

Health Professionals and Minority Official Language Capacity: Contextual Dimensions of Access to Health

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- What do we know?
 - ? Conceptual model
 - ? Resources predisposing utilization of health services
 - ? National patterns but local processes of health access
- What do we want to know?
 - ? Compositional characteristics (Who?)
 - ? Contextual characteristics (How many? Where? Surplus deficit? Variation in concentration and density?)
- Where do we go from here?
 - ? How are the health professionals services utilized?
 - ? How can we estimate the potential stock of health professionals with OLMC linguistic capacity? Mobility? Ageing and regional retention?

Health Professionals as Social Determinants of Health

Conceptual model of physical access to health services of OLMC

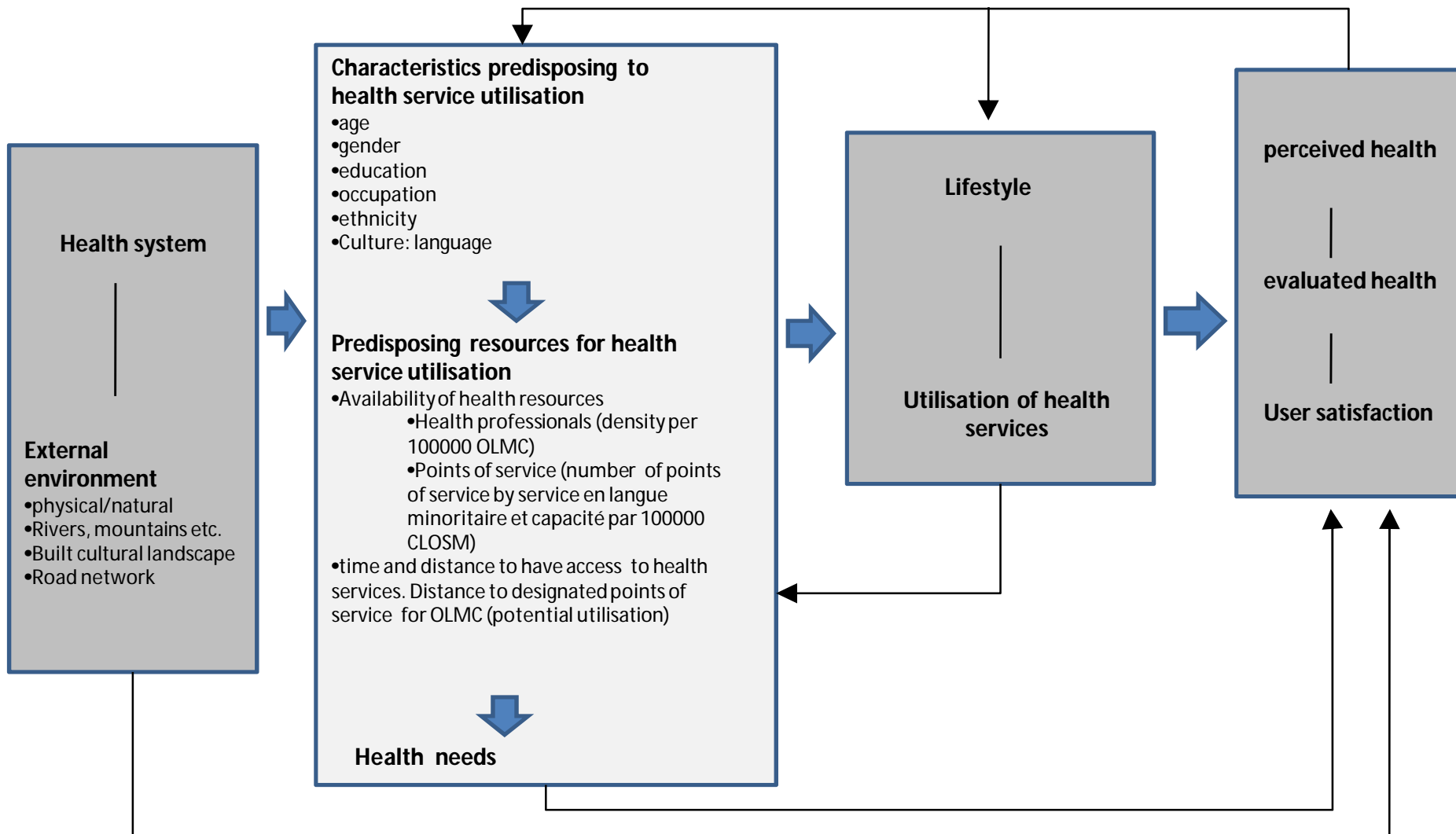
Bouchard & Warnke (2009), adapted from Andersen (1995)

Environment

Population characteristics

Health behaviour

Health access result



- Access is a result of adequation of supply and demand (Pechansky & Thomas, 1981)
- Access is a process (Khan, 1994)
 - Typology of access to health (geographic/non-geographic; realised/potential)
- Access is a continuum (Gulliford, 2002)
- Realisation of health access
 - ? Pathways to the realisation of health access (Starfield, 2007)
 - ? Scale: The neighbourhood – local scale, place where health is realised (Philibert et al, 2007; Pampalon, 2007)
- Access equity measures
 - ? “Assessing health equity requires comparing health and its social determinants between more and less advantaged social groups” (Braveman & Gruskin, 2003)

Equality of access to health

? Health professional supply characteristics

- Number and types of professionals
- Age structure, gender, official language minority (OLM) capacity
- Geographic location and Scale
 - ? Satisfy local demand
 - ? Location determines availability (Pong, 2001)
- Scale - multilevel considerations
 - ? Link to social process
 - National (Province)
 - Regional (Health Regions)
 - Sub-Regional (health service centre territories, counties)
 - Neighbourhood (census tracts, natural areas)

The supply of and demand for health professionals with OLM capacity

- Traditional measures : #health professionals/ # potential clients in a geographic area
- Serious limits for OLMC measurement
 - Areas are artificial units , not “natural” human areas of activity
 - People can travel outside the area
 - Chinese in Toronto (Wang, 2007)
 - English in Montérégie Health Region (Warnke & Pocock, 2009)
- Comparative index
 - ? Attempts to diminish impact of some of the issues with traditional measures
 - ? Integrates an equity component into the measure: minority language/majority language
- Resources
 - ? RISF Research mandate
 - ? Health Professionals data sets (PCH)
 - ? Geographic boundary files (Statistics Canada)

