

Women in Prince Edward Island

Statistical Review Fourth Edition



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Executive Summary

The Fourth Edition of the Women in PEI: Statistical Review provides a statistical snapshot of the female population in PEI based on sex and gender-disaggregated data on population, education, work and income, health, justice, violence, shelter services, and leadership. The first Statistical Review was completed in 1996, followed by editions in 2010 and 2015. The Interministerial Women's Secretariat (IWS) is committed to updating the Statistical Review every five years.

This edition includes quantitative data collected between 2016 and 2020 from a variety of sources, including Statistics Canada, the Government of Prince Edward Island, educational institutions, and communitybased organizations. The sources included in the Statistical Review use a combination of sex and gender-disaggregated data. Whenever possible, gender, diversity, and inclusion statistics are also incorporated into the review. The Statistical Review uses "female" and "male" when referencing sexdisaggregated data and "women" and "men" when referencing gender-disaggregated data. The Statistical Review does not provide an analysis of the data presented. Therefore, it is important to consider the data within the context of historical and social factors.

In everyday conversation, the terms sex and gender are frequently used interchangeably. For the purposes of Gender and Diversity Based Analysis, it is helpful to distinguish between the two. Sex is a biological classification based on differences in reproductive organs, physiology and anatomy, genes and hormones.

It is also important to acknowledge that sex is not always binary. Women and Gender Equality Canada notes that intersex people are born with any of several variations in sex characteristics, including chromosomes, gonads, sex hormones, or genitals that do not fit with typical conceptions of "male" or "female" bodies.

Gender is a social classification. This classification is based upon the personality traits, qualities, social roles and responsibilities and relations expected for and among women and men. The classification is also affected by what behaviours are generally considered acceptable for and among women and men. Society commonly attributes different power and influence to gender in different spheres of life. People express their gender and identify their gender across a spectrum. Gender expectations, expressions and relations vary across cultures and across time.

IWS recognizes that the sex and gender-disaggregated data in this review are primarily limited to binary categories that do not reflect all individuals in society. The Statistical Review relies heavily on data collected by Statistics Canada. A limitation of the most recent census from Statistics Canada is the absence of data about transgender and gender diverse individuals. In response, Statistics Canada notes that they have "studied comments from the last census and engaged with experts, academics, and LGBTQ2 communities in order to understand the needs and challenges associated with producing reliable data on the transgender and non-binary populations living in Canada, then made recommendations on changes for the next census."1 In order to address the data gap on the transgender and non-binary population, the next census will ask individuals to identify their sex at birth and their gender.²

Additionally, sex and gender-disaggregated data alone does not reflect the experience of women from diverse backgrounds, including Black, Indigenous, women of colour, women with disabilities, Francophone women, young women, and 2SLGBTQQIA people. Increasingly, our understanding of sex, gender, and diversity continues to evolve and inform data collection and reporting. As more disaggregated data for diverse population groups becomes available, it will be included in future editions of the Statistical Review.

The COVID-19 pandemic began as the Statistical Review was entering the final stage of data collection. As a result, this edition of the Statistical Review includes initial data related to COVID-19 and health, employment, and income. The next Statistical Review will include more comprehensive data related to the COVID-19 pandemic and its effect on women in PEI.

Chapter one provides an overview of demographic information related to females in PEI. Females made up 50.8% of the PEI population. Indigenous females made up 52.4% of the Indigenous population of PEI. The median age of females in PEI was 44.2 years. The median age of Indigenous females (27.7 years) was younger than the median age of the total female population. The fertility rate (children per female) was 1.42, compared to 1.46 in Canada, which is well below the replacement fertility rate of 2.1. The majority of PEI females spoke English only (95.6%), compared to 3.4% who spoke French only. Fourteen percent of females in PEI spoke both English and French. Females made up half of the visible minority population of PEI.² Over four percent (4.6%) of the female population in PEI identified as a member of the visible minority population. Forty-two percent (42.8%) of females who immigrated to PEI from outside of Canada were between the ages of 25-44 years. Females over the age of 65 made up 21.3% of the total female population in PEI. Twenty-eight percent (28%) of females in PEI had a disability. Females made up the majority (78.8%) of lone-parent families in PEI.

The education chapter contains a review of data collected nationally, provincially and by institution. At the elementary and secondary level, females were more likely to be enrolled in French Immersion programs (56.7%) and French First Language schools (55.8%). Females in PEI were more likely than males to have obtained college, CEGEP, or other non-university certificates or diplomas, university certificates or diplomas below and above the bachelor level. Indigenous females were more likely than Indigenous males to have obtained college, CEGEP, or other nonuniversity certificates or diplomas, university certificates or diplomas below and above the bachelor level. In PEI, Indigenous and non-Indigenous males significantly outnumbered Indigenous and non-Indigenous females in apprenticeship and trades degrees. Females made up almost twothirds of students enrolled at UPEI. The majority of part-time students in university were females (54%). Females made up 53.5% of all International students in PEI colleges and university. Females continued to be significantly underrepresented in the fields of architecture, engineering, and related technologies. In the 2019-2020 academic year, females accounted for 78% of registered

¹ The Women in PEI: Statistical Review follows the Missing and Murdered Indigenous Women and Girls Final Report lead in using the 2SLGBTQQIA acronym (Two Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex and Asexual). In some cases, sources referenced in the Statistical Review use a variation of this acronym.

² In the most recent census Statistics Canada used the Employment Equity Act definition of visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour." It is important to note that "Statistics Canada has received feedback regarding the sensitivity and appropriateness of the term 'visible minority' and the level of data disaggregation in disseminated data tables and analytical products, Statistics Canada will continue to explore alternative ways to measure various population groups." Further, "Statistics Canada has relied on the advice of the Advisory Committee on Ethnocultural and Immigration Statistics, and will continue to rely on their advice as changes to the question on population groups are considered for the 2026 Census." (see text box, below)

students at Collège de l'Île. At Holland College, females were more likely to be enrolled in the fields of Health and Community Studies, Business, and Tourism.

Chapter three highlights sex-disaggregated data related to work and income in PEI. As of 2020, females made up 47% of the labour force in PEI. The employment rate for females age 15 years and older in PEI was 57.7%, compared to 53.9% for women nationally. The number of females employed over the age of 15 decreased by 5.7% (or 2,200) in 2020 over 2019, while there was no change for males. Due to the COVID-19 pandemic, the unemployment rate for females increased 3.8 percentage points to 10.4%. Females in PEI worked fewer paid hours per week than males. The average weekly wage rate for females working part-time was \$283.91, while for males, the average rate was \$235.45. Females in PEI lost an average of 15 days of work in 2020. The most commonly cited reason for absence was illness or disability followed by personal and family. Indigenous and non-Indigenous females in PEI were represented most predominantly in sales and service, business, finance, and administration, law, social, and government services, and health. Four thousand females in PEI were self-employed in 2020. The median income for females in PEI was \$28,065, compared to \$32,062 for males. The median income for Indigenous females in PEI was \$21,562, compared to \$24,932 for Indigenous males.

