

**NORTHERN**  
POLICY INSTITUTE

INSTITUT DES POLITIQUES  
**DU NORD**

# ***PRIMER ON NPI & HEALTH POLICY***

***PRESIDENT & CEO, CHARLES CIRTWILL***

***24 SEPTEMBER 2015, SUDBURY***



# A primer on Northern Policy Institute

There is a **BIG** difference between:

“working **WITH** a Policy Institute” and “**HIRING** a consultant”

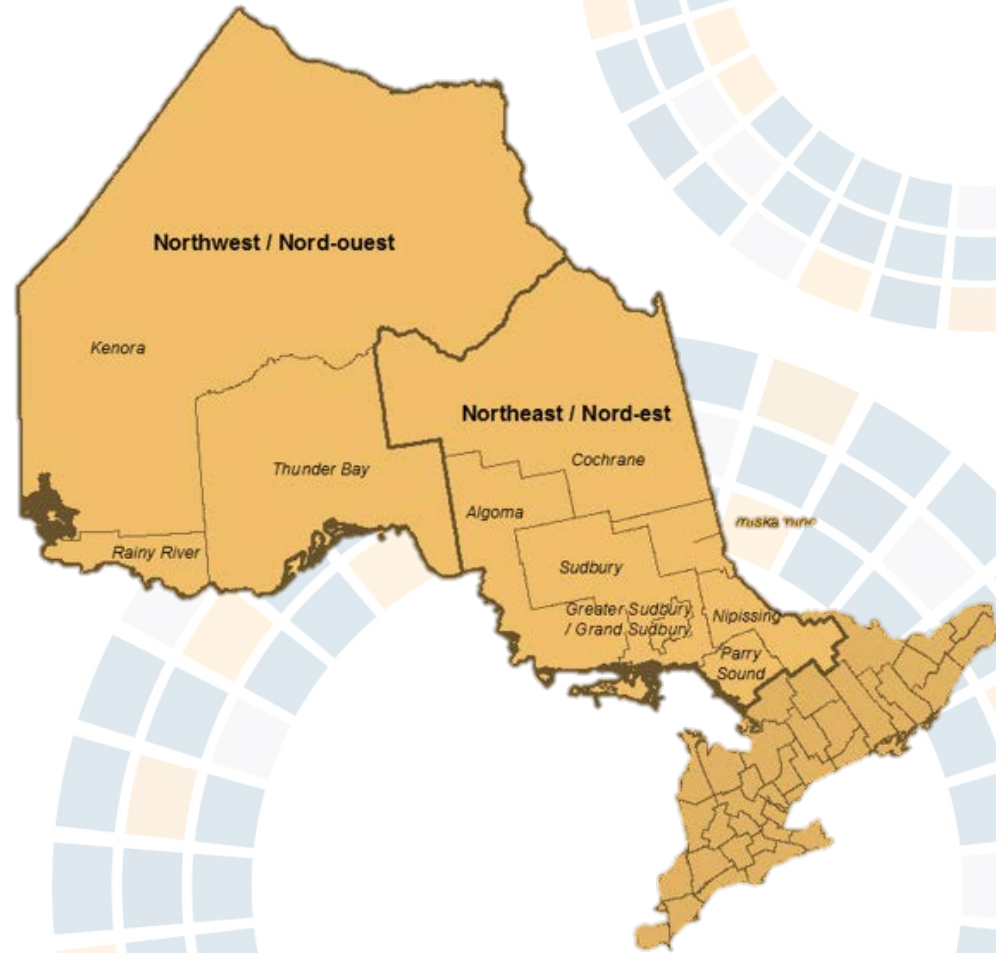
Independent means just that –

- Funders, members and stakeholders do not direct the work of Northern Policy Institute
- Board does not “pick” projects or pre-determine results
- Staff and contract authors are independent
- Double blind peer review – just like academic journals
- Northern Policy Institute does **NOT** take positions – we ask the questions – the authors provide, and defend, the answers

# Our Region

Northern Ontario consists of  
(Census, 2011):

- 2 Economic Regions
- 11 Districts
- 278 Census Sub-Divisions
  - 144 Municipalities
  - 118 First Nation Reserves or Settlements
  - 16 Unorganized CSDs
- **~ 780,000 individuals**



# Stay informed!



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experience



#KNOWTHENORTH



# Policy

IN A

# PUB

Inspired by The Mowat Centre

## WE COME TO YOU

All you need is:

- An informal setting
- A serious issue

## We provide:

- Data on the Problem
- Evidence based solutions

## Format:

Network

Have a drink

Some nibbles

5-10 minutes of “warm up”

Open discussion

Then see what happens...



Together we:  
**Get People TALKING!**



**NPI Blog  
you can write  
for  
this too**

Eliminating Homelessness: Northern Ontario as the next Medicine Hat?

Preserving Coop housing: Proposing concrete action

A Vulnerable North: Lyme disease in Canada

Health care does not mean health

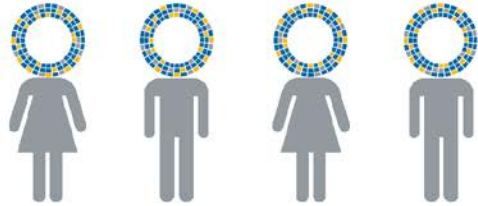
Public Transportation not just an urban concern

Community Hub Schools: A Call for “Cage Busting” Leadership

Weathering winter roads - What is the best route?

Making the old new again: How adaptive reuse is changing Sault Ste. Marie’s Mill Square

# experience



# NORTH

## NPI summer internship program

4 months May to August

Research, communications & operations placements

- NFP management
- Policy research
- Community engagement
- Student blogs

Last year – 8 interns

- 3 in Thunder Bay
- 3 in Sudbury
- 2 in Sault Ste. Marie

Next Year Goal:

- 2 in Timmins\*
- 2 in Kenora\*
- 2 in SSM
- 2 in Thunder Bay
- 2 in Sudbury

\*(where the supervisors are)



# DUE NORTH



NPI monthly newsletter

## The NORTH, by the numbers:

- A chart, table or graph from a recent NPI publication

## New from NORTHERN Policy Institute

- Short summary of recent NPI publications, talks or events

## News in the NORTH

- Three headlines that caught our eye in the past month

## NORTHERN Profiles

- One FN and one non-FN community profile, the “fast facts”

## Success in the NORTH

- A Northern success story – linking to a longer blog or feature piece

## JobsNORTH

- A snapshot of the job market in the north – overall, are we matching people and opportunities, or not

Subscribe at: [northernpolicy.ca](http://northernpolicy.ca)



**Part 1** – our Newsletter

Where the jobs are:

- Vacancy rates and ratios in Northern Ontario
- Top opportunities in the NE & NW
- Statscan updates quarterly

**Part 2** – matching resources

- Catalogue of them
- Links to them
- Promotion

Project is just getting started – happy to have partners!

Do **YOU** Know the **NORTH**?

Municipalities

First Nations Communities

Aboriginal Groups

Economic Development Agencies

Research Institutes

Unions, Chambers and other Community/ Grassroots Organizations

**#KNOWTHENORTH**

What do you know?

your data, your research, your analysis

How do you know it?

your tools, your timing (one time or cyclical?)

Common tools

provincial surveys, common questions, common measures

Examples: chamber and municipal satisfaction surveys, Sioux Lookout mining permit survey,  
Kenora growth project, EmployerOne survey

**The KEY – open honest sharing of information**

# KNOWLEDGE

# NORTH

## Online searchable library

- Reports
- Policy statements
- Formal submissions
- Research papers
- Discussions papers
- Position papers

## Sorted into our six areas of interest:

- Aboriginal
- Communities
- Demographics
- Environment
- Economy
- Infrastructure

Over **1200** documents collected already  
Assessing platforms now to make the  
material available online.

