



**Mayne Island Health Survey  
Final Report  
October, 2007**

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# Mayne Island Health Survey Report

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# 1. SUMMARY

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## Background:

The Mayne Island Health Association has been in existence for more than 30 years. Recently, the management of the Mayne Island Health Centre, which previously occupied a good deal of the Health Association board's time, was taken over by the local Improvement District. With this in mind, the Health Association decided that it was time to review its mandate.

The Association determined that a first step in doing this was to find out what health-related issues were most important to residents of Mayne Island. In addition, the Health Association decided to make an effort to gather some information about the health status of islanders, with a view to planning for health promotion and education activities in the coming years and to provide a baseline for future research.

These goals were expected to be accomplished through a survey of Mayne Island residents.

## Methodology:

- The survey was developed using:
  - a) Questions related to islanders health that could be compared to national health indicators
  - b) Open ended questions asked for information on what could be done to improve the health of respondents and their families; what could be done to improve the health of islanders overall and what were the most important issues for the Health Association to focus on in the coming three years. The questions were similar to those used in surveys of Pender Island residents in 1994 and 2005.
- Survey questions were reviewed by Dr Losier and other local health care providers and some changes were made, based on their professional advice.
- The confidential survey was conducted in the month of April, 2007. Two surveys with return envelopes were sent to each household in the community, additional surveys were made available in the community and an online survey (using the Survey Monkey tool) was posted on the Mayne Island website. Promotion efforts included advertising in the Mayneliner publication, posters in public places and an announcement on the Mayne Island website. In addition, board members provided encouragement to respond through phone calls, emails and announcements at community meetings. Various drop-off boxes were distributed in the community.
- 431 individuals responded to the survey with the majority of respondents submitting surveys in paper format. Volunteer board members entered the data from the paper surveys to the Survey Monkey, which automatically calculated percentages related to the responses.
- Mayne Island residents, researchers Dr Charles Krebs and Alice Kenney kindly performed some statistical analysis of the data.
- Answers to the four open-ended questions were subjected to analysis, using accepted methods of coding and categorizing the data.
- A preliminary report was drafted for discussion with Dr Losier and to provide information to a VIHA service review.

- Some comparisons between the Mayne Island data and national health statistics were made and a final report was written.

### **Limitations:**

1. While the survey results can be viewed as being statistically significant, they do not represent the opinions of all islanders.
2. Responses from the age group 35 years or less is poorly sampled.
3. ALL Survey respondents did not answer every question.
4. Interpretation of the data was conducted by a volunteer researcher who is not a health care professional.

### **Findings:**

#### **Related to the self rated health status of islanders**

Amongst survey respondents:

1. Self-rating of physical and mental health status was similar to that of the overall Canadian population and that of the population in the South Vancouver Health Service Delivery Area
2. 61% of 411 survey respondents reported that they had accessed medical services at the Mayne Island Health Centre
3. It appears that a reasonably high percentage of respondents are accessing appropriate medical testing
4. High blood pressure (43%), high cholesterol (30%) and arthritis (31%) are the most prevalent diagnosed health conditions
5. The health status of the 45-55 year olds (indicated by diagnosis of disease) shows some decline with aging - with high blood pressure, high cholesterol and allergies being the most prevalent diagnoses
6. A significant number of respondents (51 individuals) have conditions that hinder their mobility
7. Stress (113 individuals), anxiety (71) and depression (52) are the most prevalent mental health risks reported
8. Overall immunization rates (flu, pneumonia and childhood immunizations) are 63% or lower
9. 185 respondents believe they would be healthier if they lost weight
10. A small percentage of respondents have experienced concerns related to family violence
11. Volunteerism (69%), social support (82%) and a sense of belonging (87%) are relatively high on the island

12. A small percentage of respondents have been unable to fill prescriptions because of cost
13. 54 respondents have been unable to access dental care because of cost
14. A small percentage of respondents have been unable to access appropriate medical care because of transportation problems
15. 9% of 409 respondents smoke daily and of these, 70% would like to quit
16. 73% of 421 respondents consume three or more servings of fruits and vegetables daily
17. 48.5% of respondents engage in moderate exercise 4-6 times a week and 24% of islanders engage in vigorous exercise 4-6 times a week
18. 23% of respondents never use sunscreen
19. There is a reasonably high level of awareness of some health related services, particularly those established on-island and a lesser level of awareness of services provided by off-island service providers.

### **Related to islander's priorities**

Amongst survey respondents:

1. Increased availability of physician/nurse/emergency coverage is the top priority of respondents *relative to their own health and that of their households*. Some respondents indicated concerns related to the stability of ambulance services.
2. Increased physician/nurse coverage, programs to promote health/wellness and health education were the top priorities of respondents *relative to the general health and well being of islanders*.
3. Pharmacy, laboratory services, services of a variety of health professionals and services for seniors are the top of the list of services that respondents believed *could be delivered on island; closer to home*.
4. Physician/nurse/emergency services; issues related to an aging population and health promotion activities were the top three areas that respondents believed were the *most important for the Health Association to address*.

### **Recommendations:**

The following recommendations are generated from the information gathered in the survey:

#### **Medical services**

1. Advocate directly with VIHA, BC Ambulance and through the Southern Gulf Islands Advisory Committee for adequate physician/nurse/laboratory/emergency services to meet the needs of the resident and visiting population now and as the elderly population increases.  
A preliminary step in doing so will involve clarifying how many patients the local physician currently has on her caseload; how many patients she can carry on her caseload and how

many individuals are being turned down as patients (generate wait list?). Remain aware of any issues related to physician/nurse/on call/ambulance services and take action where appropriate and possible.

2. Work with local health care providers to ensure that islanders have clear information on the services that are available, who can access these services and how to do so and what to do in emergency situations. Compile and circulate a comprehensive directory of available services, eligibility criteria and access information
3. Work with VIHA to establish more effective/accessible mental health services
4. Investigate options for improving access to pharmacy
5. Investigate options for increased access to alternative health care providers.
6. Work with the Assisted Living Society and other organizations supporting seniors to continue to provide and enhance support services to Mayne Island elders.

### **Health promotion/prevention services**

1. Consult with the local physician and other health care providers to determine which (if any) areas of islander's health would benefit from increased testing and raise awareness in the community accordingly.
2. Provide some education on prevention and remediation of diseases such as high blood pressure, arthritis and high cholesterol. Investigate options for providing blood pressure clinics, walking groups and other exercise programs for middle aged individuals and seniors.
3. Work to increase safe access to public buildings and businesses on the island and provide information and education about falls prevention.
4. Increase community awareness of the potential benefits and risks of immunizations
5. Encourage the Community Centre Association and other groups who are involved, or could potentially be involved in fitness activities to increase the availability of fitness programs for people of all ages on Mayne Island.
6. Publicize information on BMI and obesity.
7. Provide clear information on how to access timely, confidential help in matters of family violence.
8. Encourage a community-wide effort by local associations and groups to make island residents (including newcomers) aware of the various opportunities for volunteerism and how to become involved
9. Investigate the provision of resources/support that would help smokers to quit
10. Work with local retailers and producers to ensure the availability of fresh produce, encourage continued support of local farming as well public awareness raising of the benefits of an adequate number of servings of fruit and vegetables

11. Increase local awareness of the prevalence of skin cancer and how it can be prevented
12. Find ways to assist residents who are unable to access prescriptions because of cost and off-island medical services because of transportation problems.
13. As mentioned in the Limitations section of this report, the under 35 population of Mayne Island is under represented in this research. However, it is recommended that attention be paid to the health and welfare of island children and families. Survey respondents mentioned the need for affordable housing, employment, and activities for younger children and families. The maintenance of a diversity of age groups on the island will help to ensure that the community remains viable.

## **Conclusions:**

For a small volunteer organization with no sustainable funding, the array of issues that could potentially be addressed is somewhat overwhelming, and perhaps the first piece of work the Health Association might do is to use this research as a basis from which to review its mandate by asking the following questions:

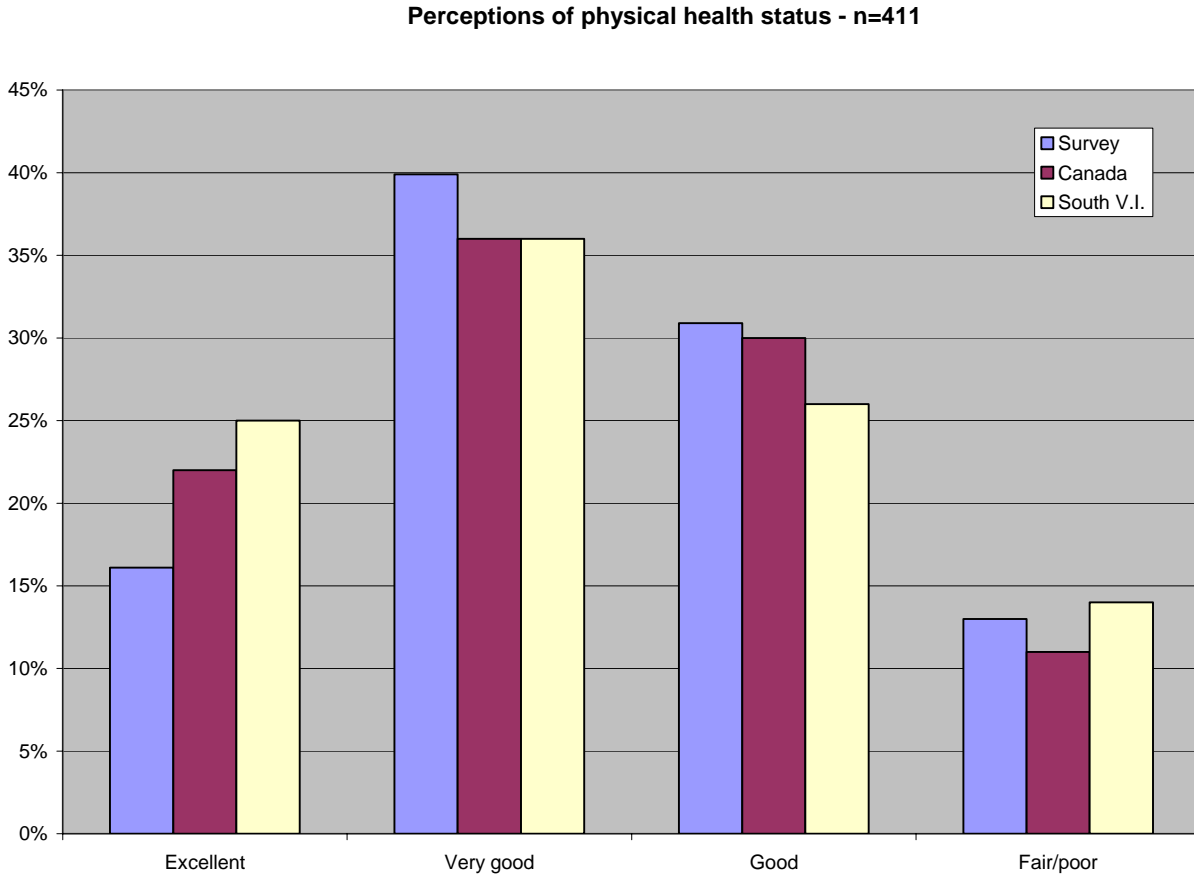
- Which of the community priorities is the Health Association prepared to work on?
- What other resources will be required (e.g. expanded volunteer base)?
- Which of the community priorities could/should be addressed by others (e.g. VIHA; local health professionals, other community organizations), and what role can the Health Association play in encouraging them to do so?
- Using the information collected on the current health status of Mayne Islanders, what could be done by the Health Association to improve this status?

## **2. SELF- REPORTED HEALTH STATUS/ACTIVITY OF MAYNE ISLANDERS**

**Physical Health:**

Survey respondents were asked to rate their physical health on a five point scale. 411 survey respondents chose to answer this question:

Figure 8



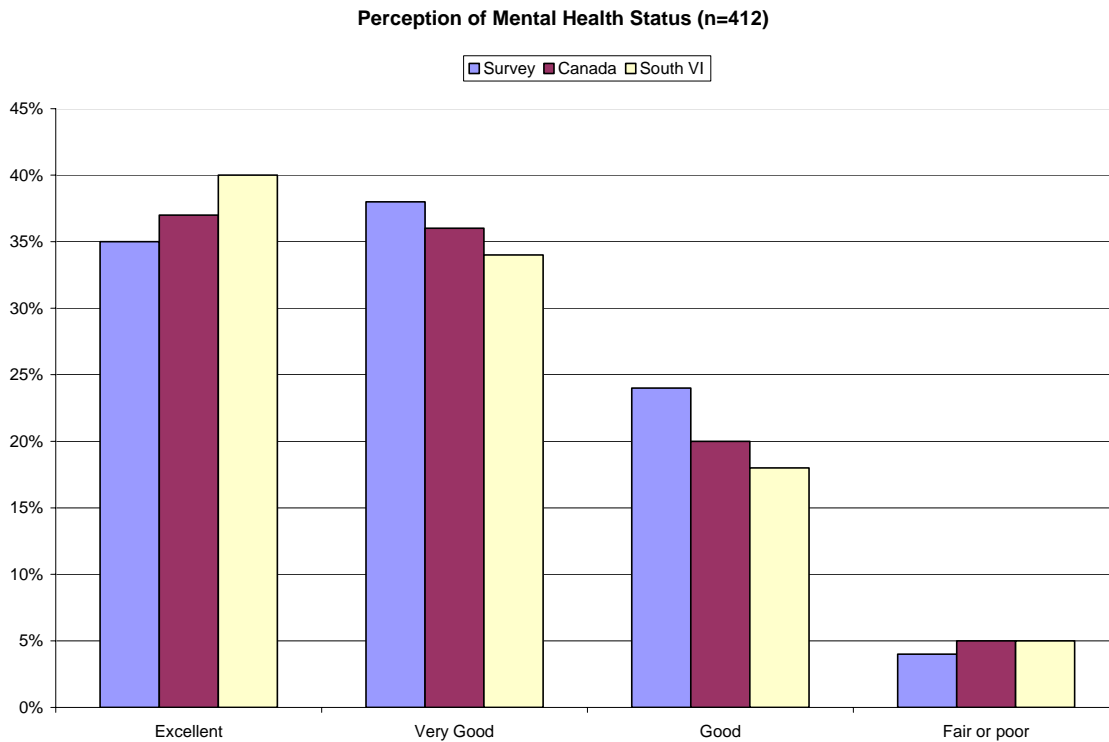
**Discussion**

Self-rated health is an indicator of overall health status. It can reflect aspects of health not captured in other measures, such as incipient disease, disease severity, aspects of positive health status, physiological and psychological reserves and social and mental function (Stats Canada). Perceptions of physical health status reported by survey respondents were compared to data collected in the 2003 Canadian Community Health Survey (“fair” and “poor” grouped together) conducted by Statistics Canada. The results show that the perceptions of Mayne Islanders were similar to those of the overall Canadian population as well as the Southern Vancouver Island health area residents, with a slightly lower percentage believing themselves to be in excellent physical health and a slightly higher percentage believing themselves to be in good physical health. This is a positive finding.

