Physical wellness

The 40 maps and 8 tables included in this section look at a variety of indicators related to physical health and show how they vary throughout the province.

Self perceived health has been shown to be one of the most reliable and useful indicators in population health surveys and is viewed as an excellent indicator of wellness. It also is a useful predictor of other wellness assets such as being free of chronic diseases and good functional ability. Being free of conditions that limit activity both inside and outside the home, being free of injuries and being physically active are all good assets for wellness.

A Physical Activity Index based on respondents’ answers to several questions related to the frequency, duration, and intensity of their participation in certain activities has been developed and used as an indicator in this section. For each leisure time activity, an average daily energy expenditure was calculated. Respondents were then classified as Active if their average daily energy expenditure was 3 kcal/kg/day, Moderately Active with an expenditure between 2.9 and 1.5 kcal/kg/day, and Inactive below 1.5 kcal/day.

The Health Utility Index (HUI) is a multi-attribute health and wellness indicator and provides a single summary score for a variety of indicators including: sensation (see, hear, speak); mobility; dexterity; emotion (happiness); cognition (learns and remembers); and pain status. A score of 0.8 or higher is considered to be very good or perfect health.

For seniors, physical recreation (e.g., walking, hiking) and active living are key wellness assets as they prolong independent functioning by compressing the impairment and disease period typically associated with aging.
Good to excellent self-perceived health

### Health Service Delivery Area

<table>
<thead>
<tr>
<th>HSDA</th>
<th>All respondents Ages 65+(%)</th>
<th>Males Ages 65+(%)</th>
<th>Females Ages 65+(%)</th>
<th>All Ages 65-74</th>
<th>All Ages 75+</th>
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**Province**

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<th>All respondents Ages 65+(%)</th>
<th>Males Ages 65+(%)</th>
<th>Females Ages 65+(%)</th>
<th>All Ages 65-74</th>
<th>All Ages 75+</th>
<th>All Ages 20-64</th>
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± 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). HSDA rate differs significantly from the Provincial rate.

### CCHS Question

In general, would you say your health is: excellent, very good, good, fair, or poor?

### Key Points

#### At the Provincial level:
- Senior respondents (ages 65+) have a significantly lower rate of having good to excellent self-perceived health than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

#### At the HSDA level:
- For all seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For male seniors, no HSDA differs significantly from the Provincial rate.
- For female seniors, there is no HSDA significantly higher, and there are 2 HSDAs significantly lower than the Provincial rate.
- For younger seniors, there is no HSDA significantly higher, and there is one HSDA significantly lower than the Provincial rate.
- For older seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.

#### Within HSDAs:
- For all seniors, there is no HSDA significantly higher, and there are 15 HSDAs significantly lower than their respective 20-64 age cohort.
- For male seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than its respective female age cohort.
- For younger seniors, there are 3 HSDAs significantly higher, and there is no HSDA significantly lower than their respective older age cohort.
### No long term physical, mental, or health condition that reduces activity at home

<table>
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<tr>
<th>Health Service Delivery Area</th>
<th>All respondents Ages 65+ (%)</th>
<th>Males Ages 65+ (%)</th>
<th>Females Ages 65+ (%)</th>
<th>All Ages 65-74</th>
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<td><strong>82.84</strong></td>
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† 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). HSDA rate differs significantly from the Provincial rate.

**CCHS Question**

Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity you can do at home: sometimes, often, or never?

**Key Points**

**At the Provincial level:**
- Senior respondents (ages 65+) have a significantly lower rate of having no long term physical, mental, or health condition that reduces activity at home than the 20-64 age cohort.
- Males ages 65+ have a significantly higher rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

**At the HSDA level:**
- For all seniors, no HSDA differs significantly from the Provincial rate.
- For male seniors, no HSDA differs significantly from the Provincial rate.
- For female seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For younger seniors, there is no HSDA significantly higher, and there is one HSDA significantly lower than the Provincial rate.
- For older seniors, no HSDA differs significantly from the Provincial rate.

