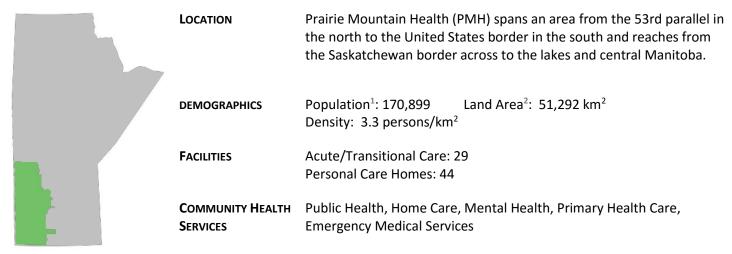
PRAIRIE MOUNTAIN HEALTH PROFILE



LOCATION AND DEMOGRAPHICS



DID YOU KNOW?

- PMH has the lowest prevalence of congestive heart failure and the lowest stroke rate in Manitoba
- There are significant disparities between the most healthy and least healthy residents in PMH
- * The highest rate of mood and anxiety disorders in Manitoba is found among PMH residents
- Diabetes prevalence is significantly higher than the Manitoba average in PMH
- The highest rate of respiratory morbidity in Manitoba is found among PMH residents and total respiratory morbidity prevalence increased significantly over time

SOCIAL AND ECONOMIC INDICATORS COMPARED TO MANITOBA

LIFE Expectancy ³	ŤŤ	Female: 83.3 > 82.8 years Male: 78.3 < 78.5 years	CHILDREN IN LOW INCOME FAMILIES ⁴		21.8% < 21.9%
Median Household Income ⁴	5	<mark>\$54,014</mark> < \$59,093	Housing Affordability ⁵	ô	Tenant: 30% < 37% Owner: 10% < 11%
EDUCATION LEVEL ^{4, 6}		17% > 14%	Unemployment Rate ⁴	ĮĮ.	6.6% < 6.8%

NOTES

¹ Manitoba Health Population Reports, 2018 ² Land area excludes the unorganized territories. ³ Manitoba Centre for Health Policy RHA Indicators Atlas, 2019 ⁴Statistics Canada 2016 Census ⁵ Housing affordability is the percentage of households spending 30% or more of total household income on shelter costs. ⁶Aged 25-64 without a high school diploma

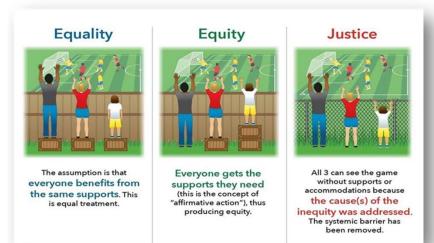
To learn more, check out the complete Community Health Assessment Report at: prairiemountainhealth.ca/CHA-2019

HEALTH STATUS IS IMPROVING FOR SOME, BUT NOT ALL

The 2019 Community Health Assessment and profile documents provide a better understanding of health gaps in our region, zones and districts. They demonstrate health disparities and inequities that exist and provide the basis to discuss

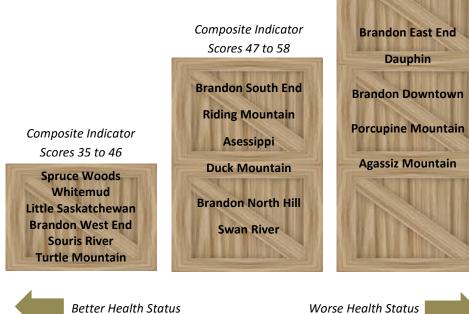
future planning efforts. The profiles provide a snapshot of health status and are to be used in conjunction with the comprehensive CHA.

As noted within the CHA, an equity perspective is crucial to reduce health disparities and improve health outcomes within PMH. Inequity in health status is evident across our region, with some segments of the population experiencing a higher burden of illness. The health status of residents is largely driven by the social determinants of health, particularly income, with individuals living in lower income areas experiencing higher rates of physical and mental illnesses.



EOUITY LENS

The following graphic depicts the most and least healthy districts within PMH (see methodology for more details):



Worse Health Status

Composite Indicator

Scores 59 to 69



Look at the profiles with an equity lens and ask:

- How does health differ and what disparities exist amongst the zones and districts?
- What changes can we make to support those who need it most?
- How can we work with partners to address disparities and social determinants of health?

METHODOLOGY

The equity lens was determined based on 26 indicators chosen from the 2019 Prairie Mountain Health Community Health Assessment. These indicators represent a cross-section of health indicators including mortality, socioeconomic factors, cardiovascular and other disease conditions, mental illness, hospital and physician use as well as quality of care. No attempt was made to give different weights to indicators; each of the 26 indicators were treated as equal for the purposes of creating a composite indicator score. The composite indicator was set on a range of 0 to 100 with PMH at the middle of the range (50). A lower score is better. PMH composite indicator scores ranged from a low of 35 (PMH best) to a high of 69 (PMH worst). An equity lens was then applied using the PMH range.