HEALTH SURVEILLANCE INDICATORS: SELF-RATED GENERAL HEALTH



Public Health Relevance

Self-rated health is a simple, valid measure that is considered to be an important indicator for overall health status and well-being. Research has shown that self-rated health status may be associated with future morbidity and mortality. It may also be a predictor of help-seeking behaviours and health service use.

Statistics Canada states that perceived health is a relative measure as people often assess their health in relation to their circumstances, expectations, and peers. Many health surveys ask respondents to rate their health as 'excellent', 'very good', 'good', 'fair', or 'poor'.

Highlights

- 1. More than half of the people in Toronto rated their general health as 'excellent/very good'.
- 2. The percent of people that rated their general health as 'excellent/very good' in Toronto remained fairly stable from 2007 to 2014.
- 3. Perceived general health amongst people in Toronto was not significantly different than the rest of Ontario and the rest of GTA.
- 4. People in East Scarborough were significantly less likely to rate their general health as 'excellent/very good' compared to Toronto as a whole.
- 5. Socio-demographic factors such as age, education, immigrant status, and income level were associated with significant differences perceived health amongst people in Toronto.

Overall Self-Rated General Health

More than half of the people in Toronto rate their general health as 'excellent/very good'.

Figure 1 shows the percent of people aged 12 years and older that rated their general health as 'excellent', 'very good', 'good', 'fair', or 'poor' in Toronto in 2013/2014.

More than half of the people in Toronto rated their general health as 'excellent' or 'very good'. Approximately 1 in 10 people in Toronto rated their general health as 'fair' or 'poor'.





Error bars (I) represent the 95% confidence intervals. Data Source: see Data Notes.

Trends Over Time

The percent of people that rated their general health as 'excellent/very good' in Toronto remained fairly stable from 2007 to 2014.

Figure 2 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' in Toronto from 2007 to 2014.

The percent of adults that rated their general health as 'excellent/very good' remained fairly stable from 2007 (60.6%) to 2014 (58.6%), as did the percent of people that rated their general health as 'fair/poor' (12.7% in 2007 versus 13.4% in 2014).





Error bars (I) represent the 95% confidence intervals. Data Source: see Data Notes.

Regional Comparisons

Perceived general health amongst people in Toronto was not significantly different than the rest of Ontario and the rest of GTA.

Figure 3 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' in Toronto compared to the rest of Ontario (Ontario without Toronto), the rest of the Greater Toronto Area (GTA without Toronto), and the health units (HUs) in Ontario with the highest and lowest percent in 2013/2014.

There was no significant difference in the percent of people that rated their general health as 'excellent/very good' or 'fair/poor' compared to the rest of Ontario and the rest of the GTA.

People in Toronto were significantly less likely to rate their general health as 'excellent/very good' compared to the Ontario HU with the highest percent, but were significantly more likely than the HU with the lowest percent.

People in Toronto were significantly less likely to rate their general health as 'fair/poor' as compared to the HU with the highest percent. There were no significant differences between Toronto and the HU with the lowest percent for 'fair/poor' general health.





Data Source: see Data Notes.

Toronto Neighbourhood Comparisons

People in East Scarborough were significantly less likely to rate their general health as 'excellent/very good' compared to Toronto as a whole.

Table 1 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' by Toronto Public Health's Service Delivery Areas (SDAs) for Chronic Disease and Injury Prevention in 2013/2014.

When compared to Toronto as a whole, people in East Scarborough were significantly less likely to rate their general health as 'excellent/very good'. The estimates for the percent of people that rated their general health as 'fair/poor' by SDA were supressed due to high sampling variability.

Table 1: Percent Rating their General Health as 'Excellent/Very Good' by Service DeliveryArea*, People Aged 12 Years and Older, Toronto, 2013/2014

CDIP Service Delivery Area	%
Danforth East York	63.3
East Scarborough	46.5 L
Humber Downsview	54.0
Rexdale Etobicoke	63.8
Toronto Centre	64.1
West Scarborough	57.2
Willowdale Don Mills	58.8
York South Humber	57.2
Toronto	58.9

* Toronto Public Health's Service Delivery Areas for Chronic Disease and Injury Prevention (CDIP).

^L Significantly lower than the Toronto total indicating an unfavourable result for that area.

Socio-demographics

Socio-demographic factors such as age, education, immigrant status, and income level were associated with significant differences perceived health amongst people in Toronto.

Table 2 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by sex in Toronto in 2013/2014.

There were no significant differences in perceived general health by sex.

 Table 2: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' by

 Sex, People Aged 12 Years and Older, Toronto, 2013/2014

Sex	Excellent/Very Good (%)	Fair/Poor (%)
Male	62.7	10.2
Female	55.3	13.8

Data Source: see Data Notes.

Table 3 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by age group in Toronto in 2013/2014.

The percent of people that rated their general health as 'excellent/very good' decreased significantly as age increased. People in the 65 years and older age group were significantly less likely to rate their health as 'excellent/very good' compared to the younger age groups.

Table 3: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' byAge Group, People Aged 12 Years and Older, Toronto, 2013/2014

Age Group	Excellent/Very Good (%)	Fair/Poor (%)
12 to 19 Years	67.4	S
20 to 39 Years	67.2	5.1 ^c
40 to 64 Years	55.8∟	14.2 ⊾
65 Years and Older	42.7 ⊾	26.0 ⊾

S Extremely high sampling variability. Estimate suppressed.

^c Moderately high sampling variability, interpret with caution.

L Significantly lower than the age group with the highest percent. Data Source: see Data Notes.

Table 4 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by education level in Toronto in 2013/2014.

Adults with less than high school education were significantly less likely to rate their general health as 'excellent/very good' compared to those with a higher level of education.