## Mental Health

412 survey respondents rated their mental health:

Figure 9



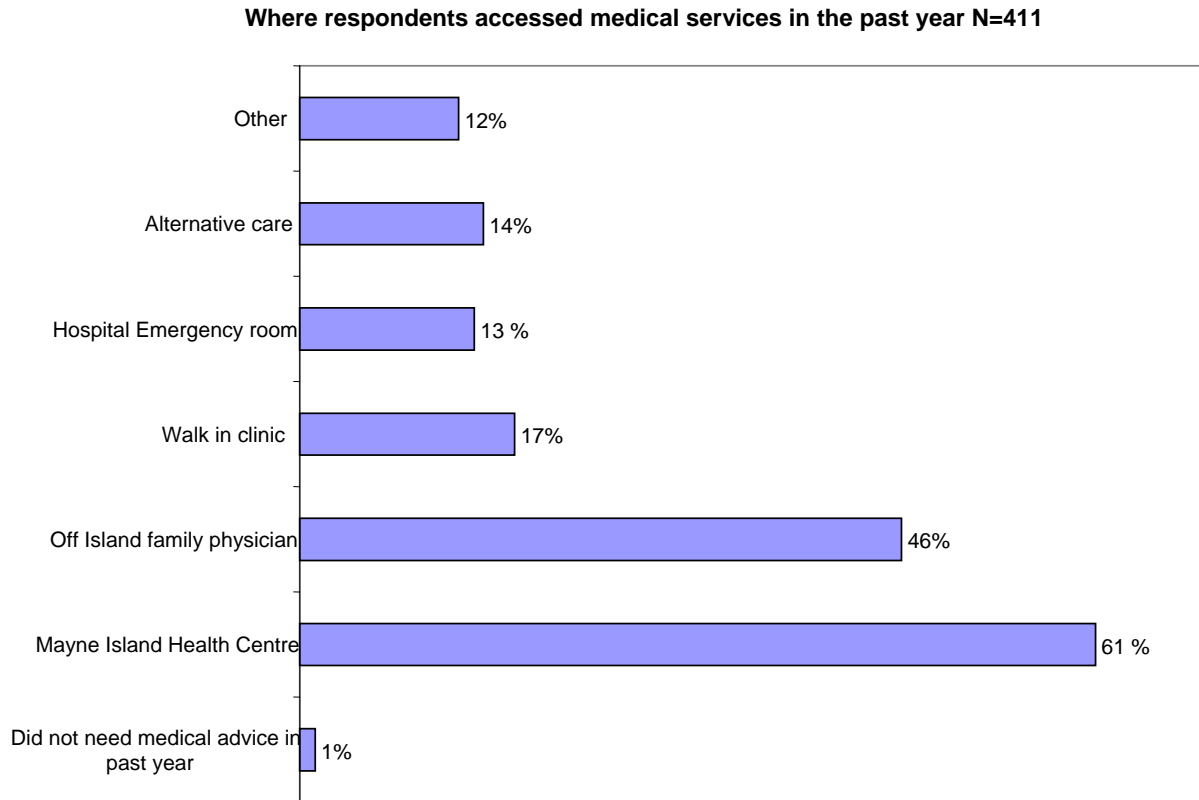
## Discussion

Self-reported mental health provides a general indication of the population suffering from some form of mental disorder, mental or emotional problems, or distress that is not necessarily reflected in self-reported physical health (Stats Canada). Data collected in the survey was compared to data collected in the Canadian Community Health Survey (CCHS 3.1, January to June 2005) and again statistics for the overall Canadian population and South Vancouver Island were not dissimilar to those of the survey respondents.

## ACCESS TO HEALTH SERVICES

Survey respondents were asked where they had accessed health services over the past year.

Figure 10



251 survey respondents indicated that they had accessed services at the Health Centre and 190 indicated that they had visited an off-island family physician. Some further analysis showed that 51 respondents who visited an off-island physician had also gone to the Health Centre for medical advice in the past year.

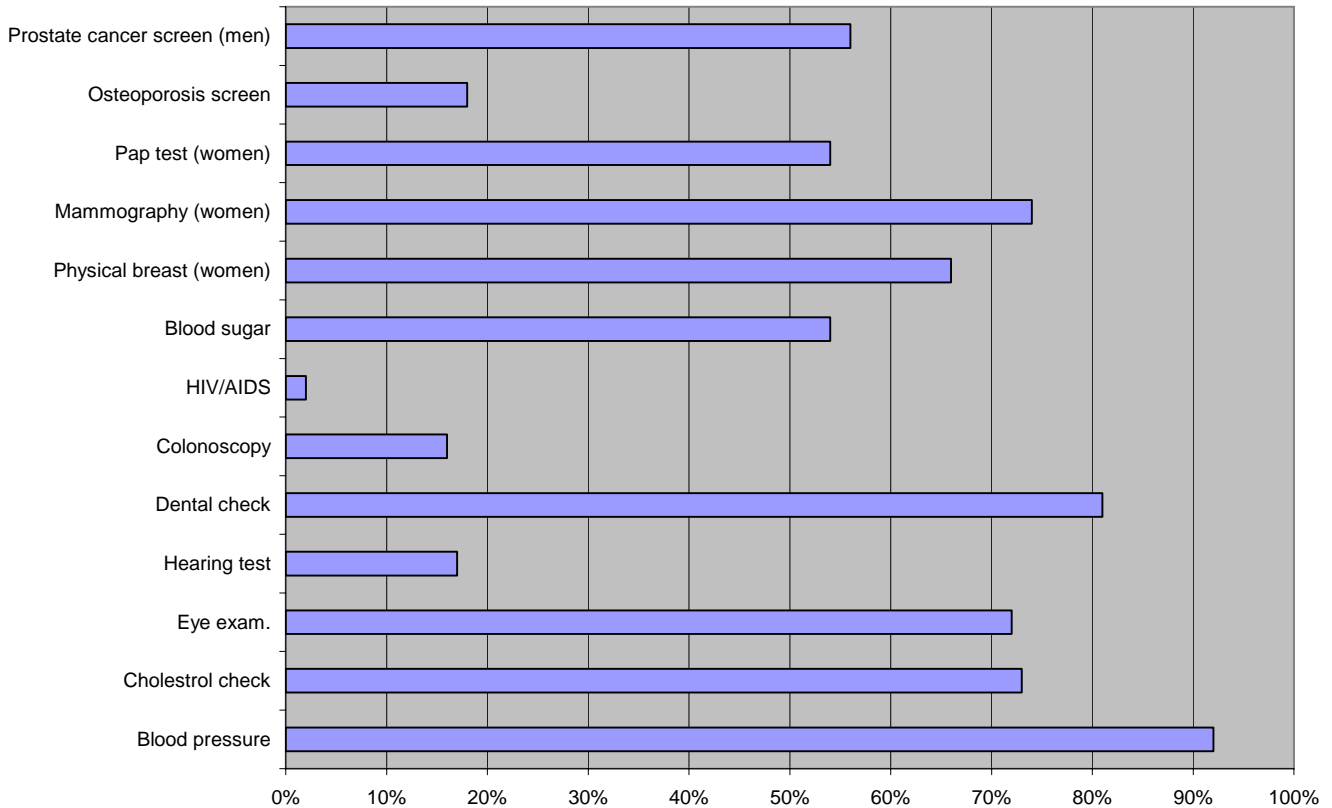
### Discussion:

The actual number of islanders who attend the Health Centre is unknown at the time of writing this report, so there is some uncertainty as to the significance of this data.

Survey respondents were asked if they had undergone medical tests in a number of areas. 289 respondents answered this question:

Figure 11

Medical testing in the past 2 years (n=289)



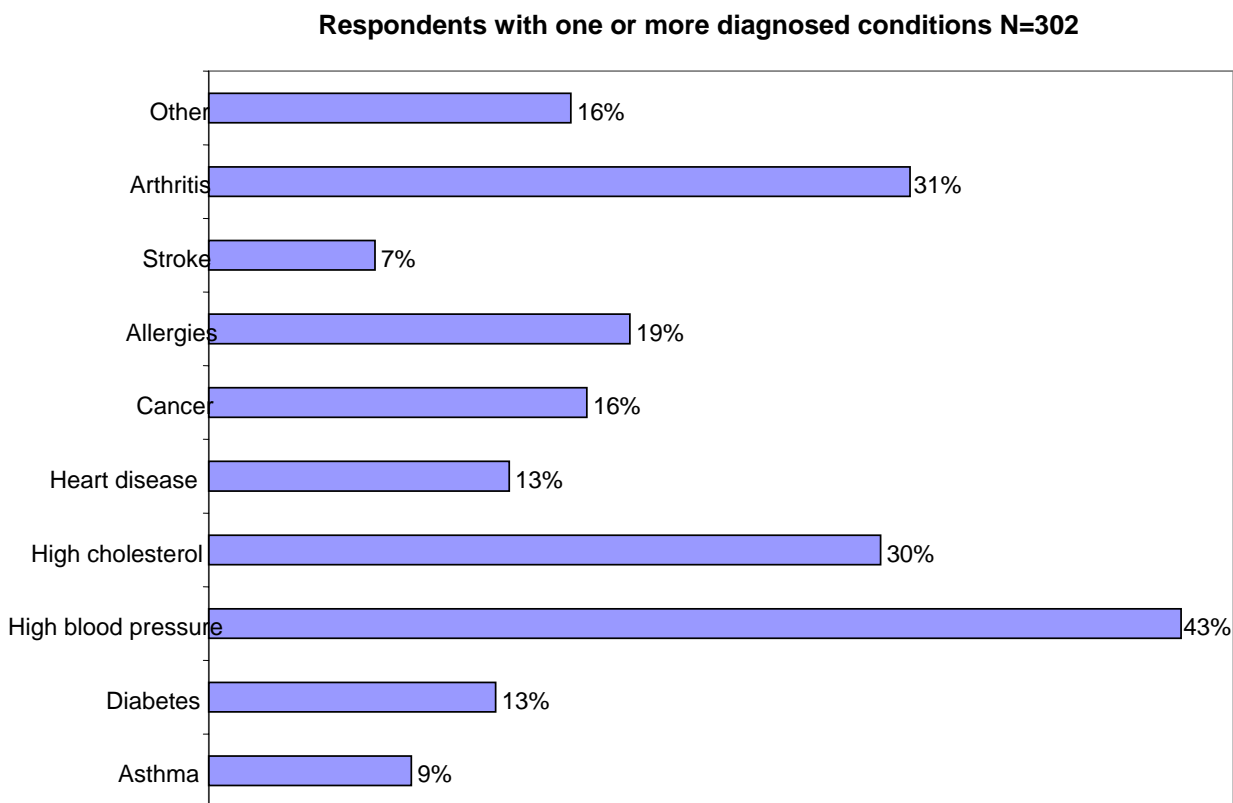
### Discussion

142 survey respondents did not respond to this question, so the foregoing chart should be interpreted with caution. This report does not draw any conclusions about the significance of this data; however it may be useful to local health professionals. For example, should the level of testing for osteoporosis be increased? Or, would it save physician time to have a blood pressure testing clinic run by the nurse, etc. These decisions are best made by health professionals, however if indicated, the Health Association could help to raise awareness of the importance of testing in one area or another.

### MEDICAL CONDITIONS

Survey respondents were asked if they had been diagnosed with any of a number of medical conditions:

Figure 12



<sup>1</sup> Note

Where possible, data was compared to Canadian and/or South Vancouver Health Region data:

- The Statistics Canada, Canadian Community Health Survey, 2003 showed that 16.8% of the total population over the age of 12 reported having arthritis or rheumatism. Mayne islanders have almost twice that rate and this is likely due to age differences in the population; the median age of Mayne Islanders is 58, while the median age in Canada is 39.5. 29% of respondents who indicated that they had been diagnosed with this condition were between the ages of 55-64 and 64% were 65 years of age and older.
- The Statistics Canada, Canadian Community Health Survey, 2003 showed that 8.4% of the Canadian population and 7.9% of the population (over the age of 12) in the South Vancouver Region reported having been diagnosed by a health professional as having asthma. The asthma rate of 9% on Mayne Island. This was somewhat surprising, given the relatively clean air; however the majority of those with this condition were over the age of 55. The rate of asthma in those under the age of 44 was almost non-existent leading to an assumption that the slightly higher rate overall is not due to environmental conditions on the island.
- The Statistics Canada, Canadian Community Health Survey, 2000/01 showed that 4.1% of the Canadian population aged 12 and over reported that they had been diagnosed by a health professional as having diabetes; again much lower than the rate indicated by survey respondents

<sup>1</sup> Respondents who checked "other" (48) indicated a wide variety of health conditions including hearing loss and vision conditions and other diseases associated with various organs. No particular trends were identified.

and again the higher rate on-island is likely due to the older population – about 90% of respondents with this condition were over the age of 55.