**Within HSDAs:**
- For all seniors, there is no HSDA significantly higher, and there are 12 HSDAs significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, there are 4 HSDAs significantly higher, and there is no HSDA significantly lower than the Provincial rate.
No long term physical, mental, or health condition that reduces activity at home

All respondents 65+ (%)

Males 65+ (%)

Females 65+ (%)

All ages 65-74 (%)

All ages 75+ (%)

Source: CCHS Cycle 3.1

Data are suppressed in grey shaded areas due to StatsCan Rules
Cross hatched areas are significantly different than provincial average

Physical wellness 41
### No long term physical, mental, or health condition that reduces activity outside the home

**Health Service Delivery Area** | **All respondents Ages 65+(%)** | **Males Ages 65+(%)** | **Females Ages 65+(%)** | **All Ages 65-74** | **All Ages 75+** | **All Ages 20-64**
--- | --- | --- | --- | --- | --- | ---
31 Richmond | 80.05 | 79.57 | 80.46 | 86.21 | 67.80 | 87.68
32 Vancouver | 74.08 | 75.66 | 72.76 | 81.59 | 66.28 | 85.00
33 North Shore/Coast Garibaldi | 70.68 | 77.48 | 65.00 | 81.44 | 59.50 | 83.75
51 Northwest | 70.59 | F | F | 78.76 | F | 81.69
21 Fraser East | 68.93 | 73.07 | 65.40 | 78.82 | 56.81 | 84.51
11 East Kootenay | 68.87 | 76.15 | 61.85 | 72.90 | F | 71.55
14 Thompson Cariboo Shuswap | 68.18 | 66.18 | 70.13 | 70.57 | 63.53 | 76.91
42 Central Vancouver Island | 67.99 | 68.03 | 67.96 | 76.50 | 56.64 | 77.14
23 Fraser South | 66.55 | 71.24 | 62.97 | 75.78 | 54.95 | 82.78
12 Kootenay Boundary | 66.36 | 66.39 | 66.33 | 78.61 | 52.67 | 77.60
41 South Vancouver Island | 65.06 | 63.66 | 66.15 | 71.42 | 59.18 | 77.32
52 Northern Interior | 64.87 | F | 67.25 | 67.43 | 61.26 | 78.57
43 North Vancouver Island | 64.70 | 59.33 | 69.91 | 67.92 | 59.58 | 72.46
13 Okanagan | 62.88 | 67.71 | 58.68 | 76.08 | 50.43 | 79.84
22 Fraser North | 61.39 | 67.94 | 55.99 | 65.32 | 56.63 | 84.44
53 Northeast | 58.55 | F | 49.20E | 65.24 | F | 76.61

| 99 Province | 67.53 | 70.05 | 65.38 | 75.20 | 58.29 | 81.61 |
--- | --- | --- | --- | --- | --- | ---

† 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). HSDA rate differs significantly from the Provincial rate.

### CCHS Question

Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity you can do in other activities, for example, transportation or leisure? A long-term condition refers to a condition that is expected to last or has already lasted 6 months or more.

### Key Points

**At the Provincial level:**
- Senior respondents (ages 65+) have a significantly lower rate of having no long term physical, mental, or health condition that reduces activity outside the home than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

**At the HSDA level:**
- For all seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For male seniors, no HSDA differs significantly from the Provincial rate.
- For female seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For younger seniors, no HSDA differs significantly from the Provincial rate.
- For older seniors, no HSDA differs significantly from the Provincial rate.