Target date: **Summer 2016**



# NORTHBYNUMBERS.ca

EXPLORING NORTHERN ONTARIO'S COMMUNITIES

**Northern Ontario data** is now just a click away. Northern Policy Institute, North Superior Workforce Planning Board, and the Sault Ste. Marie Innovation Centre are pleased to launch [Northbynumbers.ca](http://Northbynumbers.ca), an **interactive data tool** that displays Northern Ontario census data from between 2001 and 2011.

Identity, income, housing, education, employment, mobility, age and population statistics – at the District, community and even neighborhood level!\*

\* - where available

# Our Founding Partners



Select a Year

Select a Geography

Zoom Tools:

Zoom To A Municipality

Zoom To A Reserve

Map Options:

Print

Clear

Download Options:

Google Earth


Excel

Help:


Help & Glossary

Partners

**Founding Partners**

 **North Superior**  
Workforce Planning Board

**NORTHERN POLICY INSTITUTE** | INSTITUT DES POLITIQUES DU NORD

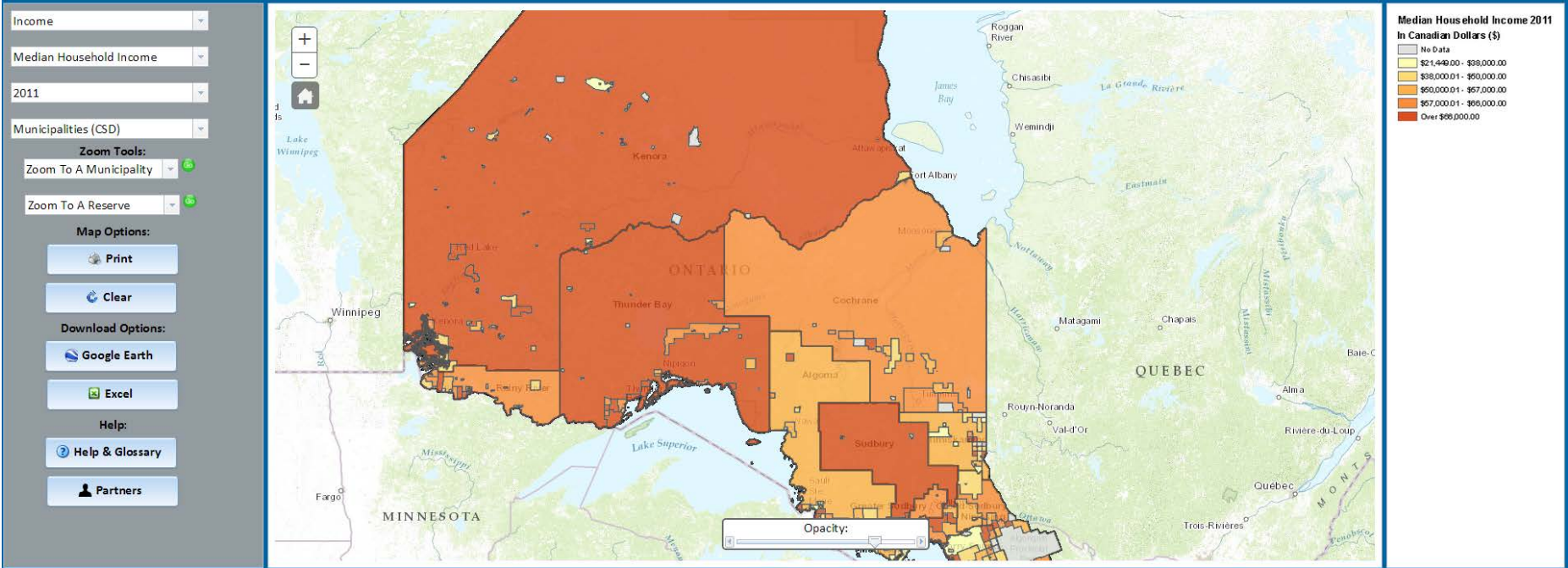
 SAULT STE. MARIE  
**INNOVATION CENTRE**  
Community Geomatics Centre

Do you have feedback or data suggestions? If so [click here!](#)

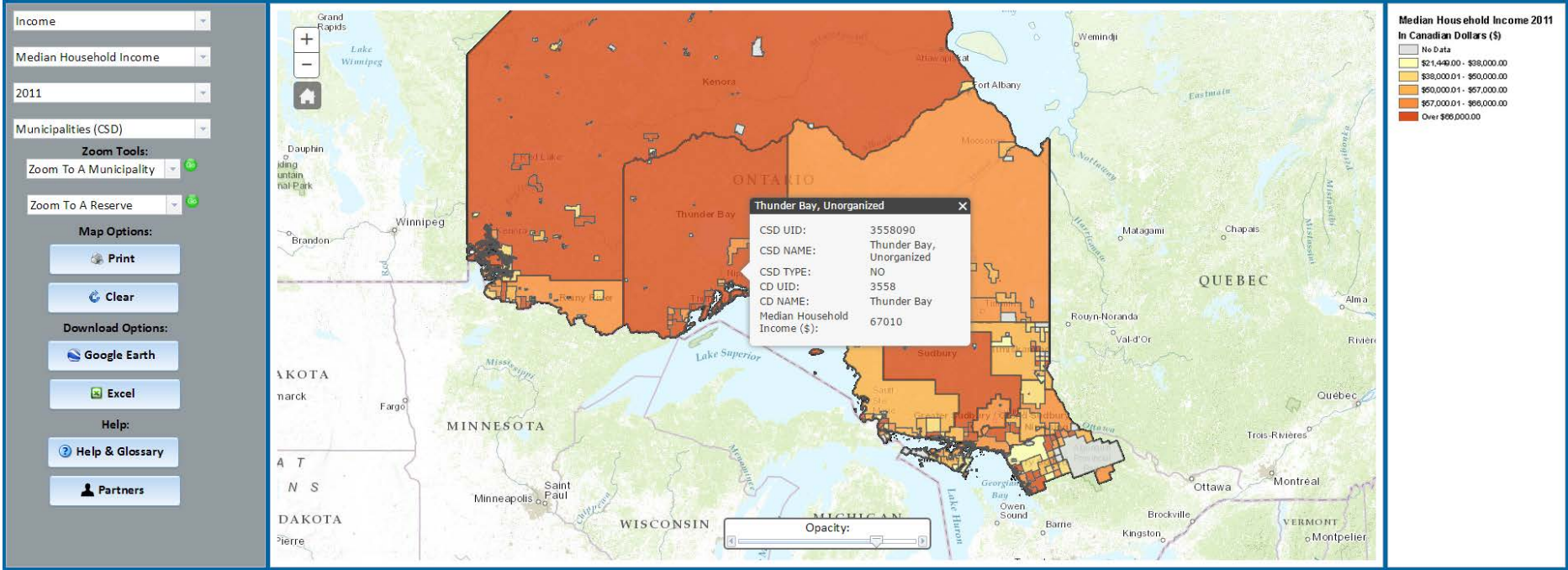
Disclaimer: These maps are provided on an "as-is basis" for informational purposes only. The information displayed in these maps may not be accurate and may be out of date. The Northern Policy Institute and the Sault Ste. Marie Innovation Centre assume no responsibility or liability for any consequences resulting from any use made of these maps or information provided.

Data sources: Statistics Canada - Census of Canada 2001; Census of Canada 2006; Census of Canada 2011; and the National Household Survey of 2011.