- The Statistics Canada, Canadian Community Health Survey, 2003 showed that 14.4% of the Canadian population and 15% of the population in the South Vancouver Island Health Service Delivery Area (aged 12 and over) reported that they had been diagnosed by a health professional as having high blood pressure. Respondents to the Mayne Island survey who had been diagnosed with this condition were once again mostly over the age of 55.
- In the South Vancouver Island Health Region the rate of all cancers in 2002 was 390 per 100,000; 390.7 per 100,000 – 95% confidence interval - low: 380.1, high: 401.2 (Stats Canada). Based on current incidence rates, 39% of Canadian women will develop cancer during their lifetimes. Among men, 44% will develop cancer during their lifetimes. Cancer is primarily a disease of older Canadians: 44% of new cancer cases and 60% of cancer deaths will occur among those who are at least 70 years old (General cancer stats for 2007 – Canadian Cancer Society). The incidence of cancer on Mayne Island (16%) was for the most part evenly spread amongst three age groups 55-64; 65-74 and over 75. 80% (38) of those reporting a cancer diagnosis live on Mayne Island full-time and 72% reported that they accessed the Mayne Island Health Centre for medical advice in the past year.

**Discussion:**

The response rate from the population between the ages of 25-45 was low and there were very few respondents in these age groups who indicated that they had been diagnosed with a health condition.

The health status of the 45-55 year old respondents (indicated by diagnosis of disease) showed some decline - with diagnoses of high blood pressure, high cholesterol and allergies being the most prevalent diagnoses. The survey provided an interesting opportunity to look at the changes in health conditions with age:

Figure 13

Age group	# of respondents in this age group	High blood pressure	High cholesterol	Heart disease	Cancer	Allergies	Stroke	Arthritis
45-54	68 (17%)	20%	38%	3%	6%	35%	9%	18%
55-64	134 (33%)	39%	29%	7%	16%	22%	2%	29%
65-74	102 (25%)	47%	39%	14%	17%	15%	6%	33%
75+	79 (19%)	52%	18%	26%	23%	13%	16%	42%

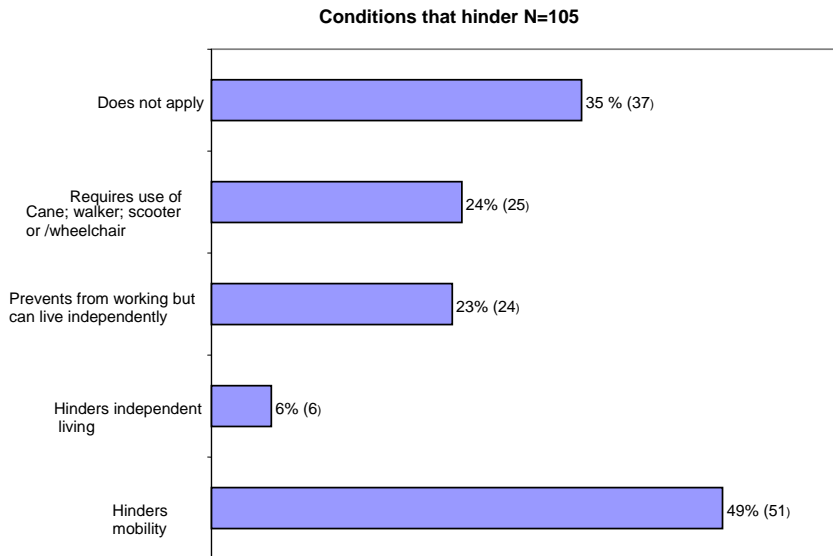
- Of course it is not surprising to find that the health of the population on Mayne declines with age. What is significant is that together 45-64 year olds make up 45% of the population of Mayne (2006 Census), so it can be expected that the requirements of the local health system will increase in the coming years<sup>2</sup>.

<sup>2</sup> This data can be used as a baseline to measure any change over time and indicate an increased/decreased need for services.

## Conditions that hinder mobility

Survey respondents were asked about conditions that hinder their mobility. Of 105 respondents to this question, 51 indicated that their mobility is hindered in some way:

Figure 14



## Discussion:

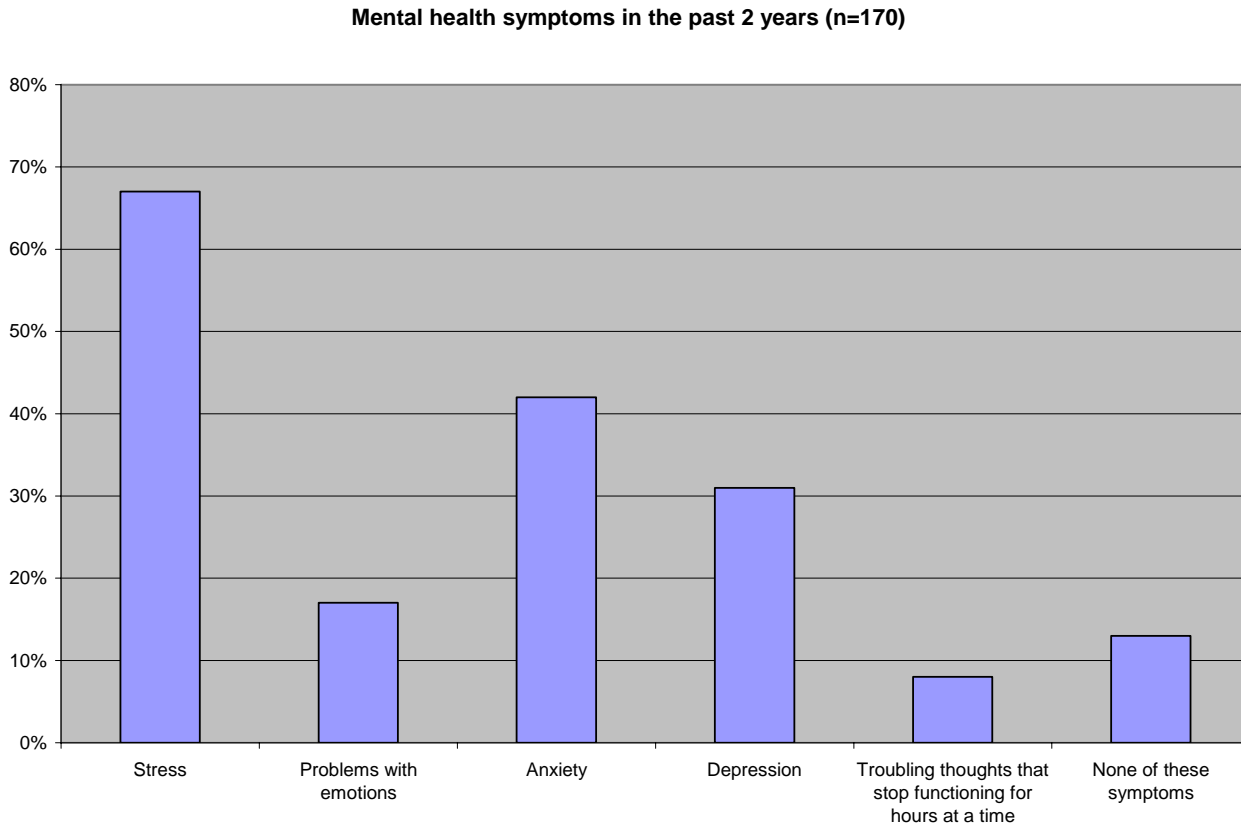
The Vital Statistics Annual Report (2001-2005) indicated that the rate of deaths due to falls in the LHA 64 was high. Falls are the most common cause of injury and the 6th leading cause of death for seniors and almost half of admissions to long term care facilities are fall related (BC Injury, Research & Prevention Unit). It could be expected that those with conditions that hinder mobility as well as the elderly are at increased risk of falls.

## Mental Health

Survey respondents were asked if they had suffered from any mental health problems in the past two years. 170 individuals responded to this question and of those, 22 indicated that they had encountered

none of the conditions identified in the survey. However, for the overall size of the population, a significant number of individuals indicated that they had suffered from stress, anxiety and depression:

Figure 15



## Discussion

In the Statistics Canada, Canadian Community Health Survey (2003) 63.8% of respondents indicated that they experienced some stress in their lives and 24.4% indicated that they had “quite a lot of stress”. The level of stress encountered by survey respondents was not measured, so no comparison can be made. A family counselor visits Mayne Island one day a week (if called upon), however it must be recognized that all mental health issues do not fall under the purview of family counseling. 27 survey respondents who live alone indicated that they suffered from anxiety and/or stress and 16 individuals who live alone indicated that they suffer from depression, so it may be that their issues might be best dealt with by another type of health professional.

Other free mental health services that are “available” to Mayne Island residents require that potential recipients of this service travel to Saltspring Island. The ferry schedule does not accommodate this well - a trip to Saltspring from Mayne allows a patient 1 ½ hours to find his/her way to and from Saltspring Community Services, and this is likely not feasible for many people. In addition, 37 respondents who reported suffering from stress and 14 suffering from depression work full-time, so opportunities to access off-island treatment and support are limited.

## Health related Activity

Survey respondents were asked to identify their health related activities in a number of areas:

Figure 16

Activity	Yes	No	Not sure	Respondent Total
1. Have you had a flu shot in the past year?	<b>53% (226)</b>	47% (197)	0% (0)	423
2. Have you ever had a pneumonia shot?	31% (127)	<b>67% (274)</b>	2% (8)	409
3. If you have children, are their immunizations up to date?	<b>63% (72)</b>	22% (25)	16% (18)	114
4. In the past year, has a health professional told you that you should lose weight?	23% (90)	<b>77% (305)</b>	1% (2)	397
5. Do you believe that you would be healthier if you lost weight?	48% (185)	<b>48% (188)</b>	4% (17)	389
6. In the past 12 months, have you been frightened about your safety, the safety of your children or friends or a neighbour because of the anger or threats of a family member?	2% (8)	<b>97% (379)</b>	1% (4)	389
7. Do you volunteer in the community?	<b>69% (283)</b>	30% (124)	0% (2)	409
8. Do you believe that you have enough social support in the community?	<b>82% (337)</b>	7% (30)	11% (46)	412
9. Do you feel a sense of belonging to the community?	<b>87% (357)</b>	6% (26)	7% (28)	411
10. In the last year, have you been unable to fill a prescription due to cost?	4% (15)	<b>96% (399)</b>	0% (0)	414
11. In the past year, have you been unable to access dental care because of the cost?	13% (54)	<b>87% (360)</b>	0% (1)	415
12. In the past year, have you been unable to access appropriate health care because of transportation problems?	4% (15)	<b>96% (399)</b>	0% (0)	414

## Discussion

### 1. Immunizations:

The Public Health Agency of Canada claims that the most effective way to protect oneself from flu is to be vaccinated in the fall of each year and that Flu shots are especially important for:

- children ages 6 to 23 months;
- adults and children with chronic heart and lung disease;
- anyone living in a nursing home or chronic care facility;
- people 65 years of age and older;
- people with chronic conditions such as diabetes, anemia, cancer, immune suppression, HIV or kidney disease;
- children and adolescents on long term acetylsalicylic acid (ASA) therapy;
- health care workers, other caregivers and household contacts capable of transmitting influenza to the above at-risk groups; and
- People at high risk of influenza complications who are traveling to areas where the flu virus is likely to be circulating.

It appears that there reasonably high awareness and uptake of the Public Health Agency's position that the benefits of flu shots outweigh the risks<sup>3</sup>. The Mayne Island survey results showed that 76% of respondents (n=102) over the ages of 65 and 79% of persons with diabetes (n=38) had received a flu shot in the past year.

With respect to childhood immunizations, 56% of respondents who live on Mayne full time (38) indicated that their children's immunizations were up to date; 27% (18) indicated that their children's immunizations were not up to date and 18% (12) were unsure.

The potential benefits of pneumonia immunization were not looked at as part of this project.

## **2. Weight loss**

According to the Canadian Institute for Health Information and Statistics Canada, body mass is an indicator of health. Information on the Body Mass Index (BMI) is appended to this report (Appendix D). This survey did not attempt to gather information related to the BMI of island residents.

A significant number of survey respondents indicated that either they had been advised to lose weight by their physician (90) or that they believed that they would be healthier if they lost weight (188). In addition, respondents to the survey indicated a desire for increased access to fitness programs and facilities.

## **3. Safety**

2% (8) survey respondents indicated that they been frightened about their safety, the safety of their children or friends or a neighbour because of the anger or threats of a family member over the past 12 months.

While this is a relatively small percentage of survey respondents, it does indicate that there is the potential for family violence on the island. There is one law enforcement officer on Mayne and limited on-island counseling services.

## **4. Volunteerism**

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<sup>3</sup> It should be noted here that according to the Public Health Agency of Canada, certain groups should not be vaccinated for influenza. These include children under six months of age and people who have had a severe allergic reaction to eggs or a previous dose of the vaccine.

The Public Health Agency of Canada is exploring the health benefits of volunteering. Current research is looking at how volunteer work improves the well-being of individual volunteers primarily, but not exclusively by enhancing social support networks. A summary of current research:

- Volunteering helps individuals form interpersonal ties and develop their social networks.
- Social support is a key reason for the link between volunteering, life satisfaction and health outcomes. While it is difficult to know whether healthy people are more likely to volunteer or whether volunteering provides health benefits, poor health was indicated as a barrier to volunteering by only 22 % of Canadian non-volunteers recently surveyed in the National Survey on Giving, Volunteering and Participating (NGSVP).
- Social participation may not only enhance the support available to individuals, but may also promote health by positively affecting thoughts, emotions and behaviour.
- Beyond the benefits of social ties gained from volunteer behaviour, research by Young and Glasgow, among others, suggests a separate and distinct benefit of formal affiliation with community-oriented organizations.

