

## Introduction

According to the Health Council of Canada, about one-third of Canadians suffer from at least one chronic illness and, considering that the number of Canadians over age 65 is expected to double by the year 2036, this number is expected to rise significantly. *Health Guide Canada: An informative handbook on chronic and mental illnesses and health services in Canada* offers a comprehensive overview of 106 chronic and mental illnesses, including 7 brand new illness profiles, from Addison's to Wilson's disease. Each chapter includes an easy-to-understand medical description, plus a wide range of condition-specific support services and information resources that deal with the variety of issues concerning those with a chronic or mental illness, as well as those who support the illness community.

The word *chronic* comes from the Greek word *chronos*, meaning *time* (the Greek god Chronos is often depicted as Father Time). The World Health Organization defines a chronic disease as one "of long duration and generally slow progression." It is rarely curable and will likely cause significant changes to the person's quality of life. Mental health disorders include a wide variety of psychological illnesses.

*Health Guide Canada* contains thousands of ways to deal with the many aspects of chronic or mental health disorders. It includes associations, government agencies, libraries and resource centres, educational facilities, hospitals and publications. In addition to chapters dealing with specific chronic or mental conditions, there is a chapter relevant to the health industry in general, as well as others dealing with charitable foundations, death and bereavement groups, homeopathic medicine, indigenous issues and sports for the disabled.

This guide will provide critical information to those dealing for the first time with the stress and crucial need-to-know issues, as well as to those already coping with chronic disease. *How can I connect with others with diabetes? What cancer treatment is best for me? What genetic disorders could my child be at risk of inheriting? How can I better access public health programs through digital technology?* You'll find ways to answer these questions and more in Grey House's newly updated health text.

In addition to patients and families, hospital and medical centre personnel can find the support they need in their work or study. *Health Guide Canada* is full of resources crucial for people with chronic illness as they transition from diagnosis to home, home to work, and work to community life.

*Health Guide Canada* provides, in one source, comprehensive, critical, immediate information, from national associations to children's books. Each listing will provide a description, address (including website, email address and social media links, if possible) and executives' names and titles, as well as a number of details specific to that type of organization.

### Educational Material

To access information by specific chronic illness, body system or disorder category, the cross-referenced Chronic Illness–Body System chart in the front of the book makes it easy.

Two articles—*The health and well-being of Canadians* and *Digital technology as a tool for public health*—by the Public Health Agency of Canada provide an overview of the factors affecting the health of Canadians, and the role modern technology plays in connecting people to health care.

A Glossary of medical terminology, showing the meanings of prefixes, roots and suffixes follows the articles.

### Arrangement

**Section I: Chronic & Mental Illnesses** contains 106 chronic or mental condition chapters, which are arranged alphabetically by name of the disorder. Each chapter begins with a brief and straightforward description of the illness, showing probable causes, symptoms, prevalence and treatment options.

Following each description are disease-specific resources. Chapters contain the following: associations, publications, government agencies, libraries and resource centres, educational facilities, and hospitals—a total of over 5,000 listings. Listings include the name of the organization or publication, address, phone, fax number, email, website, social media links and executives, as available. Brief descriptions and other details are included depending on the type of listing: an association, for example, may include the year it was founded and yearly dues; while a magazine might include its frequency and number of pages.

**Section II: General Resources** includes similar categories to Section I, but shows information related to health in general instead of to a specific illness.

**Section III: Appendices** include charitable foundations, which lists organizations devoted to granting wishes of chronically and terminally ill individuals; death and bereavement listings showing support services for those who find themselves or a loved one close to death or grieving a loss; homeopathic medicine facilities providing information on where to access more holistic services; organizations devoted to indigenous health issues; and sports groups for the disabled.

**Section IV: Statistics** contains statistical data drawn from Statistics Canada and the Fraser Institute, showing information on numbers of people with different illnesses in Canada, the performance of the health program and wait times for certain procedures.

Rounding out this directory is the Index, which allows users additional access to the information.

*Health Guide Canada* is also available for subscription on CIRC: Canada's Information Resource Centre. Subscribers to CIRC can access their subscriptions online and do customized searches that make finding information quicker and easier. Visit [www.circ.greyhouse.ca](http://www.circ.greyhouse.ca) for more information.

## Chronic & Mental Illness—Body System

The following chart lists the illness and its body system(s) or disorder category. Chronic conditions not listed, such as Cancer, Genetic Disorders and Metabolic Disorders, do not fall into a specific system(s). A cross-reference chart follows that lists the information in reverse—body system or disorder categories followed by chronic illnesses.

<b>CHRONIC &amp; MENTAL ILLNESS</b>	<b>BODY SYSTEM/DISORDER CATEGORY</b>
Addison's Disease	Endocrine
Adjustment Disorders	Behavioural
Aging	Cells & Tissues
AIDS/HIV	Immune, Infectious Disease
Allergies	Immune
Alzheimer's Disease	Nervous
Amyotrophic Lateral Sclerosis	Nervous
Anxiety Disorders	Behavioural
Arthritis	Muscular, Skeletal
Asthma	Respiratory
Ataxia	Nervous
Attention Deficit Hyperactivity Disorder	Behavioural, Developmental
Autistic Spectrum Disorders	Behavioural, Developmental
Brain Tumours	Nervous
Blood Disorders	Blood
Carpal Tunnel Syndrome	Muscular, Skeletal, Nervous
Celiac Disease	Gastrointestinal
Cerebral Palsy	Nervous, Muscular
Chronic Fatigue Syndrome	Immune
Chronic Pain	Nervous
Cognitive Disorders	Nervous
Conduct Disorder	Behavioural
Congenital Heart Disease	Cardiovascular
Cooley's Anemia (Thalassemia)	Blood
Crohn's Disease	Gastrointestinal
Cystic Fibrosis	Respiratory, Gastrointestinal
Diabetes Mellitus	Endocrine
Down Syndrome	Developmental
Eating Disorders (Anorexia Nervosa, Bulimia)	Behavioural
Endometriosis	Reproductive
Epilepsy	Nervous
Fabry Disease	Gastrointestinal
Fibromyalgia	Muscular, Skeletal
Gastrointestinal Disorders	Gastrointestinal
Gaucher Disease	Gastrointestinal
Gender Dysphoria	Behavioural
Growth Disorders	Developmental
Gulf War Syndrome	Nervous
Head Injuries	Nervous
Hearing Loss	Sensory
Heart Disease	Cardiovascular
Hemophilia	Blood
Hepatitis	Infectious Disease
Huntington Disease	Nervous
Hydrocephalus	Nervous
Hypertension	Cardiovascular
Impulse Control Disorder	Behavioural
Incontinence	Urinary
Infertility	Reproductive
Kidney Disease	Gastrointestinal
Leprosy	Dermatologic, Nervous
Liver Disease	Gastrointestinal
Lung Disease	Respiratory

# THE HEALTH AND WELL-BEING OF CANADIANS

Many factors can impact and influence the health of a population. Being able to identify who we are using characteristics such as age and sex, and factors that may influence overall health, such as education, income and personal behaviours, can help to explain some health outcomes.

