HEALTH

3.1 Health status

Canadians enjoy a quality of life equal to or better than that of the people of most other countries. Overall mortality rates have declined significantly since early in the 20th century. The burden of ill health on individuals has eased enormously over the past 50 years and many once prevalent infectious diseases have now been virtually eliminated. A majority of adult Canadians profess to be in good to excellent health for their age, and to be satisfied with their health.

Despite these encouraging signs, several important health problems remain. Currently, the leading causes of death are cardiovascular diseases, cancer and accidents. Hospital morbidity data also identify the continued incidence of heart disease, strokes, cancer, accidents and respiratory disease. They also point out the considerable burden of ill-health imposed by mental disorders. The rapid increase in the number of reported cases of Acquired Immunodeficiency Syndrome (AIDS) poses a challenge to the public health field.

In 1986, a federal publication entitled Achieving Health for All: A Framework for Health Promotion endorsed a broader concept of health "as a state of complete physical, mental and social well-being... and not something that comes about merely as a result of treating and curing illnesses and injuries".

Achieving Health for All deemed three challenges to be of national importance to the health of Canadians: reducing inequities in the health of low- versus high-income groups in Canada; increasing the effort to find new and more effective ways of preventing the occurrence of injuries, illnesses, chronic conditions and their resulting disabilities; and enhancing people's capacity to cope with chronic conditions, disabilities and mental health problems.

In regard to reducing inequities, the report notes that the burden of ill-health in Canada is concentrated disproportionately among members of disadvantaged groups. Members of low-income groups have a reduced life expectancy, and higher rates of disability and illness, including mental health disorders.

An increase in the prevention effort is required to counteract the various forms of preventable diseases and injuries which continue to undermine the health and quality of life of many Canadians. It is estimated that the use of preventive measures can lead to a further 50% reduction in the incidence of lung cancer and heart disease.

Many Canadians suffer from chronic disease, disability or various forms of emotional stress, and lack the community support to help them cope and to live meaningful and productive lives.

In 1985, the Department of National Health and Welfare commissioned Canada's first National Health Promotion Survey. The survey focused upon how Canadians see their health. and on the things that they are doing in order to be healthy. Canada's Health Promotion Survey covered a broad range of topics including personal practices like alcohol, tobacco and drug use; nutrition, exercise and safety; personal preventive practices; social support and the influence of family and friends; and health promotion in the home and the workplace. The results of the survey were published by the Department of National Health and Welfare in The Active Health Report, and in an overview, Technical Report.

Further reports from the survey will focus in greater detail on specific issues like prevention of alcohol, tobacco and drug abuse and implications for population groups such as seniors, women and the economically disadvantaged.

In October 1988, the department issued a discussion paper entitled *Mental Health for Canadians: Striking a Balance*. This document builds upon *Achieving Health for All* in examining current issues in mental health.

Canadians rate their health. New information regarding how adult Canadians rate their health, and about a range of lifestyle factors that can affect the health of Canadians is available from two recent surveys by Health and Welfare Canada