Equity Measure

Health Professionals Linguistic Presence Index (LPI)

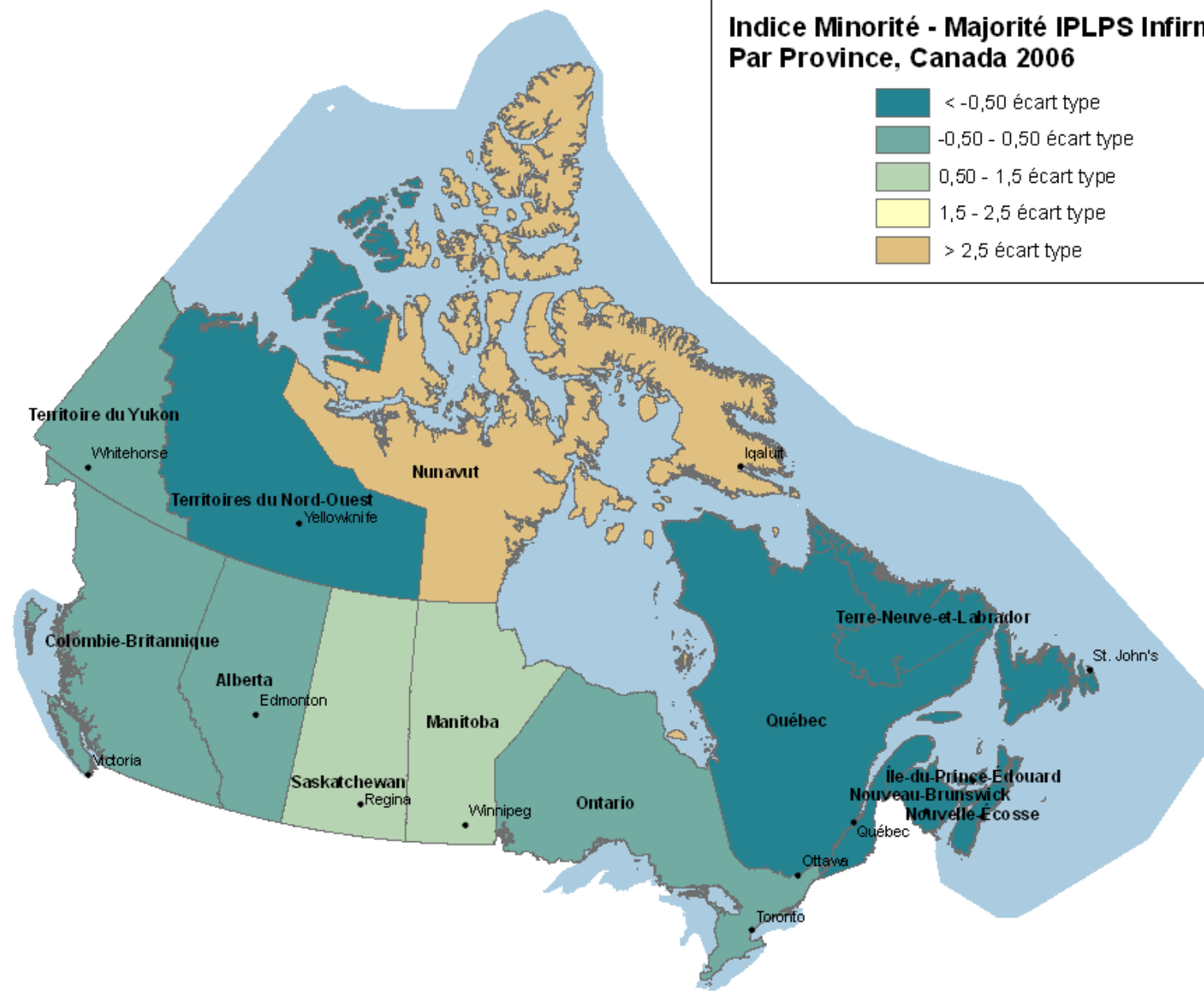
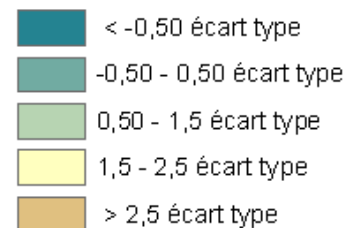
Total health professionals FOLS* minority language

