



## Goal: Healthy Human Services

Vancouverites have equitable access to high-quality social, community, and health services.

### Healthy City for All Targets

- By 2025: all Vancouver residents are attached to a family doctor.
- By 2025: increase the percentage of Vancouverites who report having access to services when they need them by 25 per cent over 2014 levels.

### Indicators in this Fact Sheet

- Health Disparities
- Health Services
- General Practitioners
- Social and Community Services
- Access to Community Hubs
- City of Vancouver Support

### Key Findings

- Access to human services is **inequitable**; health services and outcomes are shaped by a host of social and economic factors.
- Vancouver's **reputation** as a healthy and active city is not always borne out in population surveys; issues such as mental health, sense of belonging and life satisfaction show Vancouverites as less healthy.
- Ensuring equitable access to services demands **coordination** and **partnership** across different sectors and levels of government.

### Why it Matters

Health and wellbeing are shaped largely by factors outside of the health care system. The conditions in which we live, work and play have a greater impact on our overall wellbeing than do increases in health expenditures. However, our ability to access human services of various types when we need support also impacts our health and well-being, and high-quality, accessible and inclusive health, social and community services remain an important part of a healthy city for all. Services ranging from health care to emergency services to employment programs to libraries all play a critical role in the everyday functioning of our city. They help keep us safe, healthy and connected—all of which are vital to living and thriving together.

At different times in our lives we turn to human services for support: when we are sick or injured, when we lose our job or need help finding one, when we are seeking education or training opportunities, or when we have a child. This is particularly true for more vulnerable populations who may face multiple barriers to accessing services. Connecting to care can be a critical first step on the long road to greater mental and physical health and well-being.

Vancouver is perceived to be a healthy, active city. But it is not yet a healthy city for all; a coordinated, integrated approach is essential to ensuring that all Vancouverites can access the services they need to thrive.

## About this Fact Sheet

This series reports on social indicators and trends related to the 12 long-term goals of the City of Vancouver's Healthy City Strategy. More information on the Strategy is available online at [vancouver.ca/healthcity4all](http://vancouver.ca/healthcity4all). **Healthy Human Services** is about the constellation of health services, social services, amenities and facilities that give rise to health and well-being. It is concerned not just with access to the formal health care system, but also to social supports that facilitate health.

Social research is always imprecise and uncertain. Collaboration, replication and information sharing are crucial to building a more complete and rigorous picture of health and well-being in Vancouver. Readers are encouraged to provide feedback, ask questions and to engage in exploring and interpreting the information presented here.

## Areas of Study

Information in this fact sheet is presented for a number of different geographies. Comparisons between Vancouver and other cities refer to individual local governments, as defined by Statistics Canada's census subdivisions. Comparisons between Metro Vancouver and other regions refer to census metropolitan areas.

Within the City of Vancouver, this fact sheet provides information organized in two ways. Health statistics are often reported by provincially-designated health geographies. The Vancouver Health Service Delivery Area is made up of six local health areas and covers the City of Vancouver, the University of British Columbia endowment lands and the Musqueam First Nation community.



Some information is also presented in the context of Vancouver's local planning areas (neighbourhoods), illustrated in the map above right. Readers should note that the Dunbar-Southlands local area includes the Musqueam First Nation community on the Fraser River.