Volunteerism in the community is quite high, with 69% of survey respondents indicating that they are involved in some form of volunteer activity. It is likely that many newcomers to the island, many of whom are no doubt retirees, find their area of interest and become involved in one or more of the many volunteer opportunities available to them; however this may not always be the case.

## **5. Social Support**

The Public Health Agency of Canada's current research on social support is showing a correlation between social support networks and health:

- Support from family and friends acts as a buffer against stress and illness.
- People with increased social contacts and stronger support networks have lower premature death rates, less heart disease, and fewer health risk factors.
- Some experts have concluded that the health benefits of social relationships may be as important as health risks such as smoking, physical inactivity, and high blood pressure.
- Social network size is consistently related to health and well-being.
- Social networks provide both emotional benefits and actual assistance in time of need.
- An individual's perception or awareness of the availability of support, regardless of the presence of a stressful circumstance, is health-enhancing.

The Statistics Canada, Canadian Community Health Survey (CCHS 3.1, 2005) showed that in the South Vancouver Island Health Service Delivery Area, 9.1% of individuals (over the age of 12) reported having a "medium" level of social support and 76.9% of individuals reported having a "high" level of social support.

82% of survey respondents indicated that they had "enough" social support and this is significant. The correlation between volunteerism and social support indicates that Mayne Island could potentially score even better in this area through an increase in volunteerism and the building of a stronger network of volunteer organizations.

## **6. Sense of belonging**

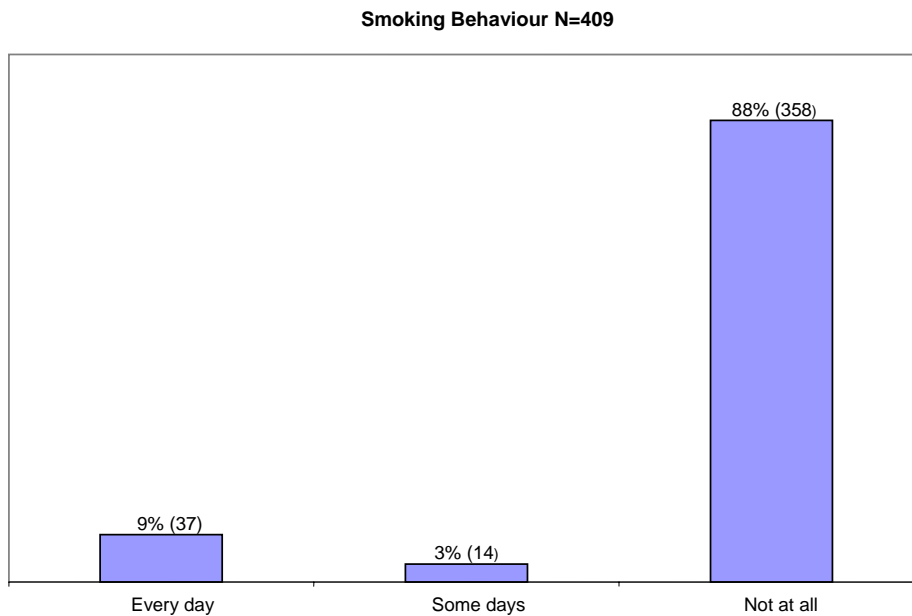
Research shows a high correlation of sense of community-belonging with physical and mental health (Stats Canada, 2005). In the 2005 Community Health Survey, 71% of residents of the South Vancouver Island Health Service Delivery reported a very strong or somewhat strong sense of belonging to community.

In the Mayne Island survey, 87% of respondents indicated that they have a sense of belonging to the community. Although this sense of belonging was not quantified (strong or somewhat strong, etc.), this is a very positive finding. One can only speculate on how this has been achieved – a fairly small closely knit community, a healthy mix of young families and older residents, volunteer opportunities and the survival of a number of long-time residents may be contributing factors. However, with school enrolment dropping and relatively few employment opportunities, the rising cost of living on the island may be affecting the “mix” of young families and retirees. Future administrations of the health survey will show how the community is responding to the changing demographics in this area.

### Smoking Behaviour

409 individuals responded to the survey question related to smoking behaviour:

Figure 17



The 2003 Canadian Community Health Survey (Stats Canada) showed that 17.8% of respondents (over the age of 12) were daily smokers and 5.1% were occasional smokers. In the same survey, data for the Vancouver Island Health Service Delivery area showed that 13.8% of respondents were daily smokers and 4.5% were occasional smokers.

### Discussion

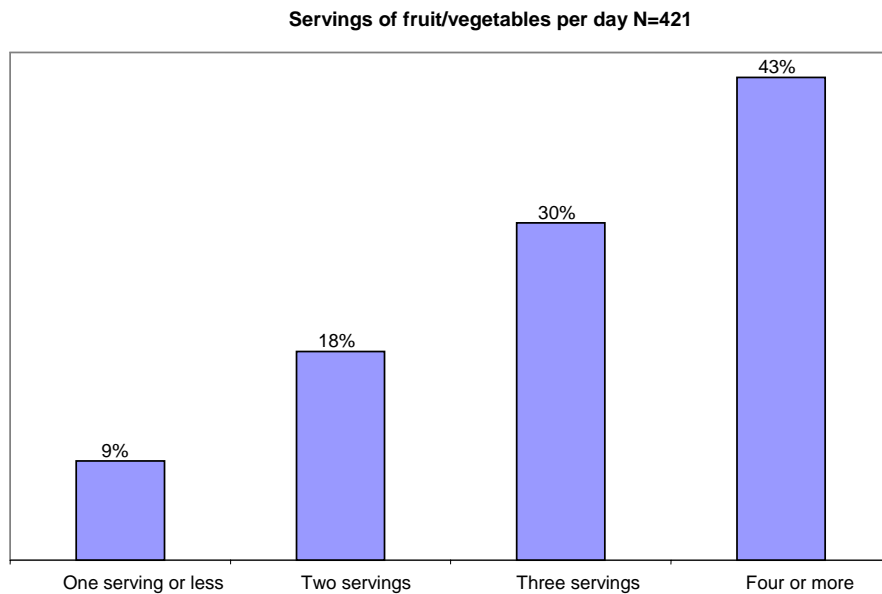
While the Mayne Island survey showed a lower percentage of smokers than recorded in the Canadian Health Survey, deviations may be due to other factors such as differences in the ages of the surveyed populations.

However, for the purposes of this survey it is important to note that 70% of respondents indicated that they would like to stop smoking and there may be opportunities for reducing the number of smokers on the island.

### Dietary Practices

Survey respondents were asked to identify health practices related to their intake of fruits and vegetables:

Figure 18



The Canada Community Health Survey (2003) indicated that 38.9% of respondents consumed fruit and vegetables 5-10 times a day.

The Public Health Agency of Canada indicates that dietary practices are one of the non-medical determinants of health.

While the survey question did not “line up” with the Canada Community Health Survey question, it appears that Mayne Island residents are more or less typical in their dietary practices.

In the summer months, local farmers provide access to fresh, often organically grown produce at a Saturday Market, roadside stands and through personal contacts. Access to fresh fruit and vegetables is limited to two retail outlets for the remainder of the year and some survey respondents mentioned the need for increased access to fresh green leafy vegetables.

## Physical Activity

Survey respondents were asked about their levels of physical activity:

Figure 19

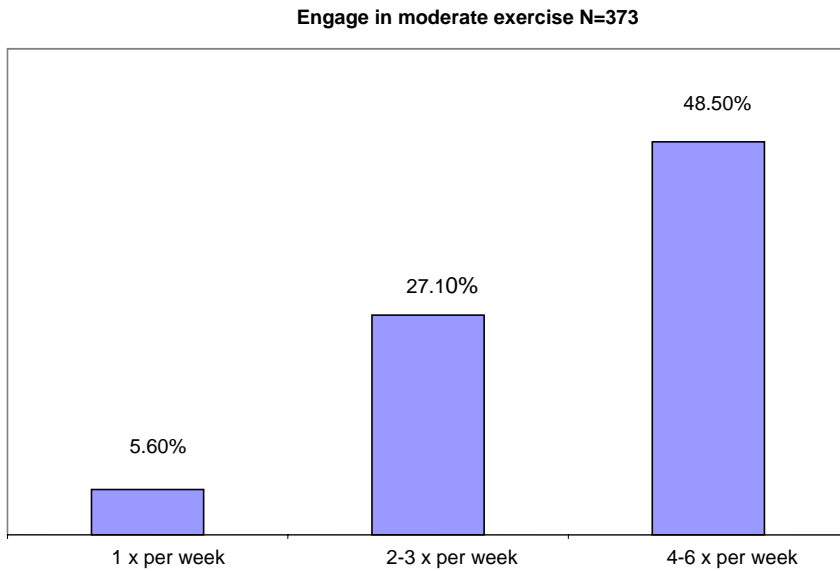


Figure 20

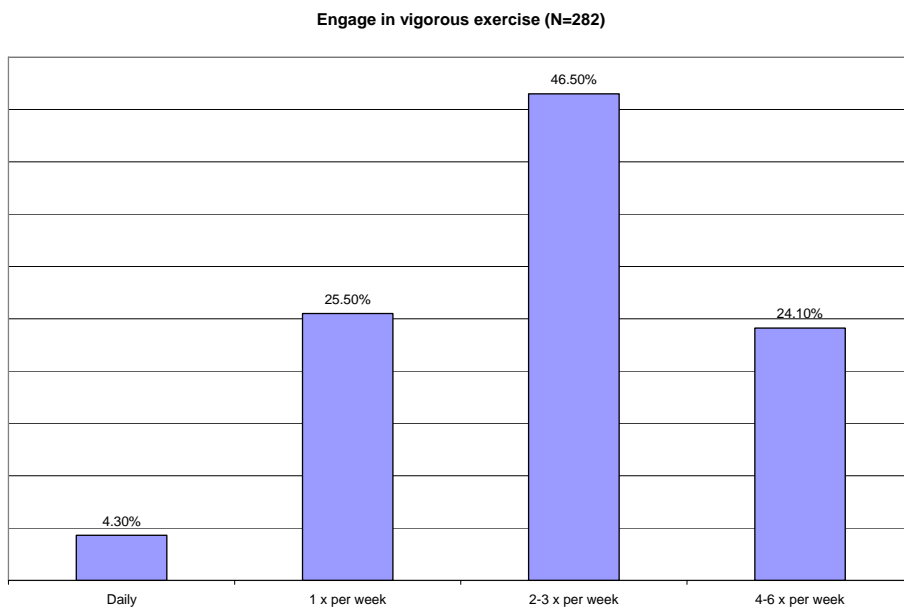
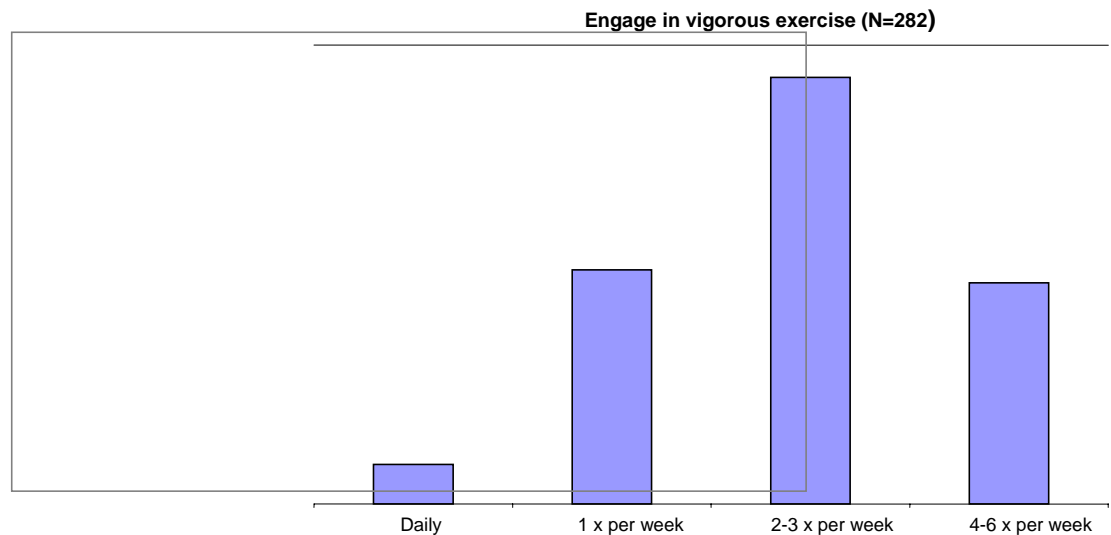


Figure 21



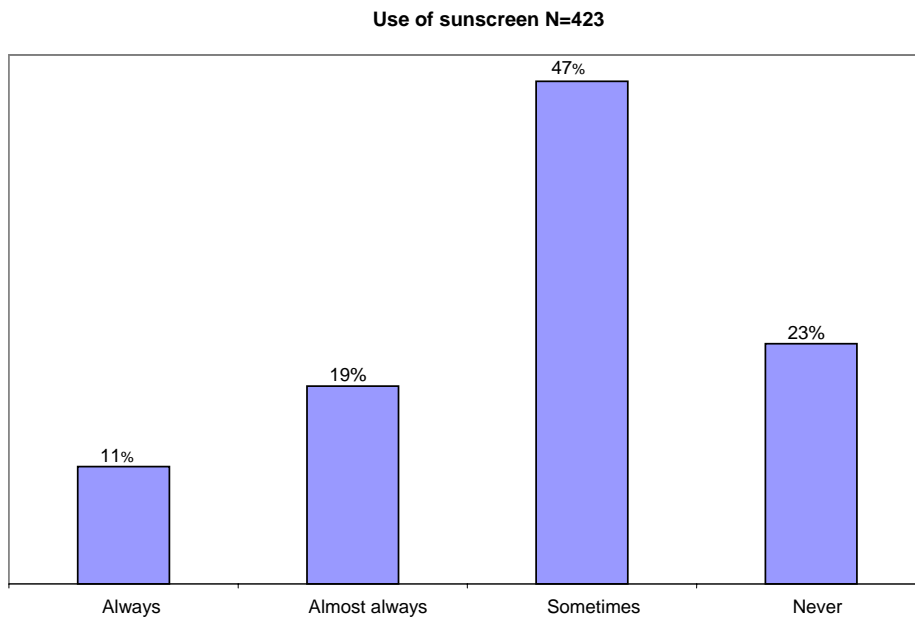
The Canadian Health Survey (2003) took a more scientific approach to data collection: Respondents were classified as active, moderately active or inactive based on an index of average daily physical activity over the past 3 months. For each leisure time physical activity engaged in by the respondent, an average daily energy expenditure was calculated by multiplying the number of times the activity was performed by the average duration of the activity by the energy cost (kilocalories per kilogram of body weight per hour) of the activity. The index was calculated as the sum of the average daily energy expenditures of all activities. Respondents were classified as follows with regards to physical activity: 3.0 kcal/kg/day or more = active; 1.5 to 2.9 kcal/kg/day = moderately active; less than 1.5 kcal/kg/day = inactive. The results showed that 26.1% of respondents were “active” and 24.2 were “moderately active”.