# Census and NHS data 2001, 2006, 2011

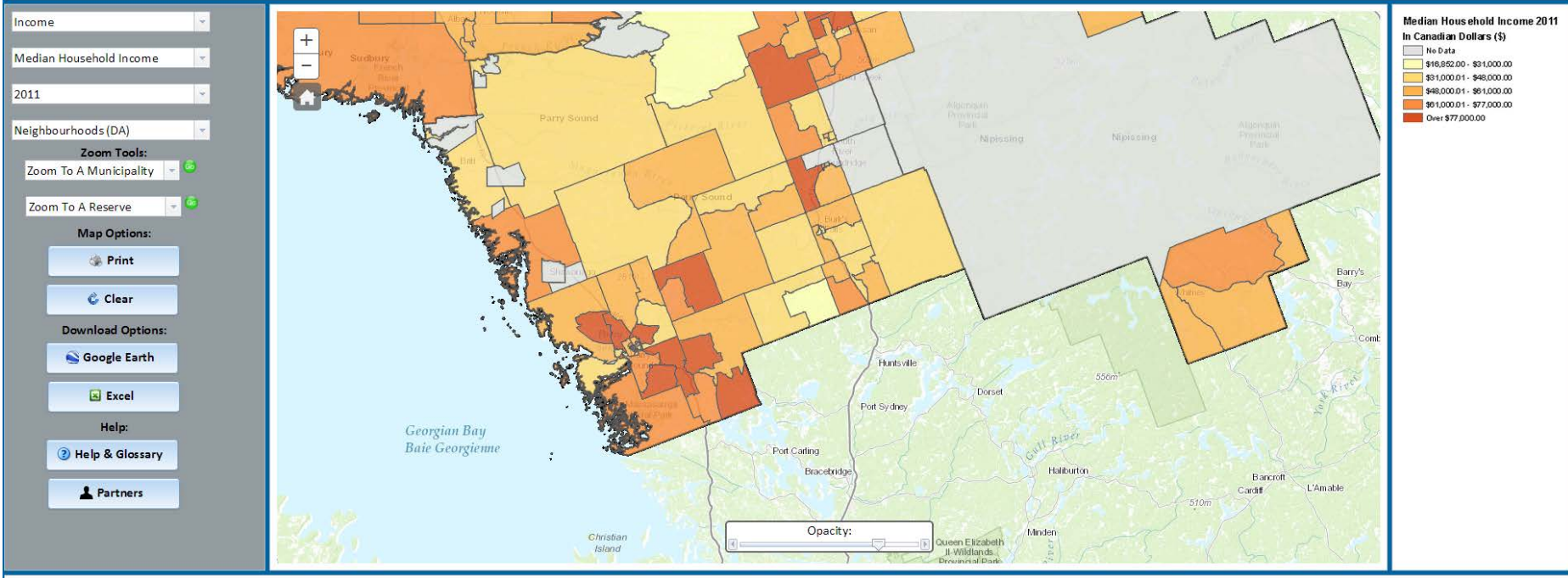


# Community “fast facts” – just a click

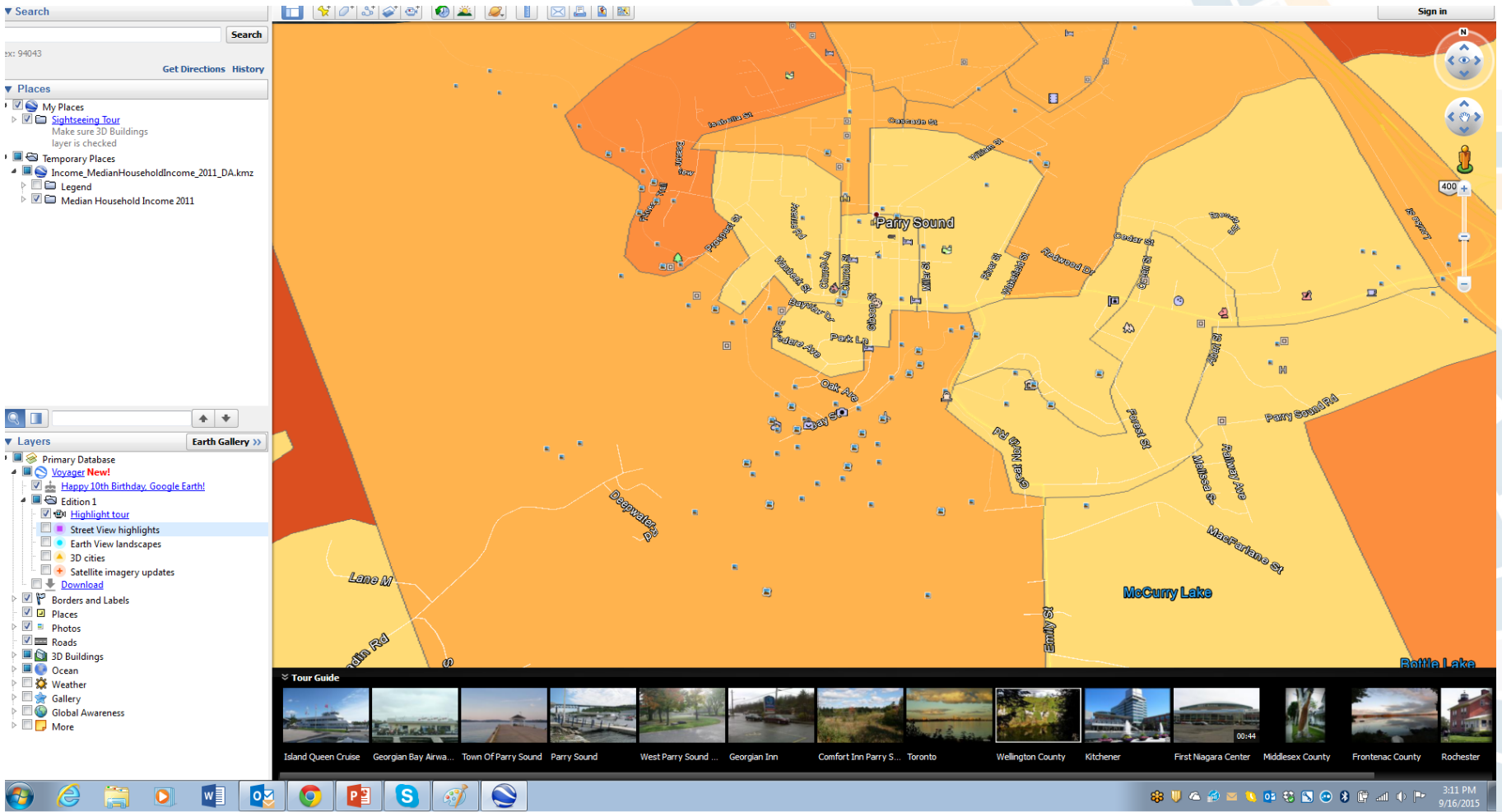




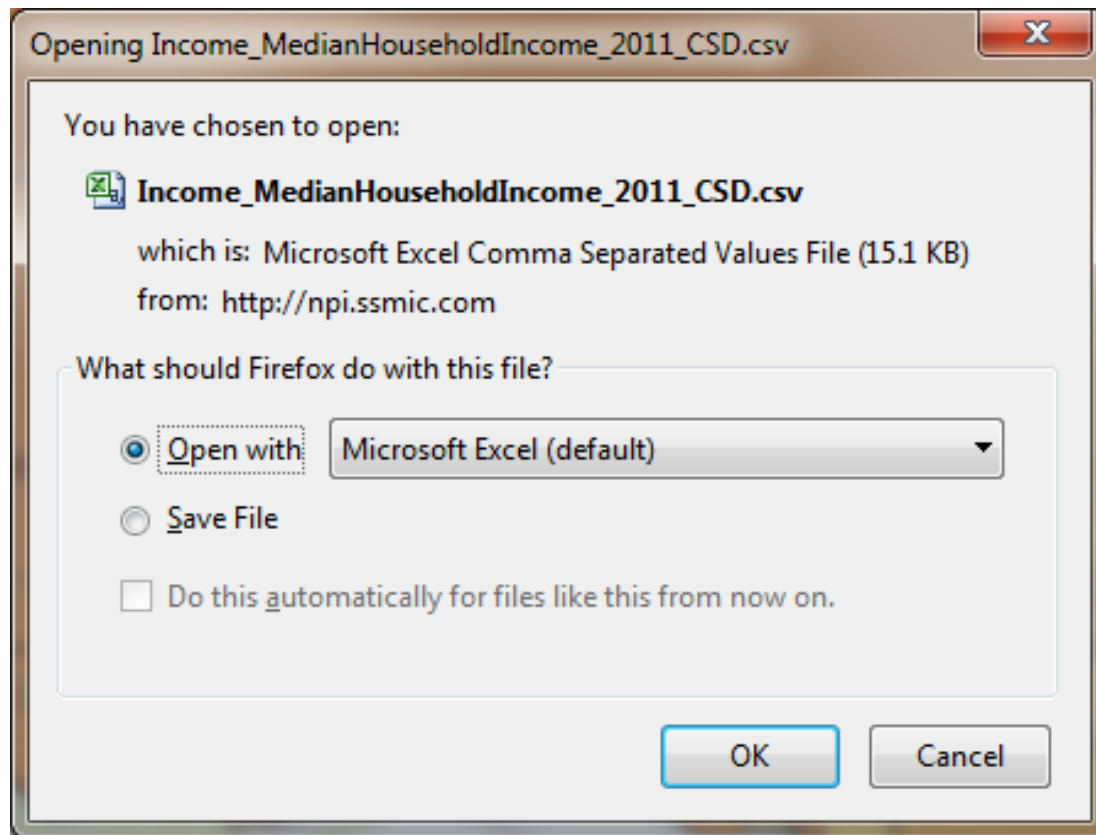
# Data down to DA (neighbourhood) level



# Drill deeper – Google Earth



# You can even download the source files



# Helpful “How to” guide and glossary

The screenshot displays the North by Numbers web application interface. On the left, there are several filter menus: 'Labour Force', 'Participation Rate', '2011', 'Municipalities (CSD)', 'Zoom Tools' (Zoom To A Municipality, Zoom To A Reserve), 'Map Options' (Print, Clear), 'Download Options' (Google Earth, Excel), and 'Help' (Help & Glossary, Partners). The main map area shows a geographical view of Northern Ontario with a legend for 'Participation Rate 2011' on the right. The legend categories are: No Data, 24.1% - 37.5%, 37.6% - 53%, 53.1% - 59%, 59.1% - 64.5%, and Over 64.5%. A 'Help & Glossary' window is open in the center, listing navigation and map options, classification methodology, list of