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Health Fact Sheets

Primary health care providers, 2017

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Primary health care providers, 2017

In 2017, 15.3% of Canadians aged 12 and older (roughly 4.7 million people) reported that they did not have a regular health care provider they see or talk to when they need care or advice for their health.¹ Overall, the proportion of Canadians reporting that they did not have a regular health care provider remained consistent with 2016 (15.8%).

Significantly more males (19.1%) than females (11.6%) reported they were without a regular health care provider.² Among both males and females, those aged 18 to 34 were more likely than any other age group to be without a regular health care provider. The group that had the lowest proportion of people without a health care provider were Canadians aged 65 and older (6.0% for males and 5.6% for females; Chart 1).

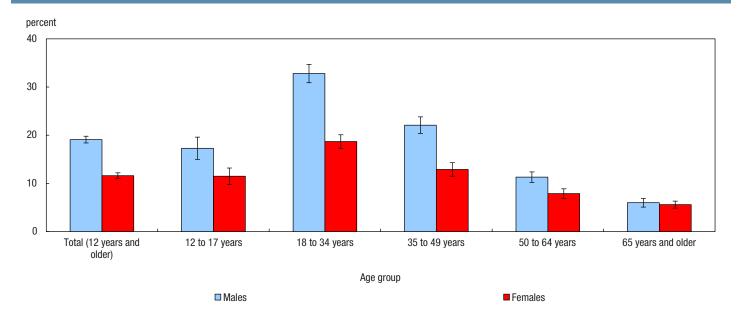


Chart 1 Percentage without a regular health care provider, by age group and sex, population aged 12 and older, Canada, 2017

Note: A regular health care provider is defined as a health professional that a person sees or talks to when they need care or advice about their health. This can include a family doctor or general practitioner, medical specialist, or nurse practitioner.

Source: Canadian Community Health Survey, 2017.

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The proportion of residents who were without a primary health care provider was **lower** than the national average (15.3%) in:

- Newfoundland and Labrador (12.4%)
- Nova Scotia (13.1%)
- New Brunswick (6.4%)
- Ontario (10.2%)

The proportion of residents who were without a primary health care provider was **higher** than the national average in:

- Quebec (22.3%)
- Saskatchewan (19.4%)
- British Columbia (18.2%)

The proportion of residents who were without a regular health care provider was similar to the national average in Prince Edward Island, Manitoba and Alberta. Canadians living in urban areas were more likely to be without a regular health care provider (15.9%) compared to those in rural regions (12.6%).

Of the 4.7 million people without a primary health care provider, the most commonly reported reasons were that they had not tried to find one (29.8%) followed by that they did not need one, but had a usual place of care (25.1%; Chart 2).³

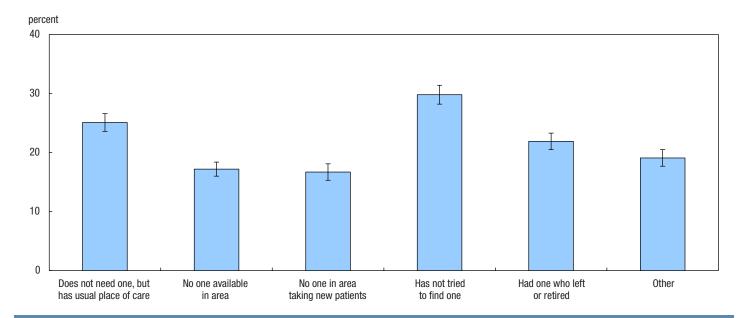


Chart 2 Reasons for not having a regular health care provider, population aged 12 and older, Canada, 2017

Note: Respondents could have reported more than one reason, so estimates are not exclusive within the population (they can add to more than 100%). **Source:** Canadian Community Health Survey, 2017.

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Canadians who don't have a health professional they see or talk to regularly were less likely to engage in preventative health measures such as influenza immunization or meeting the Canadian Task Force on Preventative Health Care (CTFPHC) cancer screening guidelines.⁴

In 2017, 35.9% of Canadians aged 12 and older with a regular health care provider reported getting the seasonal flu shot in the past 12 months, compared with 14.7% of those who did not have a regular provider.

Among Canadians aged 50 to 74, those who were without a primary health care provider were less likely to adhere to the guidelines for colorectal cancer screening⁵ (19.2%) compared to those who did have one (45.6%).

Women aged 50 to 74 who were without a provider were less likely to have had a mammogram within the past 3 years (49.1%) compared with those who reported they did have a regular health care provider (80.7%).

The proportion of women aged 25 to 69 who received a Pap test in the past 3 years was lower amongst those who reported they did not have a regular health care provider (57.8%) than those who reported they did (76.2%).

About primary health care

For many Canadians, the first point of contact for medical care is their regular health care provider. Being without a regular health care provider is associated with fewer visits to general practitioners or specialists, who can play a role in the early screening and treatment of medical conditions.

A regular health care provider is defined as a health professional that a person sees or talks to when they need care or advice about their health. This can include a family doctor or general practitioner, medical specialist, or nurse practitioner.

References

- Carrière, G. 2005. <u>Consultations with doctors and nurses</u>. *Health Reports*. Statistics Canada Catalogue no. 82-003. Vol. 16 no. 4. (accessed July 4, 2018).
- Nabalamba, A. and W. Millar. 2007. <u>Going to the doctor</u>. *Health Reports*. Statistics Canada Catalogue no. 82-003. Vol. 18 no. 1. (accessed July 4, 2018).

Data

Additional data from the Canadian Community Health Survey are available from table <u>13-10-0096-01</u>.

Notes

- 1. Estimates in this article referring to the national average or Canada rate exclude the territories. This is because the coverage of CCHS in 2017 does not represent the entire population of the territories. Only half of the communities in the territories were visited in 2017, and the other half in 2018 so analyses based on the territories are only available for two year cycles of the CCHS (e.g. 2017-2018).
- 2. In this article when two estimates are said to be different this indicates that the difference was statistically significant at a 95% confidence level (p-value less than 5%).

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- 3. Respondents could have reported more than one reason for not having a primary health care provider, so estimates are not exclusive within the population (they can add to more than 100%).
- 4. Canadian Task Force on Preventive Health Care (CTFPHC). 2018. <u>Published Guidelines</u>. (accessed September 13, 2018).
- 5. The CTFPHC recommends colorectal screening for adults aged 50 to 74 with a Fecal Occult Blood Test (FOBT) every two years or a sigmoidoscopy every 10 years unless they are at high risk.

For more information on the Canadian Community Health Survey, please contact Statistics Canada's Statistical Information Service (toll-free 1-800-263-1136; 613-951-8116; <u>STATCAN.infostats-infostats.</u> <u>STATCAN@canada.ca</u>).