The data collected in this survey cannot be compared to national statistics, however it does indicate an awareness of the benefits of physical activity and it can be used as a basis for comparison in future administrations of the survey.

## Use of Sunscreen

Survey respondents were asked about their health practices related to the use of sunscreen:

Figure 22



The Public Health Agency of Canada indicates that skin plays a vital role in keeping people healthy: “The skin is the largest organ in the body and protects one from potential problems caused by such factors as dehydration, the sun, bacterial infections, and pollution. However, there are limits to the skin’s ability to provide protection. Various factors can cause damage that cannot be repaired. This is how skin cancer may develop”.

The occurrence of skin cancer has been increasing in Canada at a fairly constant rate over the past 30 years. In 2005, there were roughly 78,000 new cases of basal and squamous cell carcinomas reported in Canada, and about 4,400 new cases of malignant melanomas. Most cases of skin cancer are preventable. According to the Public Health Agency, the use of a sunscreen lotion with a Sun Protection Factor (SPF) of at least 15 with both UVA and UVB protection is one of the ways to protect oneself against skin cancer.

Unfortunately, the survey did not gather adequate information to interpret how effectively Mayne Island residents are protecting themselves from skin cancers – i.e. there are effective measures other than the use of sunscreen such as: selecting shaded areas for outdoor activities; wearing protective clothing; avoiding exposure between the hours of 11:00 and 4:00 pm during the summer months, avoiding the use of tanning lamps and being aware that certain medications can make the skin more sensitive to UV rays.

Future administrations of the health survey could gather data to create a more comprehensive picture. However, given that Mayne Island enjoys a relatively dry climate for the West Coast and that skin cancer is a rising and preventable health risk, some effort to educate the local population on how to prevent skin cancers would likely be appropriate.

## **Awareness of Existing Services**

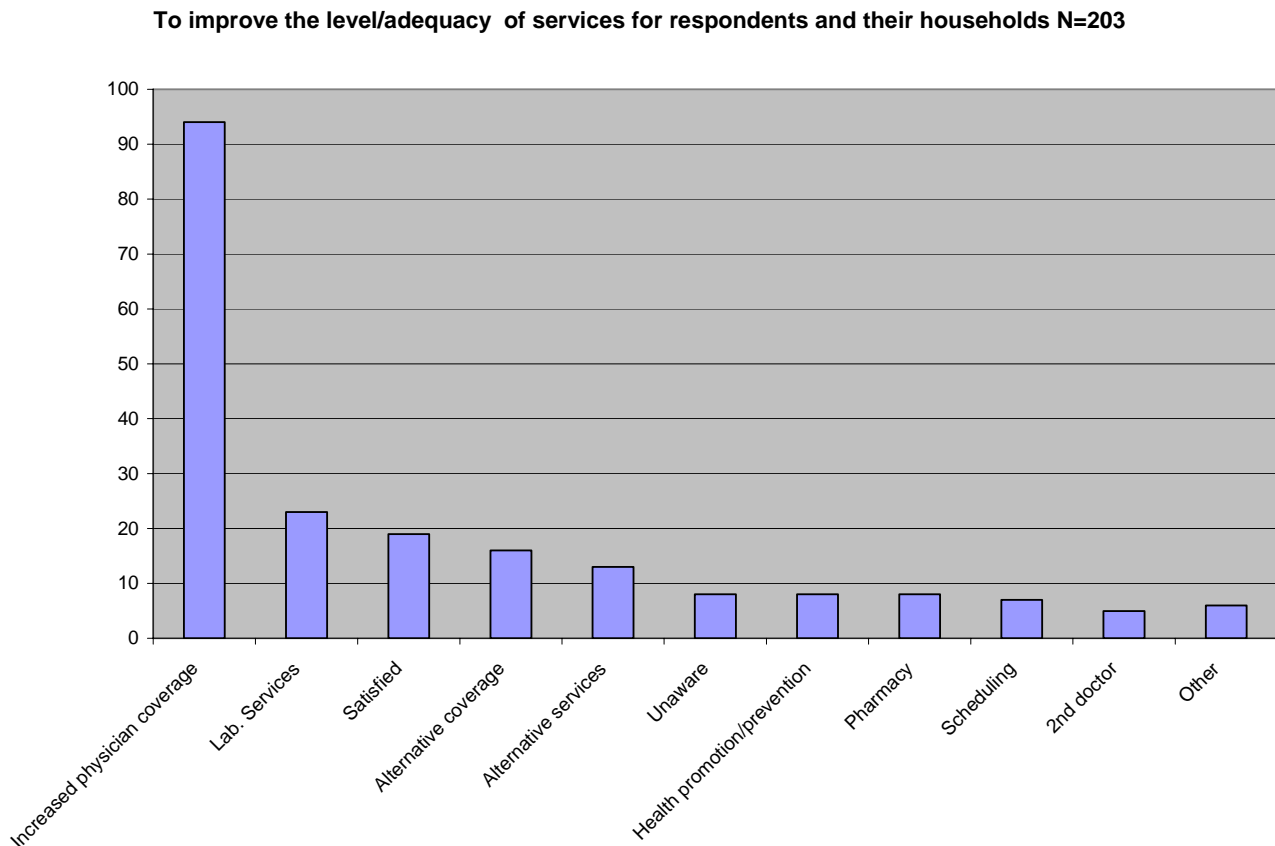
Survey respondents were asked about their awareness of existing services. A table showing responses is appended to this report (Appendix C). The responses showed a reasonably high level of awareness of services that are provided through on-island institutions and a lesser level of awareness of services provided by off-island service providers.

### 3. COMMUNITY FEEDBACK

#### Community feedback on how to improve the level/adequacy of health services of respondents and their families

203 of the 431 survey respondents answered the question “What are the most important changes you would like to see made on Mayne Island to improve the overall level and adequacy of health services for you and your household?”

Figure 23



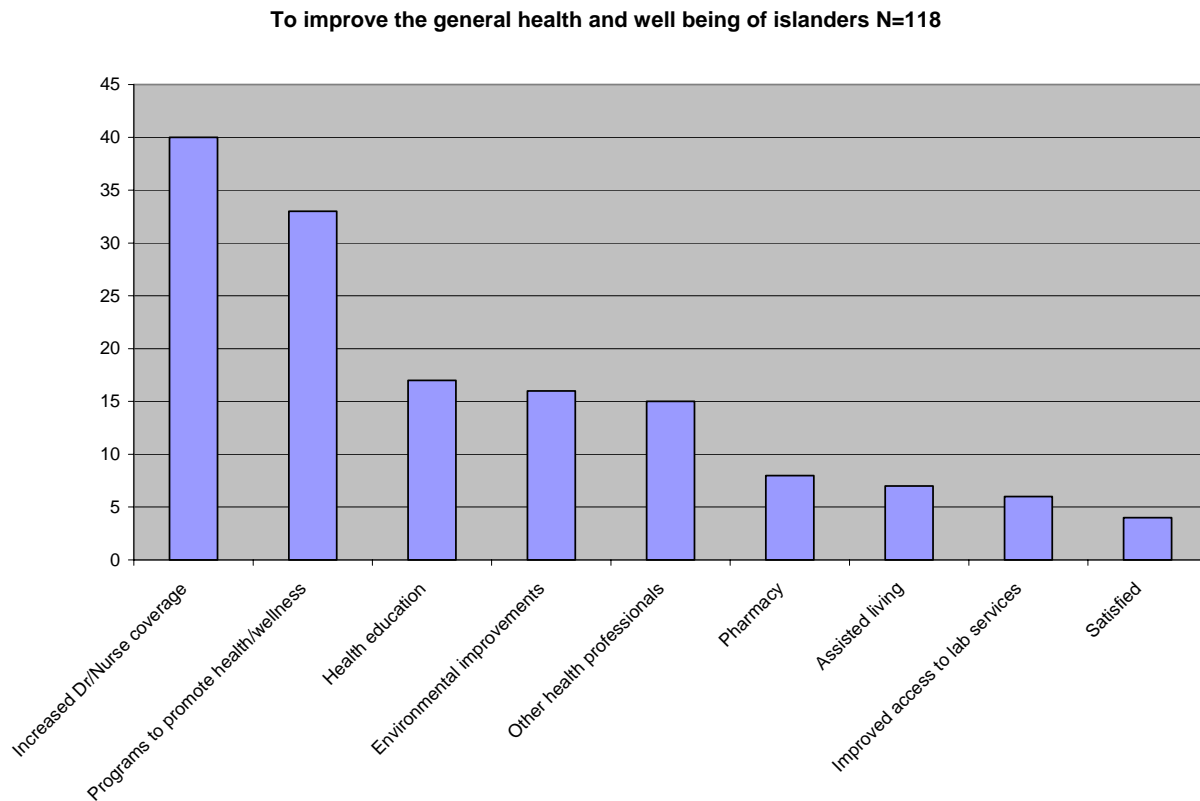
- 1. Increased physician coverage:** It is important that we recognize that this is not a criticism of existing physician’s services – but simply as an expression of the community’s perception that we need *more* on-island access to a physician. For the most part, comments related to the number of days that access was not available, that the physician is unable to accept new patients and concerns (or perhaps confusion) around access to emergency services when the physician is not in the office.
- 2. Lab services:** Again, concerns were not expressed related to the quality of existing lab services - but to access issues. Some respondents were apparently unaware that blood can be drawn on the island and there appears to be some confusion related to equity – i.e. who can access testing on the island as well as some dissatisfaction with the limited time available for testing on-island. A desire for the ability to provide X-Ray services on-island was also raised frequently.

3. **Satisfied:** Respondents who articulated satisfaction with the current level of service were within the age range of the majority of respondents. Notably, two elderly residents in poor health expressed a high level of satisfaction with the current level of service. These responses related to patient satisfaction, taken in the overall context of responses to the question posed raise a couple of important points for reflection:
- Individual expectations of health services may be a driving factor related to levels of satisfaction
  - The choice of medical professionals is a very personalized exercise – (for example, some men may have a preference for a male physician, some patients prefer a directive approach while others like to “be in charge” etc.). In short, the challenges of being the only physician in a community are significant.
4. **Alternative coverage:** Respondents felt that it was important to have a nurse available to provide emergency services; back up when the doctor was not available or to augment doctor services. Of course this response is closely related to #1, and there appears to be some concern and perhaps confusion about the availability of nursing services.
5. **Alternative services:** Access to dentistry, podiatry, chiropractic, full time availability of a physiotherapist, psychotherapy, mental health counseling, acupuncture, naturopathy, osteopathic massage and support for seniors caring for young children were mentioned as services that would improve the health of islanders and their families
6. **Unaware:** Some respondents were unaware of the range of services available. These responses are further validated in the survey question related to awareness of different services, as well as by the responses to the four open ended questions.
7. **Health promotion:** Suggestions related to health education and promotion were offered in response to this and other open ended questions. These included affordable and individualized professionally led fitness training, health education and screening programs, full time access to exercise equipment, a complete gymnasium, weight loss and stop smoking programs and a community swimming pool.
8. **Pharmacy:** Issues related to access to prescription medication on-island were identified in answer to this and other questions. Apparently VIHA is in the process of creating a list of medications that will be stocked locally. Whether this will increase or decrease the number of medications now available is unclear.
9. **Scheduling:** Concerns related to the spacing of appointment days, the number of days in a row that the doctor is not available for emergencies. This is somewhat related to #1 – if funding allows for 3 days a week of physician coverage there will of course be gaps of numerous days.
- Second doctor:** Respondents indicated that a second doctor would provide some choice; access to a second opinion as well as back up for times when the local doctor is off duty. One respondent suggested that another doctor residing on the island could charge a fee for service or that “floating” doctors could be shared with another island.
10. **Other:** Responses included a desire for transportation to off-island medical appointments, cheaper ferry service, ferry passes for off-island dentistry (children’s dentist), electronic access to patient records and child and youth mental health services.

## Community feedback on how to improve the general health and well-being of all Mayne islanders

118 of 431 survey respondents answered the question “What are the most important changes you would like to see made on Mayne Island to improve the general health and wellbeing of island residents?”

Figure 24



- 1. Improved doctor/nurse/ambulance coverage:** The range of comments here were similar to responses to Question 1.
- 2. Programs to promote health and wellness:** Comments related to exercise programs and facilities (including a community swimming pool), the availability of fresh vegetables and more community events.
- 3. Health education:** Suggestions included more education related to nutrition, diet and exercise, information meetings/clinics related to such things as blood pressure and cancer, stop smoking programs and a women’s wellness clinic.
- 4. Environmental improvements:** Suggestions included such things as affordable housing for families, senior’s housing, better monitoring of burning, bike lanes, etc. Again, more analysis of these responses needs to be completed.
- 5. Other health professionals:** Suggestions included psychological/psychiatric services, audiology clinics, mammography, acupressure, Reiki, dentistry, physiotherapy, acupuncture and on-island mental health services.