## Engaging with Data Sources

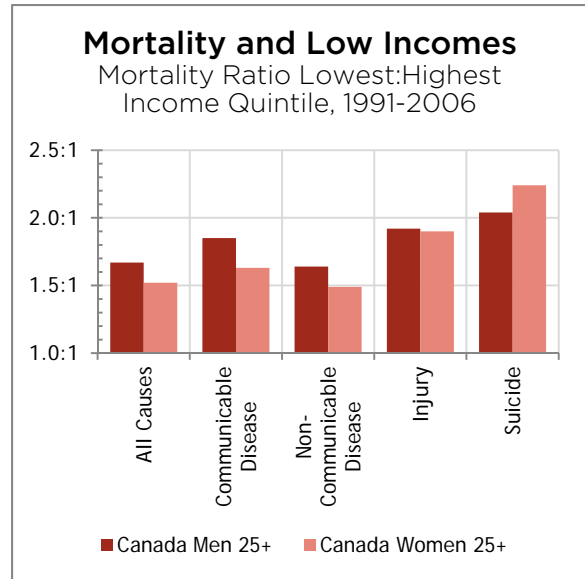
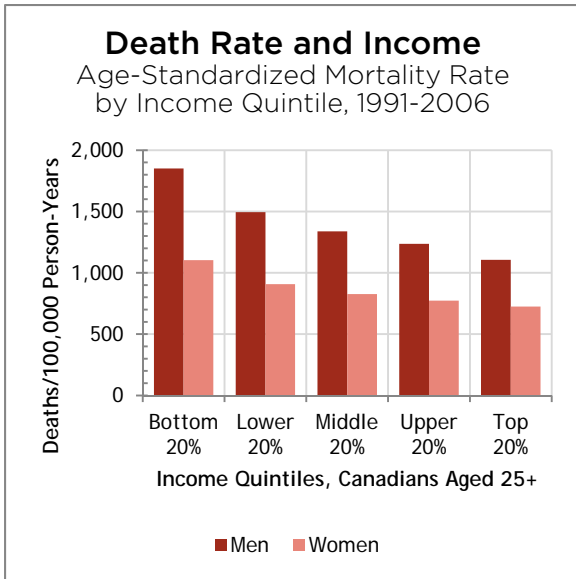
Sources used are noted in each section of this fact sheet. Key online resources include:

- CANSIM tables are viewable at [www5.statcan.gc.ca/cansim](http://www5.statcan.gc.ca/cansim).
- Information about some City of Vancouver supports and resources can be downloaded at [data.vancouver.ca](http://data.vancouver.ca).
- Social and community services are compiled by BC211 at [bc211.ca](http://bc211.ca).

**Indicator: Health Disparities**

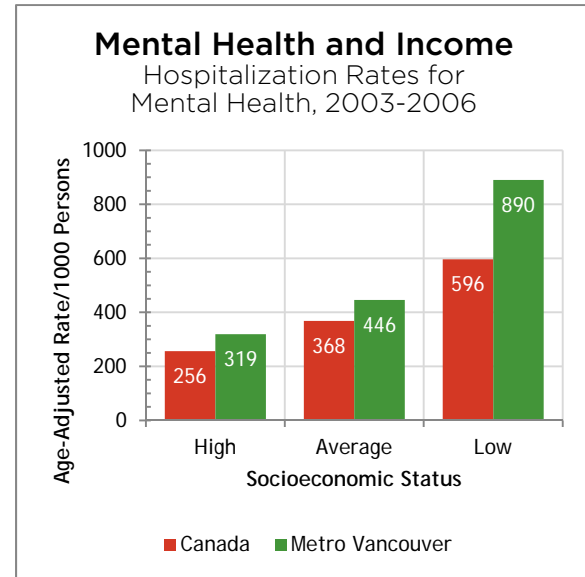
Health outcomes are shaped by a host of social and economic factors. Inequities in income, ability, gender, education and access to services can predict levels of health and well-being. When these inequities are geographical, where a person lives can be a stronger predictor of that person’s level of health and well-being than traditional health determinants like activity or lifestyle choices. To achieve a healthy city for all, these social inequities must be acknowledged and addressed.

Lower incomes are likely to lead to poorer health outcomes. Across Canada, the bottom fifth of the population has had a substantially higher death rate than the top fifth.



In British Columbia in 2008, the bottom quartile of the population by income was two-and-a-half to three times more likely to have heart disease. Vancouver Coastal Health has identified disparities in health outcomes based on many social determinants, including high school completion, health literacy, housing and homelessness, cultural background and immigrant status. Key population health priorities include addressing child and family poverty, improving early childhood development and enhancing food security.

Mental health is a prevalent issue in Vancouver. From 2003 to 2006, mental health hospitalization rates were higher for people with lower socioeconomic status, and were higher for all socioeconomic groups in Metro Vancouver compared to Canada.



**Data Sources**

Income quintile and mortality statistics are reproduced from Statistics Canada’s 2013 report *Cause-specific mortality by income adequacy in Canada: A 16-year follow-up study*, at [statcan.gc.ca/pub/82-003-x/2013007/article/11852-eng.pdf](http://statcan.gc.ca/pub/82-003-x/2013007/article/11852-eng.pdf)