**Within HSDAs:**
- For all seniors, there is no HSDA significantly higher, and there are 7 HSDAs significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, there are 4 HSDAs significantly higher, and there is no HSDA significantly lower than their respective older age cohort.
No long term physical, mental, or health condition that reduces activity outside the home

All respondents 65+ (%)

- 70.68 - 80.05
- 68.87 - 70.59
- 66.36 - 68.18
- 64.70 - 67.06
- 56.55 - 62.88

Males 65+ (%)

- 76.15 - 79.57
- 71.24 - 75.66
- 68.03 - 68.03
- 66.39 - 71.94
- 59.33 - 66.18

Females 65+ (%)

- 70.13 - 80.46
- 67.25 - 69.91
- 65.40 - 66.33
- 61.85 - 65.00
- 49.20 - 67.43

All ages 65-74 (%)

- 81.44 - 86.21
- 78.81 - 82.82
- 72.90 - 76.50
- 71.42 - 71.42
- 65.24 - 67.43

All ages 75+ (%)

- 63.33 - 67.80
- 59.50 - 61.26
- 59.18 - 59.18
- 56.63 - 56.81
- 50.43 - 54.95

Source: CCHS Cycle 3.1

Data are suppressed in grey shaded areas due to StatsCan Rules
Cross hatched areas are significantly different than provincial average
No repetitive strain injury in the past year

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<tr>
<th>Health Service Delivery Area</th>
<th>All respondents Ages 65+(%)</th>
<th>Males  65+(%)</th>
<th>Females Ages 65+(%)</th>
<th>All Ages 65-74</th>
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**CCHS Question**

In the past 12 months, did you have any injuries due to repetitive strain which were serious enough to limit your normal activities?

**Key Points**

**At the Provincial level:**
- Senior respondents (ages 65+) have a significantly higher rate of not having a repetitive strain injury in the past year than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have no significantly different rate than the older (75+) age cohort.

**At the HSDA level:**
- For all seniors, no HSDA differs significantly from the Provincial rate.
- For male seniors, there is one HSDA significantly higher, and there is one HSDA significantly lower than the Provincial rate.
- For female seniors, no HSDA differs significantly from the Provincial rate.
- For younger seniors, no HSDA differs significantly from the Provincial rate.
- For older seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than the Provincial rate.

**Within HSDAs:**
- For all seniors, there are 6 HSDAs significantly higher, and there is no HSDA significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, no HSDA differs significantly from its respective older age cohort.
No repetitive strain injury in the past year

All respondents 65+ (%)
- 92.30 - 94.41
- 91.87 - 92.15
- 90.79 - 91.76
- 88.30 - 90.71
- 84.39 - 88.12

All ages 75+ (%)
- 92.64 - 95.24
- 90.47 - 90.92
- 89.99 - 90.46
- 89.14 - 89.14
- 82.70 - 84.34

All ages 65-74 (%)
- 92.23 - 92.71
- 90.73 - 92.16
- 89.48 - 90.60
- 88.95 - 89.38
- 81.05 - 88.32

Females 65+ (%)
- 94.48 - 97.98
- 92.37 - 94.19
- 91.48 - 91.98
- 87.62 - 90.28
- 81.69 - 87.45

Males 65+ (%)
- 94.48 - 97.98
- 92.37 - 94.19
- 91.48 - 91.98
- 87.62 - 90.28
- 81.69 - 87.45

Data are suppressed in grey shaded areas due to StatsCan Rules
Cross hatched areas are significantly different than provincial average

Source:
CCHS Cycle 3.1
Injury-free in the past year

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‡ 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). HSDA rate differs significantly from the Provincial rate.

CCHS Question
Not counting repetitive strain injuries, in the past 12 months, were you injured?

Key Points

At the Provincial level:
- Senior respondents (ages 65+) have a significantly higher rate of being injury-free in the past year than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

At the HSDA level:
- For all seniors, there are 3 HSDAs significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For male seniors, there are 2 HSDAs significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For female seniors, no HSDA differs significantly from the Provincial rate.
- For younger seniors, there are 2 HSDAs significantly higher, and there is no HSDA significantly lower than the Provincial rate.
- For older seniors, there are 2 HSDAs significantly higher, and there is no HSDA significantly lower than the Provincial rate.