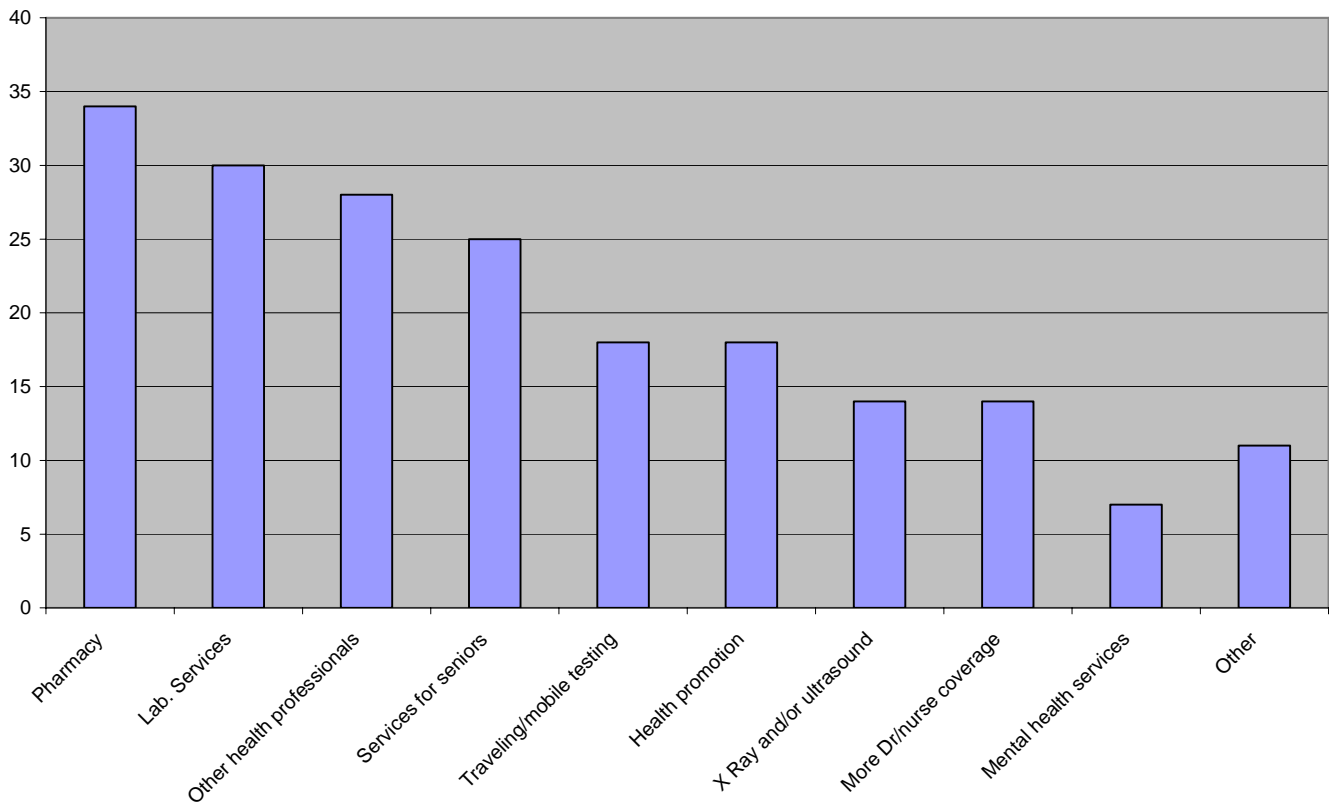
- 6. **Pharmacy:** Comments were similar to those expressed in answer to question 1.
- 7. **Assisted living:** Comments included assisting seniors with transportation, assisted living for the frail elderly and increased assistance for seniors in their own homes.
- 8. **Improved access to lab services:** Comments were similar to those expressed in question #1
- 9. **Satisfied:** Again, some respondents expressed their satisfaction with existing health services

**Community feedback on services that could be provided on-island; closer to home**

142 of 431 survey respondents answered the question “What services or programs which are not presently available on the island could be provided on island, closer to home?”

Figure 25

**Services that could be provided on-island, closer to home N=142**



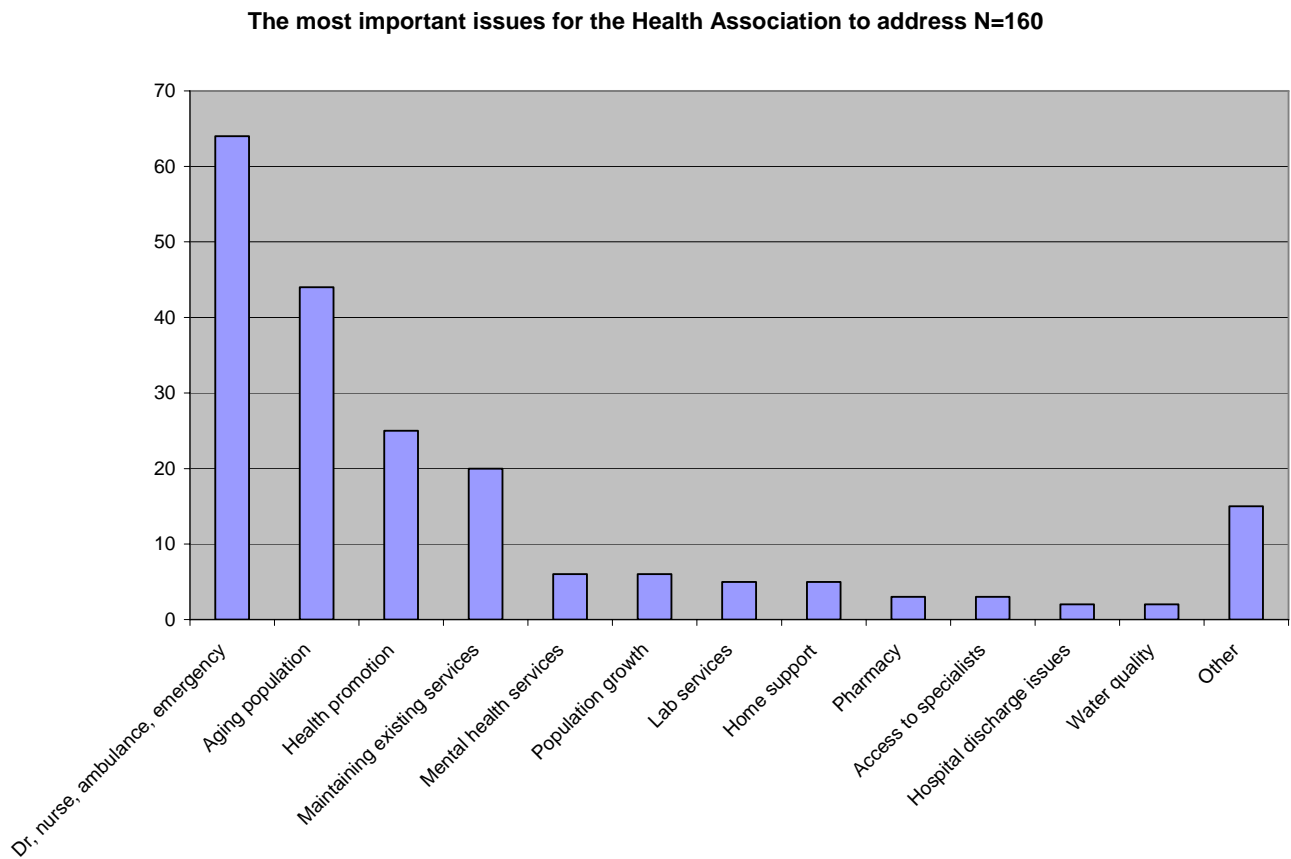
- 1. **Pharmacy, lab. services and services of other health professionals** were top of the list of services that islanders believe could be offered on island. Suggestions related to pharmacy included a pharmacy delivery program a mobile pharmacy and a local pharmacy that would provide common prescription and “behind the counter” drugs. X Ray and ultrasound capability were also mentioned here.

2. **Services for seniors** were also high on the list and included suggestions for a day care program, assisted living, senior's housing and more in-home health care support.
3. **Suggestions for mobile services** included eye testing, mammography and hearing testing.
4. **Health promotion/education** suggestions included bringing speakers of health related topics such as menopause, diet, mental health and disease prevention to the island; programs and activities for youth and young families, parenting classes and incentives to participate in physical activity
5. **More coverage by a physician and/or nurse** is lower on this list. This is not surprising, given that these services already exist.

**Community Feedback on the most important issues for the Mayne Island Health Association to address in the coming three years.**

160 of 431 survey respondents answered the question “What are the most important health issues for the Mayne Island Health Association to address during the coming three years?”

Figure 26

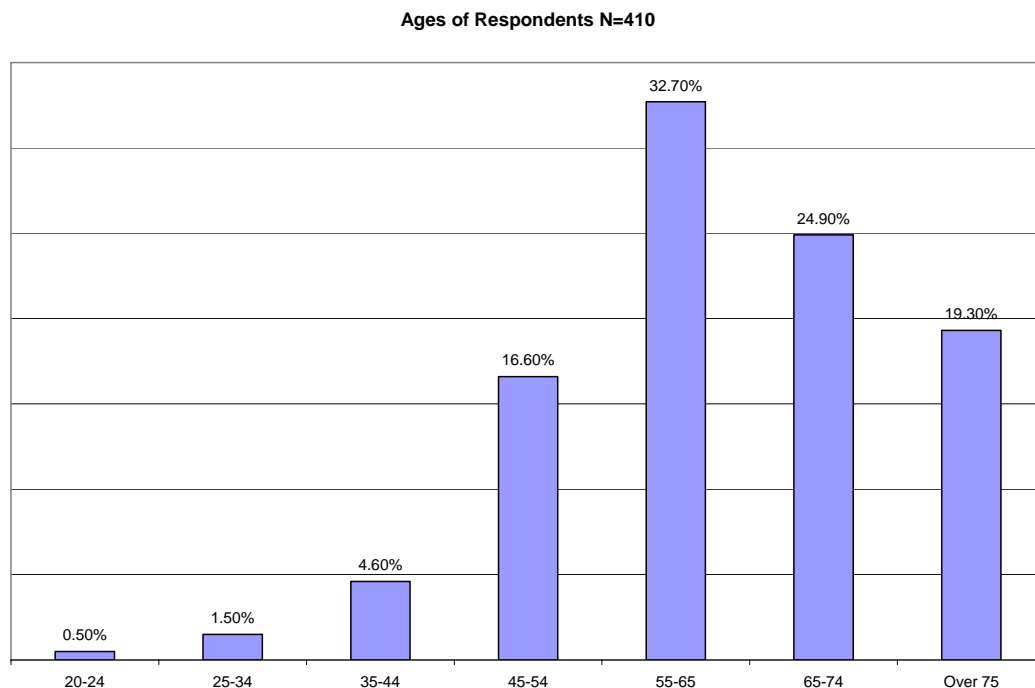


1. As demonstrated above, **physician and nurse coverage** is at the top of the list of issues respondents wish the Health Association to focus on.
2. Issues related to our **aging population** are also high on the list. Senior's housing/assisted living, home support services and other forms of assistance were frequently mentioned. These issues in combination with population growth have the potential to be the most challenging in the coming years and will affect physician/nurse and home support services.
3. **Mental health services**, while not high on the list appear to be an issue of concern and the outcome of the survey questions related to symptoms of stress or other mental health concerns (see figures 9 and 14) indicate that this is an area that likely requires some attention.

## APPENDIX A - RESPONDENT DEMOGRAPHICS

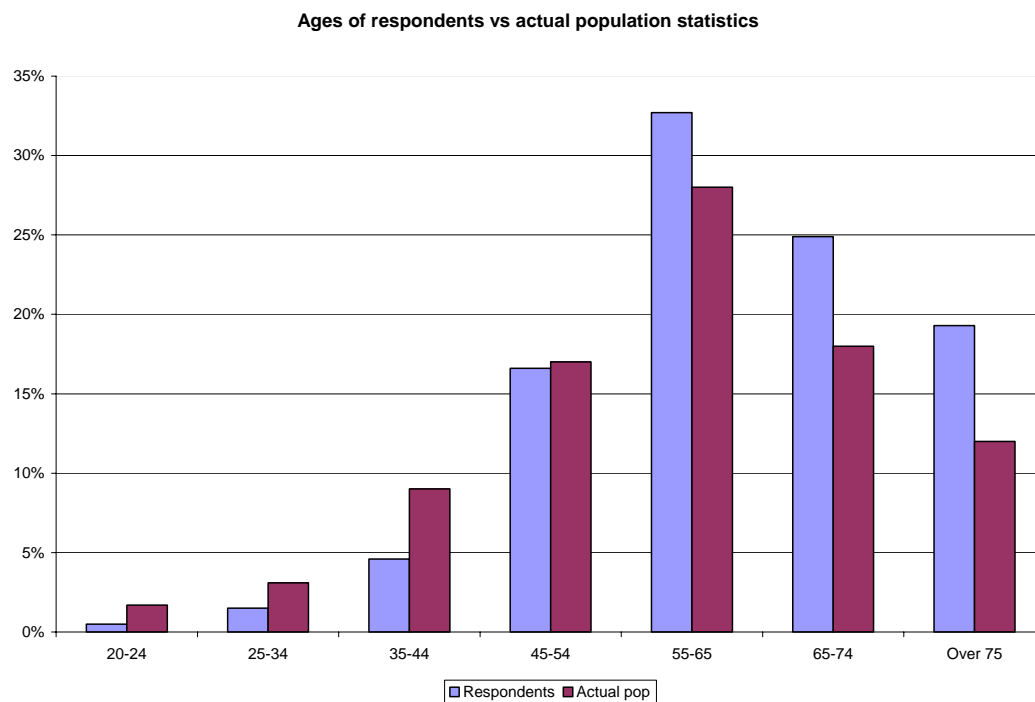
**Age:** 410 of the 431 individuals responding to the survey provided their ages:

Figure 27



This data was compared to the most recent population statistics for Mayne Island (2006 Canada Census). The comparison showed that the 20-44 years of age respondents were somewhat under represented, while the 55+ population was somewhat over represented. This is not surprising as it would be expected that the older population would be more concerned with health issues.

