

FOR THE RECORD

Canadian disparities in access to health care

The health care systems of British Columbia and Nova Scotia rate highest in a comparison of medical outcomes, while Newfoundland trailed the provincial pack, according to a study by Winnipeg-based Frontier Centre for Public Policy and Europe's Health Consumer Powerhouse.

But Ontario moves ahead of the pack (box 1) and is the "clear winner" in an overall Canada Health Consumer Index that rates provincial performance across 5 sub-disciplines — medical outcomes, primary care, wait times, patient rights and "generosity," i.e., range of services provided — using 26 indicators, such as access to a family doctor, heart infarct mortality rates, cancer 5-year survival rates and childhood vaccinations.

The four lowest ranked systems were Newfoundland in tenth, followed by Saskatchewan, Quebec and Manitoba. But authors stress there were only fractional differences between the bottom 4, who contend "closely for last place."

The 2 public policy think tanks also found a surprising correlation between spending levels and wait times, with the 3 provinces with the worst wait times (Manitoba, Alberta and Saskatchewan) spending more than the national average

Box 1: Ranking provincial health care systems

According to 2 public policy think tanks, there is an enormous disparity in the quality of health care experienced by residents of different Canadian provinces. By descending rank order, the best care is provided by:

1. Ontario
2. British Columbia
3. Nova Scotia
4. New Brunswick
5. Alberta
6. Prince Edward Island
7. Manitoba
8. Quebec
9. Saskatchewan
10. Newfoundland & Labrador

Young children remain primary victims of malaria

While worldwide access to malaria control interventions improved through 2006, there were still a staggering 247 million people estimated to have become infected with the parasite, which continues to kill about 900 000 annually, primarily children under the age of 5, according to a new World Health Organization (WHO) report (www.who.int).

The disease remained endemic in 109 countries, including 45 in Africa, on which just 3% of children in need have access to artemisinin-based combination therapy, according to the WHO's *World malaria report 2008*.

Some 80% of the malaria cases occurred in 14 African countries and over half of those were in Nigeria, the Democratic Republic of Congo, Ethiopia, United Republic of Tanzania and Kenya. Other world hot spots included India, Sudan, Myanmar, Bangladesh, Indonesia, Papua New Guinea and Pakistan.

Despite pockets of progress, Africa still lags in malaria control measures such as mosquito nets, often falling well behind the 80% target sought by the World Health Assembly for 4 interventions by 2010: insecticide-treated nets for people at risk; appropriate antimalarial drugs for probable and confirmed malaria cases; indoor residual spraying for infected households; and intermittent preventive treatment in pregnancy. For example, just 26% of people in 37 countries are now protected by proper nets.



Reuters / Corinne Dufka

Mothers and their malaria-infected children await treatment at a Kisii district hospital 400 km west of Nairobi, Kenya.

on their health care systems, while the 3 provinces with the lowest wait times (Quebec, Prince Edward Island and Nova Scotia) spent less. "These results should make it clear that a province's ability to provide timely consultations, diagnoses and treatments is not dependent upon its ability to spend huge amounts of money on healthcare."

The Index (www.fcpc.org/main/index.php) ranks the provinces using a model developed to compare European nations. In January 2008, Canada was included in the international comparison for the first time and it emerged 23rd among 30 nations.

The study stresses that no Canadian province is without its strengths and weaknesses. Even overall front-runner Ontario is an occasional poor performer, rating sixth when measuring just wait times. At the other end of the scale, Newfoundland and Labrador

ranked last but finished second in the patient rights subdiscipline.

The study also rated each province according to the cost-effectiveness by which it delivers health care. Ontario again came out on top, followed by Quebec, British Columbia and Nova Scotia. Alberta, which spends more per capita (\$3297.74) on health care than any other province, rated eighth. "Albertans enjoy mid-level healthcare, but they pay more for it than anybody else, and so fare poorly when value for money is considered."

The second highest spender, Newfoundland and Labrador (at \$3183.65 per capita) finished last, in "perhaps the most glaring example of throwing good money after bad in Canadian healthcare," the study stated. — Wayne Konro, *CMAJ*

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