The health chapter contains a robust overview of information about the health of the female population in Prince Edward Island. Females in PEI live an average of 83.6 years, while males live an average of 79.6 years. As of the end of 2020, PEI had zero deaths (and hospitalizations) due to COVID-19. In Canada, more males than females succumbed to COVID-19 before age 80. At age 80 and over, the trend reversed, and more females than males died due to COVID-19. Rates of cancer for females were lower than the rates for males in both PEI and Canada. Lung, colorectal, and breast cancer were the leading causes of cancer deaths in PEI females. Eightyfour percent (84.2%) of PEI females reported they had access to a regular health care provider, which was 3.7% higher than males, but 4.3% lower than the percentage of Canadian females who reported having access to a regular health care provider. For the past two decades, PEI hospitals have delivered approximately 1,400 babies a year. Disability peaks for females between ages 45 to 64 in PEI and Canada.

Chapter five highlights sex and gender-disaggregated information about access to justice in PEI, including services such as legal aid, corrections, and maintenance enforcement, and statistics regarding PEI courts. From April 1, 2020, to November 13, 2020, Community Legal Information received 1,472 inquiries through the inquiry line, with females accounting for 63.7% of inquiries. Females made up 71% of family and civil law legal aid recipients and 26% of criminal law legal aid recipients in PEI (adult and youth). In 2019-2020, PEI correctional centres recorded 41,169 total bed days for the Provincial Correctional Centre and Prince County Correctional Centre. Women accounted for 15% of total actual bed days. Community and Correctional Services' Community Program Section supervised 163 women under court order in the community on probation, conditional sentence or alternative measures.

The violence against women and shelter services chapter contains statistics related to violence against women in PEI. Seventy-one percent of new referrals to Victim Services in 2019-2020 were female. Since the proclamation of the Victims of Family Violence Act in 1996, 1,114 applications have been received for emergency protection. Females have consistently made up at least 94% of recipients of emergency protection orders under PEI's Victims of Family Violence Act. Family Violence Prevention Services admitted 79 women and 24 children to Anderson House in 20192020. The majority of women admitted to Anderson House were between the ages of 25 to 34 (40%). PEI Family Violence Prevention Services assisted 313 women through outreach services in 2019-2020. The highest proportion (44.4%) were accessing FVPS for the first time. Chief Mary Bernard Memorial Women's Shelter was at full capacity 100 nights in 2019-2020. Since opening in 2019, Blooming House has provided shelter for 115 individual women. Ninety-five percent of people accessing therapy at the PEI Rape and Sexual Assault Centre in 2019-2020 were women.

Chapter seven closes the Statistical Review with a look at statistics on women's leadership in PEI, including elected and appointed positions. Following the 2018 municipal elections, women made up 39.7% of councillors and 26.9% of mayors in cities, towns, and rural municipalities in PEI. In 2020, seven of twenty-seven (25.9%) Members of the Legislative Assembly in PEI were women, up from 18.5% in 2015. All four PEI Members of Parliament were men in 2020. One of four (25%) appointed Senators was a woman. In 2020, 50% of Lennox Island First Nation Band Council were women, including the Chief. In 2020, one woman (25%) was elected as a councillor of Abegweit First Nation Band Council. The President and CEO of the Native Council of PEI was a woman. Forty-eight percent (48%) of individuals appointed to provincial agencies, boards, and commissions in 2020 were female. PEI's Chief Public Health Officer was a woman.

Message from the Minister

As Prince Edward Island's Minister Responsible for the Status of Women, I am pleased to release the fourth edition of the Women in Prince Edward Island: A Statistical Review.



Since the first edition was launched in 1996, the statistical review has provided a snapshot of statistical information on the female population of Prince Edward Island at different points in time, and has been updated every five years since 2010. The statistical review continues to evolve and provide more data from a variety of sources. The Interministerial Women's Secretariat remains committed to updating the statistical review every five years.

I would also like to extend my thanks and appreciation to the members of departments, divisions, sections, secretariats, agencies, community organizations and learning institutions who have contributed their time and expertise to this document. I hope that the statistical review will be a valuable resource for gender and diversity analysis within government and community.

Honourable Natalie Jameson

Minister of Education and

Lifelong Learning

Minister Responsible for the Status of

Women

Chapter One: The Female Population of PEI

In this chapter, you will find a general overview of statistical information about the female population in Prince Edward Island. Chapter one outlines population trends and diversity statistics related to females in PEI and language, race, age, and ability. Statistics Canada's 2016 Census of Population, Annual Population Estimates, and Canadian Survey on Disability are the primary sources of data in this chapter. Additional data was provided by the Highway Safety Division of PEI. Highlights based on Statistics Canada data on the female population of PEI include the following:

- Females made up 51.5% of the PEI population.³
- Indigenous females made up 52.4% of the Indigenous population of PEI.4
- The median age of females in PEI was 44.2 years.⁵
- The median age of Indigenous females (27.7 years) was younger than the median age of the total female population.⁶
- The fertility rate in PEI was 1.42, compared to 1.46 in Canada, which is well below the replacement fertility rate of 2.1, or the number of children per female required to maintain the population.⁷
- The majority of females in PEI (95.6%) spoke English only, compared to 3.4% who spoke French only. Fourteen percent (14.2%) of females in PEI spoke both English and French.⁸
- Females made up half of the visible minority population of PEI and accounted for 4.6% of the total female population in PEI.9
- Forty-two percent (42.8%) of females who immigrated to PEI from outside of Canada were between the ages of 25 to 44 years.¹⁰
- Females over the age of 65 made up 21.3% of the total female population in PEI.¹¹
- Twenty-eight percent (28.3%) of females in PEI had a disability.¹²
- Females made up the majority (78.8%) of lone-parent families in PEI.¹³

Population

The total population for Prince Edward Island in the most recent census (2016) was 142,910, a 1.9% increase from the 2011 census. In PEI, females made up 51.5% (73,605) of the population, and males made up 48.5% (69,305) of the population in the most recent census.¹⁴ The most recent census lacks data on transgender and gender diverse individuals. Statistics Canada plans to address this gap by collecting both sex and gender data in the next census. More recent data from Statistics Canada's Annual Demographic Estimates program estimated PEI's population as of July 1, 2020, to be 159,625, which included 81,117 (50.8%) females and 78,508 (49.2%) males.¹⁵

Population Estimates by Age – A Comparative Review

The Annual Demographic Estimates program from Statistics Canada provides annual estimates of population by age and sex for Canada, provinces and territories. Table 1-1 highlights population comparisons from the estimates of population from 2010 and 2020.¹⁶ Over a ten-year period, there was an increase in the estimated population of PEI, from 141,654 in 2010 to 159,625 in 2020. Likewise, the number of females in PEI increased from 72,458 (51.1%) in 2010 to 81,117 (50.8%) in 2020.