acronyms, geographies, types of census divisions, and a glossary. Below the window, a section titled 'HOW TO USE THE NORTH BY NUMBERS TOOL:' includes a sub-section 'Selecting a Layer to View:' which explains how to use the drop-down lists to drill down to a specific data layer. At the bottom of the screenshot, a smaller version of the application interface is shown, demonstrating the tool's functionality.

Labour Force

Participation Rate

2011

Municipalities (CSD)

Zoom Tools:

Zoom To A Municipality

Zoom To A Reserve

Map Options:

Print

Clear

Download Options:

Google Earth

Excel

Help:

Help & Glossary

Partners

Georgian Bay Ge...

50m

Cardiff

L'Amable

Participation Rate 2011

- No Data
- 24.1% - 37.5%
- 37.6% - 53%
- 53.1% - 59%
- 59.1% - 64.5%
- Over 64.5%

Help & Glossary

- Navigation and Map Options
- Downloading Tabular Data
- Downloading KMZ File
- Printing
- Classification Methodology
- List of Acronyms
- Geographies
- Types of Census Divisions/Census Subdivisions (and Year)
- Glossary

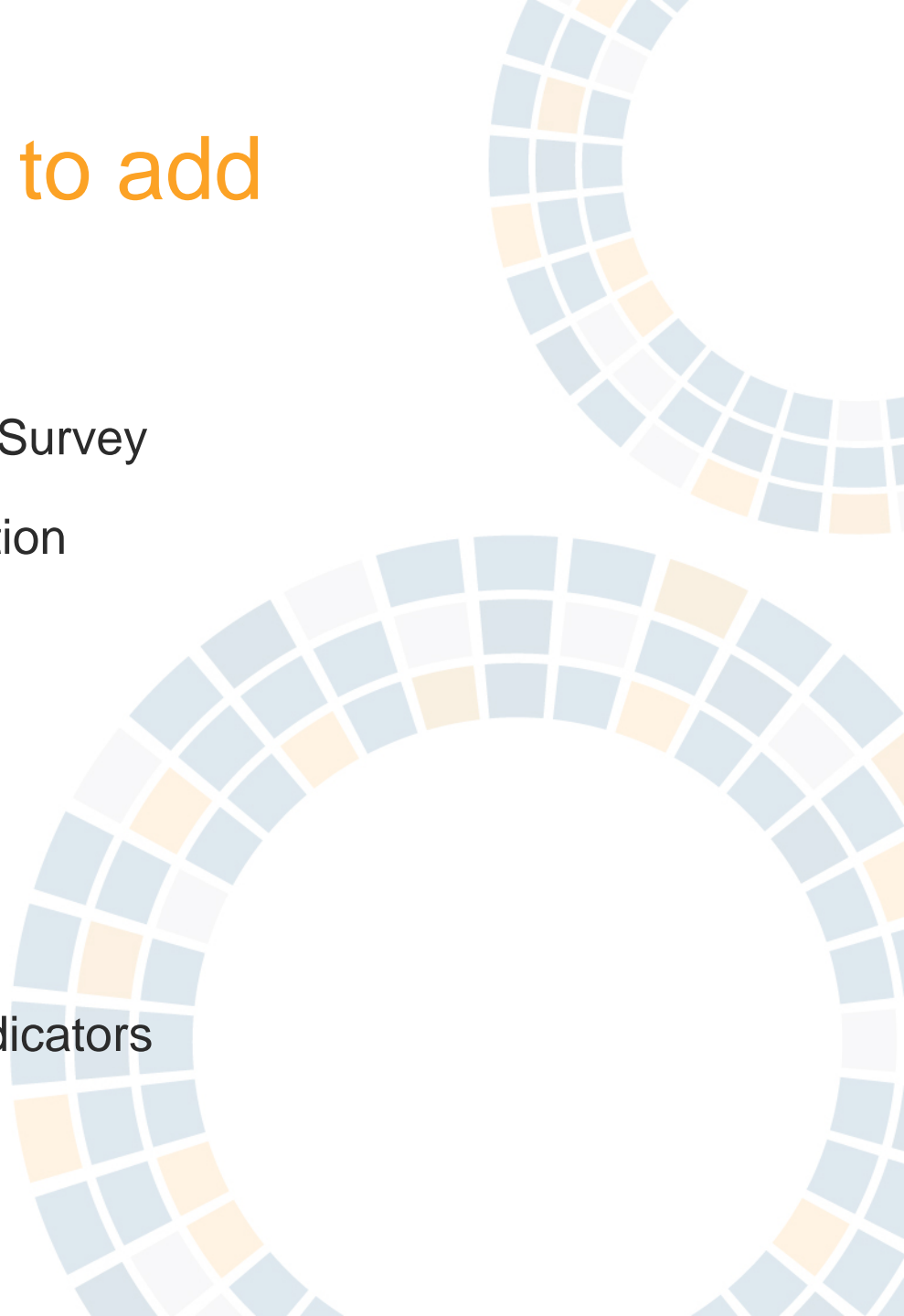
**HOW TO USE THE NORTH BY NUMBERS TOOL:**