Total official language minority population (FOLS*) / 100000

Total health professionals FOLS majority language

Total official language majority population (FOLS) / 100000

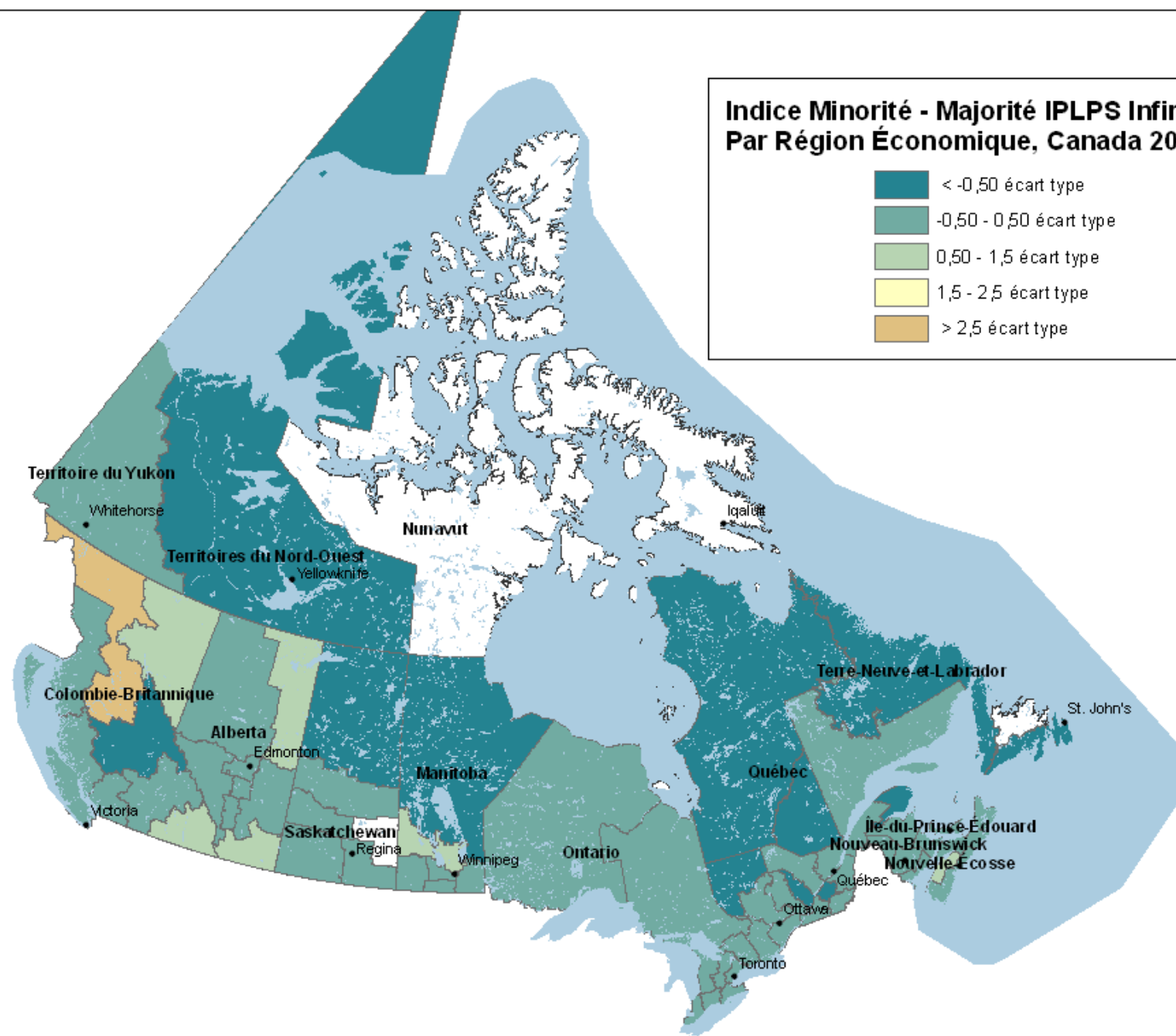
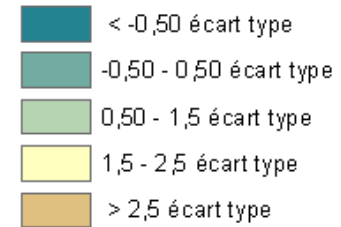
Indice Minorité - Majorité IPLPS Infirmières Par Province, Canada 2006



Source: Statistique Canada, 2006, échantillon 20%.
Auteur: Jan Warnke, J W COMM inc. & RISF



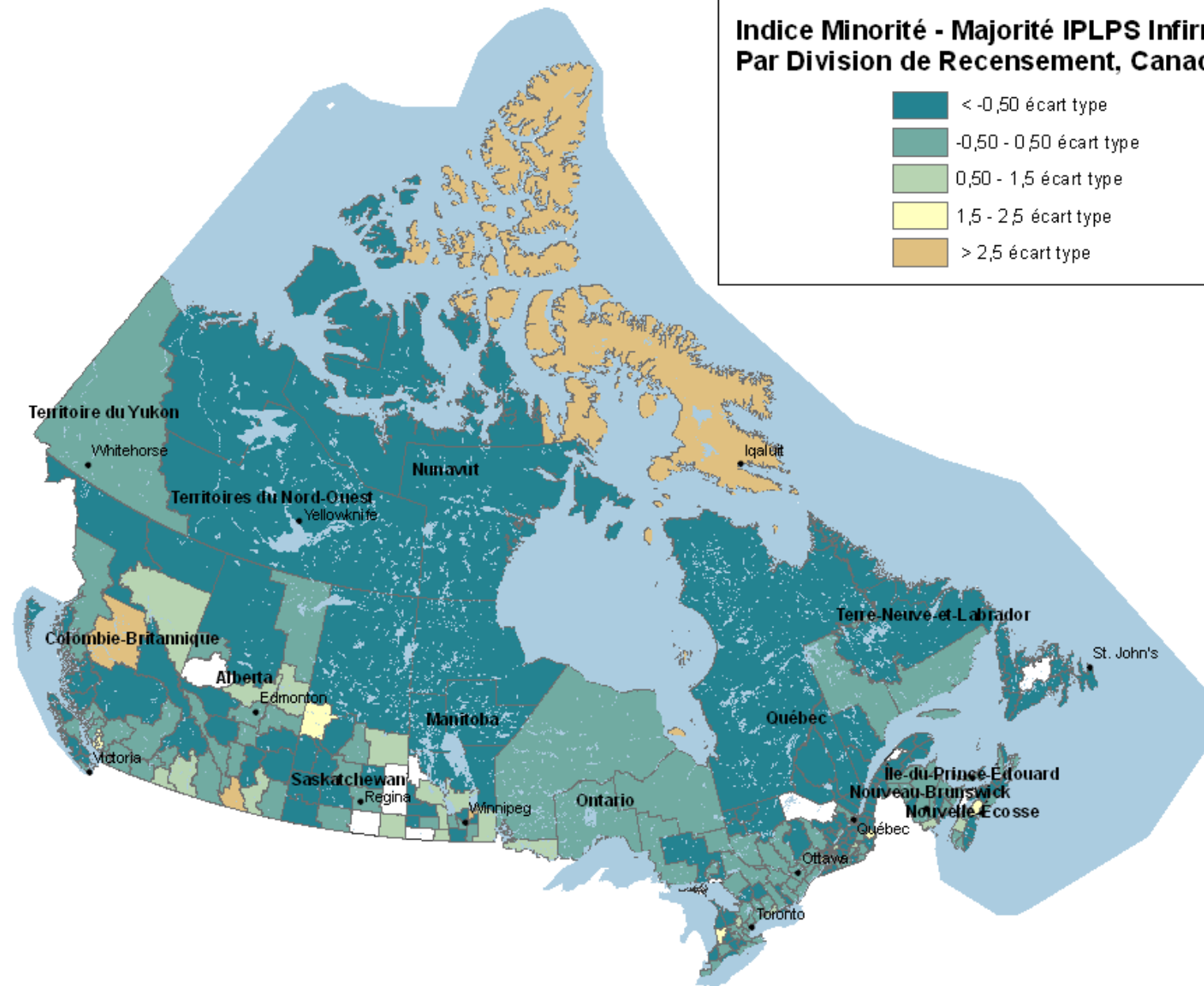
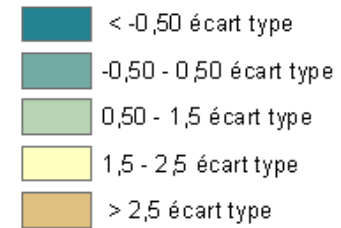
Indice Minorité - Majorité IPLPS Infirmières Par Région Économique, Canada 2006



