





Northern Saskatchewan Health Indicators

Health Status: well-being and weight status

2023

Population Health Unit

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Refer to A Guide to the Reports: Understanding the Presentation of Data for an explanation of the variety of ways data is presented.

Suggested reference: Quinn B, Irvine J. Northern Saskatchewan Health Indicators, Health Status: Weight Status and Well Being. Athabasca Health Authority and Saskatchewan Health Authority, Population Health Unit, La Ronge, 2023.

Copies of this document and related reports can be downloaded from the Population Health Unit website www.pophealthnorthsask.ca







KEY MESSAGES

For the purpose of this report, northern Saskatchewan refers to the former health regions of Mamawetan Churchill River, Keewatin Yatthé and the Athabasca Health Authority.

Weight Status

The Canadian Community Health Survey (CCHS) uses Body Mass Index (BMI) to classify individuals into several weight classifications including underweight, normal weight, overweight, and obese. Overweight and obesity are defined as abnormal or excessive fat accumulation that may impair health. Body mass index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity in adults. CCHS defines overweight and obesity as follows: overweight is a BMI greater than or equal to 25; and obesity is a BMI greater than or equal to 30. For a more detailed description of their methods please refer to data notes in appendix A [1].

Overall, northern Saskatchewan tends to report higher levels of overweight and obesity compared to the province, although these differences are not statistically significant.

Overweight

The proportion of the northern Saskatchewan population living off-reserve and aged 18 years and above identified as overweight has increased between 2015-2016 and 2019-2020, from 26.2% to 40.1%, although this did not reach statistical significance. In 2019-2020, northern Saskatchewan also had very similar rates of person's identified as overweight, compared to other northern regions in Canada.

Obesity

Rates of obesity in the off-reserve northern Saskatchewan population aged 18 years and above remained relatively stable between 2015-2016 and 2019-2020, ranging from 40-48%. During the same time period, rates in Saskatchewan ranged between 31-35%. In 2019-2020, northern Saskatchewan had similar rates of obesity, compared to other northern regions in Canada.

Well Being

Overall, compared to the province, northern Saskatchewan off-reserve adult population tends to report lower rates of self-reported health and mental health, and higher rates of perceived life stress, although these differences are not statistical significant.

Self-reported Health

Self-reported health refers to those who reported perceiving their own health status, not only the absence of injury and disease but also overall physical, mental and social wellbeing, as being either excellent or very good. Rates of excellent or very good self-reported health in northern Saskatchewan ranged from 43-52%, compared 58-60% in the province. Within northern Saskatchewan, similar rates were seen between males and females, during the same time period. Northern Saskatchewan had lower rates compared to other northern regions in Canada, although this did reach statistical significance.







Self-reported Mental Health

Self-reported mental health refers to those who reported perceiving their own mental health status as being either excellent or very good. Self-reported mental health provides a general indication of the population suffering from some form of mental disorder, mental or emotional problems, or distress, not necessarily reflected in self-reported health. The proportion of the northern population reported mental health as excellent or very good declined from 62% in 2017-2018 to 50% in 2019-2020, although the decline did not reach statistical significance. Similarly, rates in Saskatchewan declined during the same time period from 68% to 62%. Rates ranged from 51% to 62% in females and 44% to 70% in males. In 2019-2020, the overall rate in northern Saskatchewan (49.8%) tended to be lower than most other northern regions in Canada, which ranged from 53.6%-69.7%.

Perceived Life Stress

Perceived life stress refers to the population perceiving that most days in their life were quite a bit or extremely stressful. Self-reported rates of life stress in northern Saskatchewan increased from 18.4% to 33.8% between 2015-2016 and 2019-2020, although this did not reach statistical significance. Comparatively, rates in Saskatchewan remained relatively stable ranging between 17-19%. Compared to other northern regions in Canada, northern Saskatchewan's rate of 34% was higher in 2019-2020, although this was not statistically greater.







HEALTH STATUS

Weight Status

Figure 1: Population aged 18 and over, off-reserve, classified as overweight, northern Saskatchewan and Saskatchewan, 2015-2016 to 2019-2020

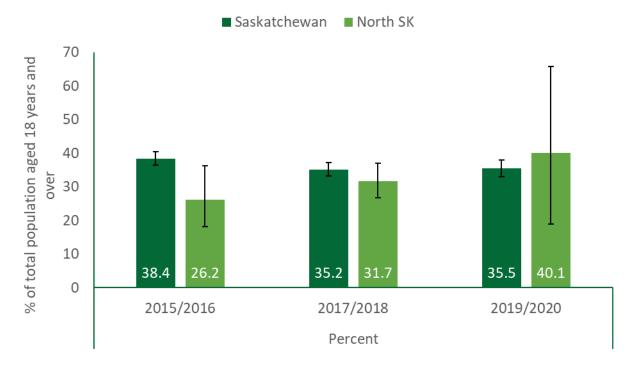


Figure 2: Population aged 18 and over, off-reserve, classified as overweight, by northern region, 2019-2020