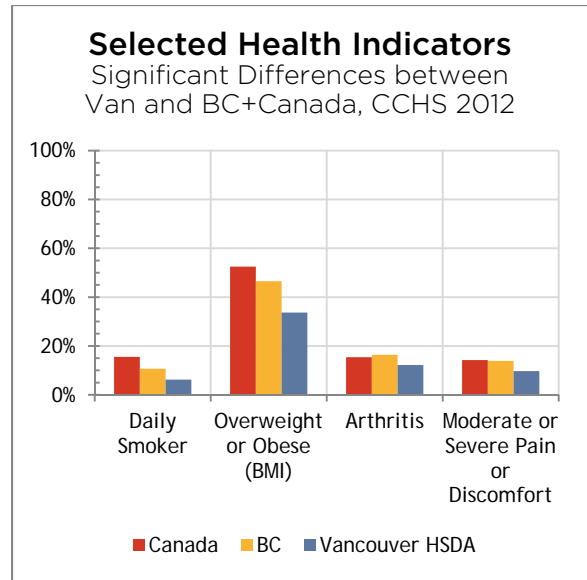
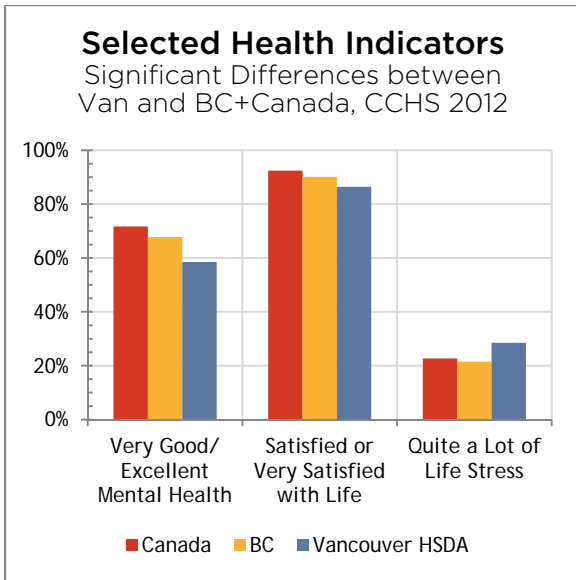
Data about income and heart disease, and discussion of Vancouver Coastal Health’s health population priorities are from that agency’s 2008 report *Reducing Health Disparities in Vancouver Coastal Health Communities: Population Health Priorities*, [vch.ca/media/VCH\\_PopulationHealthReport.pdf](http://vch.ca/media/VCH_PopulationHealthReport.pdf).

Mental health hospitalization statistics are from the Canadian Institute for Health Information, [cihi.ca](http://cihi.ca).

**Indicator: Perceived Health**

This page identifies indicators with statistically significant (at a 95 per cent confidence level) differences between the Vancouver Health Service Delivery Area and its parent geographies—British Columbia and/or Canada—based on 2012 Canadian Community Health Survey conducted by Statistics Canada.

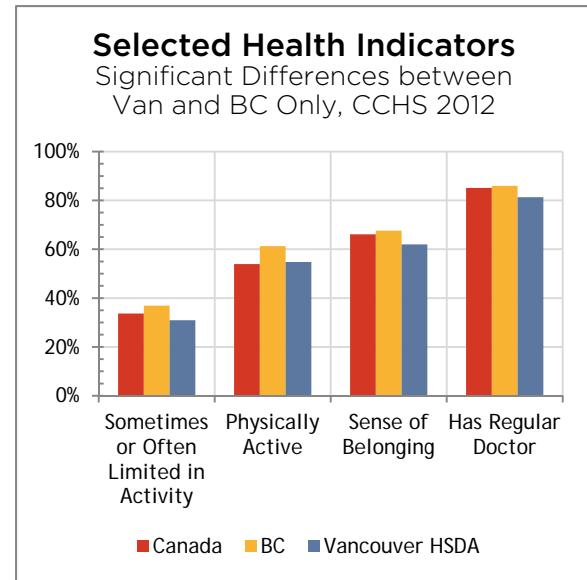
Vancouverites are relatively healthy physically, but mental health and life satisfaction are areas of concern. On the positive side, compared to both British Columbia and Canada-wide respondents, fewer people in the Vancouver HSDA were daily smokers, fewer were overweight and fewer suffered from arthritis or chronic pain. But Vancouverites were less likely to report very good or excellent mental health, less likely to be satisfied with their lives and more likely to report quite a lot of stress.



Despite its reputation as an active city, Vancouverites reported being less active than British Columbians overall, and no more active than respondents across Canada. Vancouverites were less likely to be limited in their activities than provincial respondents. But, compared to provincial respondents overall, Vancouverites were less likely to be physically active, less likely to have a sense of belonging to their community and less likely to have a regular medical doctor.

