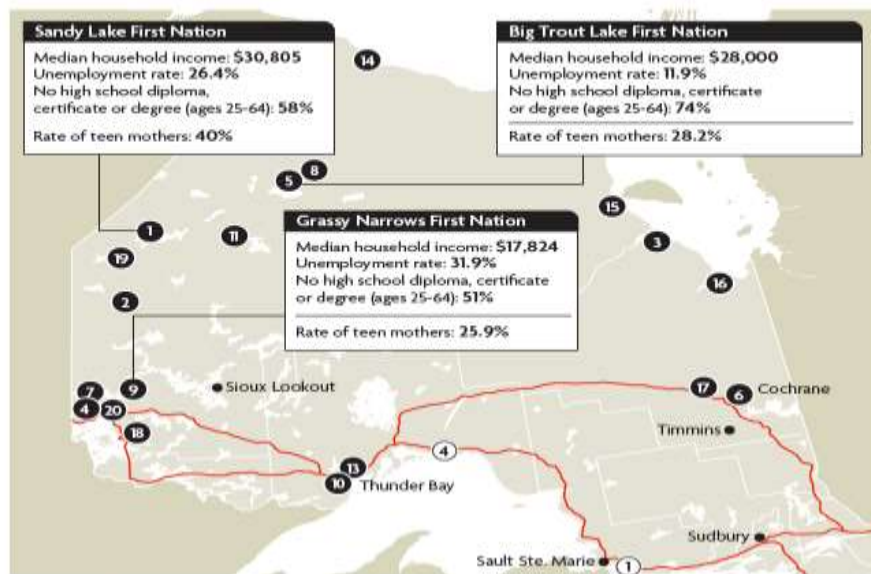
Sherman / Wentworth

Median household income: **\$35,850**
 Female lone-parent families: **27%**
 Residents below poverty line: **33%**
 Children below poverty line: **48%**
 No high school (ages 25-64): **28.3%**
 University degree (ages 25-64): **10.5%**

Teen mother rate: **14.2%**

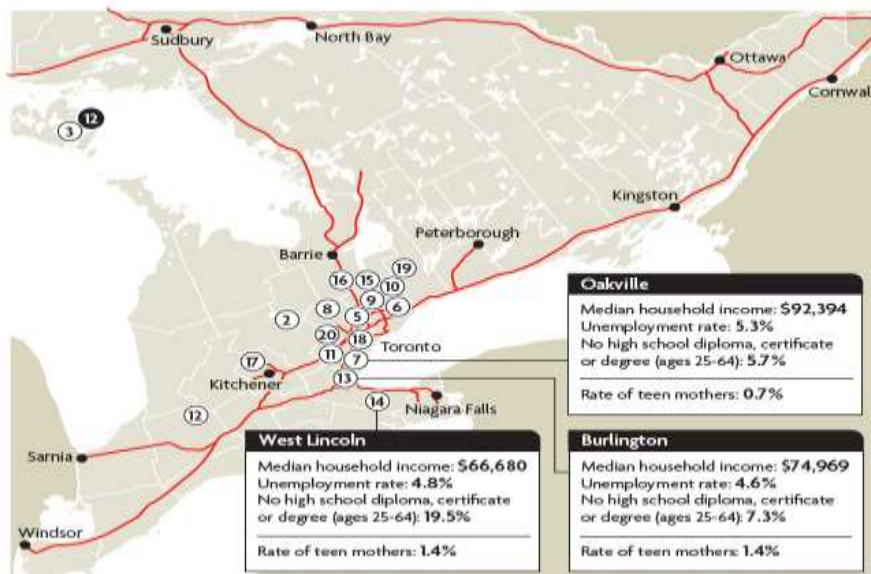
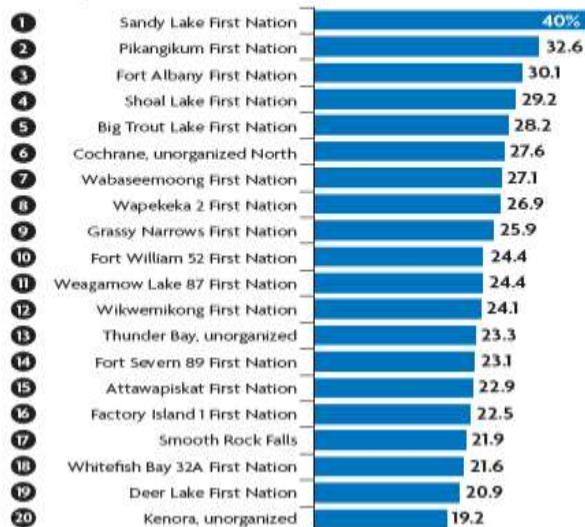
ONTARIO: A PROVINCE DIVIDED

The Spectator's analysis of 535,000 provincial birth records reveals that between 2006 and 2010 the 20 communities with the highest incidence of teen mothers are either in Ontario's Far North or native reserves.