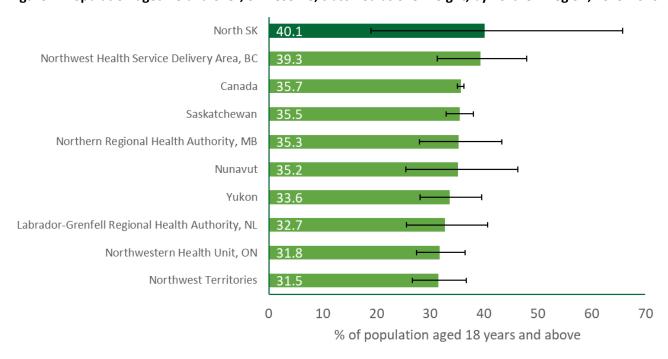








Figure 3: Population aged 18 and over, off-reserve, classified as obese, northern Saskatchewan and Saskatchewan, 2015-2016 to 2019-2020

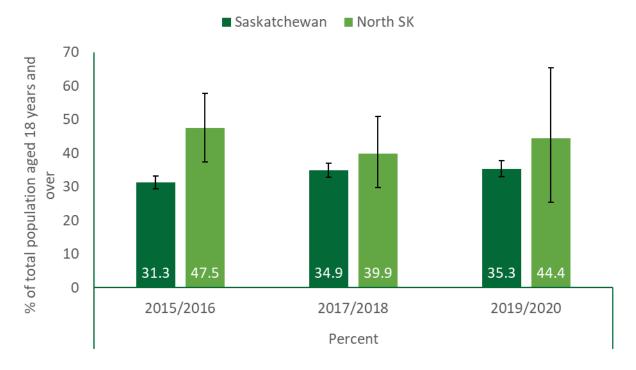
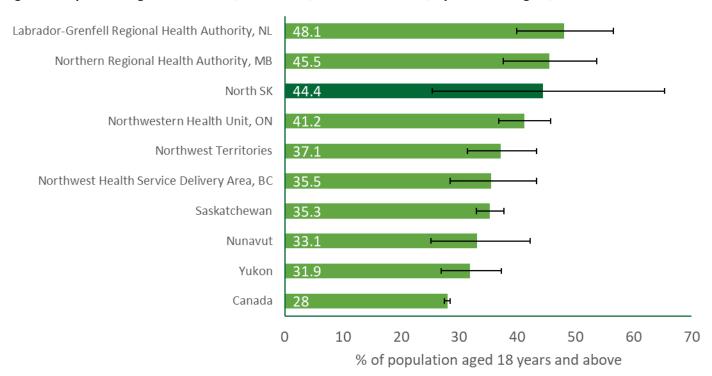


Figure 4: Population aged 18 and over, off-reserve, classified as obese, by northern region, 2019-2020









Well Being

Figure 5: Population aged 12 and over, off-reserve, who reported perceiving their own health status as very good or excellent, northern Saskatchewan and Saskatchewan, 2015-2016 to 2019-2020

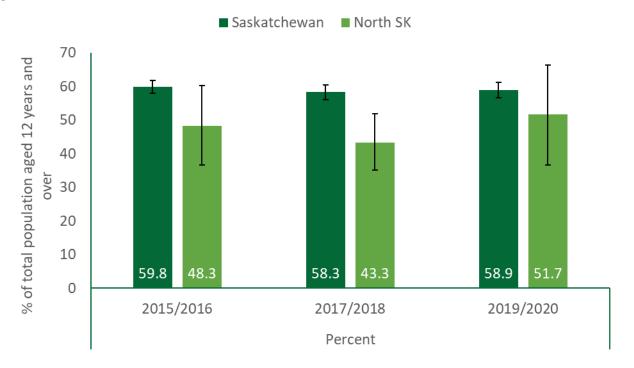


Figure 6: Population aged 12 and over, off-reserve, who reported perceiving their own health status as very good or excellent, northern Saskatchewan by sex, 2015-2016 to 2019-2020

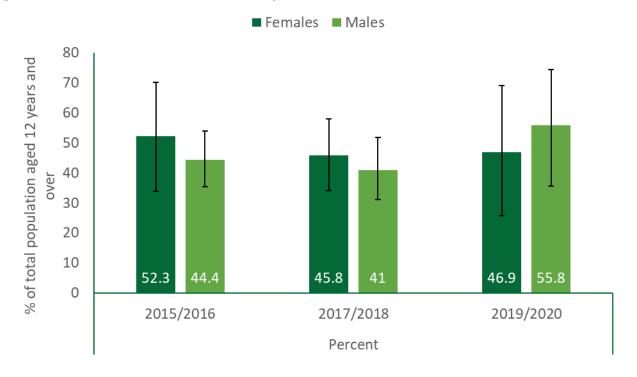








Figure 7: Population aged 12 and over, off-reserve, who reported perceiving their own health status as very good or excellent, by northern region, 2019-2020