## Who we are

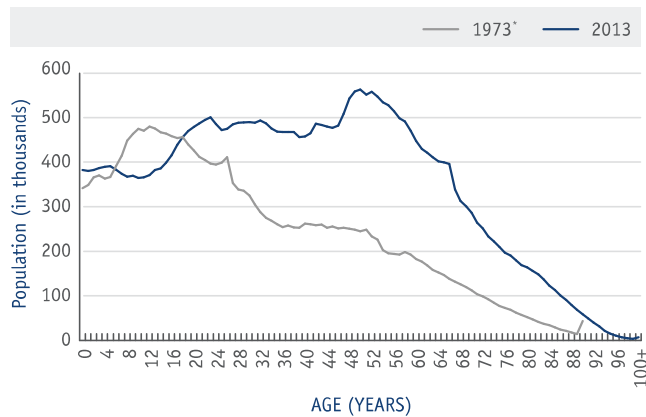
### Population

Canada's population has increased by 56% over the past 40 years and exceeded 35 million people in 2013.<sup>15</sup> As estimated by the 2011 National Household Survey, 1.4 million people in Canada identified as Aboriginal (61% First Nations, 32% Métis and 4% Inuit), while 6.8 million identified as being foreign born.<sup>9, 415</sup> The majority of Canadians (61%) lived in large urban population centres in 2011.<sup>15, 308</sup>

### Life expectancy

The life expectancy of Canadians has increased dramatically, by approximately 19 years for males and 22 years for females, over the past three-quarter century.<sup>17, 18</sup>

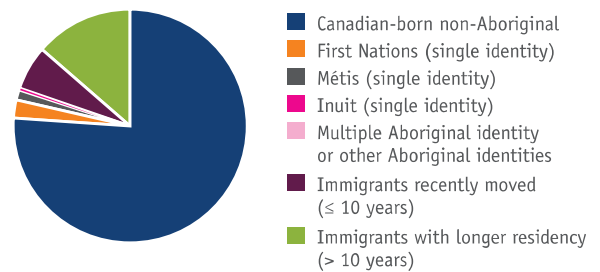
**FIGURE A.1** Population by age, Canada, 1973\* and 2013<sup>15</sup>



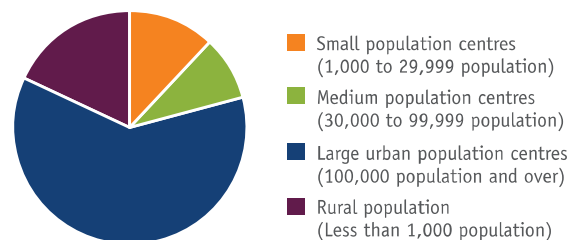
\* Population totals at 90 years in 1973.



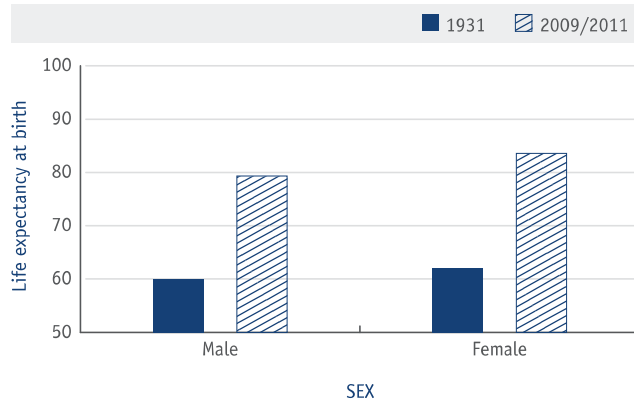
**FIGURE A.2** Population distribution by origin, Canada, 2011<sup>9, 15, 415</sup>



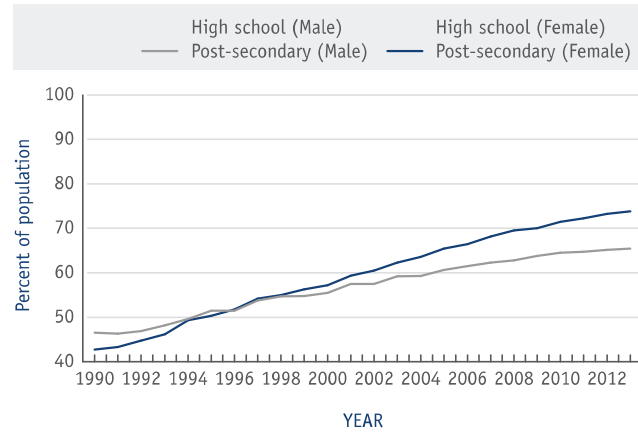
**FIGURE A.3** Population distribution by population density, Canada, 2011<sup>15, 308</sup>



**FIGURE A.4** Life expectancy at birth by sex, Canada, 1931 and 2009/2011<sup>17, 18</sup>



**FIGURE A.5** Population\* completing high school or post-secondary school by sex, Canada excluding territories, 1990 to 2013<sup>416</sup>



## Factors influencing health

### Education, employment and income

#### Education

Better education generally leads to better overall health.<sup>124, 418, 419</sup> The number of Canadians who have completed high school has steadily increased over the past 20 years.<sup>416</sup> The number of people, particularly females, who have completed a post-secondary education has also increased.<sup>416</sup>

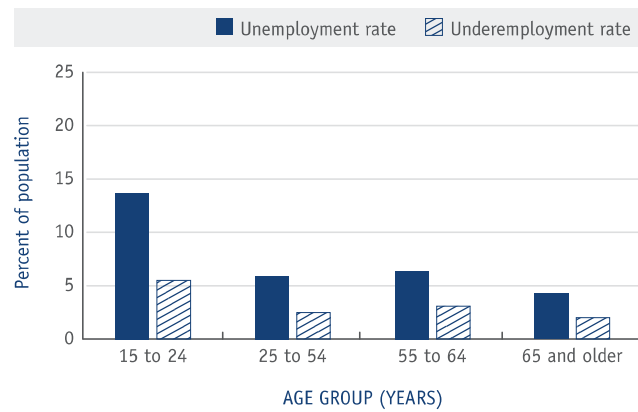
#### Employment

Unemployment has been associated with poorer health outcomes.<sup>124, 171</sup> Unemployed workers are twice as likely as their employed counterparts to experience psychological problems such as depression, anxiety, low self-perceived health and poor self-esteem.<sup>419, 420</sup>

Like unemployment, underemployment—people working part-time because they cannot find full-time employment, discouraged employment seekers and those waiting to hear about possible employment—is unequally distributed across the population.<sup>421</sup> Younger workers, females and visible minorities report higher rates of underemployment.<sup>421</sup>

\* Population aged 25 to 44 years.