Population estimates for youth under the age of 20 reveal a slight increase in the number of youth in PEI between 2010 and 2020. In 2010 the population of youth in PEI was 32,927, compared to 33,753 in 2020. This represents a 2.5% increase over the ten years. During the same time, the number of female youth increased 2.7% from 16,117 in 2010 to 16,560 in 2020. In comparison, the number of male youth increased 2.3% from 16,810 in 2010 to 17,193 in 2020.

The total population estimates for seniors 65 years and older in PEI increased from 22,063 in 2010 to 31,957 in 2020, an increase of 44.8%. During this time, the number of female seniors in PEI increased from 12,342 in 2010 to 17,293 in 2020, an increase of 40%. The number of male seniors in PEI increased from 9,721 in 2010 to 14,664 in 2020, an increase of 50.8%. PEI, like Canada, has more people 65 years and older than children aged 0 to 14.

According to the 2020 annual estimates by age and sex, the median age for PEI females (44.2) was higher than males (41.6 years). The median age for females and males in PEI was also higher than the median age for females and males in Canada. In Canada, the median age for females was 41.9 years, compared with 39.8 years for males.

TABLE 1-1 POPULATION ESTIMATES BY AGE AND SEX, PEI AND CANADA (2010 AND 2020)¹⁷

Comparative 2020 & 2010	Pri	nce Edward Isla	nd		Canada	
	Total	Male	Female	Total	Male	Female
Total						
Population						
2020	159,625	78,508	81,117	38,005,238	18,885,261	19,119,977
2010	141,654	,	72,458	, ,	16,847,823	17,157,066
0-4yrs						
2020	7,199	3,780	3,419	1,921,944	985,452	936,492
2010	7,181	3,611	3,570	1,871,905	958,928	912,977
5-9yrs						
2020	8,248	4,195	4,053	2,044,603	1,045,953	998,650
2010	7,344	3,723	3,621	1,791,169	920,043	871,126

10-14yrs						
2020	8,966	4,481	4,485	2,072,100	1,055,313	1,016,787
2010	8,646	4,473	4,169	1,959,099	1,006,314	952,785
15-19yrs	0,040	7,773	7,103	1,555,655	1,000,514	332,703
2020	0.240	4 727	4.600	2 400 065	4 074 004	4 026 774
	9,340	4,737	4,603	2,100,865		1,026,774
2010	9,760	5,003	4,757	2,248,876	1,149,965	1,098,911
20-24yrs						
2020	11,577	6,212	5,365	2,482,802	1,295,347	1,187,455
2010	9,275	4,650	4,625	2,321,972	1,178,481	1,143,491
25-29yrs						
2020	10,321	5,430	4,891	2,645,240	2,365,844	1,279,396
2010	7,973	3,964	4,009	2,357,383	1,184,964	1,172,419
30-34yrs	.,	3,50	.,000	_,,	_,	_,_,_,
2020	9,212	4,466	4,746	2,661,723	1,350,274	1,311,449
2010			•	2,283,236		
	8,074	3,907	4,167	2,263,230	1,138,881	1,144,355
35-39yrs						
2020	9,314	4,517	4,797	2,630,680		1,313,248
2010	8,829	4,334	4,495	2,282,303	1,142,061	1,140,242
40-44yrs						
2020	9,586	4,621	4,965	2,464,247	1,220,034	1,244,213
2010	9,520	4,704	4,816	2,403,059	1,207,096	1,195,963
45-49yrs						
2020	10,231	5,024	5,207	2,390,116	1,185,148	1,204,968
2010	11,565	5,714	5,851	2,780,175		1,380,836
50-54yrs	11,505	3,7 14	3,031	2,700,173	1,333,333	1,300,030
2020						
	10,319	5,096	5,223	2,449,915		1,232,050
2010	11,198	5,439	5,759	2,634,9392	1,320,504	1,313,888
55-59yrs						
2020	12,005	5,833	6,172	2,744,896		1,380,219
2010	10,288	5,053	5,235	2,286,060	1,137,887	1,148,173
60-64yrs						
2020	11,350	5,452	5,898	2,560,241	1,260,206	1,300,035
2010	9,942	4,900	5,042	1,981,245	977,853	1,003,392
65-69yrs	,			, ,	,	
2020	10,116	4,886	5,230	2,167,275	1,050,581	1,116,694
2010	6,826	3,299	3,527	1,464,326		754,710
70-74yrs	0,020	3,233	3,327	1,404,320	703,010	754,710
2020	0.400	4.405	4.674	4.700.000	054.303	022.222
2010	9,106	4,435	4,671	1,786,622		932,329
	5,286	2,527	2,759	1,114,688	524,094	590,594
75-79yrs						
2020	5,589	2,569	3,020	1,218,303		648,607
2010	4,140	1,856	2,284	913,391	411,363	502,028
80-84yrs						
2020	3,641	1,533	2,108	811,370	359,314	452,056
2010	2,914	, 1,185	1,729	685,077		404,471
85yrs plus			,			,
2020	3,505	1,241	2,264	852,296	313,741	538,555
2010	2,897	854	2,204	626,533		426,705
	2,097	654	2,043	020,333	133,028	420,705
Median Age						
2020	42.9	41.6	44.2	40.9	39.8	41.9
2010	42.0	41.0	43.0	39.8		40.6
Source: Statistics Can			.3.0	23.0		

Source: Statistics Canada Table 17-10-0005-01

Atlantic Canada – Comparative Review

Table 1-2 compares the percentage of females in the Atlantic Provinces and Canada in 2010 and 2020 based on the annual estimates in population data from Statistics Canada. The percentage of females in PEI was consistent with data from the Atlantic Provinces and Canada. In general, females made up an increasing percentage of age groups, particularly over age 75. The median age of females in PEI (44.2) was lower than the median age of females in other Atlantic Provinces but higher than the median age of females in Canada (41.9).