*Selecting a Layer to View:*

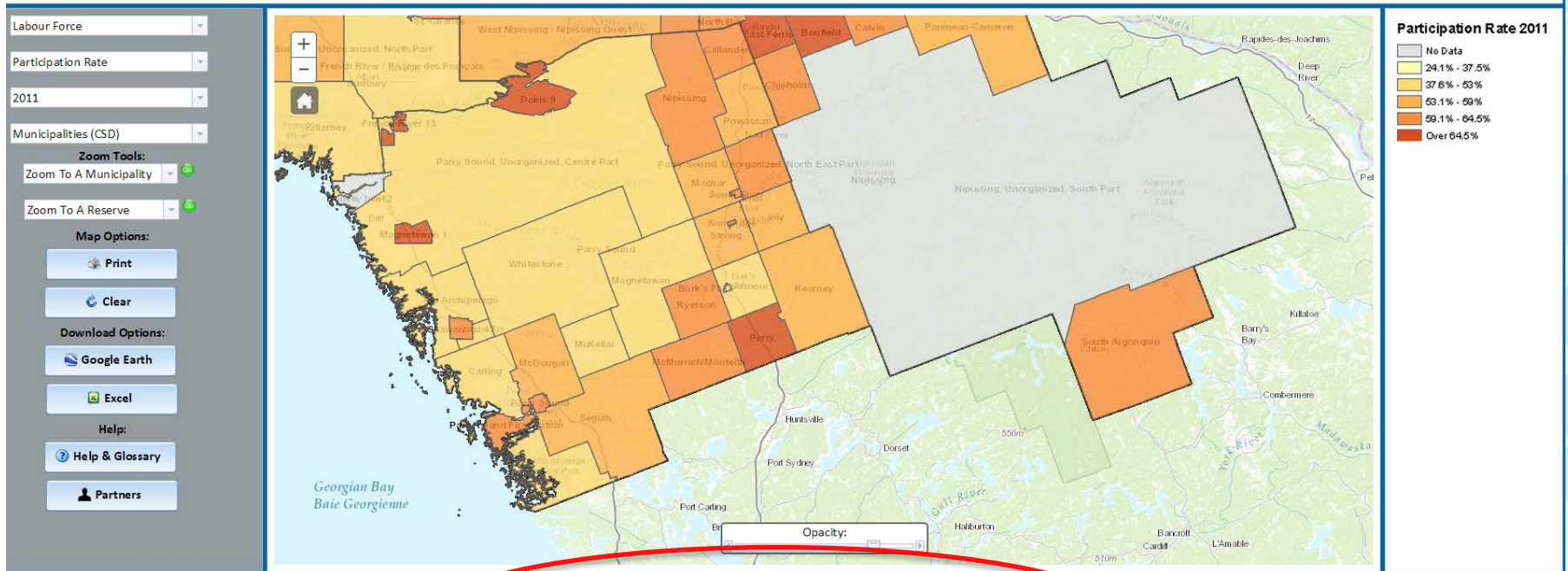
To view Census/NHS data, use the drop-down lists on left hand side of the page to drill down to a specific data layer. First select a **Topic**, then a **Variable**, then a **Year**, and finally your Geography of interest (to view a layer you must make a selection for each of these four lists). In a moment, your layer should overlay on the map. Also, the legend for that particular layer should appear at the top right of the screen. See screenshot below:

# Measures we hope to add

- Statscan Labour Force Survey
- Statscan Job Vacancy & Wage Survey
- CMHC housing market information
- Municipal FIR returns
- FN information returns
- Trade & commerce data
- Tourism data
- “Vital signs” and other social indicators