**FIGURE A.6** Unemployment and underemployment rate by age group, Canada excluding territories, 2013<sup>417</sup>



## Addison's Disease

Addison's disease, also referred to as adrenal insufficiency, stems from the malfunction of the adrenal glands located on top of the kidneys. In this disease, there is an insufficient amount of cortisol and aldosterone produced by the adrenal cortex, the gland's firm outer layer.

### Cause

Most often, Addison's disease results from destruction of the adrenal gland. Patients develop antibodies against their own adrenal tissue (autoimmune reaction). It may also be caused by fungal infections (or other infections such as HIV and tuberculosis), malignant tumours, trauma or blood loss.

### Symptoms

The symptoms of Addison's disease usually develop slowly over the course of several months. Signs of the disease may include fatigue, weakness, loss of appetite, nausea and vomiting, low blood pressure (hypotension) and salt cravings. Other symptoms such as darkening of the skin (hyperpigmentation), muscle pain, low blood sugar (hypoglycemia), depression and irritability may also occur. If a person is in acute adrenal failure (Addisonian crisis), there may be a sudden onset of signs and symptoms such as severe vomiting and diarrhea, pain in the lower abdomen, back or legs, low blood pressure, difficulty breathing and loss of consciousness.

### Prevalence

Addison's disease is a rare disorder that is diagnosed in about 1 in 100,000 people. It affects men, women and children of all ages.

### Treatment Options

Addison's disease is diagnosed after a thorough medical history is taken, and a number of tests are performed. These tests may include a blood test, an ACTH (adrenocorticotropic hormone) test, an insulin-induced hypoglycemia test and imaging tests.

The primary treatment for Addison's disease is hormone replacement therapy. Options to counteract hormonal loss include oral corticosteroids, corticosteroid injections and androgen replacement therapy. During times of illness and surgery, a temporary increase in dosage is usually suggested. Treatment should never be stopped, even for a day, without the advice of a physician. Persons undergoing treatment should wear a medical alert bracelet and carry a medical identification card to let emergency medical providers know of their diagnosis. Immediate treatment—typically through injections of hydrocortisone, saline and sugar—is required during an Addisonian crisis.

People with Addison's disease require lifelong treatment. However, with proper hormone replacement therapy, they are able to lead normal lives.

## National Associations

### The Canadian Addison Society / La Société canadienne d'Addison

193 Elgin Ave. West, Goderich ON N7A 2E7

Toll-Free: 888-550-5582

Other Communication: [newsletter@addisonsociety.ca](mailto:newsletter@addisonsociety.ca)

e-mail: [liaisonsecretary@addisonsociety.ca](mailto:liaisonsecretary@addisonsociety.ca)

[www.addisonsociety.ca](http://www.addisonsociety.ca)

**Overview:** A small national charitable organization founded in 1990

**Mission:** To offer information about Addison's Disease; To assist in the education of the medical society & the public about Addison's Disease

#### Chief Officer(s):

Harold Smith, President

[president@addisonsociety.ca](mailto:president@addisonsociety.ca)

Roger Steinmann, Vice-President

[vicepresident@addisonsociety.ca](mailto:vicepresident@addisonsociety.ca)

Rick Burpee, Secretary-Treasurer

[Treasurer@addisonsociety.ca](mailto:Treasurer@addisonsociety.ca)

#### Publications:

• The Canadian Addison Society Newsletter

Type: Newsletter; Frequency: Quarterly; Editor: Patricia Hehner

Profile: Society updates & current information regarding Addison's Disease

## Adjustment Disorders

### Cause

The experience of stress in life is inevitable. Serious life changes such as job loss, divorce and surgery, and more commonplace events like the first day of school and worries about money can all be stressful. When faced with such situations, people usually do their best to cope and move on. However, if a person cannot seem to adjust to these life changes and continues to feel overwhelmed and anxious and have trouble functioning normally, an adjustment disorder—a stress-related mental illness—may be diagnosed. Adjustment disorders are divided into six subtypes: depressed mood; anxiety; mixed anxiety and depressed mood; disturbance of conduct; mixed disturbance of emotions and conduct; and unspecified.

### Symptoms

The symptoms of adjustment disorders are both emotional and behavioural, and vary from person to person. However, in all cases, the symptoms begin within three months of experiencing a stressful event. An adjustment disorder may make a person feel sad, nervous, anxious, worried, hopeless or desperate. Physical complaints such as trembling, twitching and skipped heartbeats may also be experienced. People suffering from an adjustment disorder may also exhibit changes in behaviour including social withdrawal, vandalism, truancy, fighting and reckless driving. Adjustment disorders increase the risk of suicidal behaviour, and they also complicate the course of other medical conditions (for example, patients may not take their medication or eat properly). If the symptoms persist for less than six months after the stressor ends, the disorder is considered acute; if symptoms persist for more than six months, the disorder is considered to be chronic.

### Prevalence

Men and women of all ages, as well as children, can suffer from this disorder. The chance of having an adjustment disorder is about the same for boys and girls, but among adults, women are twice as likely as men to be affected. In the general population, the prevalence of adjustment disorders is estimated to range from 5 to 20 percent. In the labour market, an adjustment disorder—often referred to as burnout—is one of the most common mental disorders diagnosed in workers.

### Treatment Options

The diagnosis of an adjustment disorder is made after a thorough psychiatric evaluation has ruled out other possible diagnoses. For example, symptoms that are part of a personality disorder and become worse under stress are not usually considered to be adjustment disorders unless they are new types of symptoms for the individual. The patient must also meet the criteria for adjustment disorder that are specified in the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*. An emotional or behavioural response that is out-of-proportion to a specific stressor, or that impairs a person's ability to function in social, workplace and school settings meets the criteria, as do symptoms that develop within three months of experiencing a stressful event (other than bereavement).