**Data Sources**

Information in this section is adapted from Statistics Canada CANSIM table 105-0501, Health Indicator Profile, Annual Estimates.



**Indicator: Health Services**

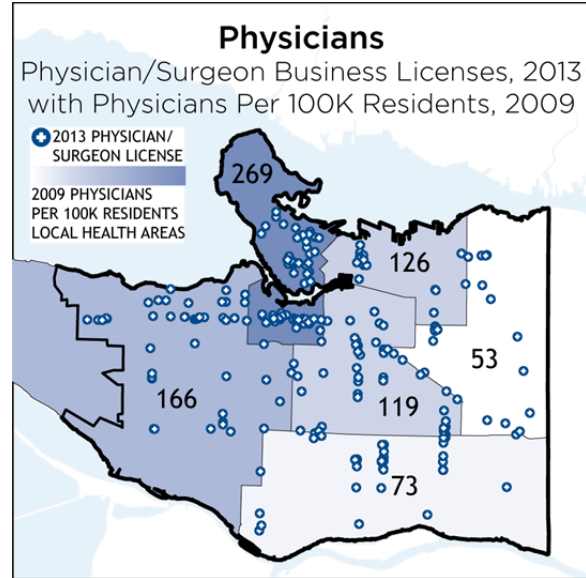
Access to health services is affected by geography, appropriateness and cost. Although access to health care is formally equal, many people face health barriers. Some people do not know how to access the health care system; many cannot afford non-covered services such as medication; and some struggle to find culturally appropriate services.

**Access to a Physician**

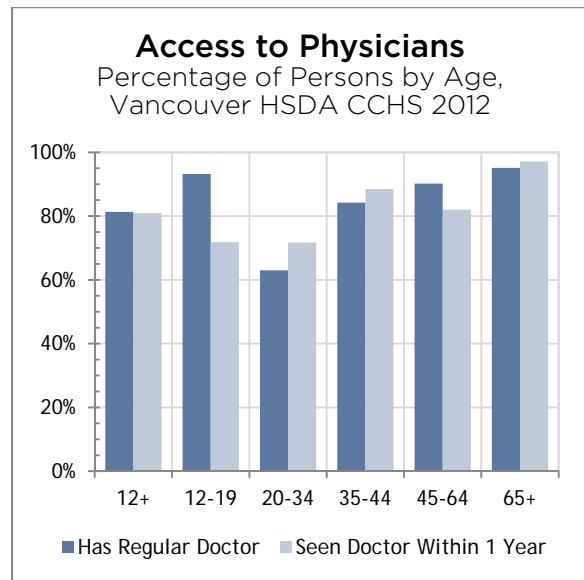
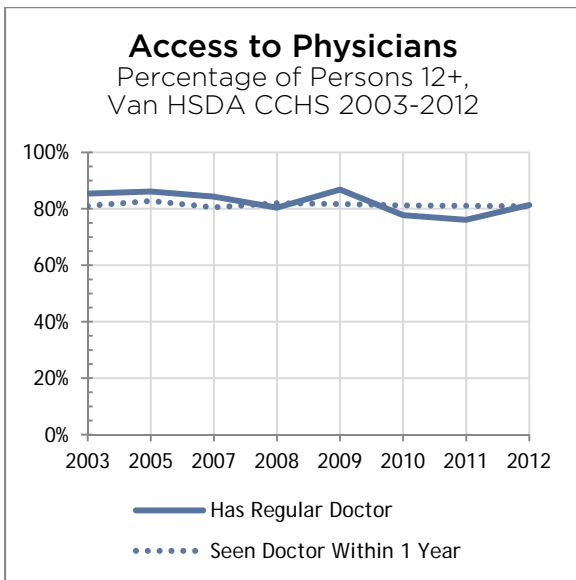
Access to a regular health practitioner is important for a strong medical system and good health outcomes. Unfortunately, reliable detailed data on access to physicians is challenging to gather for Vancouver, but this page presents two surrogate indicators: the geographical location of physicians' offices, and self-reported data collected through national surveys.

Geographically, there were 137 general physicians per 100,000 people in 2009 in the Vancouver Health Service Delivery Area (HSDA). The City Centre Local Health Area had the highest concentration of physicians and Northeast Local Health Area had the lowest.

City business license data present a somewhat more detailed, though still incomplete, picture. In 2013, many health services were concentrated in Downtown and around Vancouver General Hospital in Fairview.