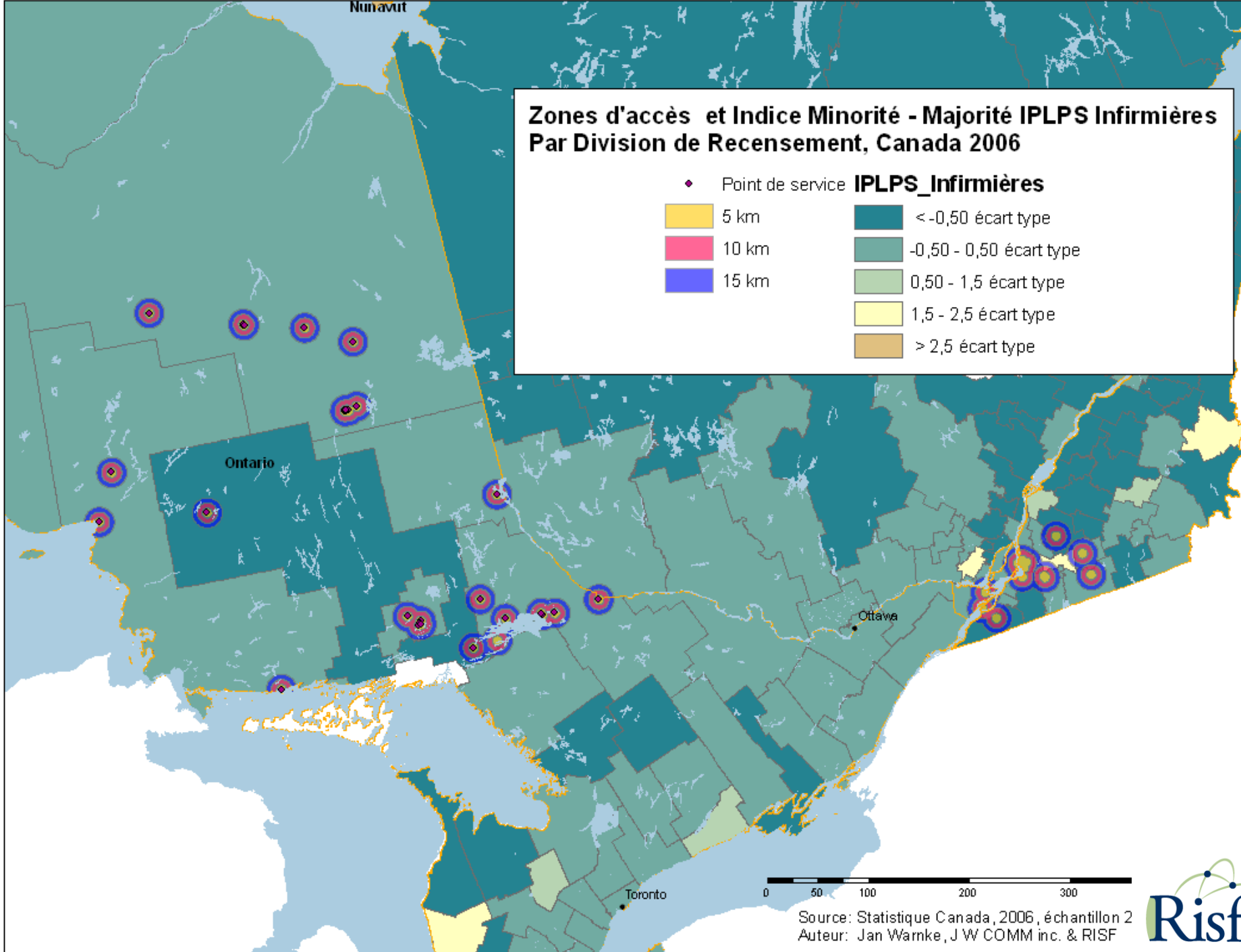
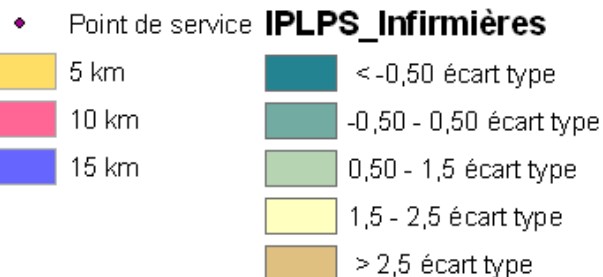
Source: Statistique Canada, 2006, échantillon 20%.
Auteur: Jan Warnke, J W COMM inc. & RISF



Indice Minorité - Majorité IPLPS Infirmières Par Division de Recensement, Canada 2006



Zones d'accès et Indice Minorité - Majorité IPLPS Infirmières Par Division de Recensement, Canada 2006



Source: Statistique Canada, 2006, échantillon 2
Auteur: Jan Warnke, J W COMM inc. & RISF