Anyone who is experiencing one or more stressful events or circumstances, and feels overwhelmed or markedly distressed and cannot function normally, should seek help. The main type of

## National Associations

### Accreditation Canada / Agrément Canada

1150 Cyrville Rd., Ottawa ON K1J 7S9

Tel: 613-738-3800; Fax: 613-738-7755

Toll-Free: 800-814-7769

e-mail: communications@accreditation.ca

www.accreditation.ca

**Previous Name:** Canadian Council on Health Services Accreditation; Canadian Council on Health Facilities Accreditation

**Overview:** A large national licensing charitable organization founded in 1958

**Mission:** To improve quality in health services through accreditation; To provide health care organizations with a voluntary, external peer review to assess the quality of their services

**Chief Officer(s):**

Sébastien Audette, Chief Executive Officer & Secretary

Jil Beardmore, Contact

jil.beardmore@accreditation.ca

**Publications:**

- Accreditation Canada Annual Report

Type: Yearbook; Frequency: Annually

- Accreditation Standard

Type: Newsletter; Frequency: Semiannually; Editor: Sandra Morrison; Leanne Craig; ISBN: 978-1-55149-086-1

Profile: Updates & information about accreditation for Accreditation Canada's client organizations

- Canadian Health Accreditation Report

Frequency: Annually; ISBN: 978-1-55149-073-1

Profile: Findings from accreditation surveys, highlights of challenges & successes in health care, & leading practices by health organizations across Canada

- In Touch: A Newsletter for Surveyors

Type: Newsletter; Editor: Erin Guthrie

Profile: Information for surveyors

- Leadership in the Journey to Quality Health Care: The History of Accreditation

Type: Book

Profile: Evolution of Accreditation Canada over the past fifty years

- Leading Practices

Frequency: Annually

Profile: Companion report to the annual Canadian Health Accreditation Report which presents a compilation of practices identified by surveyors

- Qmentum Quarterly

Type: Journal; Frequency: Quarterly; Accepts Advertising; Editor: Erin Guthrie

Profile: Educational information for health & social services organizations to improve quality & patient safety

- The Value & Impact of Accreditation in Health Care: A Review of the Literature

Author: Wendy Nicklin; Sarah Dickson

- Within Our Grasp: A Healthy Workplace Action Strategy for Success & Sustainability in Canada's Healthcare System

### Association des établissements privés conventionnés - santé services sociaux (AEPCC)

#200, 1076, rue de Bleury, Montréal QC H2Z 1N2

Tél: 514-499-3630; Téléc: 514-873-7063

Courriel: info@aepc.qc.ca

www.aepc.qc.ca

www.facebook.com/416653585019212

twitter.com/AEPC\_SSS

**Nom précédent:** Association des centres hospitaliers et centres d'accueil privés du Québec

**Aperçu:** Dimension: moyenne; Envergure: nationale; Organisme sans but lucratif; fondée en 1979

**Mission:** Promouvoir l'amélioration continue de la qualité des soins et des services donnés au sein des entreprises membres; protéger et promouvoir l'entreprise privée dans le domaine de la santé et du bien-être

**Membre(s) du bureau directeur:**

Danny Macdonald, Directeur général par intérim

### Association for Vaccine Damaged Children

c/o Mary James, 67 Shier Dr., Winnipeg MB R3R 2H2

**Overview:** A small national organization founded in 1986

**Mission:** To inform parents of the risks of immunization; To support parents in any challenging situation with public health authorities

**Chief Officer(s):**

Mary James, Contact, 204-895-9192

tjames4@shaw.ca

### Association of Faculties of Medicine of Canada (AFMC) / L'Association des facultés de médecine du Canada (AFMC) #800, 265 Carling Ave., Ottawa ON K1S 2E1

Tel: 613-730-0687; Fax: 613-730-1196

e-mail: username@afmc.ca

www.afmc.ca

twitter.com/afmc\_e

**Previous Name:** Association of Canadian Medical Colleges

**Overview:** A medium-sized national charitable organization founded in 1943

**Mission:** To represent the interests of members in medical research policy formulation; to promote & advance academic medicine through the review & development of standards for medical education, through the development of national policies appropriate to the aims & purposes of Canadian faculties of medicine, through the fostering of research, & through representation of Canadian faculties of medicine to professional associations & governments

**Affiliation(s):** Canadian Medical Association; Association of Universities & Colleges of Canada

**Chief Officer(s):**

Genevieve Moineau, President & CEO

### Association of Medical Microbiology & Infectious Disease Canada (AMMI Canada) / Association pour la microbiologie médicale et l'infectiologie Canada

#101, 298 Elgin St., Ottawa ON K2P 1M3

Tel: 613-260-3233; Fax: 613-260-3235

Other Communication: Alternate e-mail: communications@ammi.ca

e-mail: info@ammi.ca

www.ammi.ca

**Previous Name:** Canadian Infectious Disease Society

**Overview:** A small national charitable organization founded in 1978

**Mission:** To represent the broad interests of researchers & physicians who specialize in the fields of infectious diseases & medical microbiology in Canada; To contribute to the health of people at risk of, or affected by, infectious diseases; To promote & facilitate research; To develop policies for the prevention, diagnosis, & management of infectious diseases

**Chief Officer(s):**

Lynn Johnston, President

Brett Filson, Executive Director

director@ammi.ca

Riccarda Galioto, Office Manager & Coordinator, Special Events

manager@ammi.ca

Sarah Forgie, Secretary

Mel Krajden, Treasurer

Kimberley Wannamaker, Administrative Assistant, Membership

info@ammi.ca

Gwen Lovagi, Contact, Communications

communications@ammi.ca

**Publications:**

- Association of Medical Microbiology & Infectious Disease Canada Annual Report

Type: Yearbook; Frequency: Annually

- Association of Medical Microbiology & Infectious Disease Canada Membership Directory

Type: Directory

- Canadian Journal of Infectious Disease & Medical Microbiology

Type: Journal; Price: Free with membership in the Association of Medical Microbiology & Infectious Disease

- Members Connect [a publication of the Association of Medical Microbiology & Infectious Disease Canada]

Type: Newsletter; Price: Free with membership in the Association of Medical Microbiology & Infectious Disease

Profile: The newsletter of the Association of Medical Microbiology & Infectious Disease Canada

### Barth Syndrome Foundation of Canada

#115, 162 Guelph St., Georgetown ON L7G 5X7

Tel: 905-873-2391; Fax: 905-877-5952

Toll-Free: 888-732-9458

www.barthsyndrome.ca

## Charitable Foundations

### National Associations

#### Achilles Canada

123 Snowden Ave., Toronto ON M4N 2A8

Tel: 416-485-6451; Fax: 416-485-0823  
www.achillescanada.ca

**Previous Name:** Achilles Track Club Canada

**Overview:** A medium-sized national charitable organization founded in 1999

**Mission:** To encourage & assist all persons with disabilities to enjoy running for health in a social environment

**Chief Officer(s):**

Brian McLean, Contact  
bmclean@achillescanada.ca

#### Acupuncture Foundation of Canada Institute (AFCI) / Institut de la fondation d'acupuncture du Canada

#204, 2131 Lawrence Ave. East, Toronto ON M1R 5G4

Tel: 416-752-3988; Fax: 416-752-4398  
e-mail: afciweb@afcinstitute.com  
www.afcinstitute.com

**Overview:** A medium-sized national organization founded in 1995

**Mission:** To define & maintain the highest professional standards for the use of acupuncture; to gain recognition of acupuncture's legitimate place in western medicine as a safe, efficient complement to conventional medical treatment; to design educational training programs for physicians, physiotherapists, RNs, dentists, chiropractors & naturopaths in the methodology & practice of acupuncture

**Affiliation(s):** World Federation of Acupuncture Societies; Pan Pacific Medical Acupuncture Forum

**Chief Officer(s):**

Mac Mierzejewski, President/Chair  
Cathy Donald, Treasurer  
Ronda Kellington, Managing Director

#### Air Canada Foundation

e-mail: foundation-fondation@aircanada.ca  
www.aircanada.com/en/about/community/foundation

**Overview:** A medium-sized national charitable organization founded in 2012

**Mission:** Helps connect sick children to the medical care they need, alleviate child poverty, and make the wishes of ill kids come true.