Of course, the location of doctors' offices is not the only indication of residents' access to a regular doctor. Survey data expands the picture. According to the Canadian Community Health Survey, 81 per cent of respondents aged 12 and over in the Vancouver HSDA reported having a regular doctor in 2012, and a similar percentage reported having seen a doctor in the previous year. Younger and older persons are most likely to have a regular doctor, and older persons are most likely to have seen a doctor recently.



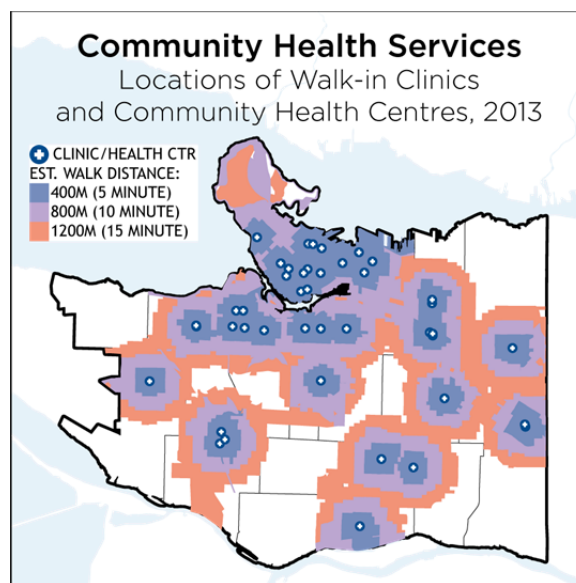
## Social Indicators and Trends 2014: Healthy Human Services

### Health Services in the City

Vancouver Coastal Health plans and delivers health services in Vancouver, including public health, mental health, residential care, home care and hospitals. Some services are delivered in partnership with other agencies, such as Providence Health Care. This page sketches the geographical distribution of these services.

There are four acute care hospitals located in Vancouver, though hospitals in Burnaby and at the University of British Columbia are also located near Vancouver and may treat Vancouver residents.

Walk-in clinics and community health centres are commonly accessed for emergent health treatment or by people who do not have access to a family doctor. Within the downtown core and central Broadway areas, a clinic is usually a short walk away, but in lower-density areas access can often be more challenging.



There are other health services which are not mapped on this page. Residential care units are distributed relatively evenly across the city. Assisted living facilities tend to be found near the Downtown and in the eastside of Vancouver. There are three hospices in Vancouver, all located in the north portion of the city.

Planning for equitable access to health services is challenging: ongoing partnerships between the health authority, local government, service providers, professionals and the public are necessary to understand how health service needs can best be met across the city and across different groups.

### Data Sources

City of Vancouver business license data on physicians and surgeons are available through the City of Vancouver open data catalogue, [data.vancouver.ca](http://data.vancouver.ca). 2009 physician per capita data are from Vancouver Coastal Health's 2013 publication series *A Health and Social Profile*.

Information on contact with physicians is adapted from Statistics Canada's CANSIM Table 105-0501, Health Indicator Profile, Annual Estimates, viewable at [www5.statcan.gc.ca/cansim](http://www5.statcan.gc.ca/cansim).

Locations of health services are adapted from Vancouver Coastal Health's service directory, [vch.ca/locations\\_and\\_services](http://vch.ca/locations_and_services) and from the BC Government's HealthLinkBC directory at [healthlinkbc.ca](http://healthlinkbc.ca).