Within HSDAs:
- For all seniors, there are 6 HSDAs significantly higher, and there is no HSDA significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, there is one HSDA significantly higher, and there is no HSDA significantly lower than its respective older age cohort.
Injury free in the past year

All respondents 65+(%)

- 94.16 - 95.41
- 90.41 - 91.59
- 87.74 - 88.73
- 85.67 - 86.46
- 82.70 - 83.11

Source:
CCHS Cycle 3.1

Data are suppressed in grey shaded areas due to StatsCan Rules
Cross hatched areas are significantly different than provincial average

Males 65+ (%)

- 96.00 - 98.99
- 92.60 - 94.47
- 88.31 - 92.14
- 85.87 - 87.19
- 79.66 - 84.40

Females 65+ (%)

- 92.26 - 94.26
- 89.12 - 91.87
- 86.33 - 87.74
- 84.54 - 86.31
- 82.59 - 84.31

All ages 65-74 (%)

- 93.74 - 97.65
- 92.34 - 92.60
- 88.62 - 92.12
- 88.47 - 88.47
- 82.91 - 84.19

All ages 75+ (%)

- 93.36 - 95.78
- 89.08 - 92.22
- 85.12 - 88.36
- 82.36 - 84.27
- 80.48 - 80.98

Physical wellness 47
**Active or moderately active physical activity index score**

<table>
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<th>Health Service Delivery Area</th>
<th>All respondents Ages 65+(%)</th>
<th>Males Ages 65+(%)</th>
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</table>

### **99 Province**

|                  | 50.64‡ | 54.76† | 47.12 | 57.85* | 41.96 | 57.15 |

± 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). HSDA rate differs significantly from the Provincial rate.

### CCHS Question

Active or moderately active physical activity index score: respondents are classified as active, moderately active or inactive based on an index of average daily physical activity over the past 3 months. 3.0 kcal/kg/day or more = physically active; 1.5 - 2.9 kcal/kg/day = moderately active; less than 1.5 kcal per day = inactive.

### Key Points

**At the Provincial level:**
- Senior respondents (ages 65+) have a significantly lower rate of having an active or moderately active physical activity index score than the 20-64 age cohort.
- Males ages 65+ have a significantly higher rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

**At the HSDA level:**
- For all seniors, there is no HSDA significantly higher, and there are 3 HSDAs significantly lower than the Provincial rate.
- For male seniors, no HSDA differs significantly from the Provincial rate.
- For female seniors, no HSDA differs significantly from the Provincial rate.
- For younger seniors, no HSDA differs significantly from the Provincial rate.
- For older seniors, no HSDA differs significantly from the Provincial rate.

**Within HSDAs:**
- For all seniors, there is no HSDA significantly higher, and there are 3 HSDAs significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, there are 3 HSDAs significantly higher, and there is no HSDA significantly lower than their respective older age cohort.
Active or moderately active physical activity index score

All respondents 65+ (%)

Males 65+ (%)

Females 65+ (%)

All ages 65-74 (%)

All ages 75+ (%)

Source: CCHS Cycle 3.1

Data are suppressed in grey shaded areas due to StatsCan Rules

Cross hatched areas are significantly different than provincial average

Active or moderately active physical activity index score

Physical wellness 49
### Six or more hours walking to work to school or while doing errands per week

<table>
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<tr>
<th>Health Service Delivery Area</th>
<th>All respondents 65+(%)</th>
<th>Males 65+(%)</th>
<th>Females 65+(%)</th>
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| Province                         | 19.79‡                 | 18.88        | 20.56          | 23.14*         | 15.75        | 26.70          |

- 65+ age group differs significantly from 20-64 age group.
- † males differ significantly from females.
- * 65-74 age group differs significantly from 75+ age group.
- E interpret data with caution (16.77< coefficient of variation< 33.3).
- F data suppressed (n<30, or coefficient of variation >33.3).
- ‡ HSDA rate differs significantly from the Provincial rate.

## CCHS Question

In a typical week in the past 3 months, how many hours did you usually spend walking to work or to school or while doing errands?