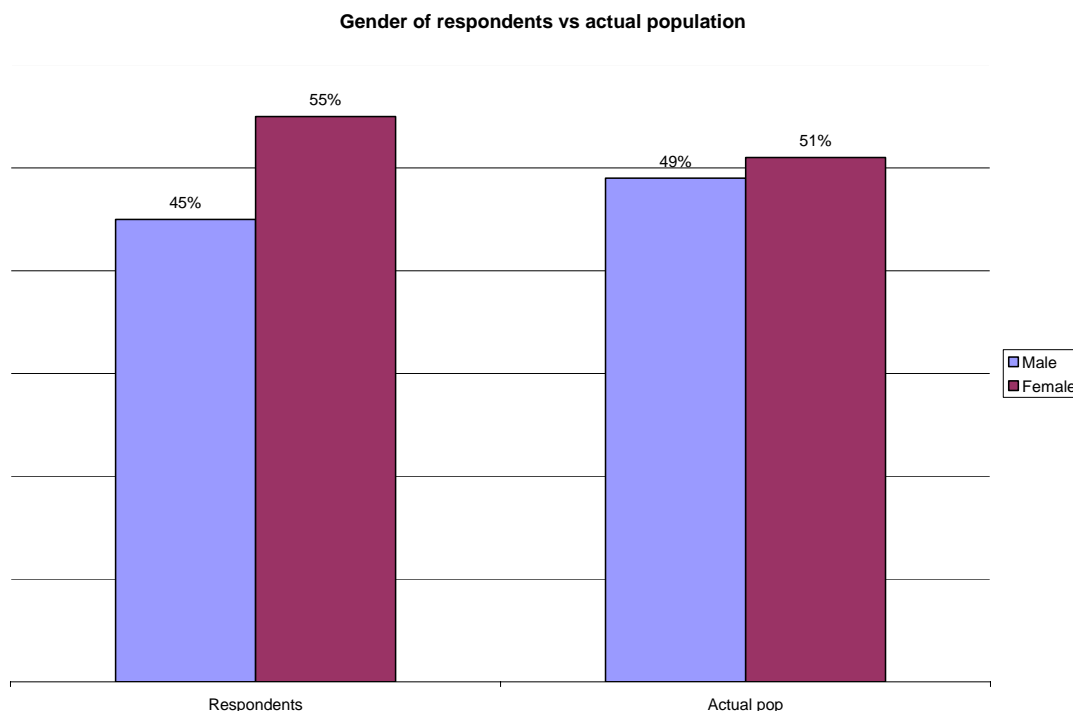
Figure 28



## Gender:

424 respondents identified their gender. The age spread of respondents is somewhat similar to that of the actual population of Mayne (2006 Census) and to that of the South Vancouver Island Health Region (Male 48%; female 52%)

Figure 29

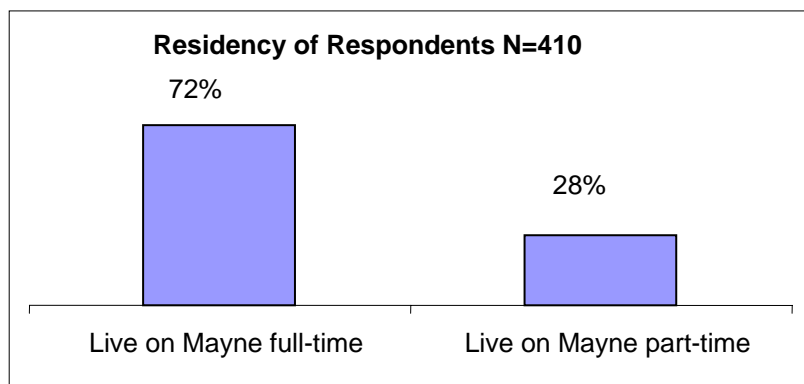


## Residency:

The largest percentage of respondents reported that they live on Mayne full time, however a fair number of part time residents also responded to the survey. 17% (18) of part-time respondents indicated that they had accessed medical advice at the Mayne Island Health Centre over the past year.

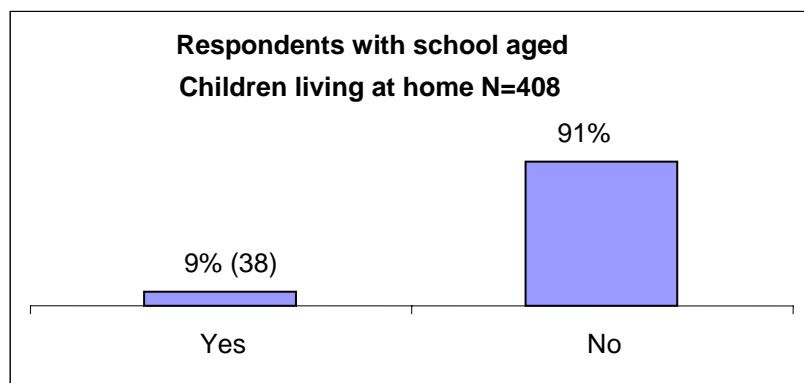
Data on the health status of part time residents was not examined in depth; however it interesting to note that 70% of these respondents were in the 45-65 years of age group and the most prevalent health conditions reported were high blood pressure, high cholesterol and arthritis – similar to the overall island population. 11% (8) of part time residents reported having heart disease. One can only guess if these statistics gathered from a relatively small sample of part time residents, who often tend to be “weekenders”, have significant implications relative to the availability of medical care at weekends. Perhaps some local data collection of the level of access to health care by part-time and non residents would show the impact of these groups on the local health care system.

Figure 30



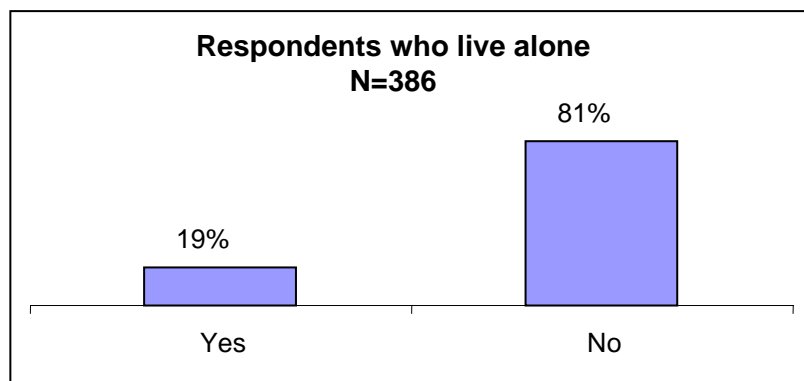
Fifteen respondents who have school aged children living at home identified as part time residents, so only 18 full time residents with school aged children responded to the survey. Census data showed that there are as many as 65 school aged children on Mayne (6-19 years), but as the survey did not ask respondents to indicate how many children were in their families, so it is not possible to know if a valid sample of parents responded to the survey.

Figure 31



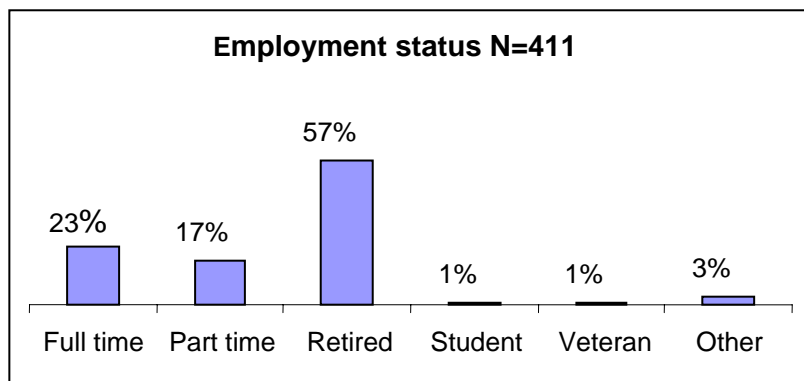
72 respondents indicated that they live alone:

Figure 32



The data showed that 40% of respondents are employed either full or part time and 57% are retired:

Figure 33



## APPENDIX B - RANGE OF RESPONSES TO SURVEY QUESTIONS:

### Question 1.

203 respondents (47%) made comments related to the **most important changes they would like to see made on Mayne Island** to improve the overall level and adequacy of health services for themselves and their households:

**94 respondents (46%) expressed the need for increased coverage by a physician with respondents expressing a need for coverage from “24/7” to physician coverage 5 days a week. The range of comments:**

- More frequent availability of clinics with doctor
- It would be most beneficial to have the health centre open more clinic days. The population has gone up and the Dr hours have gone down. I still have to go off-island for a GP as I can't wait up to 5 days for the Dr on Mayne
- Availability of doctor, but that would take an additional doctor; it's too much for one.
- A doctor to be always available; not every other week and weekend
- Increase Doctor hours
- 2<sup>nd</sup> doctor
- Medical emergency coverage for 7 days/week.
- Doctor working 5 days/week even if it means fewer hours/day
- As the population increases, generally the services need to be adjusted upward and a larger permanent infrastructure needs to be established as a significant number of residents are seniors
- There are 4 or 5 days in a row each week (alternately) where this is no doctor in the office. I feel this is way too long a period of time with no doctor in office as non emergency problems should be dealt with
- Health centre open more days/week.

**23 respondents (11%) commented on laboratory services;** with the majority expressing a variety of concerns related to blood testing. Some were apparently unaware that blood can be drawn on the island. Others felt that the current level of lab service is inadequate. The range of comments:

- Lab service on island would reduce ferry trips for diagnosis
- Lab coverage. Too long between tests & getting results e.g. test on Thurs., earliest next Wed. in office, maybe.
- Blood testing for all - why is this selective?
- Blood tests on island.
- Lab testing to be available more than once a week and longer hours
- Better access to testing, such as blood, blood sugar, etc.
- Have basic lab work procedure in blood work done here on a weekly basis
- Lab is only available 2x monthly on average. This is not enough service. "Younger" persons are advised to go to Sidney as service is limited. Lab can only accommodate 6 appointments on average

In addition, 4 respondents articulated a need for x ray services on island.

**19 respondents (10%) expressed satisfaction with current level of health services:**

1. The majority of these identified themselves as full time residents (16)
2. The majority rated themselves as being in good to excellent health and 4 rated themselves as being in fair or poor health
3. 12 identified as using the Mayne Island Health Centre and 7 as using off-island family physicians
4. Age distribution was varied with the majority being in the “middle age” groups 6 over 70 years of age

Some comments:

- I feel the care here is quite adequate
- Pretty good for a small community
- I am very happy with the level of care here
- I find them adequate but worry about losing the doctor to over work
- We have found services here great the few times we've needed them.

**16 respondents articulated a need for more coverage by either an RN or nurse practitioner; to provide emergency services; back up when the doctor was not available or to augment doctor services. The range of comments:**

- More medical coverage, possibly a RN or Nurse Practitioner.
- Provide 24 hour/7 day emergency coverage (including call support for minor health emergencies). Doesn't need to be a MD; coverage by a Nurse Practitioner with advisory/diagnostic support from Lady Minto or Royal Jubilee would be adequate.
- More hours for nurse practitioner
- more doctors or MD & Nurse practitioner to fill out 5 days/week and on call availability
- Full-time Nurse and Doctor Clinic open 5 days a week

**13 respondents identified a need for more alternative health care services:**

- Access to medical telephone service at all times.
- Physiotherapist )x 2) using BC Med (x2)
- Visiting podiatrist
- Regular access to mental health counseling, psychotherapists.
- Better access to body workers: physio, acupuncture, osteopathic massage
- Annual or 6 mo. mobile mammography visit on Mayne
- Less wait time to see specialists
- Alternative care (chiropractor (x2), naturopathy, etc.)
- Full time dentist - or oftener
- Home IV therapy
- Visiting specialists: heart, cancer, etc. by appointment times publicized
- Video links for consults

**8 respondents indicated that they are unaware of what services are available** and some expressed a need for more access to information. The range of comments:

- Have not been here long enough yet to really know
- Communicate what services are available
- would like to have a one page list of all the medical services provided with names & numbers also available in a wallet sized card
- More public awareness on the use of the clinic. Have been told they are not taking new patients
- It needs to be published as to what is correct protocol of the physician taking on new patients

**8 respondents articulated a desire for preventative approaches**

- Health education and screening.
- Availability of individualized dietary counseling and other weight loss programs for people who cannot afford the costs of regularly having to go off-island or the costs of exercise programs, physiotherapist and massage therapist
- Emphasize preventative health care like exercise, proper diet and being made aware of things that affect our health such as burning of wood etc. that harm the air we all breath.
- Preventive information re living on island, e.g. what to expect and how to plan for self-care

- I would like to see a quit smoking program launched which may start off with a "trying to quit" support group
- Affordable individualized fitness training by a professional instructor that can be mastered and then done at home
- We need to rest and eat properly
- Increased access to gym equipment (early morning and evenings)

**8 respondents articulated a need for on-island access to prescriptions.** The range of comments:

- Access to prescriptions on island
- On-island Pharmacy
- Common prescription drugs available on island
- It would be good to have a druggist on the island, if only part-time

Dr. to obtain a methadone license to use it for chronic pain

**7 respondents expressed some concern related to scheduling.** The range of comments:

- More even spacing of appt. days
- The present system with gaps of almost a week is not effective and does not encourage islanders to doctor on island
- Better scheduling of appointment time
- I find it disturbing that there is so much "on call" scheduling for this island.
- Coordination to make sure that off-hour coverage is taken care of for emergencies.
- I would like to see the doctors schedule remain constant - not alternate days from week to week

**5 respondents indicated a need for a second doctor.** The range of comments:

- A second doctor so there is someone else if you are uncomfortable with the one you are seeing
- More access to a 2nd opinion
- The use of back up Doctors when the local Doctor is off. If other Doctors are available and resident on the Island perhaps a fee for service could be engaged or a floating Doctor could be used amongst one or two Islands.
- A second doctor

**5 respondents (.02%) made reference to the ambulance service:**

- Improved financial assistance to ambulance crew for services rendered and training cost
- A reliable and continuing commitment from the Prov. Govt and BC Ambulance service to ensure 24/7 availability of ambulance service and increase the number of volunteer personnel - perhaps by increased funding for wages.
- Full time ambulance attendants : first responders/firefighters as in the city
- Full time ambulance service
- Improve ambulance response time. Service was excellent once it arrived, but I experienced a 25 minute wait on a heart-related call. I have heard that the volunteer personnel must first change into uniform before responding - if true this policy gets the priorities reversed. I would be well satisfied and grateful to be attended by someone who slipped on an official vest and sped to my call for help. It could save a life.