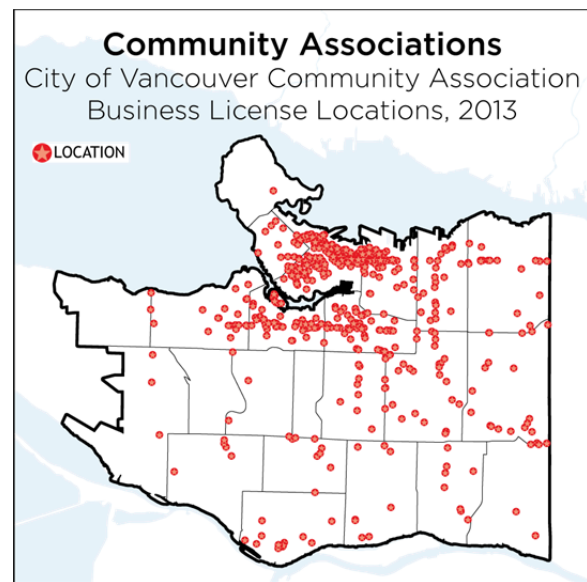
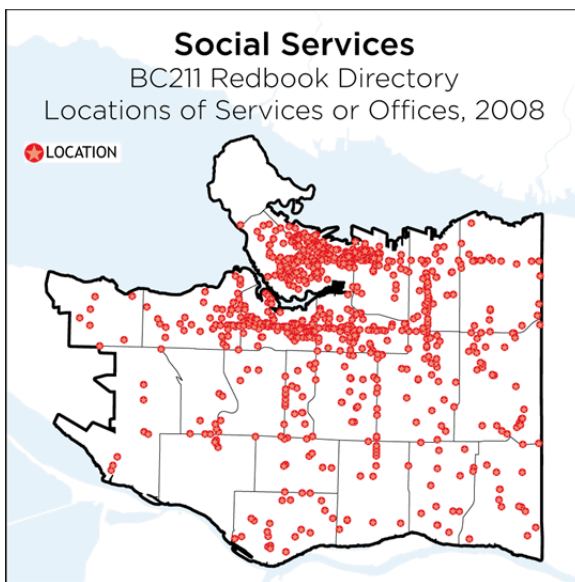
Information on the number of services by area is from Vancouver's Coastal Health's summer 2013 *Health and Social Profile* report on service levels, demographics and health outcomes in local health areas.

## Indicator: Social and Community Services

Vancouver has a large service sector. A number of organizations work to promote improved health and well-being for Vancouverites. Many people, particularly members of vulnerable and marginalized groups, rely on services to help access basic needs, to receive support and compassion, to build skills and to connect and engage with their community. Services can build a more just, equitable and inclusive city, and they can build capacity by allowing all residents to participate in their city as citizens.

The two maps below illustrate the distribution of social services and non-profit organizations across the city. In general, it can be seen that services are often concentrated in the downtown core and along major transit corridors such as Broadway. Services and organizations are more likely to be found on the east side of Vancouver than the west side.

This fact sheet presents locations only. Understanding and analyzing social services is a complex process, requiring robust data, definitions and a full understanding of the services provided by agencies and their objectives for serving the community.



### Data Sources

BC211 is a service directory available by phone or online at [bc211.ca](http://bc211.ca). The dataset mapped is from 2008, and so the map should be interpreted as a general illustration rather than a complete or up-to-date picture of services. Note also that locations may be where service delivery occurs or an organization's office.

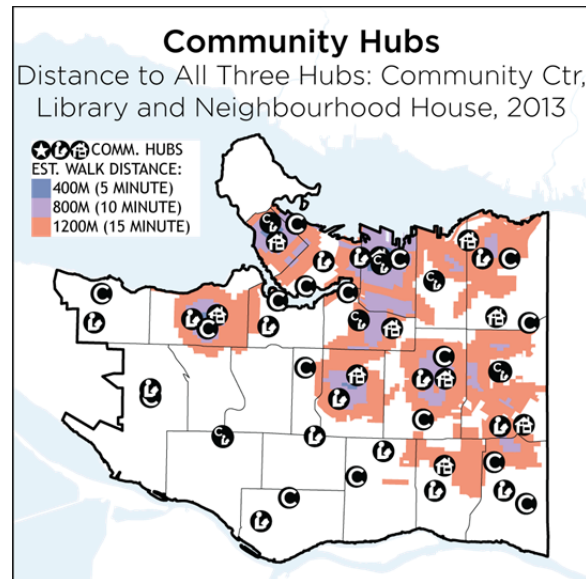
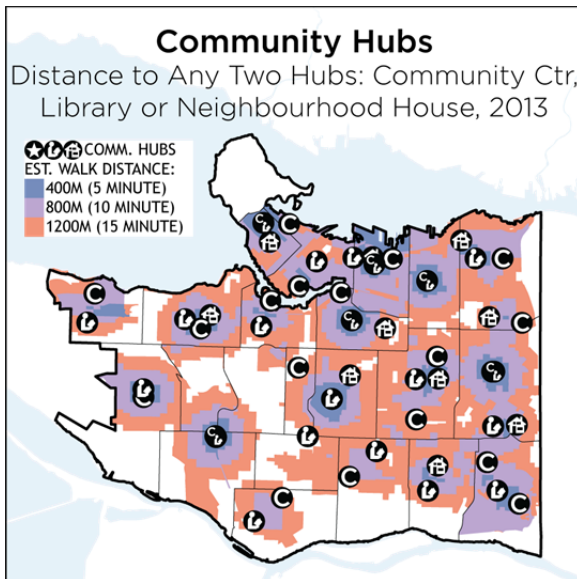
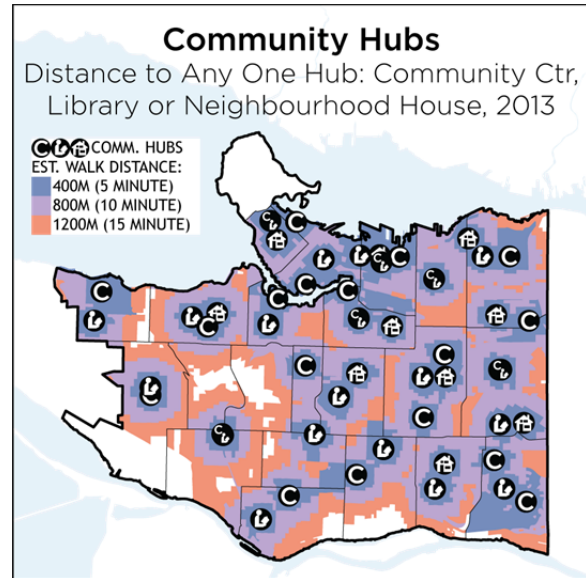
Business license data are available through the City of Vancouver open data catalogue, [data.vancouver.ca](http://data.vancouver.ca). Community Association licenses are granted to a society or organization in good standing under the Society Act or registered under the Income Tax Act as a charitable group. Although there is a correlation between this map and service locations, it must be remembered that not all service providers are community associations, and not all community associations provide direct service.