## Key Points

### At the Provincial level:
- Senior respondents (ages 65+) have a significantly lower rate of walking six or more hours per week to work, school, or while doing errands than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

### At the HSDA level:
- Data are suppressed in most HSDAs, which precludes meaningful comparisons.

## Within HSDAs:
- Data are suppressed in most HSDAs, which precludes meaningful comparisons.
Six or more hours walking to work to school or while doing errands per week

**All respondents 65+ (%)**
- 32.67 - 52.99
- 27.09 - 30.25
- 19.47 - 21.28
- 14.64 - 15.09
- 12.20 - 14.43

**Females 65+ (%)**
- 51.20
- 37.05
- 27.04

**Males 65+ (%)**
- 54.84
- 34.11
- 27.04

**All ages 65-74 (%)**
- 66.04
- 40.61
- 33.12

**All ages 75+ (%)**

Source: CCHS Cycle 3.1

Data are suppressed in grey shaded areas due to StatsCan Rules
Cross hatched areas are significantly different than provincial average

See inset.
## Good health utility index score (0.8+)

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<th>All Ages 65-74</th>
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<td>55.98‡</td>
<td>56.04</td>
<td>55.93</td>
<td>66.25*</td>
<td>43.40</td>
<td>79.54</td>
</tr>
<tr>
<td>13  Okanagan</td>
<td>54.28‡</td>
<td>51.42</td>
<td>56.77</td>
<td>66.21*</td>
<td>43.04</td>
<td>77.16</td>
</tr>
<tr>
<td>12  Kootenay Boundary</td>
<td>53.87‡</td>
<td>F</td>
<td>62.03</td>
<td>68.07</td>
<td>F</td>
<td>76.83</td>
</tr>
<tr>
<td>14  Thompson Cariboo Shuswap</td>
<td>52.83‡</td>
<td>48.59</td>
<td>56.98</td>
<td>61.66</td>
<td>F</td>
<td>81.49</td>
</tr>
<tr>
<td>53  Northeast</td>
<td>48.50E‡</td>
<td>F</td>
<td>38.48E</td>
<td>50.82</td>
<td>F</td>
<td>73.90</td>
</tr>
<tr>
<td>99  Province</td>
<td>59.17‡</td>
<td>61.16</td>
<td>57.47</td>
<td>68.77*</td>
<td>47.60</td>
<td>79.81</td>
</tr>
</tbody>
</table>

* 65+ age group differs significantly from 20-64 age group. † males differ significantly from females. * 65-74 age group differs significantly from 75+ age group. E interpret data with caution (16.77< coefficient of variation< 33.3). F data suppressed (n<30, or coefficient of variation >33.3). ⬜ HSDA rate differs significantly from the Provincial rate.

### CCHS Question

The Health Status Index or Health Utility INDEX (HUI) provides a description of an individual's overall functional health, based on eight attributes: vision, hearing, speech, mobility (ability to get around), dexterity (use of hands and fingers), cognition (memory and thinking), emotion (feelings), and pain and discomfort.

### Key Points

**At the Provincial level:**
- Senior respondents (ages 65+) have a significantly lower rate of having a good health utility index score (0.8+) than the 20-64 age cohort.
- Males ages 65+ have no significantly different rate than the female ages 65+ cohort.
- Younger senior respondents (ages 65-74) have a significantly higher rate than the older (75+) age cohort.

**At the HSDA level:**
- For all seniors, no HSDA differs significantly from the Provincial rate.
- For male seniors, no HSDA differs significantly from the Provincial rate.
- For female seniors, no HSDA differs significantly from the Provincial rate.
- For younger seniors, no HSDA differs significantly from the Provincial rate.
- For older seniors, no HSDA differs significantly from the Provincial rate.

**Within HSDAs:**
- For all seniors, there is no HSDA significantly higher, and there are 14 HSDAs significantly lower than their respective 20-64 age cohort.
- For male seniors, no HSDA differs significantly from its respective female age cohort.
- For younger seniors, there are 5 HSDAs significantly higher, and there is no HSDA significantly lower than their respective older age cohort.