Nunavut

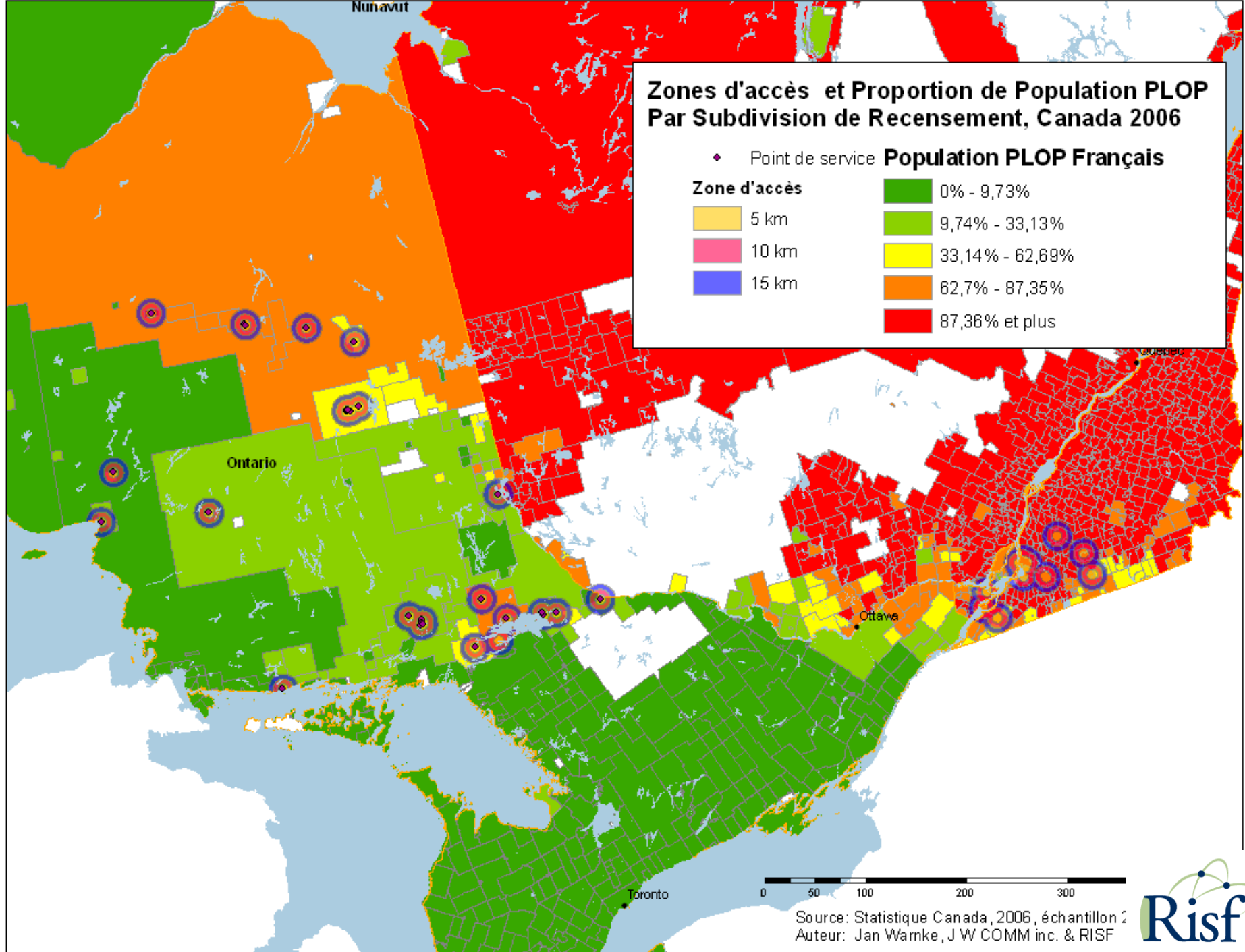
Zones d'accès et Proportion de Population PLOP Par Subdivision de Recensement, Canada 2006

◆ Point de service **Population PLOP Français**

Zone d'accès

- 5 km
- 10 km
- 15 km

- 0% - 9,73%
- 9,74% - 33,13%
- 33,14% - 62,69%
- 62,7% - 87,35%
- 87,36% et plus



Ontario

Ottawa

Toronto



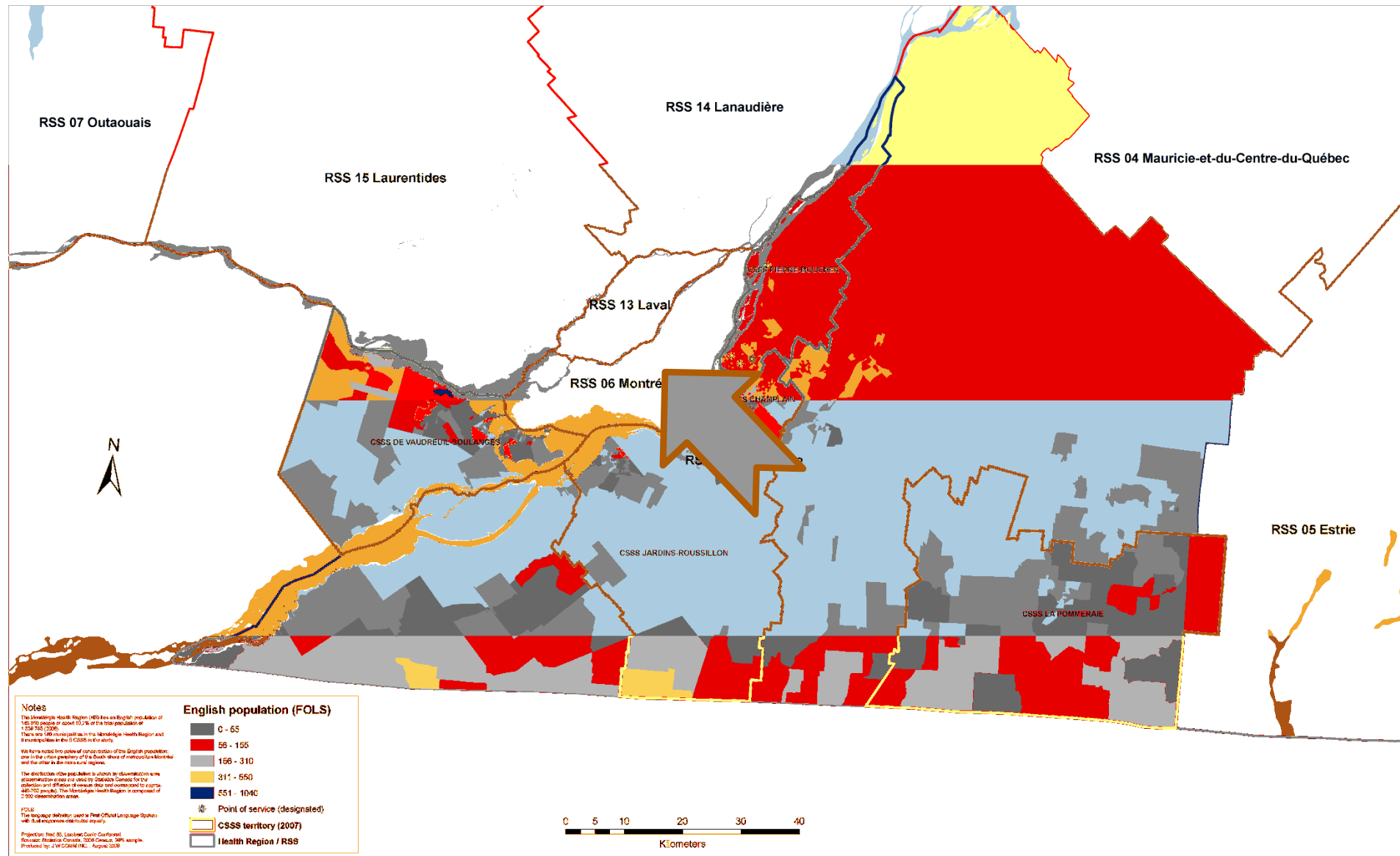
Source: Statistique Canada, 2006, échantillon 2
 Auteur: Jan Warnke, J W COMM inc. & RISF