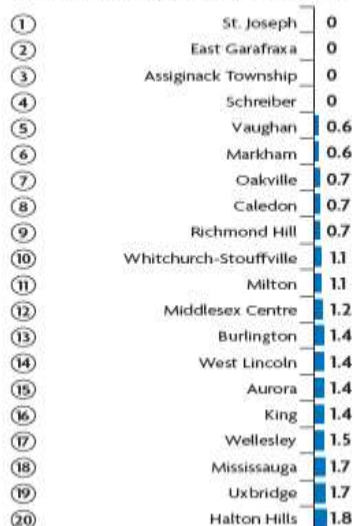
Communities with the highest rates of teen mothers

Percentage of all mothers that are teenagers



Communities with the lowest rates of teen mothers

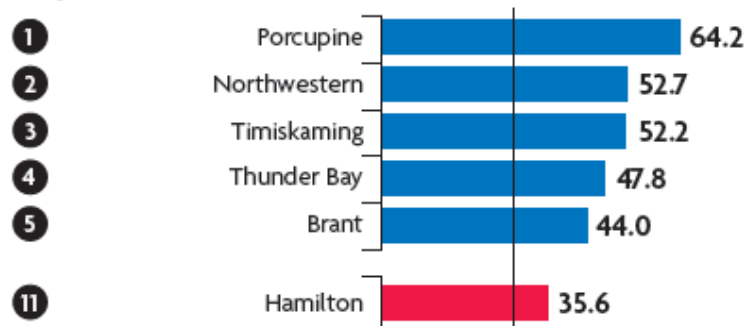
Percentage of all mothers that are teenagers



Teen pregnancy rates provincewide

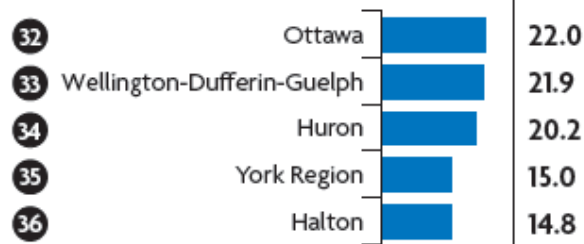
Number of teen pregnancies per 1,000 girls aged 15-19, by public health unit, 2009

Top of the list



◀ Ontario average: 28.6

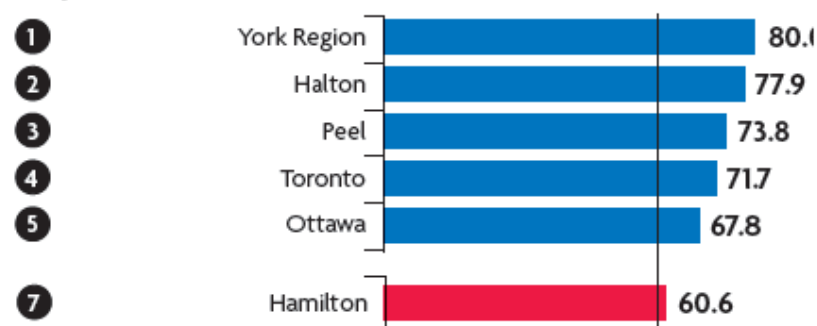
Bottom of the list



Teen abortion rates provincewide

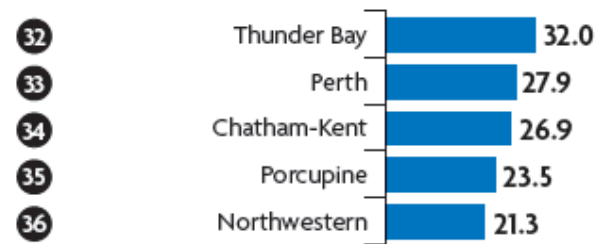
Percentage of pregnancies ending in abortion for teens aged 15-19, by public health unit, 2009

