



Health Inequalities in Nova Scotia: Future Developments and Directions for Health Policy

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Comparisons of health, health policies, and health services among District Health Authorities and Community Health Boards are useful to health policy makers in Nova Scotia. But it is a challenge to present results in a way that meets their needs.

Dr. Paul J. Veugelers compared small areas in Nova Scotia and used maps to depict visually provincial variations in health. His research shows the feasibility – and the dangers – of making small-area maps. Such maps are easy to interpret and meaningful for monitoring inequalities in health and their determinants. But geographic health maps have a downside. They can lead to invalid interpretations. Dr. Veugelers says researchers must take responsibility for the soundness of the methodology used and be aware of methodological issues that can introduce substantial error and misinterpretation.

While the health concerns of Cape Breton have long been documented, other areas of the province have never been investigated. Dr. Veugelers's research team determined that the health concerns of the North End of Halifax, for example, are of similar magnitude as those of Cape Breton. Bedford and Kings County subdivisions B and D, where Cape Split and Wolfville are located, have the longest life expectancy. Poorer health is a consequence of more than the area's socio-economic situation. It is, therefore, important for policy makers to realize the health problems will only partially change by addressing only the socio-economic factors.

The Nova Scotia researcher also found that use of health services varies substantially throughout the province. Health services are unequally used and use of specialist services and hospitalizations vary considerably. This raises a concern about health inequalities and resulting adverse health effects.

More information on factors that may be responsible for these health differences is available, but has not yet been systematically evaluated. For example, the health impact of policies at the District Health Authority and Community Health Board levels has never been evaluated. Such information in combination with the maps and methodology developed by Dr. Veugelers will increase understanding of health differences and provide clues and directions for prevention and intervention.

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