TABLE 1-2 PERCENTAGE OF FEMALES BY AGE, ATLANTIC PROVINCES AND CANADA (2010 AND 2020)¹⁸

TABLE 1-2 PERCENTAGE OF F	EWALES BY AGE	, ATLANTIC PRO	JVINCES AND C	ANADA (2010 F	(ND 2020)
Comparative of 2010 and 2020	PE	NS	NB	NL	CA
2010 4114 2020	PE	INS	IND	NL	CA
Total Female Population					
2020	50.8	51.0	50.5	50.6	50.3
2010	51.1	51.0	50.6	50.7	50.4
0-4yrs					
2020	47.5	48.6	49.0	48.4	48.7
2010	49.7	48.2	48.7	48.4	48.7
5-9yrs					
2020	49.1	48.7	48.8	48.4	48.8
2010	49.3	48.7	48.6	48.8	48.6
10-14yrs					
2020	50.0	48.5	48.9	48.4	49.0
2010	48.2	48.6	47.8	49.1	47.2
15-19yrs					
2020	49.3	48.9	49.5	48.4	48.9
2010	48.7	48.6	48.6	48.8	48.8
20-24yrs					
2020	46.3	47.9	47.4	47.4	47.8
2010	49.8	48.7	47.7	49.2	49.2
25-29yrs		40.0			
2020	47.4	49.3	48.5	48.6	48.3
2010	50.2	49.6	48.9	49.8	49.7
30-34yrs	F4 F	FO 4	40.6		40.2
2020	51.5	50.4	49.6	49.9	49.2
2010	51.6	51.4	50.4	51.2	50.1
35-39yrs	51.5	54. 0	50.5	F4.6	49.9
2020	51.5 50.9	51.3	50.5	51.6	49.9 49.9
2010	30.9	50.9	30.0	51.3	43.3
40-44yrs 2020	51.8	52.7	50.2	52.1	50.5
2010	50.6	50.5	50.5	52.1 50.7	49.7
45-49yrs	30.0	50.5	30.3	50.7	73.7
2020	50.9	51.8	50.1	51.5	50.4
2010	50.6	51.8	50.7	50.6	49.6
50-54yrs	55.0	50.6	33.7	30.0	13.0
2020	50.6	51.1	49.7	51.2	50.2
2010	51.4	51.1	50.5	50.3	49.8
55-59yrs	0 2.1	0212	33.3	30.3	.3.0
2020	51.4	50.8	50.4	50.5	50.2
2010	50.9	51.2	50.5	50.0	50.2
2010	50.9	J1.Z	50.5	50.0	30.2

60-64yrs					
2020	51.9	51.2	50.6	50.7	50.7
2010	50.7	50.7	50.0	50.2	50.6
65-69yrs					
2020	51.7	51.8	51.4	50.8	51.5
2010	51.7	51.2	50.6	50.6	51.5
70-74yrs					
2020	51.3	51.9	51.7	51.2	52.1
2010	52.2	52.5	52.0	51.5	52.9
75-79yrs					
2020	54.0	53.6	52.3	51.7	53.2
2010	55.1	55.7	55.9	53.9	54.9
80-84yrs					
2020	57.8	56.0	55.3	54.5	55.7
2010	59.3	60.1	60.7	59.1	59.0
85-89yrs					
2020	62.6	61.5	61.2	58.4	59.6
2010	67.2	66.1	65.5	63.6	65.3
90-94yrs					
2020	65.1	68.7	69.4	67.9	66.1
2010	73.3	72.8	72.8	73.7	72.1
95 to 99yrs					
2020	76.5	78.3	77.9	77.7	75.0
2010	84.4	81.8	79.8	83.0	78.2
100yrs and over					
2020	80.0	83.3	84.0	80.4	81.2
2010	87.9	79.1	87.1	72.7	84.3
Median Age					
2020	44.2	46.2	47.0	48.2	41.9
2010	43.0	43.8	43.8	43.6	40.6

Source: Statistics Canada Table 17-10-0005-01

Fertility Rates

According to the most recent data from Statistics Canada, the fertility rate (children per woman) in PEI was 1.42, compared to 1.46 in Canada. 19 Over a five-year period the fertility rate in PEI decreased from 1.56 in 2015 to 1.42 in 2019. In comparison, the fertility rate in Canada decreased from 1.56 in 2015 to 1.46 in 2019. Statistics Canada notes that the fertility rate in the Atlantic Provinces and Canada was well below the replacement fertility rate of 2.1, or the number of children per woman required to maintain the population²⁰ (Table 1-3).

TABLE 1-3 FERTILITY RATE, ATLANTIC PROVINCES AND CANADA (2015-2019)²¹

Jurisdiction	2015	2016	2017	2018	2019
Canada	1.56	1.54	1.49	1.49	1.46
Prince Edward Island	1.56	1.57	1.48	1.45	1.42
Nova Scotia	1.43	1.42	1.39	1.35	1.35
New Brunswick	1.54	1.55	1.54	1.49	1.45
Newfoundland	1.43	1.42	1.32	1.35	1.30

Source: Statistics Canada Table 13-10-0418-01

Births and Birth Estimates

The number of births (and birth estimates) decreased by 3.1% in PEI from 2015-2016 to 2019-2020.²² Similarly, the number of births (and birth estimates) decreased in the rest of Atlantic Canada, with the largest decrease in Newfoundland and Labrador. The total births in Canada decreased by 2.2% from 2015-2016 to 2019-2020. During this same period of time, Yukon recorded the largest increase in births in Canada at 7.3% (Table 1-4).

TABLE 1-4 BIRTH ESTIMATES, CANADA, PROVINCES, AND TERRITORIES (2015-2016 TO 2019-2020)²³

	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
Canada	383,57	379,94	376,79	372,71	374,885
Newfoundland and Labrador	4,43	4,38	3,98	3,89	3,715
Prince Edward Island	1,39	1,38	1,29	1,30	1,353
Nova Scotia	8,35	8,22	8,10	7,96	8,193
New Brunswick	6,64	6,59	6,42	6,36	6,316
Quebec	86,91	84,66	83,99	83,83	84,400
Ontario	139,92	140,53	140,98	140,08	142,739
Manitoba	16,74	16,95	17,31	16,80	16,837
Saskatchewan	15,51	15,47	15,36	14,72	14,435
Alberta	56,92	54,78	52,98	52,32	51,996
British Columbia	44,66	44,98	44,30	43,43	42,996
Yukon	450	463	477	483	483
Northwest Territories	708	600	622	593	576
Nunavut	861	892	923	896	846

Source: Statistics Canada Table 17-10-0008-01



Marital Status

According to Statistics Canada, "marital status" refers to whether or not a person is living in a common-law union as well as the legal marital status of those who are not living in a commonlaw union. All persons aged 15 years or younger are considered as never married and not living common-law.24

Data from the most recent census reveals that 71,650 individuals in PEI were married or living common-law.²⁵ Of the 60,895 married individuals, 50% were male, and 50% were female. Females accounted for 49.7% of people living common-law, and males accounted for 50.2% of people living common-law. The number of people not married or living common-law was wider between sexes. Out of the 48,570 people not married or living common-law in PEI, females accounted for 55%, while males comprised the remaining 45%. The gap widens and also reverses when it comes to the ratio of females divorced (60%) to males divorced (40%) and widened further for the ratio of widowed females (80%) to widowed males (20%).