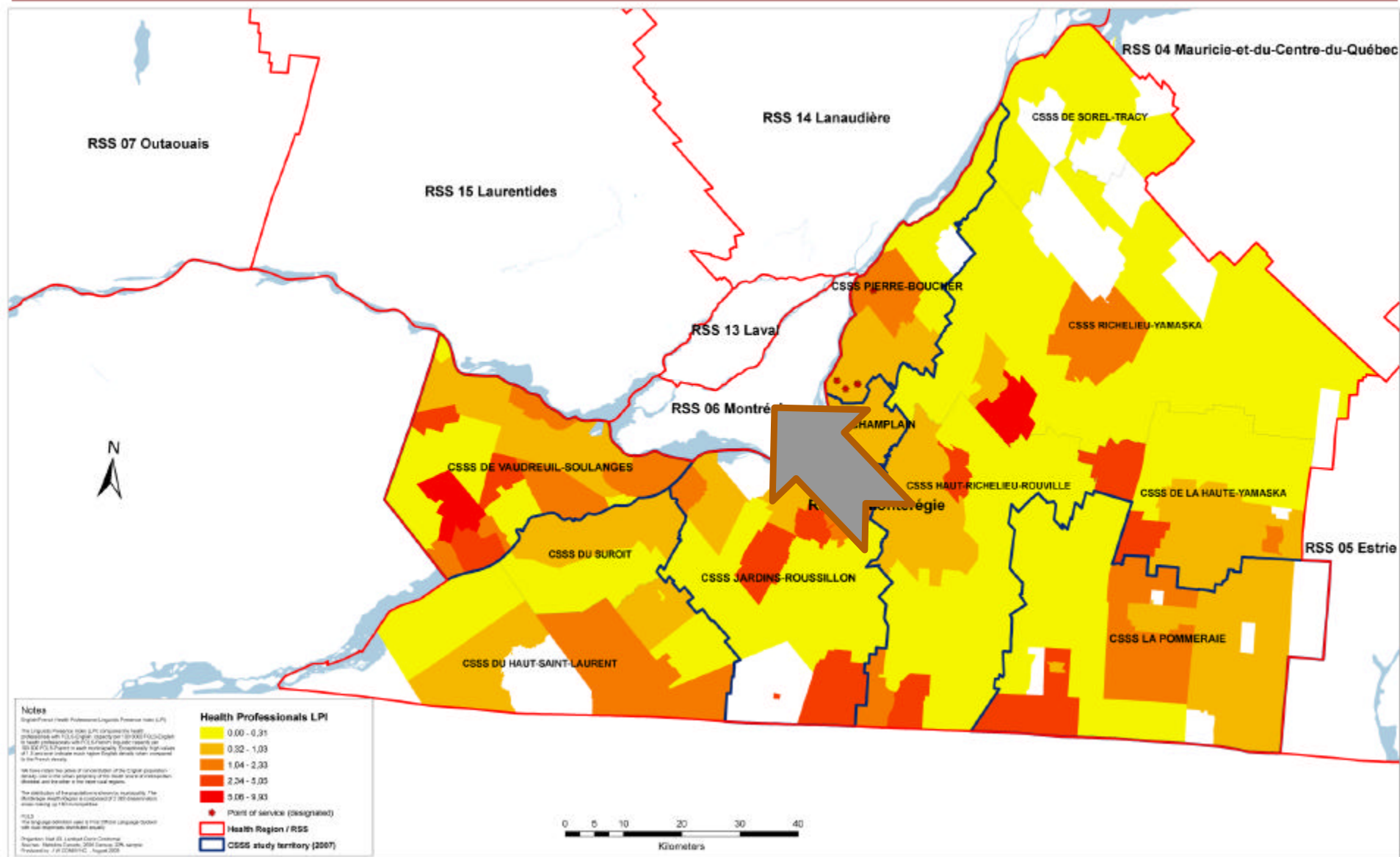
- Case Study of OLMC health professional supply and demand
- English minority in Québec
- CHSSN mandate to document the health service access (potential and actual)
- Montérégie Health Region
 - ? CHSSN Data Model of social determinants
 - ? CHSSN-CROP Community Vitality Survey (2005, n=3129)
 - Satisfaction with health service utilisation and behaviour information
 - OLMC population tends to use Montréal services
 - Wish to have services in English locally