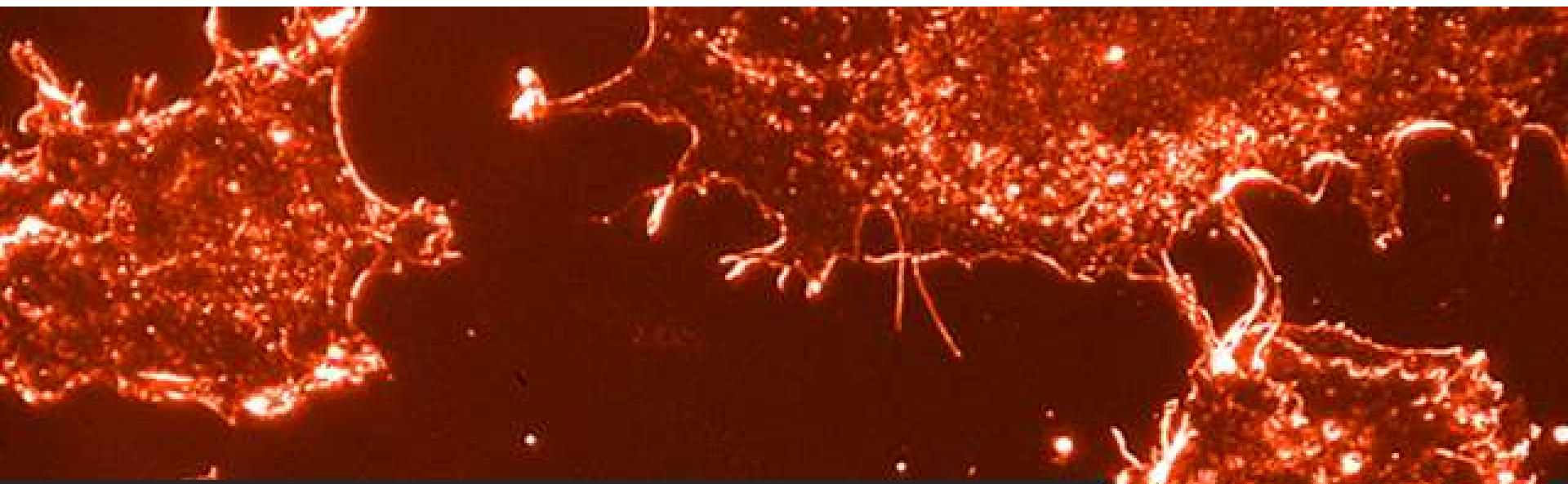
Top of the list



◀ Ontario average: 59

Bottom of the list





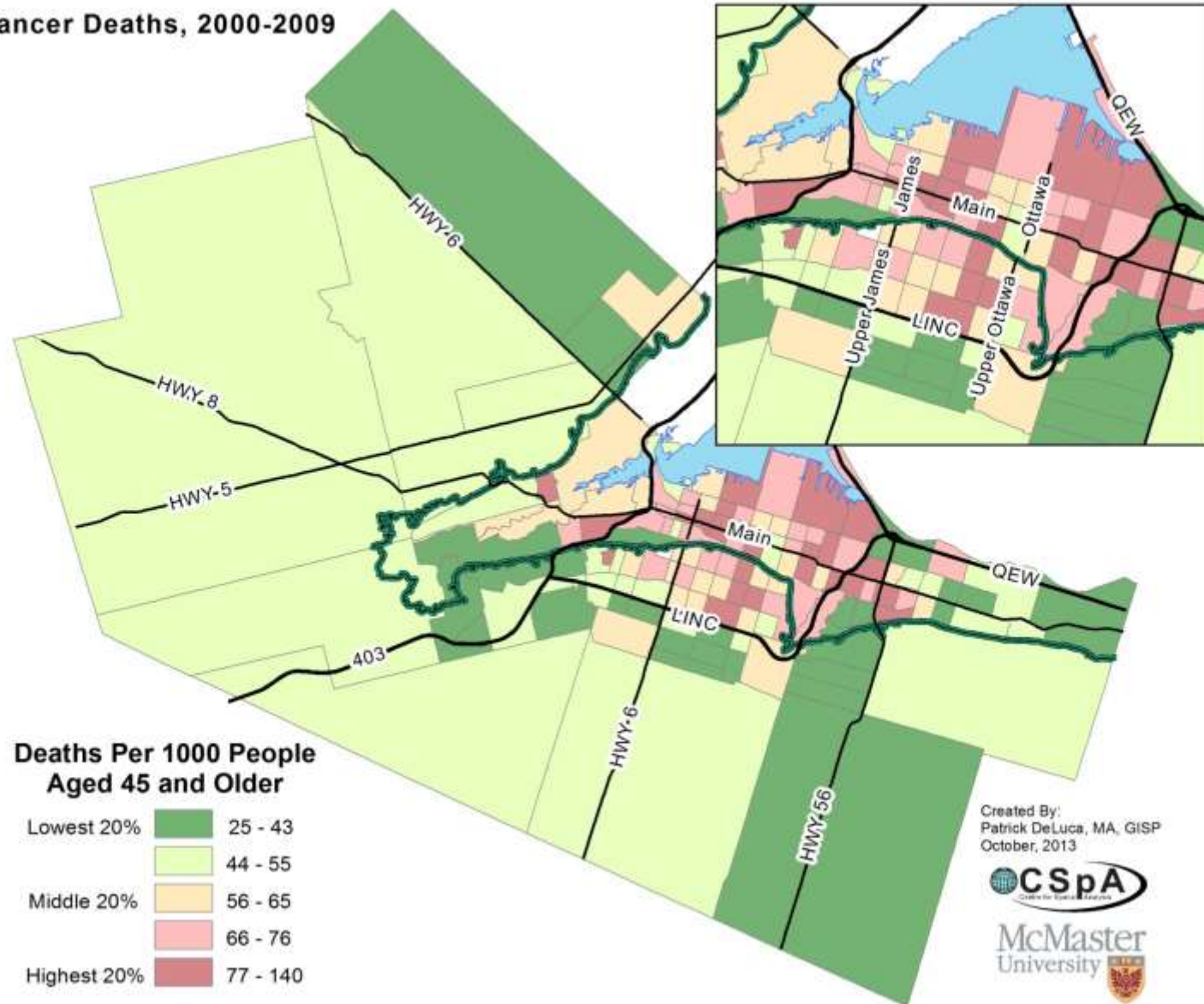
CANCER

A CODE RED PROJECT

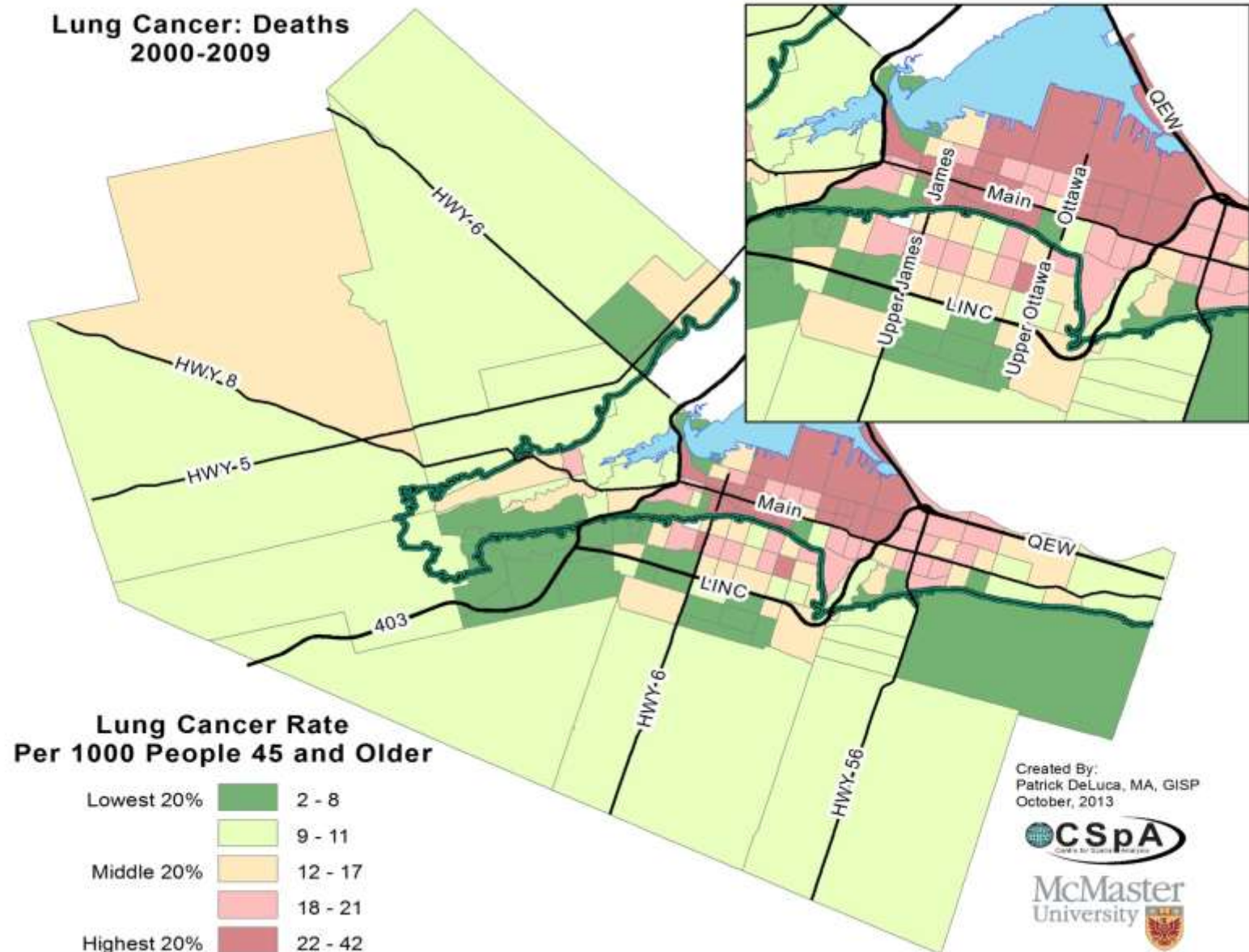
Cancer, Hamilton and the connections to the SDOH:

- Cancer mortality rate in inner-city core 90% higher than Ancaster.
- Mortality rate in worst neighbourhood **4X** higher than best neighbourhood.
- Lung cancer mortality rate in worst neighbourhood **15X** higher than best.
- 3,438 fewer cancer deaths over 10 years if former City of Hamilton had same cancer mortality rate as Ancaster.