Table 1-5 displays data on marital status and sex for the Atlantic Provinces and Canada from the 2020 population estimates. The percentage of married people in PEI by sex was 50.1% for females and 49.9% for males. Similarly, the percentage of people living common-law in PEI by sex was 52.1% for females and 47.9% for males. Females made up the majority of separated (56.8%), divorced (61.3%), and widowed (80.4%) people in PEI. Males made up the majority of single (54.5%) people in PEI.

TABLE 1-5 MARITAL STATUS AND SEX, ATLANTIC PROVINCES AND CANADA (2020)²⁶

	CA	NL	PE	NS	NB
Both sexes	38,005,238	522,103	159,625	979,351	781,476
Male	18,885,261	257,955	78,508	479,392	386,847
Female	19,119,977	264,148	81,117	499,959	394,629
Single					
Both sexes	15,236,828	180,349	61,389	367,859	280,765
Male	8,117,814	96,325	33,429	194,221	148,714
Female	7,119,014	84,024	27,960	173,638	132,051
Married					
Both sexes	14,358,058	230,406	*	383,741	311,332
Male	7,261,217	116,009	•	192,532	158,444
Female	7,096,841	114,397	32.950	191,209	152,888
Separated					
Both sexes	851,685	9,610	*	27,650	23,889
Male	395,322	4,711	*	12,206	11,982
Female	456,363	4,899	2,232	15,444	11,907
Living common					
Both sexes	3,746,039	45,891	•	91,366	80,232
Male	1,900,394	23,422	6,176	46,460	40,788
Female	1,845,645	22,469	6.719	44,906	39,444
Widowed					
Both sexes	1,850,396	33,541	8,642	56,520	46,604
Male	400,546	7,282	•	12,102	10,197
Female	1,449,850	26,259	6.945	44,418	36,407
Divorced					
Both sexes	1,962,232	22,306		52,215	38,654
Male	809,968	10,206	•	21,871	16,722
Female	1,152,264	12,100	4,311	30,344	21,932
Source: Statistics C	anada Table 17-10-0060-01				

Source: Statistics Canada Table 17-10-0060-01

Families

Statistics Canada defines "census family structure" as the combination of relatives that comprise a census family. Classification on this variable considers the presence or absence of married spouses or common-law partners and children.²⁷ According to the most recent census, the total number of census families in private households in PEI was 41,705.²⁸ The average size of a census family was 2.8 individuals per household.

At 84.3%, the most common family type was coupled families (married or common-law). The total number of married couples in PEI was 29,785, which accounted for 71.4% of all census families. The total number of common-law couples in PEI was 5,375 or 12.9% of all census families. The next most common family type was lone-parent families, which accounted for 15.7% of all census families in PEI. The total number of lone-parent families in PEI was 6,545. Female parents accounted for 78.8% (5,155) of lone-parent families, while male parents comprised the remaining 21.2% (1,390). Compared to the total number of census families, female lone-parent families accounted for 12.4% of all census families in PEI, whereas male lone-parent families accounted for 3.3% (Table 1-6).

TABLE 1-6 PERCENTAGE OF FAMILY TYPES, PEI (2011 AND 2016)²⁹

Family Type	2011	2016
Married Couple Families	72.7	71.4
Common-Law Couple Families	11.2	12.9
Female Lone-Parent Families	12.8	12.7
Male Lone-Parent Families	3.3	3.3

Source: Statistics Canada Census

The majority of lone-parent families in PEI had one child living in the home (62.2%). An additional 27.7% had two children and 10.2% had three or more children living in the home (Table 1-7).

TABLE 1-7 PERCENTAGE OF CHILDREN IN LONE-PARENT FAMILY HOMES, PEI³⁰

Total Lone-Parent Family Homes	
Lone-Parent with 1 child in the home	62.2%
Lone-Parent with 2 children in the home	27.7%
Lone-Parent with 3 or more children in the home	10.2%

Source: Statistics Canada Census

Table 1-8 displays the most recent census data on family structure and presence of children in the Atlantic Provinces and Canada. The Atlantic Provinces and Canada recorded more families with children than families without children. Married couples made up the majority of couple type followed by common-law couples and lone-parent families. Like PEI, other Atlantic Provinces and Canada all recorded higher numbers of female lone-parent families than male lone-parent families.

TABLE 1-8 FAMILIES IN PRIVATE HOUSEHOLDS BY FAMILY STRUCTURE AND PRESENCE OF CHILDREN, ATI ANTIC PROVINCES AND CANADA³¹

Family Type	CA	NL	PE	NB	NS
All families	9,840,730	161,010	41,705	222,865	270,965
Without children in a census family	3,782,095	73,210	18,405	102,170	124,000
With children in a census family	5,436,135	80,880	21,825	112,070	136,280
Married couples	6,474,005	113,520	29,785	147,900	181,435
Common-law couples	1,753,920	23,235	5,375	38,780	42,630
Total lone-parent families	1,612,805	24,250	6,545	36,185	46,900
Male lone-parent	350,465	4,960	1,390	7,530	9,305
Female lone-parent	1,262,340	19,295	5,155	28,650	37,595

Source: Statistics Canada Census

Mother Tongue

Statistics Canada defines "mother tongue" as the first language learned at home in childhood and which is still understood by the person at the time the data was collected. For a person who learned two languages at the same time in early childhood, the mother tongue is the language this person spoke most often at home before starting school. The person has two mother tongues only if the two languages were used equally often and are still understood by the person. For a child who has not yet learned to speak, the mother tongue is the language

spoken most often to this child at home. The child has two mother tongues only if both languages are spoken equally often so that the child learns both languages at the same time.³²

The most recent census identified the mother tongue of 90.7% of females in PEI as English only, compared to 3.6% French only.33 Over five percent (5.8%) of females in PEI had a mother tongue which was neither French nor English. Females made up 53.8% of people in PEI whose mother tongue was French, a total of 2,620 females. The Aboriginal Profile from the most recent census noted that 1.4% of Aboriginal females in PEI identified Mi'kmaq as their Mother Tongue.34

Following the most recent census, Statistics Canada consulted with Indigenous people, communities, and organizations and governments on changes to the next census. As a result of its consultations and testing, Statistics Canada notes that "'Aboriginal' is no longer the preferred collective term. If a collective term is used, 'Indigenous' is more appropriate." Therefore, the next census will no longer use the collective term "Aboriginal."