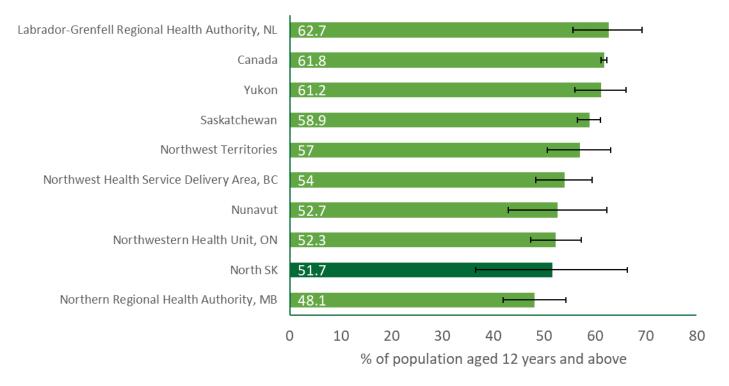


Figure 8: Population aged 12 and over, off-reserve, who reported perceiving their own mental health status as very good or excellent, northern Saskatchewan and Saskatchewan, 2015-2016 to 2019-2020

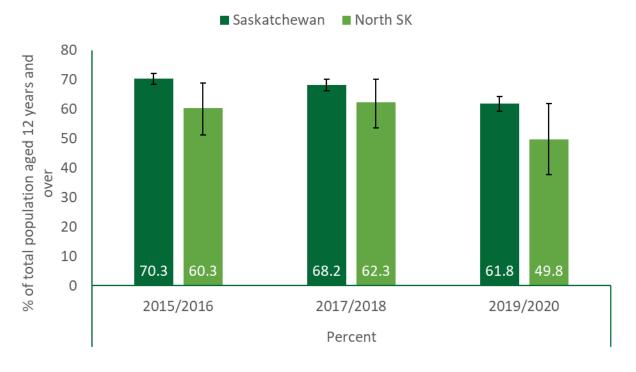








Figure 9: Population aged 12 and over, off-reserve, who reported perceiving their own mental health status as very good or excellent, northern Saskatchewan by sex, 2015-2016 to 2019-2020

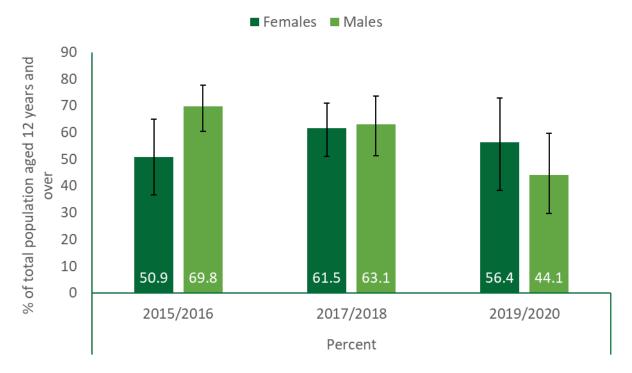


Figure 10: Population aged 12 and over, off-reserve, who reported perceiving their own mental health status as very good or excellent, by northern region, 2019-2020

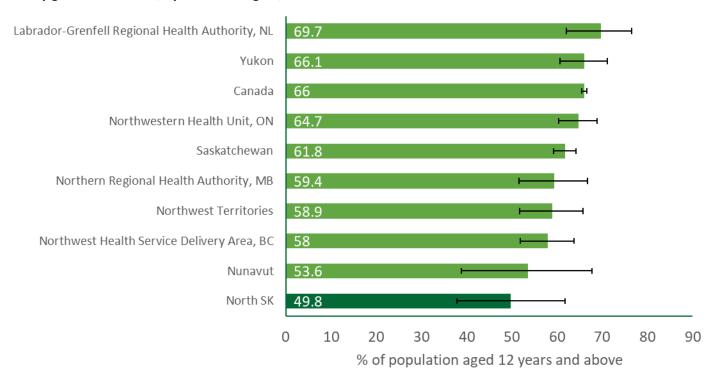








Figure 11: Population aged 12 and over, off-reserve, who reported that most days in their life were quite a bit or extremely stressful, northern Saskatchewan and Saskatchewan 2015-2016 to 2019-2020