**Indicator: Access to Community Hubs**

Community hubs, including community centres, libraries and neighbourhood houses, are spaces where people can connect with others, participate in programs and relax in a safe space. Access to services is determined by location, affordability and appropriateness. A full assessment of these factors is beyond the scope of this fact sheet. This section presents some general analysis of the geographical distribution of community hubs.

Almost all Vancouverites live within a 15 minute walk (1,200 meters) of at least one of a library, community centre or neighbourhood house. Slightly fewer (82 per cent) live within 1,200 metres of two or more types of facilities, and only 43 per cent live within 1,200 metres of all three facility types.

Community Hubs Estimated Percentage of Population Within Selected Distances, 2011			
Hub Type	<400m	<800m	<1200m
Community Centre	21%	53%	85%
Public Library	21%	54%	85%
Neighbourhood House	13%	34%	54%
Any One Type	43%	82%	97%
Any Two Types	10%	46%	84%
All Three Types	2%	14%	43%



**Data Sources**

Locations of libraries and community centres are available through the City of Vancouver open data catalogue, [data.vancouver.ca](http://data.vancouver.ca). Block-level population estimates from Statistics Canada’s 2011 Census of Population are used to calculate the proportion of Vancouver’s population falling within selected radii. Note that distances are “crow flight” distances, rather than reflecting the street pattern, and actual walking conditions vary.