Languages Spoken

First official language spoken is specified within the framework of the Official Languages Act. It refers to the first official language (English or French) spoken by the person.³⁵ The first official language spoken by the vast majority of females in PEI was English (95.6%). An estimated 3.4% of the female population identified French as their first official language spoken. A small percentage (0.2%) of females in PEI identified both French and English as their first official language spoken.³⁶

Knowledge of official languages refers to whether the person can conduct a conversation in English only, French only, in both languages or in neither language. For a child who has not yet learned to speak, this includes languages that the child is learning to speak at home.³⁷ When it comes to knowledge of official languages, the majority of females in PEI (84.9%) can conduct a conversation in English only, whereas 0.08% of females in PEI can conduct a conversation in French only. Approximately 14.2% of PEI females speak English and French, and 0.82% of PEI females speak neither English nor French.³⁸

Language spoken most often at home refers to the language the person speaks most often at home at the time of data collection. A person can report more than one language as 'spoken most often at home' if the languages are spoken equally often. 39 Ninety-four percent (94.1%) of PEI females identified English as the language spoken most often at home. In comparison, 1.7% of PEI females identified French as the language spoken most often at home, and 3.1% of PEI identified a non-official language as the most common language spoken at home. 40 One percent (1.0%) of Aboriginal females identified Mi'kmaq as the language spoken most often at home.41

Indigenous Population

According to the most recent census data, 2,735 individuals made up the Aboriginal population of PEI, including First Nations, Inuit, and Métis. 42 Sixty-eight percent (68%) of Aboriginal people identified as First Nations, followed by 26% Métis, and 2.7% Inuk (Inuit). The remainder identified multiple responses or responses not included elsewhere. Sixty-eight percent (68.3%) of First Nation respondents identified their ancestry as Mi'kmag.

Of the 2,735 people who identified as Aboriginal in the census, 1,435 (52.4%) were female, and 1,305 (47.7%) were male.⁴³ From this data, Aboriginal females accounted for 1.99% of the total female population of PEI. The median age of Aboriginal people in the most recent census was 27.4 years. The median age of Aboriginal females was 27.7 years, compared to 26.2 years for Aboriginal males. Six hundred and fifteen (615) females in PEI have registered status, compared with 580 males.

Immigrant Status

Immigrant status refers to whether the person is a non-immigrant, an immigrant, or a nonpermanent resident. Period of immigration refers to the period in which the immigrant first obtained landed immigrant or permanent resident status. 44 In the most recent census, 6.4% (4,565) of all females in PEI identified as immigrants. Of these, 35% immigrated to PEI prior to 1991, 28% immigrated between 1991 and 2010, and 37% immigrated between 2011 and 2016. Approximately 51.5% of female immigrants had Canadian citizenship in 2016.

In PEI, the highest proportion of female immigrants first obtained landed immigrant or permanent resident status between the ages of 25 to 44 (42.8%), followed by the ages 5 to 14 (20.5%), 15 to 24 (15.8%), 0 to 5 (12%) and 45 plus (8.9%). 45

Overall, female immigrants in PEI identified countries within the following continents as their place of birth: Asia (45%), Europe (32%), Americas (19%), and Africa (4%). In comparison, recent⁴⁶ female immigrants in PEI identified countries within the following continents as their place of birth: Asia (79.6%), Europe (10.6%), Americas (6%), and Africa (3.8%).

Visible Minority Population

In the most recent census, Statistics Canada used the Employment Equity Act definition of visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or nonwhite in colour."47

In total, 4.7% (6,640) of individuals in PEI identified as a member of a visible minority group in the most recent census.⁴⁸ Females made up 50% (3,320) of the visible minority population in PEI and accounted for 4.6% of the total female population in PEI. The breakdown of females who identified as a member of a visible minority group included 39.3% Chinese, 13.6% South Asian, 12.0% Black, 10.8% Filipino, 3.5% Latin American, 2.7% Southeast Asian, 7.5% Arab, 2.9% West Asian, 3.6% Korean, and 1.8% Japanese. An additional 1.5% identified with multiple visible minority groups.

Statistics Canada has "received feedback regarding the sensitivity and appropriateness of the term 'visible minority' and the level of data disaggregation in disseminated data tables and analytical products, Statistics Canada will continue to explore alternative ways to measure various population groups." Further, "Statistics Canada has relied on the advice of the Advisory Committee on Ethnocultural and Immigration Statistics, and will continue to rely on their advice as changes to the question on population groups are considered for the 2026 Census."

Seniors

The most recent census identified 27,710 individuals over the age of 65 in PEI. Seniors accounted for 19.3% of the total population of PEI. Of those, 15,070 (54.4%) were female and 12,640 (45.6%) were male.⁴⁹ The Aboriginal Population Profile from the Census of Population provides insight into the demographics of Aboriginal people in PEI. The most recent census identified 80 Aboriginal females over the age of 65 in PEI, which accounted for 5.6% of the total female Aboriginal population. Aboriginal females over age 65 made up 0.5% of the total female population over age 65 in PEI. In addition, the census noted 75 Aboriginal males over 65, making up 5.7% of the total Aboriginal male population in PEI.⁵⁰

According to the Statistics Canada population estimates, there were 31,957 individuals over the age of 65 living in PEI as of July 1, 2020 (Table 1-9). Over a five-year period from 2016 to 2020, the number of seniors in PEI increased from 27,844 to 31,957, an increase of 14.6%. Females accounted for 54.1% of people over the age of 65, while males comprised the remaining 45.9%. The senior population of PEI continued to grow, with people over the age of 65 comprising 20% of the total PEI population. Females age 65 and over accounted for 21.3% of the total female population in PEI and outnumbered senior males in all age groups over 65 years of age. Females in PEI have a longer life expectancy than males, with two females for every male in the 85 and older population.

TABLE 1-9 POPULATION BY SEX AND AGE GROUP, PEI (2016-2020)⁵¹

		2016			2017			2018			2019 203				
	Male	Femal	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
65-69	4,834	5,110	9,944	4,815	5,064	9,879	4,783	5,082	9,865	4,830	5,176	10,006	4,886	5,230	10,116
70-74	3,219	3,496	6,715	3,635	3,809	7,444	3,988	4,204	8,192	4,211	4,435	8,646	4,435	4,671	9,106
75-79	2,179	2,507	4,686	2,234	2,595	4,829	2,289	2,704	4,993	2,454	2,885	5,339	2,569	3,020	5,589
80-84	1,432	1,937	3,369	1,477	1,994	3,471	1,492	1,987	3,479	1,488	2,060	3,548	1,533	2,108	3,641
85-89	715	1,187	1,902	749	1,215	1,964	779	1,279	2,058	832	1,334	2,166	840	1,404	2,244
90 +	341	887	1,228	356	900	1,256	374	872	1,246	378	857	1,235	401	860	1,261
Total	12,720	15,124	27,844	13,266	15,577	28,843	13,705	16,128	29,833	14,193	16,747	30,940	14,664	17,293	31,957

Source: Statistics Canada Table 17-10-0005-01



People with Disabilities

According to the 2017 Canadian Disability Survey (CDS), approximately 26% of the PEI population age 15 and over lived with a disability. 52 The CDS outlines eleven disability types, including seeing, hearing, mobility, flexibility, dexterity, pain-related, learning, developmental, mental-health related, memory and unknown.⁵³ In this survey, a disability included a difficulty or impairment that was a long-term condition or health problem, a limitation in daily activities (which was said to be present "sometimes," "often" or "always"), a situation where a person was "rarely" limited (yet at times, genuinely unable to perform a particular task), or able to perform tasks only with great difficulty.