#### L'Arche Foundation

#300, 10271 Yonge St., Richmond Hill ON L4C 3B5

Tel: 905-770-7696; Fax: 905-884-4819  
e-mail: foundation@larche.ca  
www.larchefoundation.ca  
www.facebook.com/larche.canada

**Overview:** A medium-sized national charitable organization overseen by L'Arche Canada

**Mission:** To raise money to support the activities of L'Arche Canada

**Member of:** L'Arche International

**Chief Officer(s):**

Kathy Adamo, Acting Executive Director  
Dean Levitt, Chair

#### The Belinda Stronach Foundation (TBSF)

Toronto ON

www.tbsf.ca  
www.youtube.com/user/TheTBSFChannel

**Overview:** A small national charitable organization founded in 2008

**Mission:** Assists girls and women and Aboriginal youth in Canada and youth in developing nations to achieve a better life through the provision of programs that enhance basic health and education, improve economic and political independence and that promote civic involvement.

**Chief Officer(s):**

Belinda Stronach, President & CEO

#### Best Buddies Canada (BBC) / Vrais Copains

#923, 1243 Islington Ave., Toronto ON M8X 1Y9

Tel: 416-531-0003; Fax: 416-531-0325  
Toll-Free: 888-779-0061  
e-mail: info@bestbuddies.ca  
www.bestbuddies.ca  
www.facebook.com/BestBuddiesCanada  
twitter.com/BestBuddiesCND

**Overview:** A medium-sized national charitable organization founded in 1995

**Mission:** To enhance our communities through one-to-one friendships between students & people with intellectual disabilities

**Member of:** Best Buddies International

**Chief Officer(s):**

Stephen Pinnock, Executive Director, 416-531-0003  
sp@bestbuddies.ca

Emily Bolyea-Kyere, Director, Program & Special Events  
emily@bestbuddies.ca

#### Canadian Abilities Foundation

#803, 255 Duncan Mill Rd., Toronto ON M3B 3H9

Tel: 416-421-7944; Fax: 416-421-8418  
e-mail: abilities@bcsgroup.com  
www.abilities.ca  
twitter.com/abilitiescanada

**Overview:** A small national charitable organization founded in 1988

**Mission:** To provide information, inspiration & opportunity to Canadians with disabilities

**Chief Officer(s):**

Cameron Graham, Chair

**Publications:**

• Abilities

Type: Magazine; Frequency: Quarterly; Accepts Advertising

Profile: For people with disabilities, their families, friends, & professionals

#### Canadian Association of Medical Teams Abroad (CAMTA)

103 Laurier Dr., Edmonton AB T5R 5P6

Tel: 780-486-7161; Fax: 403-223-9020  
e-mail: info@camta.com  
camta.com  
www.facebook.com/237638586268756  
twitter.com/camta

**Overview:** A small national charitable organization founded in 2001

**Mission:** CAMTA provides orthopedic surgeries to pediatric and adult patients in Ecuador.

**Chief Officer(s):**

Marc Moreau, President  
Jim Raso, Secretary  
Sandra Muchekeza, Administrator

#### Canadian Burn Foundation (CBF)

2051 - 47 St., Edmonton AB T6L 2V5

Tel: 780-448-9025  
Toll-Free: 877-448-9025  
e-mail: info@canadianburnfoundation.org  
www.canadianburnfoundation.org

**Overview:** A small national organization founded in 1998

**Mission:** To provide support & services to burn survivors

**Chief Officer(s):**

Barry Peachey, President  
Stephen Williams, CEO  
swilliams@canadianburnfoundation.org  
Nadine Spindler, Executive Director  
nadine@canadianburnfoundation.org

#### Canadian Digestive Health Foundation (CDHF) / Fondation canadienne pour la promotion de la santé digestive

PO Box 76059, #3, 1500 Upper Middle Rd., Oakville ON L6M 3H5

Tel: 905-829-3949  
www.cdhf.ca  
www.linkedin.com/company/649009  
www.facebook.com/CDHFdn  
twitter.com/TheCDHF  
www.youtube.com/user/CDHFtube

**Overview:** A medium-sized national charitable organization founded in 1994 overseen by Canadian Association of Gastroenterology

**Mission:** To raise funds for the protection, promotion, & improvement of digestive health

## Statistics

This statistics section starts with tables of health topics that include geographic regions (Canada and its provinces) and age-standardized rates. Topics include overall health and mental health, life stress, specific conditions such as diabetes and cancer, injuries in the last 12 months, leisure-time physical activity, exposure to second-hand smoke at home, and sense of community well being, among others. Most topics break down into sub-categories such as Both Sexes, Males, and Females-for a total of 158 tables. They include data for up to eleven years, from 2003 to 2013.

Following the health trends tables is a section of graphs on wait times-referral to appointment, appointment to treatment, referral to treatment-by province. The data includes statistics for the years 1993/1994 and 2014 for easy comparison.