**3 respondents highlighted the cost associated with going off-island for health services**

- Portal to portal transportation to Victoria for medical appointments would be extremely helpful
- Better and cheaper ferry service
- Ferry passes for trips to children's dentist on Vancouver Island.

**Other:**

- Electronic internet access to patient records across B.C.
- Child and youth mental health services
- Support for seniors caring for young children, to prevent health deterioration

**Question 2**

118 respondents made comments related to **What are most important changes they would like to see on Mayne Island to improve the general health and well-being of island residents.**

Of these respondents,

**40 suggested the desire to have more or improved Doctor, Nurse or Ambulance service/coverage.**

The range of comments:

- More home nursing care is sometimes needed for more hours
- More regular doctor's schedule with more availability
- Clinic open more days per week, fewer hours per day
- Free once a year thorough check-up
- Health care provider could be MD, nurse practitioner or other qualified RN
- Allow retired doctor to assist in operation of clinic
- 2 or 3 beds to care for sick people on island
- Always have authorized person to administer drugs (injections, etc.).
- Dr/RN stay on island until end of shift
- Paid first responders: train more volunteers
- Full-time doctor
- I was turned down as a patient, even though I live here.

**33 respondents suggested various programs to promote health and wellness.**

The range of comments:

- Incentives to eat healthy (locally)
- More community events
- Increase the ability for residents to walk on trails around the island
- Labyrinth for meditation, grieving, sacred place
- Indoor swimming pool (mentioned many times)
- Workout room/weight room
- More exercise programs
- Regular availability of leafy green vegetables for cooking and unpackaged and available in the stores at a reasonable price. Better labeling of packaged food. Subsidize organic farmers.
- Specific exercise programs: yoga for seniors, walking groups, biking tours
- Supportive programs for young families

**17 respondents suggested more health education.**

The range of comments:

- Information meetings: blood pressure, colonoscopy, cancer
- In preventative care: services and education
- More education: re: nutrition, diet, exercise
- The health & wellness fair was a really good idea. More of the same
- Education programs on diet, fitness, etc. sleep deprivation, mental health

- Workshops on how to stop smoking; lose weight, etc.
- General approaches to strategies for maintaining healthy lifestyles during transition times and as one ages
- More advocacy regarding taking care of your own health – perhaps a women’s health wellness clinic

**16 respondents made reference to environmental issues to improve one’s health/reduce stress**

The range of comments:

- Affordable housing. Senior’s sheltered housing (mentioned many times)
- Closer monitoring of burning. More Mayneliner articles such as the “Toxic Cocktail” in the April issue)
- No smoking on the patio of the mall
- Add walking paths or wider shoulders to make it safer to walk on Mayne. Dog owners should keep their dogs on a leash and clean up after them
- Bike lanes on all major roads
- Ban cars one day a week
- Better and cheaper ferry service. More forest protection. Better water availability

**15 respondents want more/other medical professionals visiting Mayne**

The range of comments:

- Psychological/psychiatric support needs to be increased
- Audiology clinic
- Mammography clinic
- Regular access to dentist
- Another full time physiotherapist/masseur
- I would like to have complimentary health services available at the Health Centre (acupressure, acupuncture, massage, Reiki).
- Mental health services on island

**8 respondents requested pharmacy service.**

The range of comments:

- Pharmacy on island
- More availability of over the counter and Rx drugs, although I don’t need them personally
- Drug dispensary

**7 respondents want to see improved assisted living,**

The range of comments:

- Transportation to Doctor’s appointments and shop
- Improve this so-called Senior’s Assisted Living.
- More programs for the frail elderly assisted living programs
- Assistance for seniors in their own home

**6 respondents mentioned more lab clinics and X/ray services.**

The range of comments:

- X/ray equipment available on the island
- To be able to have blood testing done on the island
- Immediate blood work if needed in emergency

#### **4 respondents indicated adequate services already in place, on the island**

The range of comments:

- Good
- From what I hear in 9 years of living here part-time, health care is good on Mayne Island

#### **Question # 3.**

142 respondents made comments related to **what services or programs are not presently available on the island and could be provided, on-island, closer to home.**

Of these respondents,

#### **34 suggested a desire for a Pharmaceutical service.**

The range of comments:

- Pharmacy for the more common prescriptions and behind the counter drugs
- A drug store or dispensary outlet
- Pharmacy delivery program
- Mobile pharmacy
- Pharmacological help

#### **30 would like to see increased laboratory service.**

The range of comments:

- More lab clinics
- Lab services, perhaps such as MB Labs supports
- Improved access to lab tests i.e. services by MDS labs twice a week
- INR testing
- I resent being told to go off island to have blood taken, because this lab is only for islanders who need regular blood work
- Lab services available to all regardless of age

#### **28 would like to see coverage by other health professionals.**

The range of comments:

- More dental appointments (the majority of these respondents pointed this out)
- Acupuncture (1)
- Physiotherapy/physical therapist (4)
- Pediatrician (1)
- Optometrist (2)
- Naturopath (1)
- Chiropractor (1)
- Podiatrist (1)
- Psychiatrist/counseling (2)
- Chelation therapy (1)

#### **25 comments were made related to various senior's issues.**

The range of comments:

- Elder day care program
- Funded assisted living
- Telephone tree – daily calls to provide support to elderly or chronically ill
- Health unit for elderly – a small hospital with a long term care attached
- At home health care support

- Aging population
- Seniors housing (mentioned numerous times)

**18 suggested some form of traveling or mobile testing services.**

The range of comments:

- Eye testing -periodic clinics
- Mammography (many respondents suggested this)
- Bone density scanning
- Hearing test

**18 made reference to various health promotion ideas or public awareness needs.**

The range of comments:

- Speakers on health related topics – not just for seniors
- Programs or activities for youth & younger kids/ young families
- Participation encouraged in physical activities/healthier lifestyle (provide coupons/incentives)
- We used to have parenting classes, seminars on menopause and other pertinent issues.
- Scholl program on dietary issues, cover supplements, exercise (mental & physical), emotional, smoking, drinking, etc. Life health & general societal values
- Prevention of disease

**14 want X/ray and/or Ultrasounds services.**

The range of comments:

- Ultrasound diagnostics
- X/ray services

**14 commented on the desire for increased doctor coverage.**

The range of comments:

- Weekend health care clinics
- Full-time doctor
- This may be hearsay, but I understand the Dr. is not taking new patients.
- On-call from Pender just may not be good enough if anyone has an emergency on Mayne
- Nurse practitioner when Dr. not here
- Boat with oars for local rescue team
- It would be great to have 24/7 coverage on the island of a nurse or doctor.
- First responders should have their training upgraded to AED (defibrillator)

**7 made reference to the need for on-island mental health counseling.**

The range of comments:

- Drug/ETOH addiction counseling
- Mental health care
- Mental health services are non-existent and psychological services are not being used (appointments being cancelled due to not enough patients)
- Support for parents needing child care

**11 Other comments included:**

- Swimming pool
- Not sure/too new to island to comment
- I am not sure as I have not needed any myself

- Burlesque or movie theatre
- A wish list is nice, but can we afford it?
- Affordable housing for families
- I think we have adequate services. It doesn't make sense to recreate an urban health center here. Our relative isolation is something residents must consider if they choose to live here

#### Question 4:

160 respondents made comments related to: **What are the most important health issues for the Mayne Island Health Association to address during the coming three years?**

**64 comments related to more doctor and/or nurse coverage; emergency coverage and preparation for serious event; ambulance coverage.** The range of comments:

- Full time doctor
- Emergency coverage – doctor or nurse on call 24/7
- Access to doctor for longer hours
- Improving the office hours to a more even spacing if possible & weekend coverage, esp. on summer & holiday weekends
- Nurse Practitioner to assist in the increasing workload of a physician
- Keep our doctor safe from overwork
- Availability of doctor on a more regular basis. Considering available staffing a good job is being done

**44 comments related to issues around the aging population.** The range of comments

- Establish a retirement home with different levels of care from high functioning to assisted living
- Counseling for seniors who are rapidly and often dangerously nearing a time when they can no longer drive, cook or maintain independent living
- To continue to provide the greatest level of care for the elderly, so that they are able to remain on Mayne Island as long as desired.
- The increasing number of full-time residents and the aging of those individuals.
- Seniors general health
- Aging seniors, diabetes and everything related to chronic disease; heart conditions support for seniors in their own homes
- monthly blood pressure clinic and other prevention type clinics for seniors
- Bathing facility for seniors. More liberties for homecare i.e. driving clients to doctor and groceries.

**25 comments related to raising awareness and promotion of health lifestyles.** The range of comments:

- Develop a higher profile in community education/health lectures senior fitness raise awareness of programs that are available on the island
- Promotion of healthy lifestyle through awareness of our environment - i.e. discourage outdoor burning; encourage eradication of broom; support local organic farmers continue education and preventive medicine workshops
- Make tourists more aware of what is available for medical services here on the island :helping the elderly better understand their medical condition and not to expect medical cures
- Prevention programs. Education information. Discussion re when to leave the island or planning what is needed to stay from a health perspective, e.g. articles in Mayneliner on regular basis

**20 comments related to maintaining the services we have.** The range of comments:

- Keeping medical staff :VIHA trying to re-group services and decrease our coverage

- keep the building and instruments, etc. up to date
- Maintain the financial viability of the Health Centre
- Maintain present level of medical care, including Dr. Losier. Continue to have Dr. Williams from Pender as a locum, rather than others unfamiliar with our area and needs.
- to keep services we already have esp. GP/Nursing, MOW & volunteer coordinator

**6 comments related to mental health issues. The range of comments:**

- Lack of mental health services
- Mental health :alcoholism

**5 comments related to increasing lab services. Range of comments:**

- Scarcity of lab time and of properly trained personnel - i.e. qualified lab technicians.
- More lab time

**3 comments related to timely access to specialists. Comments:**

- To see a specialist in a more timely wait period.
- Access to specialists - Long surgery waits

**2 comments related to hospital discharge to isolated rural communities. Comments:**

- Discharge from hospital - better notification of relatives and not just discharge patient with no follow-up as to where or how they get home.
- People being summarily dispatched from hospital with no arrangements for when they get home/how they will GET home

**2 comments related to the availability of clean, safe water.**

**APPENDIX C - Awareness of existing services (N=422):**

<b>Service</b>	<b>Aware of</b>	<b>Not Aware</b>	<b>Sample size</b>
911 ambulance service	98.5%	1.5%	410
Physician	98.8%	1.2%	407
First Call nurse/community nurse	94.8%	5.2%	402
Laboratory services	78.7%	21.3%	395
Red Cross equipment loan	57.1%	42.9%	389
Public health nurse	85.8%	14.2%	387
Palliative nursing care	54.7%	45.3%	369
Home support services	79.8%	20.2%	387
Home care nurse	72.8%	27.2%	383
Firefighters First Responder support	92.5%	7.5%	402
Alcohol and Drug Counseling	82.1%	17.9%	390
Family Advancement Counseling	38.2%	61.8%	356
Crisis counseling (by telephone)	61.9%	38.1%	362
24 hour crisis line (1-800-suicide)	64.3%	35.7%	361
Dentist	83.8%	16.2%	394
Massage therapy	89.7%	10.3%	389
Chiropractor	69.7%	30.3%	383
Physiotherapy	73.6%	26.4%	383
Foot care	60.6%	39.4%	363
Mayne Island Assisted Living volunteers	67.8%	32.2%	370
Mayne Island Help Line	44.8%	55.2%	357
Child protection services	39.2%	60.8%	342
Senior's Wellness	42.3%	57.7%	350
Elderly Outreach VISTA	17.2%	82.8%	343
Psychologist	40.8%	59.2%	346
Hearing screening	22.7%	77.3%	344
Cancer Support Group	59.4%	40.6%	362
1 Way on Mayne	8.3%	91.7%	327
Meals on Wheels	78.3%	21.7%	374
'Our House'	10.6%	89.4%	227
Child and youth mental health services	21.0%	79.0%	210
X Ray services	45.5%	54.5%	220
Mammography	42.1%	57.9%	214
Psychiatrist	36.7%	63.3%	199

**Appendix D**

## Body Mass Index

Body Mass Index (BMI) is a method of classifying body weight according to health risk. According to 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 I = high health risk; obese class II = very high health risk; obese class III = extremely high health risk.

BMI is calculated as follows: weight in kilograms divided by height in meters squared.

The index is: under 18.5 (underweight); 18.5-24.9 (normal weight); 25.0-29.9 (overweight); 30.0-34.9 (obese-Class I); 35.0-39.9 (obese-Class II); 40 or greater (obese - Class III). The index is calculated for those aged 18 and over excluding pregnant women and persons less than 3 feet (0.914 meters) tall or greater than 6 feet 11 inches (2.108 meters).

(Sources: Statistics Canada, Canadian Community Health Survey, 2003, 2000/01)

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