# Any suggestions for other measures?



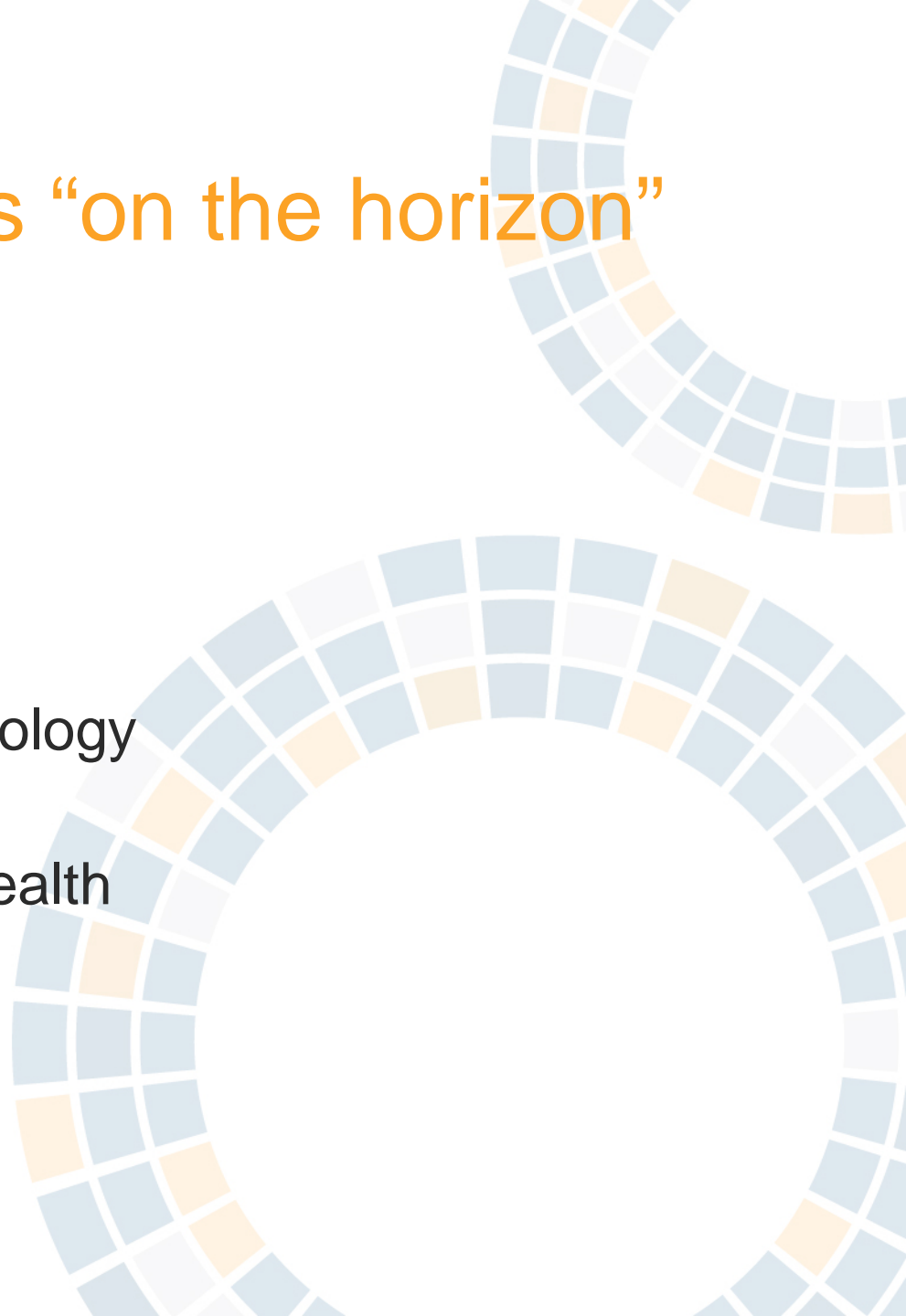
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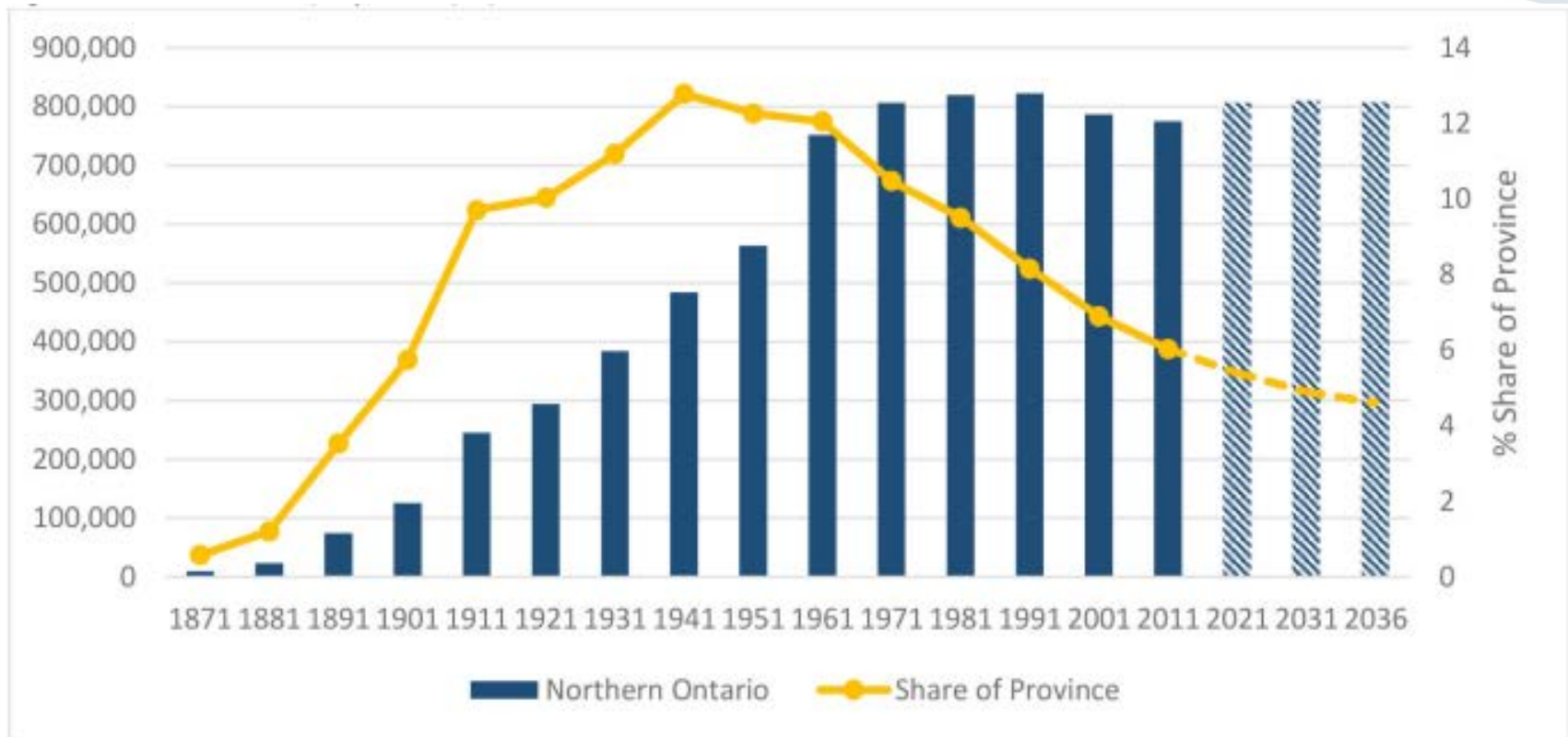
# Health Policy Issues “on the horizon”

1. Demographics
2. The Information Age
3. Drugs and Medical Technology
4. Social Determinants of Health



# POPULATION

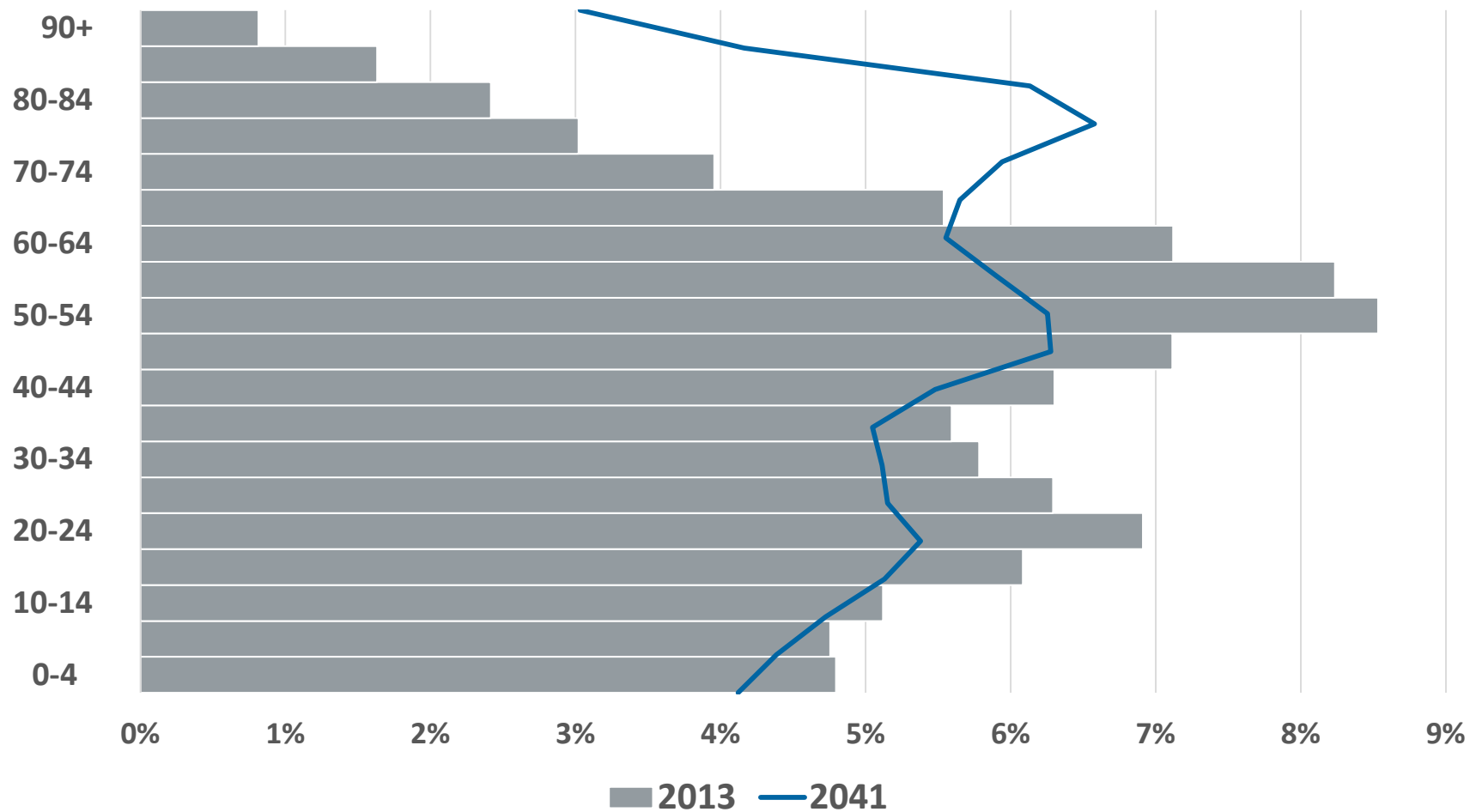
- Historical and projected population in Northern Ontario, 1871-2036
- Population is expected to increase to 807,100 (0.5%) by 2036
  - NW expected to increase by 3.9%
  - NE expected to decrease by 1%