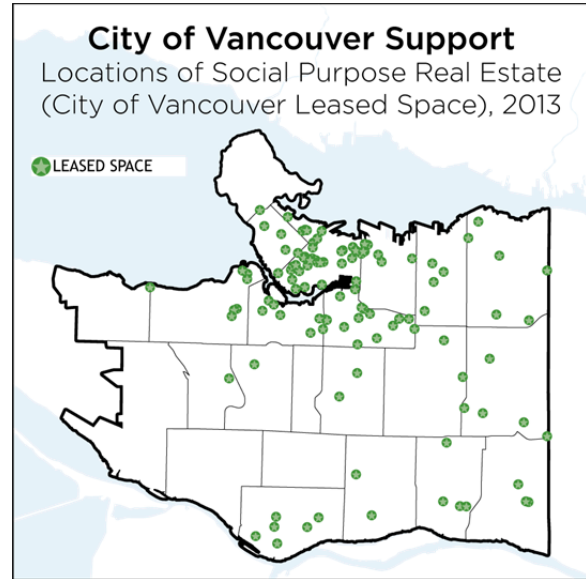
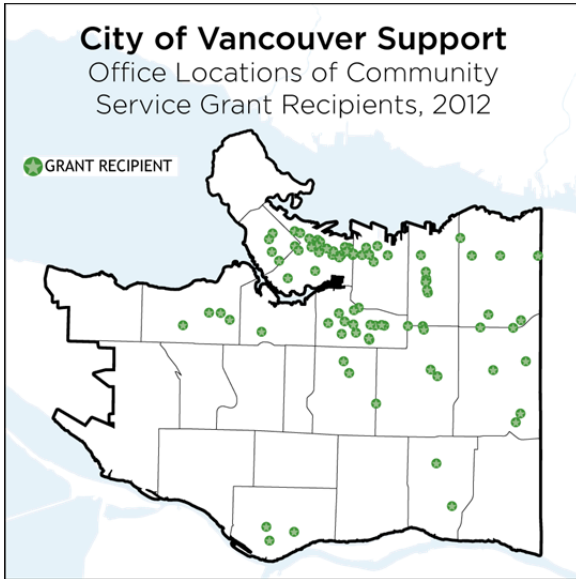
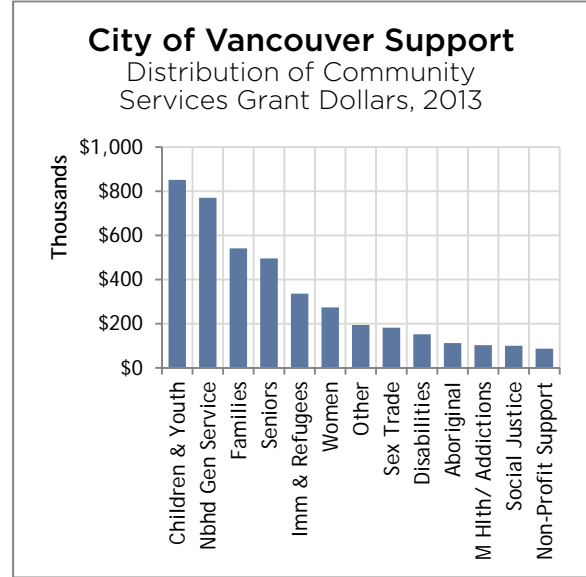


**Indicator: City of Vancouver Support**

The City of Vancouver supports services in Vancouver through a variety of mechanisms. Funding through Community Services Grants supports organizations providing a range of social services, including youth outreach, newcomer supports and mental health services.

City funding is only a small part of sustaining healthy human services. Community Services Grants typically represent 19 per cent of revenue for programs. Building on this core funding, programs are also frequently able to leverage the City’s commitment to seek support from a range of other funding sources; this translates into approximately \$4 leveraged for every \$1 invested by the City.

In addition, the City provides in-kind support to community organizations through subsidized space in some City-owned property. The map below and to the right shows where these properties are located. Space is used for a number of purposes, including the provision of childcare, office space for non-profit organizations and creative spaces for arts and culture.



**Data Sources**

Information about City of Vancouver Community Services Grants is available at [vancouver.ca/people-programs/social-and-sporting-event-grants](http://vancouver.ca/people-programs/social-and-sporting-event-grants). Grants are awarded by City Council each year.

A list of City-owned properties is available in the City of Vancouver’s open data catalogue, [data.vancouver.ca](http://data.vancouver.ca).

### Toward a Healthy City for All

#### Setting Goals

Questions raised:

- How do we address health inequities?
- How do we think holistically about health and wellbeing?
- How do we shift our approach to health from one of crises response to one of prevention?

Answering these will be a complex challenge, requiring partnerships between the City of Vancouver, other levels of government, service providers and the private sector.

#### The City's Role



Key areas in which the City can show leadership include:

- Providing **grants** to social services.
- Providing **subsidized rent** on City owned property or rental subsidies to non-profits.
- **Advocating** senior governments for improved and expanded services.
- Creating progressive **policy** that supports strategies to improve access and quality services.

#### Priority Actions

Some specific actions the City may undertake include:

Fulfilling goals in the Vancouver Coastal Health and City of Vancouver Memorandum of Understanding, including:

- developing healthy public policy; and
- improving access to City and VCH services for vulnerable groups Innovate low barrier models to improve health and well-being of the most vulnerable populations.

Additional priority actions include:

- developing strategies to better address mental health challenges in the community, such as work through the Mayor's Task Force on Mental Health;
- implementing actions outlined in the Age Friendly Action Plan, such as dementia-friendly adult programs and grants supporting services for at-risk and vulnerable seniors,

#### Your Turn

Learn more and get involved at [vancouver.ca/healthcity4all](http://vancouver.ca/healthcity4all).