



Renfrew County and District Health Unit

Community Health Status Report

Issue Number 4 - July 1995

SUMMARY

This report is the latest in a series which began in August 1993. Earlier reports in the series presented a demographic profile of the community, information about employment, income, education, and a variety of health outcomes including mortality, morbidity, and reproductive outcomes. A number of significant differences were noted between Renfrew County and District residents and our provincial counterparts. For instance, overall mortality was found to be higher here, in particular premature deaths; income and education levels were found to be lower.

The current report is an examination of lifestyle risk factors which contribute to heart disease, cancer, injuries and other diseases in our community.

Smoking and exposure to environmental tobacco smoke (ETS) cause many heart disease and cancer deaths here. One-third of the population smokes and 40% are exposed to ETS in the home. Smoking rates are not significantly higher in Renfrew County than Ontario, but people do start smoking younger here. More than 150 people die each year here because of tobacco use. The fact that people in Renfrew County and District die younger from heart disease and cancer may be partly explained by earlier ages of smoking initiation here.

High fat intakes among Renfrew County residents are a serious problem. About 95% of our population consumes too much fat. Only one in twenty people in Renfrew County meets Health Canada's recommendation for fat intake compared to one in ten people in Ontario. A significant portion of our excess mortality from heart disease and premature death due to cancer can likely be attributed to this difference between Renfrew County residents and our provincial counterparts.

Fifty percent of the Renfrew County population is somewhat overweight or obese as compared with only 39% of the Ontario population, as a result of high fat intakes here, in combination with low activity levels. The higher prevalence of overweight here contributes to excess mortality due to heart disease and cancer.

Renfrew County residents fall far short of physical activity objectives set by the Ontario Ministry of Health. Only 25% of males and 16% of females over the age of 12 are active daily for at least 15 minutes. Inactivity is a major contributor to heart disease deaths here; however it does not account for any excess mortality here as Ontario residents are no more active than we are in Renfrew County.

Alcohol use is a serious problem in Renfrew County which helps to account for our excess death rates and PYLL rates due to accidents. As compared with Ontario, in Renfrew County more alcohol is consumed per capita, people start drinking at younger ages, more young adults drink, more males binge drink and report alcohol-related problems, and more motor vehicle accidents involve alcohol.

The potential to positively affect health status in Renfrew County and District by assisting people to change their smoking, eating, drinking and activity patterns appears to be substantial based on the data presented in this report. Excellent educational resources and programs are already offered locally by the Addiction Research Foundation, Canadian Cancer Society, the Lung Association of Renfrew County, the Heart and Stroke Foundation, and others. As well, the Renfrew County and District Health Unit promotes healthy lifestyles through a variety of programs and resources. Clearly however, there is much more work to be done, and a shift of resources into this area could have a substantial payoff in terms of improved health status in our community.



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"Promoting Healthy People in a Healthy Environment"

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