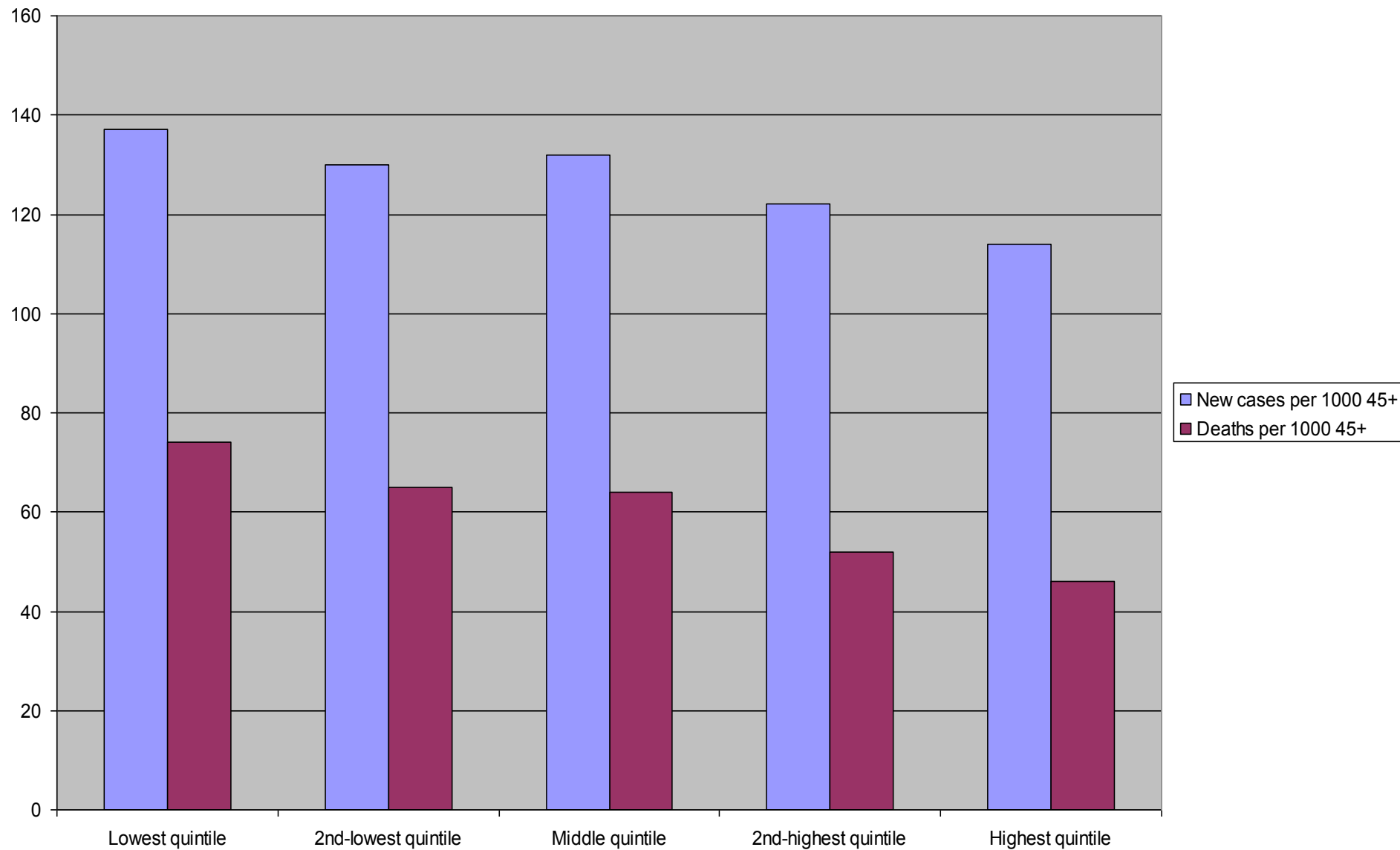
All Cancer Deaths, 2000-2009



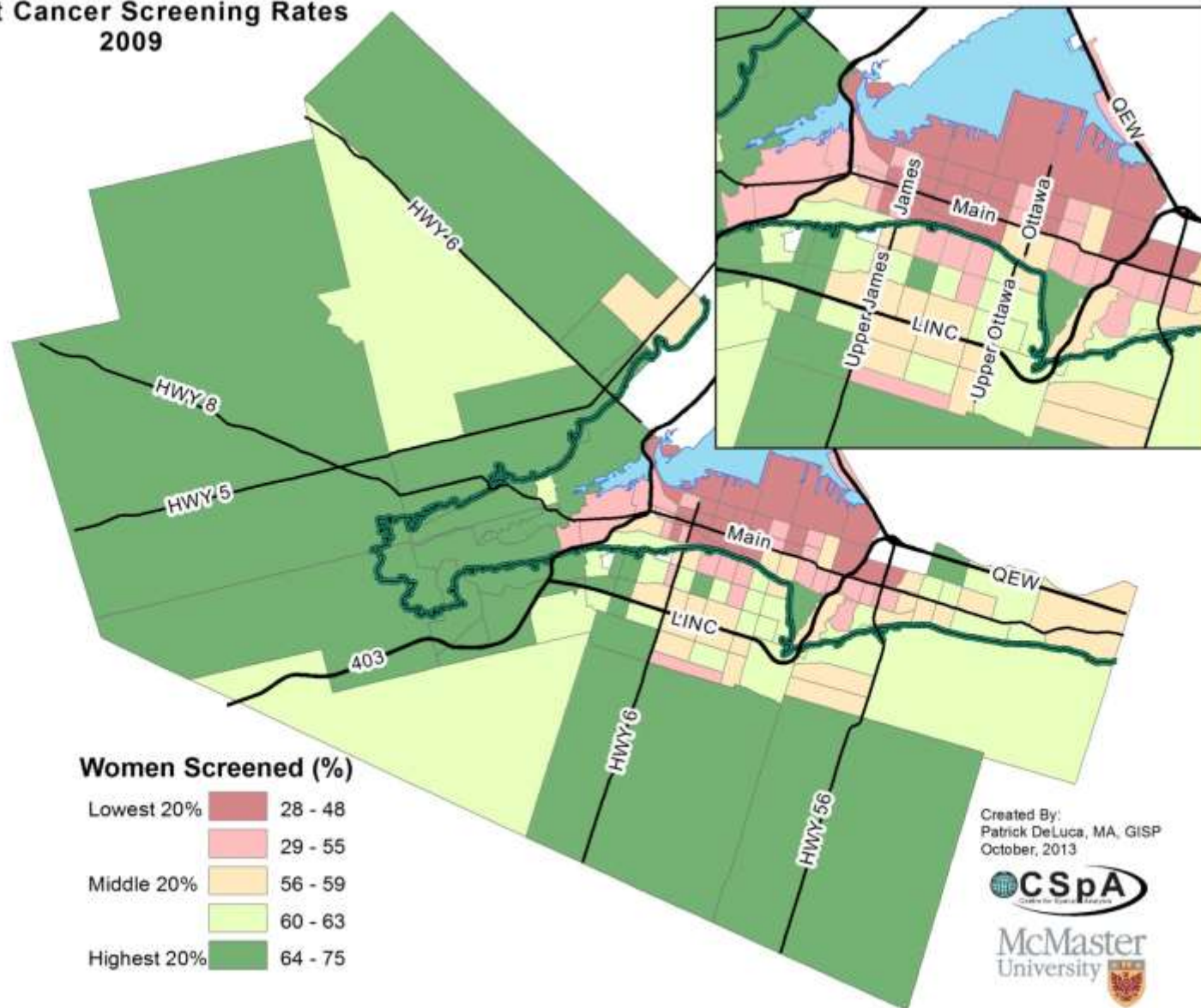