In 2017, there were a higher number of females (16,840) with disabilities than males (12,980) with disabilities in PEI. Overall, 28.3% of females in PEI lived with a disability, compared to 23.4% of males. This is consistent with data from other Atlantic Provinces but slightly higher than Canada (Table 1-10).

TABLE 1-10 NUMBER OF FEMALES WITH DISABILITIES, ATLANTIC PROVINCES AND CANADA (2017)54

Jurisdiction	Female Population Age 15 and Over	Females with a Disability (#)	Percentage of Females With a Disability (%)
Canada	14,345,330	3,483,090	24.3
Prince Edward Island	59,610	16,840	28.3
Nova Scotia	392,700	127,330	32.4
New Brunswick	311,390	88,300	28.4
Newfoundland	211,310	56,440	25.5

Source: Statistics Canada Table 13-10-0374-01

Prevalence of Disabilities

Table 1-11 indicates that males and females in PEI have slightly higher rates of disability when compared to the Canadian population. In PEI, 28.3% of females and 23.5% of males lived with a disability. Nationally, 24.3% of females and 20.2% of males lived with a disability.

TABLE 1-11 TOTAL ADULTS WITH AND WITHOUT DISABILITIES BY SEX AND AGE GROUP, PEI AND CANADA $(2017)^{55}$

		Nι	ımber of P	ersons	Percent of Persons						
Population	Area	Both	Male	Female	Both	Male	Female				
Total persons	PE	114,850	55,240	59,610	100%	100%	100%				
	CA	28,008,860	13,663,530	14,345,330	100%	100%	100%				
A. Persons with disabilities	PE	29,820	12,980	16,840	26.0%	23.5%	28.3%				
	CA	6,246,640	2,763,540	3,483,090	22.3%	20.2%	24.3%				
B. Persons without	PE	85,040	42,260	42,780	74.0%	76.5%	71.8%				
disabilities	CA	21,762,230	10,899,990	10,862,240	77.7%	79.8%	75.7%				

Source: Statistics Canada Table 13-10-0374-01

Results from the Canadian Survey on Disability reveal that females in PEI and Canada consistently reported a higher prevalence of disability than males across age groups. The prevalence of disability tracks closely between PEI and Canada among most age groups, except the 25 to 44 age range, where 24.5% of PEI females report a disability, compared to 17.7% of Canadian females, a difference of 6.8% (Table 1-12). Disability rates peak between ages 45 and 64 in PEI and Canada. Table 1-12 displays the population distribution of disabilities by age categories.

TABLE 1-12 PERSONS WITH DISABILITIES BY AGE AND SEX, PEI AND CANADA (2017)⁵⁶

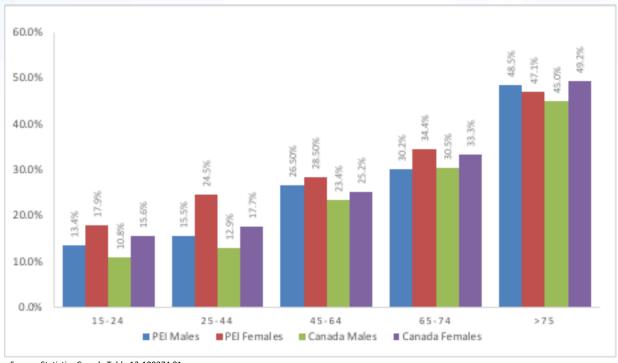
		Number		Percen	t	Difference
Age	Sex	PEI	Canada	PEI	Canada	PE vs. CA
15-24 years	Both sexes	2,630	546,410	15.7%	13.1%	2.6%
	Males	1,160	230,480	13.6%	10.8%	2.8%
	Females	1,470	315,930	17.9%	15.6%	2.3%
25-44 years	Both sexes	6,390	1,368,270	20.2%	15.3%	4.9%
23 44 years	Males	2,340	564,150	15.5%	12.9%	2.6%
	Females	4,050	804,120	24.5%	17.7%	6.8%
	remaies	1,050	00 1,120	2 11370	271770	0.070
45-64 years	Both sexes	11,560	2,359,650	27.6%	24.3%	3.3%
	Males	5,340	1,105,670	26.5%	23.4%	3.1%
	Females	6,220	1,253,990	28.5%	25.2%	3.3%
65-74 years	Both sexes	5,140	1,036,580	32.4%	32.0%	0.4%
	Males	2,320	473,530	30.2%	30.5%	0.3%
	Females	2,820	563,050	34.4%	33.3%	1.1%
75 years &	Both sexes	4,100	935,370	47.6%	47.4%	0.2%
over	Males	1,820	389,730	48.5%	45.0%	3.5%
	Females	2,290	546,000	47.1%	49.2%	2.1%
All (15	Both sexes	29,820	6,246,640	26.0%	22.3%	3.7%
years & over)	Males	12,980	2,763,540	23.5%	20.2%	1.2%
	Females	16,840	3,483,090	28.3%	24.3%	4.0%

Source: Statistics Canada Table 13-10-0374-01

Data from Table 1-12 is depicted as a graph in Figure 1-1 to reinforce trends in age and sex among persons living with disability in PEI and Canada. Considering female and male sexes, the percentage of the PEI population (Canada figures in brackets) affected by disability was approximately 15.7% (13.1%) among persons age 15 to 24, 20.2% (15.3%) among ages 25 to 44, 27.6% (24.3%) among ages 45 to 64, 32.4% (32.0%) among ages 65 to 74, and 47.6% (47.4%) among persons aged 75 and over.

The prevalence of disability increases gradually with age, peaking sharply in the 45 to 64-year age category and then gradually increasing with a small surge in the 75 years and over age category.

FIGURE 1-1 PREVALENCE OF A DISABILITY BY AGE AND SEX, PEI AND CANADA. 57



Source: Statistics Canada Table 13-100374 01



Licensed Drivers in Prince Edward Island

In November 2018, the Prince Edward Island government added two new options to licenses and voluntary identification cards including "gender not listed" and "prefer not to say," in addition to "female" and "male." The selections appear on the license as X, blank, M, and F respectively.