Perceived health, very good or excellent, both sexes, Canada, provinces and territories . . . . .	776
Perceived health, very good or excellent, males, Canada, provinces and territories . . . . .	777
Perceived health, very good or excellent, females, Canada, provinces and territories . . . . .	778
Perceived health, fair or poor, both sexes, Canada, provinces and territories . . . . .	779
Perceived health, fair or poor, males, Canada, provinces and territories . . . . .	780
Perceived health, fair or poor, females, Canada, provinces and territories . . . . .	781
Perceived mental health, very good or excellent, both sexes, Canada, provinces and territories . . . . .	782
Perceived mental health, very good or excellent, males, Canada, provinces and territories . . . . .	783
Perceived mental health, very good or excellent, females, Canada, provinces and territories . . . . .	784
Perceived mental health, fair or poor, both sexes, Canada, provinces and territories . . . . .	785
Perceived mental health, fair or poor, males, Canada, provinces and territories . . . . .	786
Perceived mental health, fair or poor, females, Canada, provinces and territories . . . . .	787
Perceived life stress, both sexes, Canada, provinces and territories . . . . .	788
Perceived life stress, males, Canada, provinces and territories . . . . .	789
Perceived life stress, females, Canada, provinces and territories . . . . .	790
Overweight or obese, both sexes, Canada, provinces and territories . . . . .	791
Overweight or obese, males, Canada, provinces and territories . . . . .	792
Overweight or obese, females, Canada, provinces and territories . . . . .	793
Overweight, both sexes, Canada, provinces and territories . . . . .	794
Overweight, males, Canada, provinces and territories . . . . .	795
Overweight, females, Canada, provinces and territories . . . . .	796
Obese, both sexes, Canada, provinces and territories . . . . .	797
Obese, males, Canada, provinces and territories . . . . .	798
Obese, females, Canada, provinces and territories . . . . .	799
Arthritis, both sexes, Canada, provinces and territories . . . . .	800
Arthritis, males, Canada, provinces and territories . . . . .	801
Arthritis, females, Canada, provinces and territories . . . . .	802
Diabetes, both sexes, Canada, provinces and territories . . . . .	803
Diabetes, males, Canada, provinces and territories . . . . .	804
Diabetes, females, Canada, provinces and territories . . . . .	805
Asthma, both sexes, Canada, provinces and territories . . . . .	806
Asthma, males, Canada, provinces and territories . . . . .	807
Asthma, females, Canada, provinces and territories . . . . .	808
High blood pressure, both sexes, Canada, provinces and territories . . . . .	809
High blood pressure, males, Canada, provinces and territories . . . . .	810
High blood pressure, females, Canada, provinces and territories . . . . .	811
Mood disorder, both sexes, Canada, provinces and territories . . . . .	812
Mood disorder, males, Canada, provinces and territories . . . . .	813
Mood disorder, females, Canada, provinces and territories . . . . .	814
Pain or discomfort, moderate or severe, both sexes, Canada, provinces and territories . . . . .	815
Pain or discomfort, moderate or severe, males, Canada, provinces and territories . . . . .	816
Pain or discomfort, moderate or severe, females, Canada, provinces and territories . . . . .	817
Pain or discomfort that prevents activities, both sexes, Canada, provinces and territories . . . . .	818
Pain or discomfort that prevents activities, males, Canada, provinces and territories . . . . .	819
Pain or discomfort that prevents activities, females, Canada, provinces and territories . . . . .	820
Low birth weight, both sexes, Canada, provinces and territories . . . . .	821
Low birth weight, males, Canada, provinces and territories . . . . .	822
Low birth weight, females, Canada, provinces and territories . . . . .	823
Chronic obstructive pulmonary disease (COPD), both sexes, Canada, provinces and territories . . . . .	824
Chronic obstructive pulmonary disease (COPD), males, Canada, provinces and territories . . . . .	825
Chronic obstructive pulmonary disease (COPD), females, Canada, provinces and territories . . . . .	826
Injuries within the past 12 months causing limitation of normal activities, both sexes, Canada, provinces and territories . . . . .	827
Injuries within the past 12 months causing limitation of normal activities, males, Canada, provinces and territories . . . . .	828
Injuries within the past 12 months causing limitation of normal activities, females, Canada, provinces and territories . . . . .	829



Age-standardized rates, perceived health, very good or excellent (%),<sup>1</sup> both sexes, Canada, provinces and territories

Geography	Age-standardized rates, both sexes										
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
◀▼▲▶	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲	▼▲
<b>Canada</b>	59.7	..	61.5	..	61.2	60.6	62.2	61.9	61.6	61.9	61.3
Newfoundland and Labrador	67.4	..	65.6	..	64.0	63.5	59.3	65.4	62.2	61.1	63.6
Prince Edward Island	66.2	..	60.2	..	59.3	63.2	62.9	67.0	59.7	60.6	59.7
Nova Scotia	60.0	..	60.1	..	59.5	58.6	62.1	60.8	61.1	60.7	60.9
New Brunswick	52.1	..	56.8	..	58.1	57.6	58.4	57.1	56.6	57.8	57.7
Quebec	58.6	..	61.2	..	61.6	61.3	63.3	61.5	61.7	61.7	60.9
Ontario	58.3	..	62.0	..	61.2	60.9	62.8	62.6	61.7	62.5	62.0
Manitoba	62.4	..	60.7	..	61.5	55.9	61.8	58.4	58.0	60.3	60.3
Saskatchewan	61.6	..	59.7	..	58.4	56.6	61.0	59.7	58.7	59.0	60.1
Alberta	63.7	..	62.4	..	62.6	63.4	61.8	62.4	62.7	62.9	62.5
British Columbia	61.6	..	61.0	..	60.5	58.7	60.6	62.6	62.7	61.4	60.4
Yukon	54.3	..	57.4	..	55.8	61.6	60.8	57.8	60.1	57.1	59.7
Northwest Territories	54.4	..	60.5	..	50.7	47.9	49.6	45.4	46.9	52.0	53.7
Nunavut	52.1	..	46.8	..	54.4	42.9	41.6	45.9	42.7	42.2	35.7

## Symbols

.. not available for a specific reference period

## Footnotes

<sup>1</sup> Perceived health, very good or excellent

**Source:** Statistics Canada, Canadian Community Health Survey.

**CANSIM table no(s):** [105-0501](#) (rates), [105-0503](#) (age-standardized rates)

Population aged 12 and over who reported perceiving their own health status as being either excellent or very good or fair or poor, depending on the indicator. Perceived health refers to the perception of a person's health in general, either by the person himself or herself, or, in the case of proxy response, by the person responding. Health means not only the absence of disease or injury but also physical, mental and social well being.

Perceived 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, physiological and psychological reserves as well as social and mental function.

Perceived health refers to a person's health in general — not only the absence of disease or injury, but also physical, mental and social well-being.

Statistics Canada. 2014. *Health Trends*. Statistics Canada Catalogue No. 82-213-XWE. Ottawa. Released June 12, 2014. <http://www12.statcan.gc.ca/health-sante/82-213/index.cfm?Lang=ENG> (accessed May 11, 2015).