Lung Cancer: Deaths 2000-2009



Cancer rate comparison for Hamilton, by median income quintiles



Breast Cancer Screening Rates 2009

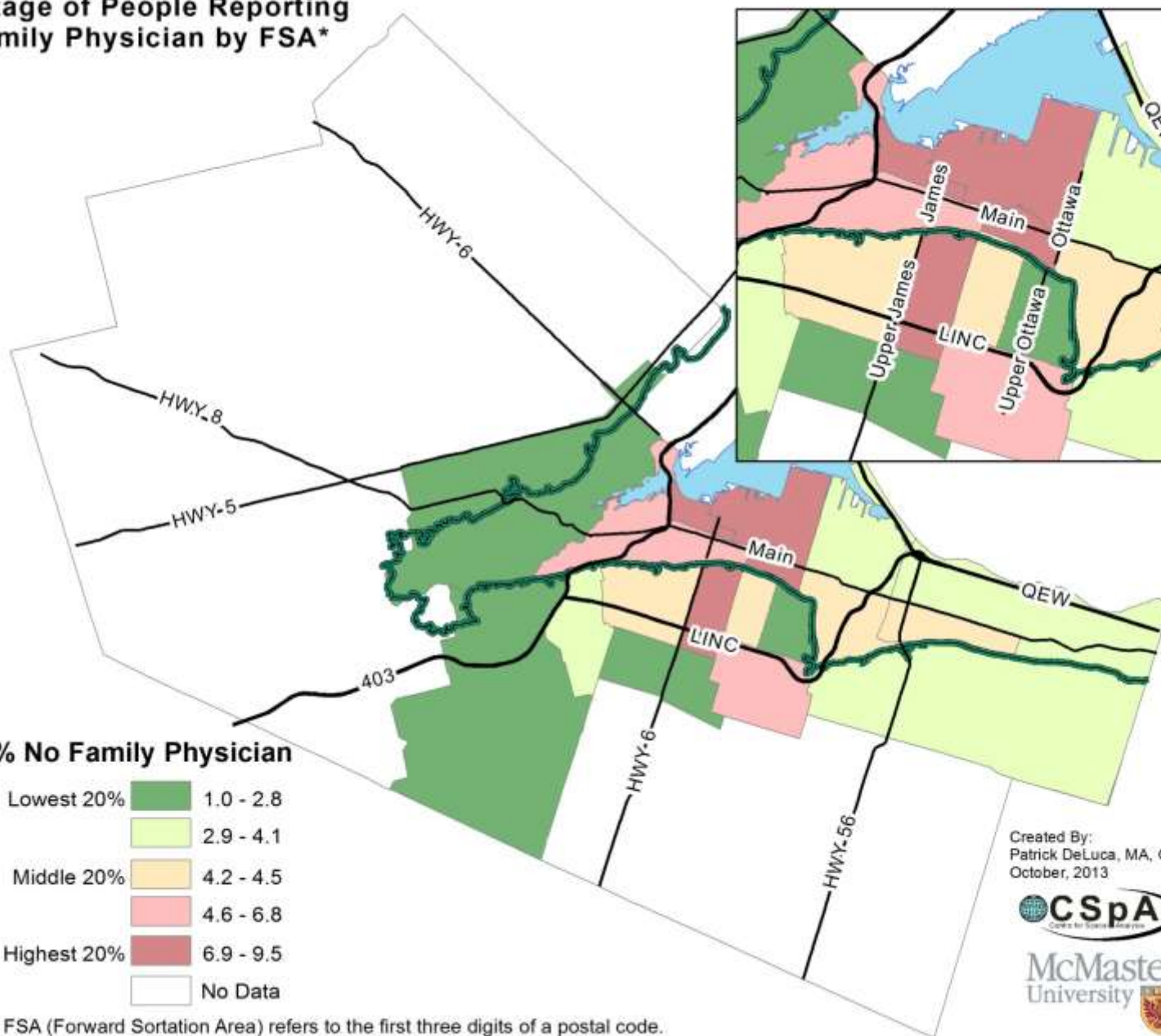
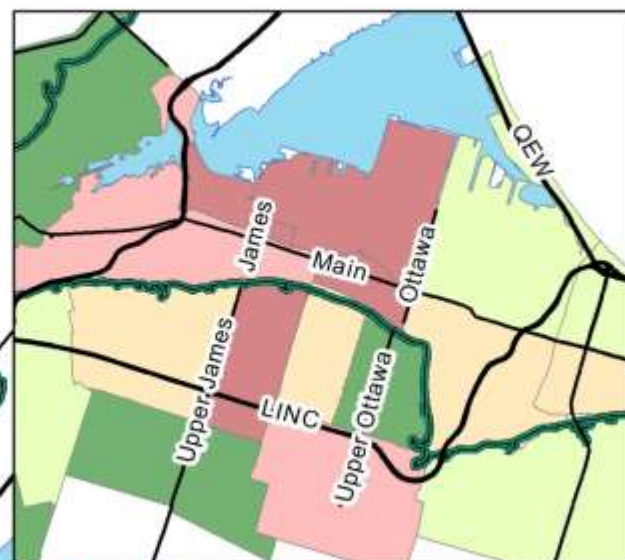