# Projected population, by age, in Thunder Bay District, 2013-2041



# Demographic Dependency Ratio

$$\frac{(\text{Persons aged 14 years or under}) + (\text{Persons aged 65 or older})}{\text{Persons aged between 15 and 64 years}}$$

This is the ratio of people working and producing new goods and services versus those who are consuming goods and services. It is a measure of the SUSTAINABILITY of our standard of living. **The LOWER the ratio of workers to dependents, the more sustainable your society is.**

Retired individuals, for example, consume stored capacity (savings and pensions) and can generate a robust GDP, but it is not sustainable.

# Changing Dependent-Worker Ratios

## The “developed” world is in decline

Number of Dependents for every 100 people in the Working-Age Population  
(Note slightly different UN definition)

	2015	2035
Africa	<b>119.4</b>	<b>101.6</b>
Latin America	74.3	<b>69.9</b>
Asia	66.2	67.1
Oceania	75.6	81.4
Northern America	67.9	84.5
Europe	61.8	79.1

Source: United Nations – *Probabilistic Projections based on the World Population Prospects: The 2012 Revision*. Total dependency ratio (<20 & 65+)/(<20-64) by country or area, 2010-2100.

# Changing Dependent-Worker Ratios

## Future is not good for Northern Ontario

Demographic Dependency Ratios (per 100 persons aged 15 to 64)				
	2015	2025	2035	2041
Canada	47.5	58.5	65.2	65.3
Ontario	47.1	57.7	67.0	67.8
Northwestern Ontario	51.5	68.2	79.4	<b>80.2</b>
Northeastern Ontario	52.5	69.5	81.6	<b>81.6</b>
Thunder Bay District	49.4	68.3	80.2	<b>80.9</b>

Source: Statistics Canada, CANSIM Table 052-0005; Ministry of Finance, Population Projections 2013-2041

# What does this mean?

- It does not mean that Thunder Bay 2040 will look like Nairobi 2015.
- It DOES mean that sustaining the level of services and lifestyles to which we have become accustomed will be VERY difficult.

# The Issue?

## Part 1 - SUPPLY

### Sustainable SUPPLY

- as population ages have fewer working age people
  - Fewer doctors, nurses, technicians, pharmacists, physiotherapists, counsellors, case workers...
- taxes are lower
  - Fewer workers, lower earnings, lower taxable revenue

### Solutions?

- Scope of practice (nurses, pharmacists, patients, policy wonks)
  - “how to be a doctor in six months” (one day?)
- Community collaborative care centres (not your mother’s emergency room)
- Telehealth (Star Trek, today – tricorders, hypo-sprays, AI physicians)

### Discussion ?

**So why do some groups resist these changes?**

# The Issue?

## Part 2 – DEMAND

### End of life care

- Chronic care
- Home care
- “Medical aid in dying” – bill 52

### Boomers buy stuff

- Public/private debate
- Expanding private supplements (especially online – the Dr. is ALWAYS in – NS Coop council)
- Expanding public coverage (Boomers vote too)

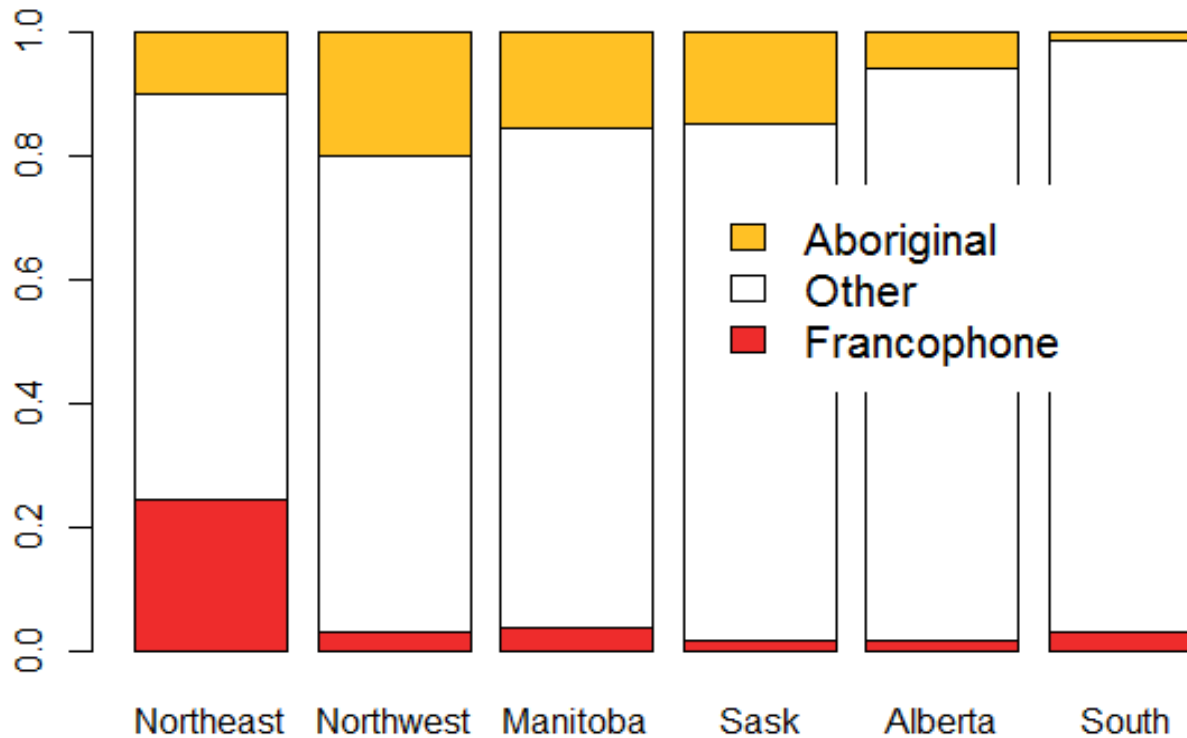
### Discussion ?

**So WHY is “no-one” “debating” health care in the 2015 election?**

# The Issue?

## Part 3 - Significant Aboriginal Population

Source: Dr. David Robinson





# Northeast outperforms Northwest

- Educational attainment for the Aboriginal population is much higher in the NE than the NW.
- Average income for everyone is higher in the NE than the NW.
- Dependency on government transfers is lower in the rural NE than in the rural NW.
- Participation rates are higher and unemployment rates lower in the very rural and remote parts of the NE than in the NW.
- There is a higher percentage of rural income earners in the NE than the NW (more people have jobs).
- There is greater economic activity in strongly rural areas in the NE than the NW.