Table 4: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' byEducation, People Aged 12 Years and Older, Toronto, 2013/2014

Education Level	Excellent/Very Good (%)	Fair/Poor (%)
Less than High School	42.5 ∟	21.4
High School Graduate	56.8	14.2
Post-Secondary Education	65.3	8.1 ⊾

Significantly lower than the education level with the highest percent. Data Source: see Data Notes.

Table 5 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by immigrant status in Toronto in 2013/2014.

Immigrants were significantly less likely to rate their general health as 'excellent/very good' compared to Canadian-born people.

Table 5: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' byImmigrant Status, People Aged 12 Years and Older, Toronto, 2013/2014

Immigrant Status	Excellent/Very Good (%)	Fair/Poor (%)
Immigrant	53.7 ∟	14.3
Canadian-born	66.9	9.1

Significantly lower than the immigrant status group with the highest percent. Data Source: see Data Notes.

Table 6 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by income level in Toronto in 2013/2014.

People in the low and middle income groups were significantly less likely to rate their general health as 'excellent/very good' compared to people in the high income group.

Table 6: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' byIncome Level, People Aged 12 Years and Older, Toronto, 2013/2014

Income Level	Excellent/Very Good (%)	Fair/Poor (%)
Low Income	47.6 ⊾	18.1
Middle Income	56.4 ⊾	11.7
High Income	72.6	6.4 ⊾

Significantly lower than the income group with the highest percent. Data Source: see Data Notes. Table 7 shows the percent of people aged 12 years and older that rated their general health as 'excellent/very good' and 'fair/poor' by ethno-racial identity in Toronto in 2013/2014.

There were no significant differences in perceived general health by ethno-racial identity.

Table 7: Percent Rating their General Health as 'Excellent/Very Good' and 'Fair/Poor' byEthno-racial Identity, People Aged 12 Years and Older, Toronto, 2013/2014

Ethno-racial Identity	Excellent/Very Good (%)	Fair/Poor (%)
White	62.2	13.4
Racialized	56.2	10.3

Data Source: see Data Notes.

Data Notes

Notes

- Significant differences were estimated using overlapping confidence intervals. Although this
 method is conservative (α ~< 0.01) and most appropriate when comparing mutually
 exclusive groups, it was chosen as an objective means of drawing conclusions on
 population-based data. Multiple comparisons performed in the analyses were not taken into
 consideration when choosing the level of significance to test.
- Toronto is compared to the rest of Ontario (Ontario with Toronto removed) as opposed to the Ontario total because Toronto comprises a large proportion of the Ontario population. Toronto is also compared to the rest of the GTA (Greater Toronto Area) for the same reason.
- Data used for the regional comparisons normally shows the percentage for the Ontario health units with the highest and the lowest percentage. The purpose of these comparisons is to show the percent for Toronto relative to other areas in Ontario.
- The estimates in this indicator page are from self-reported data from the Canadian Community Health Survey (CCHS). Self-reported data have a number of limitations. People do not always remember their behaviours, and may under-report or over-report certain behaviours or characteristics based on their perceived social desirability. For example, people may rate their general health higher because they perceive this to be a "better" response. In addition, surveys do not always provide a representative picture of the whole population. The CCHS under-represents people of low income, people with low education, and new immigrants. If a respondent did not respond to a survey question relevant to the analysis presented, they were excluded from both the numerator and the denominator.
- Time trend analysis is based on the most recent 8 years of data. This is because the CCHS changed from a two-year release cycle to an annual release cycle starting in 2007.

Definitions

95% Confidence Interval is the range within which the true value lies, 19 times out of 20.

'Excellent/Very Good' and 'Fair/Poor' General Health were established from the survey respondents' answer to the question: "*In general, would you say your health is: 'excellent', 'very good', 'good', 'fair', or 'poor'*?". The 'excellent' and 'very good' responses were grouped into the 'excellent/very good' category, and the 'fair' and 'poor' responses were grouped into the 'fair/poor' category.

Immigrants are those respondents whose country of birth is outside of Canada.

Income Level is derived as three equally divided parts of the weighted population based on the respondents' adjusted household income ratios. A respondent's adjusted household income ratio is calculated using the total household income, Statistics Canada's 2013-2014 Low Income Cut Offs (LICOs), and the CCHS income adjustment factor. Approximately 30% of survey respondents included in this analysis had their income level imputed based on other socio-demographic characteristics.

- **Racialized** is used to define groups that do not identify themselves as White, recognizing that 'races' or 'visible minorities' are socially constructed but have real consequences for individuals and communities. Ethnic origins in this category include Black, Korean, Filipino, Japanese, Chinese, South Asian, Southeast Asian, Arab, West Asian, Latin American, other racial/cultural origin, and multiple racial/cultural origins. Aboriginal respondents are not included in this category because of their unique identity, history, and experiences. They are excluded from the analysis by ethno-racial identity.
- **Sex** defines people based on their biological characteristics, whereas 'Gender' is a socially constructed concept. From a social determinants of health perspective, certain health conditions can be associated with gender, and from a biological perspective, health conditions can be associated with sex. Although rating based on both concepts would be preferable, the data source used here only collects information on sex, and not gender.

Sources

- **Canadian Community Health Survey:** Canadian Community Health Survey (CCHS), 2007 to 2014. Statistics Canada, Share File, Knowledge Management and Rating Branch, Ontario Ministry of Health and Long-Term Care. Used in:
 - Figures 1-3
 - Tables 1-7

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Category: Chronic Disease

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This indicator report is part of a series that informs the ongoing assessment of Toronto's

health status. For a full list of the indicators, please go to: www.toronto.ca/health