Percentage of People Reporting No Family Physician by FSA*

% No Family Physician

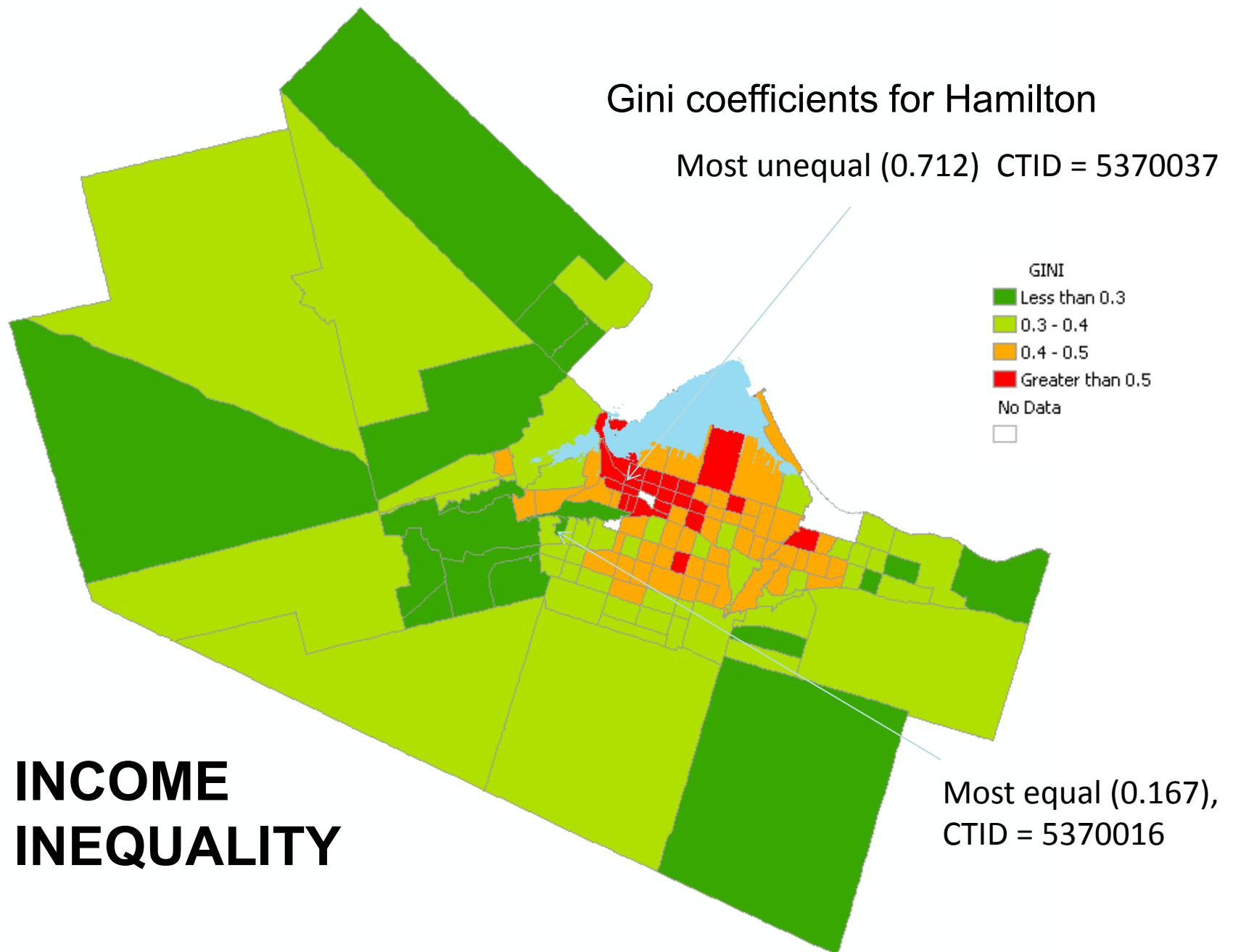


* FSA (Forward Sortation Area) refers to the first three digits of a postal code. There are 20 FSAs in Hamilton.



Created By:
Patrick DeLuca, MA, GISP
October, 2013





The inner-city neighbourhood bounded by James, Wellington, Cannon and King Streets has the highest poverty level of Hamilton's 135 census tracts.

It also has:

- the highest cancer mortality rate.
- the lowest rates of screening for three types of cancers.

It is also situated in the area of the city that reports the highest rate of people who don't have a family doctor.

Do you think that all of those things just happen to be a coincidence?

We have a checklist for patients for medical variables (e.g. existing heart condition, diabetes, hypertension).

What if we had a checklist for socioeconomic status variables too?

Are they vulnerable? Poor?

Do they suffer from mental health issues?

Do they have adequate housing?

Do they have people to support them?

Can they afford treatment (drugs, supplies etc.)?

Can they afford to even get to their treatment?

Can they follow their treatment plan?

Do they even understand their treatment plan?

Will they fall through the cracks?

Yes, we want to believe that all treatment is created equal and all people will receive equal care.

But if people can't follow it or if they fall through the cracks, then it won't be equal health care for all.

That's the bad news.

Here's the good news.

Since 2010, the reaction has been astounding:

1. City of Hamilton
2. McMaster Faculty of Health Sciences
3. Hamilton Health Sciences
4. Emergency Services pilot program
5. Hamilton school boards curriculum
6. Mohawk College
7. Hamilton Community Foundation
8. The Spectator

Thank you.

All of the Spec's Code Red
projects can be found at:
thespec-codered.com

Questions?