## Sources for Disease Descriptions

- "3rd National Symposium on Child & Youth Mental Health," School Based Mental Health and Substance Abuse Consortium, accessed March 21, 2013, <http://childyouth.mh.symposium.curriculum.org>.
- "A Brief History of HIV/AIDS in Canada," Public Health Agency of Canada, last modified September 25, 2011, accessed March 20, 2013, <http://www.phac-aspc.gc.ca/aids-sida/info/1-eng.php>.
- "About Blood Disorders," Canadian Stem Cell Foundation, accessed April 23, 2015, <http://stemcellfoundation.ca/en/disease/blood-disorders>.
- "About Celiac Disease," Canadian Celiac Association, accessed March 20, 2013, <http://www.celiac.ca/index.php/about-celiac-disease-2/symptoms-treatment-cd>.
- "Achalasia - Esophageal achalasia," PubMed Health, U.S. National Library of Medicine, last modified January 20, 2010, accessed March 6, 2013, <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001313>.
- "Acne Treatments," *Healthy Living*, Health Canada, last modified December 15, 2006, accessed March 13, 2013, <http://www.hc-sc.gc.ca/hl-vs/iyh-vsv/med/acne-eng.php>.
- "Addison's disease," Mayo Foundation for Medical Education and Research, last modified December 4, 2012, accessed March 20, 2013, <http://www.mayoclinic.com/health/addisons-disease/DS00361>.
- "Addison's disease: Adrenocortical hypofunction; Chronic adrenocortical insufficiency; Primary adrenal insufficiency," PubMed Health, U.S. National Library of Medicine, last modified December 11, 2011, accessed March 20, 2013, <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001416>.
- ADHD Canada, accessed March 20, 2013, <http://www.adhdcanada.com> (site discontinued).
- "Adjusted disorder," *MedlinePlus*, U.S. National Library of Medicine, last modified July 7, 2012, accessed March 20, 2013, <http://www.nlm.nih.gov/medlineplus/ency/article/000932.htm>.
- "Adjustment disorders," Mayo Foundation for Medical Education and Research, last modified March 17, 2011, accessed March 20, 2013, [www.mayoclinic.com/health/adjustment-disorders/DS00584](http://www.mayoclinic.com/health/adjustment-disorders/DS00584).
- "All About Leprosy," The Leprosy Mission Australia, accessed April 24, 2015, <http://www.leprosymission.org.au/TLM/Leprosy>.
- "Allergies and asthma," Canadian Lung Association, last modified September 24, 2012, accessed March 20, 2013, [http://www.lung.ca/diseases-maladies/asthma-asthme/allergies-allergies/index\\_e.php](http://www.lung.ca/diseases-maladies/asthma-asthme/allergies-allergies/index_e.php).
- Allergy/Asthma Information Association, accessed March 20, 2013, <http://www.aaia.ca>.
- ALS Canada, accessed March 20, 2013, <http://www.als.ca>.
- ALS Ontario, accessed March 20, 2013, <http://alsont.ca> (site now redirects to CIRA Ontario).
- Alzheimer Society of Canada, accessed March 20, 2013, <http://www.alzheimer.ca/en>.
- American Speech-Language-Hearing Association, accessed March 4, 2013, <http://www.asha.org>.
- "Amyotrophic Lateral Sclerosis (ALS) Fact Sheet," National Institute of Neurological Disorders and Stroke, last modified December 20, 2012, accessed March 20, 2013, [http://www.ninds.nih.gov/disorders/amyotrophiclateralsclerosis/detail\\_ALS.htm](http://www.ninds.nih.gov/disorders/amyotrophiclateralsclerosis/detail_ALS.htm).
- Anderssen, Erin and André Picard, "Raising a child with a mental illness," *The Globe and Mail*, last modified November 22, 2008, accessed March 21, 2013, <http://v1.theglobeandmail.com/servlet/story/RTGAM.20081122.wbreakdown2211/BNStory/mentalhealth>
- "Anti-oxidant supplements ease Gulf War Syndrome," Canadian Veterans Advocacy, last modified March 31, 2012, accessed March 12, 2013, <http://canadianveteransadvocacy.com/Board2/index.php?topic=731.0>.
- "Antisocial personality disorder," Mayo Foundation for Medical Education and Research, last modified October 8, 2010, accessed March 20, 2013, <http://www.mayoclinic.com/health/antisocial-personality-disorder/DS00829>.
- Antony, Martin M., *Specific Phobia*, Anxiety Treatment and Research Centre, accessed March 20, 2013, <http://anxiety.stjoes.ca/specificP.htm>.
- Anxiety Disorders Association of Canada, accessed March 20, 2013, <http://www.anxietycanada.ca/english/index.php>.
- "Anxiety Disorders," Centre for Addiction and Mental Health, accessed March 20, 2013, [http://www.camh.ca/en/hospital/health\\_information/a\\_z\\_mental\\_health\\_and\\_addiction\\_information/anxiety\\_disorders/Pages/Anxiety\\_Disorders.aspx](http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/anxiety_disorders/Pages/Anxiety_Disorders.aspx).
- "Appearance Before the Standing Committee on National Defence and Veterans Affairs - Speaking Notes for The Honourable Ronald J. Duhamel," Veterans Affairs Canada, March 29, 2001, accessed March 12, 2013, <https://www.veterans.gc.ca/eng/department/press/viewspeech/149>.
- "Arthritis, by sex, and by province and territory," Statistics Canada, last modified June 19, 2012, accessed March 20, 2013, <http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/health52a-eng.htm>.
- Asthma Society of Canada, *Asthma Facts and Statistics FAQs*, accessed March 20, 2013, [http://www.asthma.ca/adults/about/asthma\\_facts\\_and\\_statistics.pdf](http://www.asthma.ca/adults/about/asthma_facts_and_statistics.pdf).