Health Professional Supply and OLMC Use of Health Services: Case Study

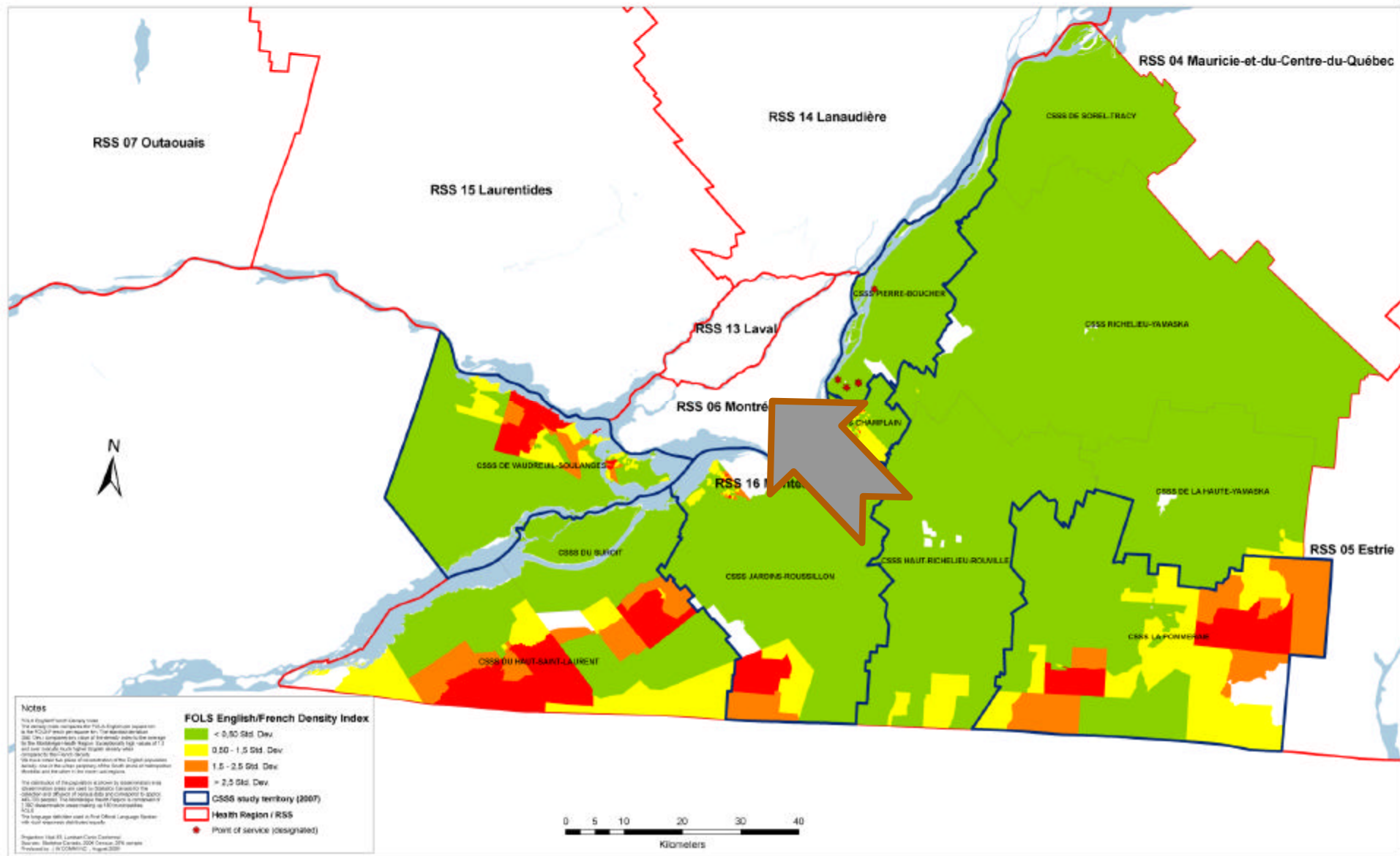
English population in the Montréalégie Health Region (RSS 16)



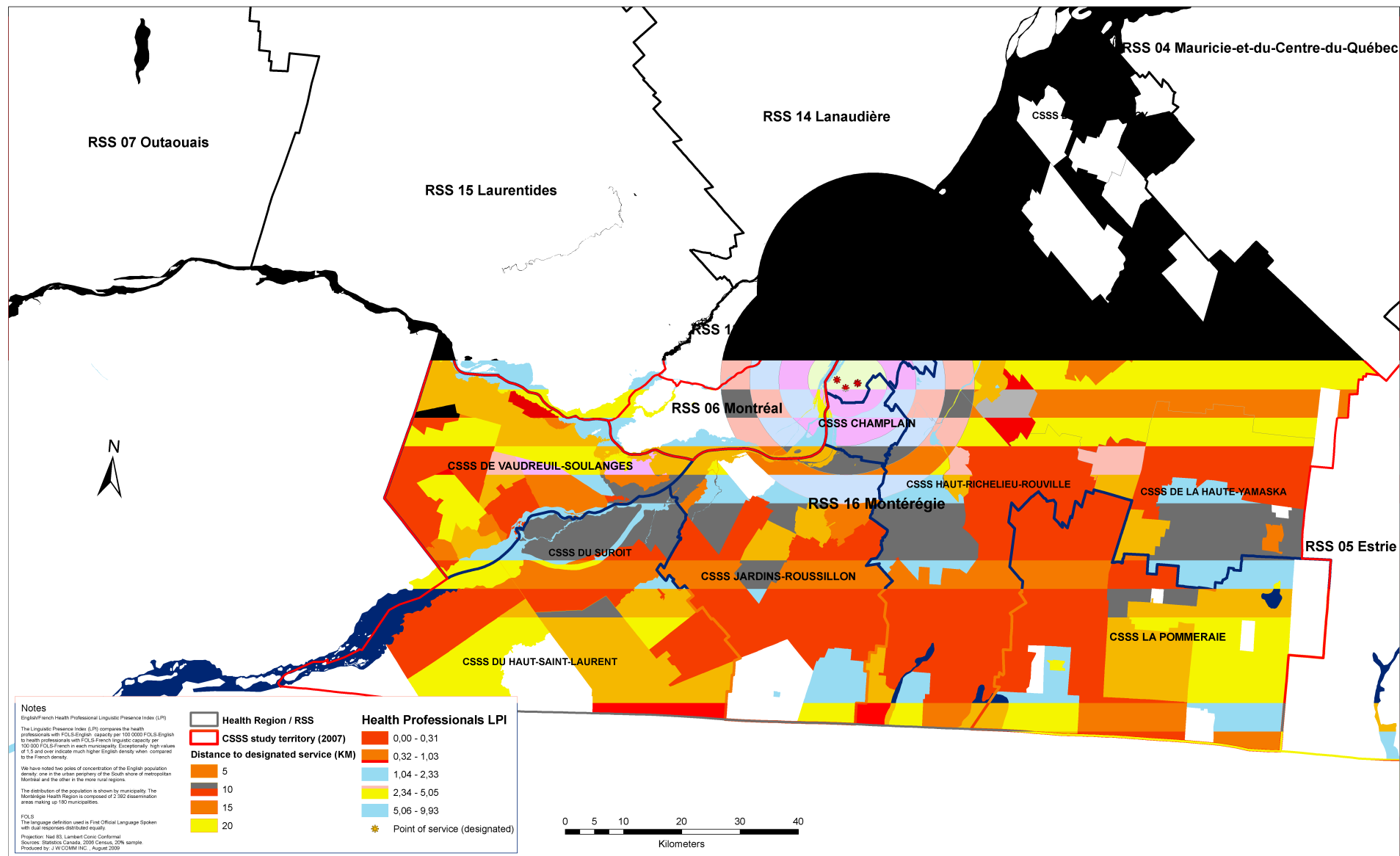
English/French Health Professional Index (LPI), Montréal Health Region (RSS 16)