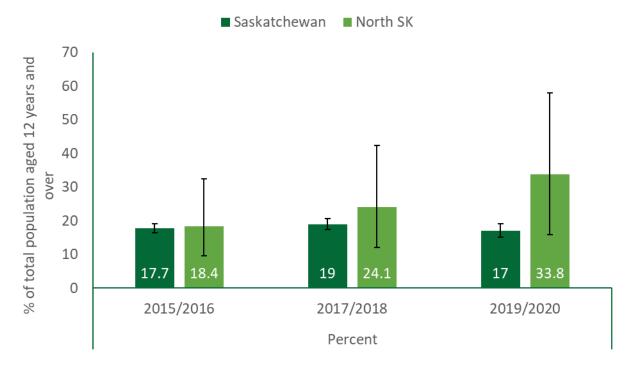
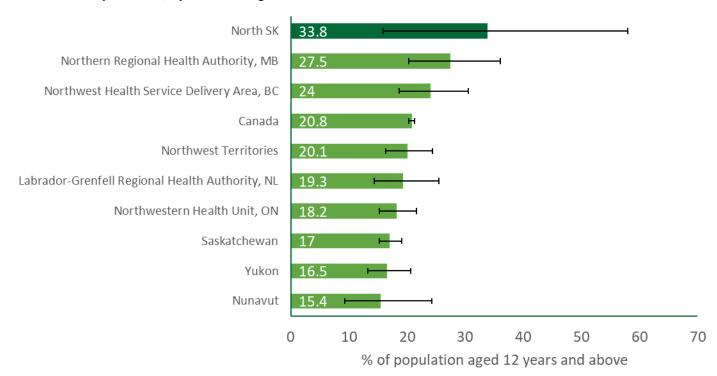


Figure 12: Population aged 12 and over, off-reserve, who reported that most days in their life were quite a bit or extremely stressful, by northern region 2019-2020









APPENDIX A – DATA NOTES

Data Sources

Canadian Community Health Survey two-year file table 13-10-0113-01. The CCHS is a Statistics Canada cross-sectional survey that collects information related to health status, health care utilization and health determinants for the Canadian population. The CCHS covers the population 12 years of age and over living in the ten provinces and the three territories. Excluded from the survey's coverage are: persons living on reserves and other Aboriginal settlements in the provinces; full-time members of the Canadian Forces; the institutionalized population, children aged 12-17 that are living in foster care, and persons living in the Quebec health regions of Région du Nunavik and Région des Terres-Cries-de-la-Baie-James. Altogether, these exclusions represent less than 3% of the Canadian population aged 12 and over. In the Canadian north, the frame for the CCHS covers 94% of the targeted population in the Yukon, 96% in the Northwest Territories and 93% in Nunavut. In northern Saskatchewan, the former health regions of Mamawetan Churchill River, Keewatin Yatthé and the Athabasca Health Authority are grouped together to provide one north wide off-reserve estimate. The CCHS produces an annual file and a file combining two years of data. Due to small sample size, data for northern Saskatchewan is always based on the two-year table files. Table 13-10-0113-01 contains two-year estimates from the 2015-2016, 2017-2018 and 2019-2020 years.

Data Notes

<u>Presentation of Data (e.g. numbers of death, crude rates, age-standardized rates)</u> – For a full description of crude rates, age-adjusted rates, and raw numbers, please refer to "A Guide to the Reports – Understanding the Presentation of Data" report on the Population Health Unit website:

(http://www.populationhealthunit.ca/mrws/filedriver/Health Indicator reports/A Guide to the Reports Understanding the Presentation of Data.pdf).

<u>Weight Classification</u> – The CCHS uses BMI to classify individuals into several weight classifications including underweight, normal weight, overweight, and obese. BMI is a method of classifying body weight according to health risk. According to the World Health Organization (WHO) and Health Canada guidelines, health risk levels are associated with each of the following BMI categories: normal weight = least health risk; underweight and overweight = increased health risk; obese, class II = very high health risk; obese, class III = extremely high health risk.

BMI is calculated by dividing the respondent's body weight (in kilograms) by their height (in metres) squared. The CCHS calculates BMI for the population aged 12 and over, excluding pregnant females and persons less than 3 feet (0.914 metres) tall or greater than 6 feet 11 inches (2.108 metres). The CCHS uses the WHO and Health Canada guidelines for body weight classification for the population aged 18 and older: less than 18.50 (underweight); 18.50 to 24.99 (normal weight); 25.00 to 29.99 (overweight); 30.00 to 34.99 (obese, class II); 40.00 or greater (obese, class III).

A systematic review of the literature concluded that the use of self-reported data among adults underestimates weight and overestimates height, resulting in lower estimates of obesity than those obtained from measured data. Using data from the 2005 CCHS subsample, where both measured and self-reported height and weight







were collected, BMI correction equations were developed. The data in table 13-10-0113-01 present's self-reported obesity estimates that are adjusted using these equations.







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REFERENCES

1. Organization, W.H. *Obesity and Overweight*. 2023 [cited 2023 March 31, 2023]; Available from: https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight.