# Entry Name Index

## A

- Abbotsford Health Protection Office, 592  
 Abbotsford Home Health Office, 592  
 Abbotsford Public Health Unit, 592  
 Abbotsford Regional Hospital & Cancer Centre, 592  
 Abbotsford Social Activity Association, 10  
 Aberdeen Hospital, 492, 608, 636  
 Aberdeen House, 243  
 Abilities, 713  
 Ability New Brunswick, 352  
 Ability Online Support Network, 281  
 Ability Society of Alberta, 214  
 Aboriginal Friendship Centre of Calgary, 752  
 Aboriginal Friendship Centres of Saskatchewan, 752  
 Aboriginal Health & Community Wellness, *Government Office*, 535  
 Aboriginal Health & Wellness Centre, 762  
 The Aboriginal Nurse, 748  
 Aboriginal Nurses Association of Canada, 748  
 Aboriginal Services, *Government Office*, 522  
 Aboriginal Voices of Survival, Resiliency & Community Wellness, 753  
 Aboriginal Women's Association of Prince Edward Island, 752  
 AboutFace, 267  
 Abuse & Neglect of Older Canadians: Strategies for Change, 3  
 Academic Pediatric Association, 291  
 Académie de Réflexologie du Québec, 745  
 Acadia Community Health Centre, 577  
 Acceptability of Food & Food Ingredients for the Gluten Free Diet, 94  
 Access Alliance Multicultural Community Health Centre, 664  
 Access Counselling & Family Services, 462, 462  
 ACCESS Downtown, 619  
 ACCESS NorWest, 619  
 ACCESS River East, 619  
 ACCESS Transcona, 619  
 ACCESS Winnipeg West, 619  
 Accessible Housing Society, 454, 454  
 Accessible Media Inc., 388  
 Acclaim Health, 728  
 Accreditation Canada, 401, 401  
 Accreditation Canada Annual Report, 401  
 Accreditation Manual: Education Programs, 91  
 Accreditation Standard, 401  
 Achilles Canada, 713  
 ACIPBC Newsletter, 742  
 Acoustic Neuroma Association of Canada, 66  
 L'Actif, 358  
 Action Autonomie, 229  
 Action Canada for Sexual Health & Rights, 21, 324  
 Action North Recovery Centre, 369  
 Action on Smoking & Health, 197  
 Action on Smoking & Health Newsletter, 197  
 Active Healthy Kids Canada, 268  
 Active Living Alliance for Canadians with a Disability, 762  
 Active Living Coalition for Older Adults, 2  
 Active Living During Pregnancy: Physical Activity Guidelines for Mo, 418  
 L'Actualité Médicale, 490  
 Acupuncture Foundation of Canada Institute, 713  
 Acute & Emergency Services, *Government Office*, 547  
 Acute Care, Mental Health & Addictions Division, *Government Office*, 543  
 Addiction & Mental Health Services, *Government Office*, 234, 367  
 Addiction Services, 372  
 Addiction Services of Thames Valley, 365  
 Addictions & Mental Health Ontario, 364  
 Addictions Foundation of Manitoba, 363  
 Adlerian Psychology Association of British Columbia, 215  
 Administration & Finance, *Government Office*, 528, 529  
 Adsum for Women & Children, 285, 461  
 Adult Children of Alcoholics, 360  
 Advanced Coronary Treatment (ACT) Foundation of Canada, 171  
 Advocacy Centre for the Elderly, 6  
 Advocate, 444  
 A.E. MacDonald Ophthalmic Library & William Callahan Reading Room, 507  
 AERO: Alternative Education Resources for Ontario, 398  
 Africa Inland Mission International (Canada), 480, 480  
 African & Caribbean Council on HIV/AIDS in Ontario, 24, 326  
 African Community Health Services, 462, 462  
 Africans in Partnership Against AIDS, 33, 336  
 Aga Khan Foundation Canada, 734  
 Agassiz Health Protection Office, 593  
 Agassiz Home Health Office, 593  
 Agassiz Medical Centre, 614  
 Agassiz Mental Health Office, 593  
 Agassiz Public Health Unit, 593  
 Age & Opportunity Inc., 5  
 Agincourt Community Services Association, 462, 462  
 Ahtahkakoop Health Centre, 704  
 AIDS Action Now, 28, 331  
 AIDS Calgary Awareness Association, 25, 328  
 AIDS Coalition of Cape Breton, 28, 330  
 AIDS Coalition of Nova Scotia, 24, 33, 326  
 AIDS Committee of Cambridge, Kitchener/Waterloo & Area, 28, 33, 331  
 AIDS Committee of Durham Region, 28, 331  
 AIDS Committee of Newfoundland & Labrador, 23, 326  
 AIDS Committee of North Bay & Area, 28, 34, 331  
 AIDS Committee of Ottawa, 28, 331  
 AIDS Committee of Simcoe County, 29, 331  
 AIDS Committee of Toronto, 29, 331  
 AIDS Committee of Windsor, 29, 34, 332  
 AIDS Committee of York Region, 29, 332  
 The AIDS Foundation of Canada, 21, 324  
 AIDS Moncton, 27, 330  
 AIDS New Brunswick, 23, 34, 326  
 AIDS Niagara, 29, 34, 332  
 AIDS PEI, 24, 327  
 AIDS Programs South Saskatchewan, 33, 34, 335  
 AIDS Saint John, 27, 330  
 AIDS Saskatoon, 33, 336  
 AIDS Thunder Bay, 29, 332  
 AIDS Vancouver, 26, 34, 329  
 AIDS Vancouver Island, 26, 34, 329  
 AiMHi - Prince George Association for Community Living, 242, 297  
 AiMHi, Prince George Association for Community Living, 225  
 Air Canada Foundation, 713  
 Airdrie Provincial Building, 234  
 Airdrie Regional Health Centre, 575  
 Airspace Action on Smoking & Health, 199  
 Airwaves, 201  
 Airwaves - The Newsletter of the Canadian Respiratory Health Profess, 45, 198  
 Akausisarvik Mental Health Facility, 248  
 Al Ritchie Health Action Centre, 706  
 Al-Anon Family Groups (Canada), Inc., 360  
 Albert County Health & Wellness Centre, 626  
 Alberta, *Government Office*, 513, 516, 761  
 Alberta & Northwest Territories Lung Association, 198, 198, 312, 312  
 Alberta Aboriginal Women's Society, 750  
 Alberta Aids to Daily Living, *Government Office*, 520  
 Alberta Alliance on Mental Illness & Mental Health, 214  
 Alberta Amputee Sports & Recreation Association, 764  
 Alberta Association of Optometrists, 392  
 Alberta Association of Prosthetists & Orthotists, 429, 439, 429, 439  
 Alberta Association of Rehabilitation Centres, 214, 429, 429  
 Alberta Association of the Deaf, 160  
 Alberta Association on Gerontology, 4  
 Alberta Blue Cross Annual Report, 405  
 Alberta Cancer Foundation, 81, 723  
 Alberta Caregivers Association, 214  
 Alberta Cerebral Palsy Sport Association, 97, 764  
 Alberta Children's Hospital, 295  
 Alberta Children's Hospital Foundation, 727  
 Alberta Children's Hospital Knowledge Centre, 294  
 Alberta College & Association of Chiropractors, 742  
 Alberta College of Acupuncture & Traditional Chinese Medicine, 738  
 Alberta College of Medical Diagnostic & Therapeutic Technologists Me, 429, 429, 429, 430  
 Alberta College of Optometrists, 392  
 Alberta College of Paramedics, 430, 430  
 Alberta College of Paramedics Annual Report, 430  
 Alberta College of Paramedics Continuing Competency Program Handbook, 430  
 Alberta College of Speech-Language Pathologists & Audiologists, 160, 345  
 Alberta Committee of Citizens with Disabilities, 430, 430  
 Alberta Continuing Care Association, 4  
 Alberta Council on Aging, 4  
 Alberta Cultural Society of the Deaf, 161  
 Alberta Deaf Sports Association, 161  
 Alberta Deaf Sports Newsletter, 161  
 Alberta Diabetes Foundation, 121  
 The Alberta Doctors' Digest, 488  
 Alberta Easter Seals Society, 723  
 Alberta Gerontological Nurses Association, 4  
 Alberta Health, *Government Office*, 519  
 Alberta Health Services, 492, 580  
 Alberta Hospice Palliative Care Association, 737  
 Alberta Hospice Palliative Care Association Newsletter, 737