Source: *It's what you know (and where you can go)*, Northern Policy Institute 2015

**Why? Think CONNECTIVITY**

# The Issue?

- Unique population health issues
- Rural and remote communities
- Younger (note earlier slides re population aging)
- Culture conflict

## Discussion ?

**With FN and non-FN trends going in opposite directions, whose health issues get priority? Why?**

# The Information Age

## Management

- Hospital Administrator wants patients to know what their care costs:
- <http://www.cbc.ca/news/canada/windsor/david-musyj-wants-patients-to-know-cost-of-their-health-care-1.2493845>
- “Operating in the dark”:
  - Can’t manage what you don’t measure
  - Wait times but not value added (comfort and function)
- <http://informatics.medicine.dal.ca/files/Operating%20in%20the%20Dark.pdf>

## Consumption

- The Good?: Self diagnosis/medication/treatment
  - “There’s an app for that” – drug management, vital signs, symptom analysis
- The Bad?
  - Over use (I paid my taxes)
  - Under use (don’t need help THAT bad)
  - Misdiagnosis? Follow up and follow on care?

## Discussion ?

**Do we know too much or too little?**

# Drugs and Medical Technology

## Are some “advances” TOO expensive?

### Cost v value:

- How much is one day more worth?
- Quality of life v life itself
- Death Panels? CDR and other “comfortable” names

### Centres of excellence/innovation

- Clusters, collaboration, creativity
  - Nintendo is in! (following on Microsoft, Google, Apple...)
- Economic/profit motive?:
  - job creation
  - product listing agreements
  - CETA

### Discussion ?

**So, are we talking patients, profits or politics? And, are they mutually exclusive?**

# Social Determinants of Health 1: Getting it Right

Dr. Murray Trusler, profiled by Jon Kay (National Post)

Four types of physician interaction with northern communities:

- medical voyeur
- doctor/patient focus
- engage in the community
- push for broader change

<http://fullcomment.nationalpost.com/2013/01/10/jonathan-kay-whats-wrong-with-remote-native-reserves-lets-ask-a-doctor-who-worked-there-for-43-years>

# 43 Years = 10 point plan

1. Access to Provincial Public Health Services
2. Access to Provincial Housing Standards
3. Access to Provincial Water Standards
4. Access to Provincial Policing Standards
5. Access to Provincial Education Standards
6. Access to Infrastructure
7. Access to Alcohol and Drug Prevention Funding
8. Access to Family Health Teams (FHTs)
9. Access to Electronic Medical Records (EMRs)
10. Access to the Chief Medical Officer of Health for Ontario

## Discussion ?

**If the plan is clear and laid out – why hasn't it been implemented?**

# European Average Income and Unemployment With and Without Minimum Wage

Source: American Enterprise Institute

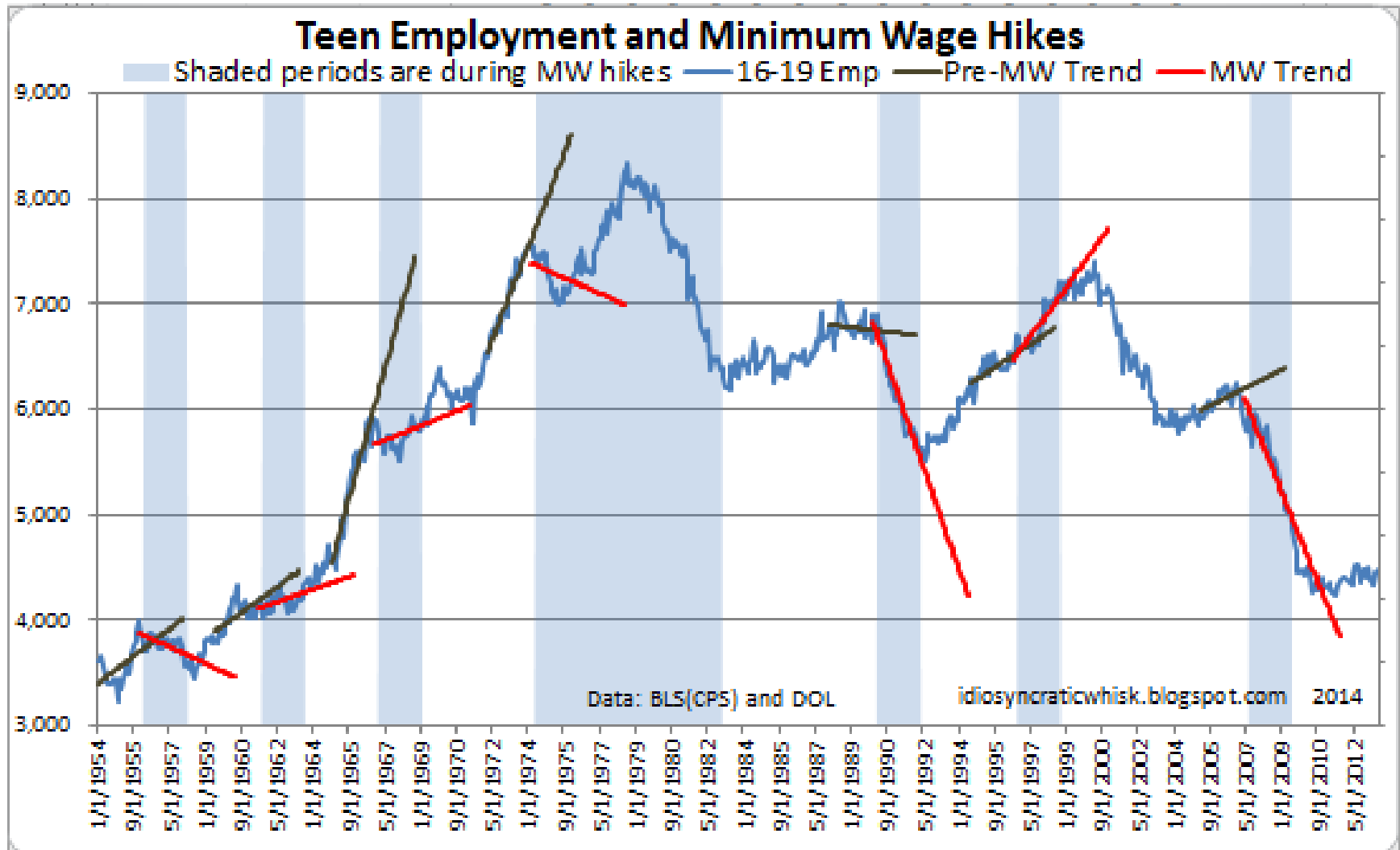
## Western European countries with No minimum wage:

Austria –	29,008	4.8%
Denmark –	27,974	6.9%
Finland –	25,747	8.4%
Germany –	24,174	5.2%
Italy –	23,194	12.7%
Norway –	32,620	3.5%
Sweden –	28,301	8.0%
Switzerland –	35,471	3.1%

## Western European Countries with a Minimum Wage:

Belgium –	25,642	8.4%
France –	27,452	10.8%
Greece –	21,352	27.4%
Ireland –	41,170	12.4%
Netherlands –	29,269	6.9%
Portugal –	7,170	15.5%
Spain –	26,856	26.7%
United Kingdon –	33,513	7.4%

# US Teen Employment and Minimum Wage





# Social Determinants of Health 2:

## Getting it Less Right

## How to attack Poverty

“Doctors, nurses petition for \$14 minimum wage, say poverty ‘biggest barrier to good health’”

- <http://globalnews.ca/news/1082355/doctors-nurses-petition-for-14-minimum-wage-say-poverty-biggest-barrier-to-good-health/>

Economists, however:

- Stephen Gordon (Laval), Morley Gunderson (U of T), Kevin Milligan (UBC), Mike Moffat (Ivey), Lindsay Tedds (Uvic) and many, many more:
  - Consensus: Minimum wage does not alleviate poverty
  - Want to help the poor, give them money: direct transfers like WITB, GAI, UCCB,

**Discussion?**  
**Who do we “listen” to? Why?**

**So, what other issue is on your mind?**

Thank you. Merci. Miigwetch.

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