English/French Population Density Index, Montérégie Health Region (RSS 16)

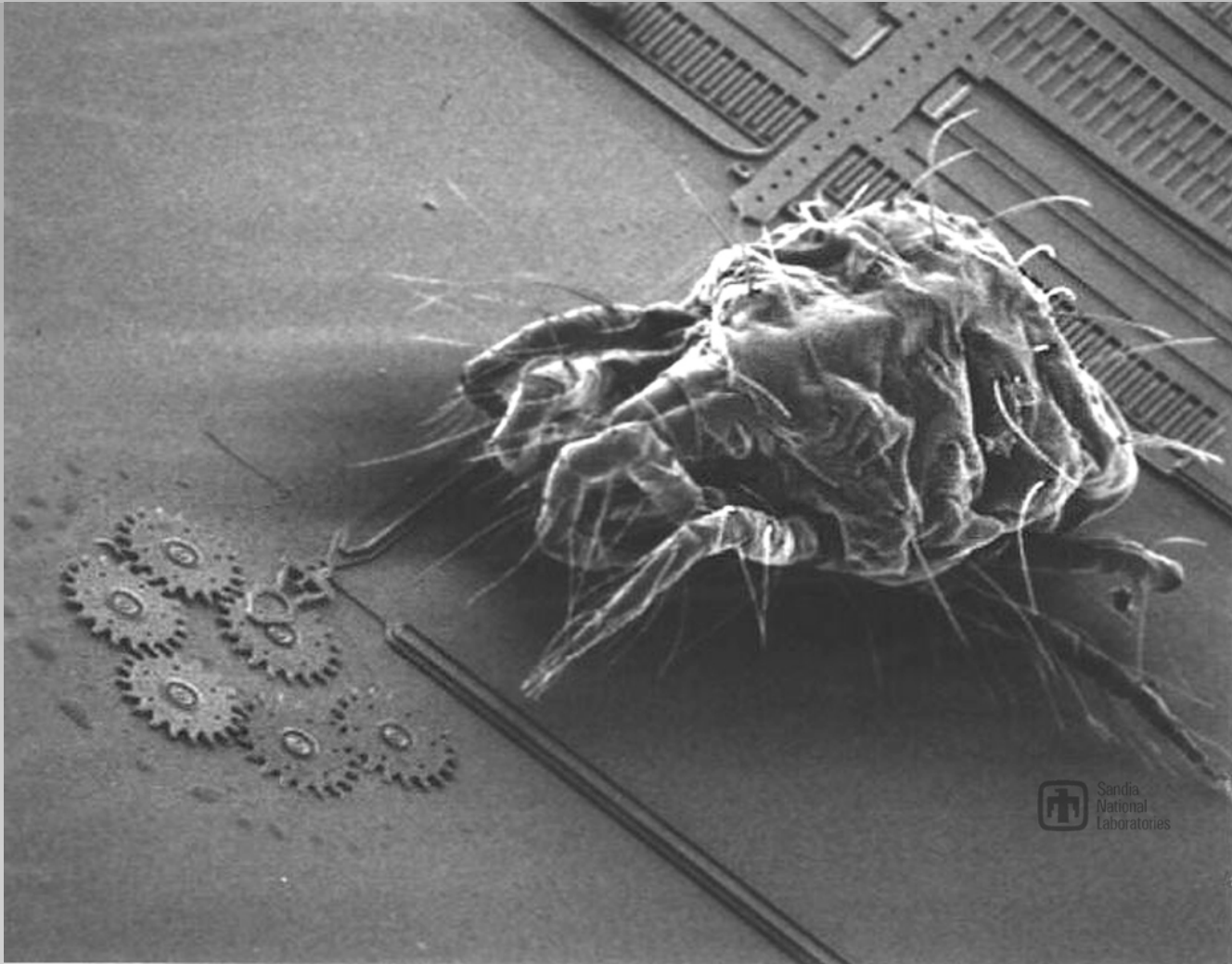


English/French Health Professional Index (LPI), Montréalégie Health Region (RSS 16)



- Health professional supply and health access
 - ? Health professional supply issues are multi-level
 - ? Measures of health professional supply have to be adapted to needs
 - ? Neighbourhood/subregional level health-professional and service user information is required
 - ? Physical access provides insight on the dynamics of regional health service use

Conclusion



 Sandia
National
Laboratories

Thank you!