According to the Highway Safety Division, in 2020, there were 115,319 licensed drivers in PEI.⁵⁸ Of those, 58,244 (50.5%) were female; 57,016 (49.5%) were male; 36 were unknown (preferred not to say), and 23 selected "gender not listed" or 'X.' (Table 1-13) Between 2015 and 2020 the total number of drivers in PEI increased by 9.5%. Similarly, the percentage of female drivers during this time increased by 9.2%.

TABLE 1-13 NUM	BEK OF LICENSED	DRIVERS BY AGE AI	ND SEX, PEI (2005-202	U)
			Links arres	

			Unknown		
Year	Female	Male	(prefer not to say)	X	Total
2020	58,244	57,016	36	23	115,319
2015	53,313	51,984	n/a	n/a	105,297
2010	48,810	49,121	n/a	n/a	97,931
2005	48,636	48,246	n/a	n/a	96,882

Voluntary IDs in Prince Edward Island

Voluntary Identification Cards (IDs) can be accessed for residents of PEI (adults or children) who need proof of their identity and do not have a PEI driver's license. According to the Highway Safety Division, in 2020, 5,516 voluntary IDs were issued. Females accounted for 2,794 (53.4%) and males accounted for 2,433 (46.5%) of all voluntary IDs in PEI. Sixteen individuals preferred not to say and seven selected "gender not listed" or "X". 59 In comparison, Table 1-14 shows that females made up 50% of Voluntary ID recipients in 2015.

TABLE 1-14 NUMBER OF VOLUNTARY IDS BY AGE AND SEX, PEI (2016-2020)

Year	Female	Male	Unknown (prefer not to say)	х	Total
2020	2,855	2,638	16	7	5,516
2019	2,511	2,312	13	4	4,840
2018	2,352	2,318	n/a	n/a	4,670
2017	2,280	2,313	n/a	n/a	4,593
2016	2,344	2,353	n/a	n/a	4,697

Chapter Two: Education

This chapter contains a review of data collected nationally, provincially, and by institution about education in PEI. Sex and gender-disaggregated data outlined in chapter two include information about elementary, secondary, and postsecondary education in PEI. Data for this chapter was collected from Statistics Canada, PEI Department of Education and Lifelong Learning, University of Prince Edward Island, Holland College and Collège de l'Île. Sex and gender highlights related to education in PEI include:

- At the elementary and secondary level, females make up the majority of students enrolled in French Immersion (56.7%) and French Language (55.8%) schools in PEI.⁶⁰
- Females in PEI were more likely to have obtained college, CEGEP, or other non-university certificates or diplomas, university certificates or diplomas below the bachelor level, and university certificates, diplomas or degrees than males.⁶¹
- Indigenous females were more likely than Indigenous males to have a college, CEGEP, or other non-university certificates or diplomas, university certificates or diplomas below the bachelor level, and university certificates, diplomas or degrees.⁶²
- In PEI, Indigenous and non-Indigenous males significantly outnumber Indigenous and non-Indigenous females in apprenticeship and trades degrees as their highest level of education.63
- Females made up almost two-thirds of students enrolled at universities, including 59.0% of UPEI students in 2019-2020.64
- Females made up 53.5% of all international students in PEI colleges and university. 65
- The majority of part-time students in university were female (54.8%).⁶⁶
- Females were significantly under-represented in the fields of architecture, engineering, and related technologies (11%), compared to males (88%).⁶⁷
- At Holland College, females were more likely to be enrolled in the fields of Health and Community Studies, Business, and Tourism.⁶⁸
- In the 2019-2020 academic year, females accounted for 78% of registered students at Collège de l'Île.69
- According to UPEI, females made up the majority of students enrolled in undergraduate programs (56%), Bachelor of Education and Certificate Programs in Education (75%), graduate programs (62%), and the Doctor of Veterinary Medicine (83%).⁷⁰

Elementary and Secondary Education

In PEI, the Department of Education and Lifelong Learning develops and delivers programs and curriculum in English and French to Island children. The Public Schools Branch and La Commission scolaire de langue française (CSLF) operate 62 public schools offering kindergarten to Grade 12.71

The Department of Education and Lifelong Learning upgraded the student information system in 2019 to allow for the reporting of non-binary genders for the first time. Students can now additionally report as "identifies another way" or "undeclared" in the data, but it is still very new and the numbers are quite small. While most data related to elementary and secondary education in this chapter is reported in columns for "female" and "male," total numbers include all genders and some may be higher than the sum of the two. As the Public School Branch is developing guidelines on gender diversity and knowledge of the additional gender options is growing, the numbers will likely increase to a point where they are high enough to be directly reportable.⁷²

English Language Schools

The Public Schools Branch (PSB) encompasses all 56 English public schools across Prince Edward Island and serves approximately 19,000 students from kindergarten to grade 12. The PSB is governed by an appointed Board of Directors. 73 Table 2-1 displays data provided by the Department of Education and Lifelong on the number and percentage of female and male students in English language elementary and secondary schools in PEI from the 2015-2016 school year to the 2019-2020 school year. In total, 19,690 students were registered in English language schools in the 2019-2020 school year. Of those, 9,605 (48.8%) were female and 10,072 (51.2%) were male.

TABLE 2-1 NUMBER AND PERCENTAGE OF FEMALE AND MALE STUDENTS REGISTERED IN ELEMENTARY AND SECONDARY SCHOOL, PEI (2015-2016 TO 2019-2020)74

		2015-2	2016			2016	-2017			2017	7-2018	
	Mal	e	Fem	ale	N	Male Female		Male		Female		
Grade	#	%	#	%	#	%	#	%	#	%	#	%
K	682	51.0	655	49.0	728	52.2	666	47.8	642	51.4	607	48.6
1	711	50.8	688	49.2	697	50.6	680	49.4	742	51.7	692	48.3
2	761	51.8	709	48.2	726	50.5	713	49.5	705	50.8	684	49.2
3	689	48.6	730	51.4	774	51.5	730	48.5	732	50.6	715	49.4
4	736	52.6	663	47.4	715	48.9	746	51.1	804	52.2	735	47.8
5	668	48.8	702	51.2	762	52.8	682	47.2	727	48.8	764	51.2
6	815	51.6	764	48.4	688	49.1	714	50.9	775	52.2	709	47.8
7	757	49.7	766	50.3	830	50.9	800	49.1	713	49.3	732	50.7
8	700	50.1	698	49.9	772	50.1	770	49.9	841	51.3	798	48.7
9	685	50.4	674	49.6	712	50.2	707	49.8	785	50.6	766	49.4
10	831	51.8	773	48.2	778	50.7	756	49.3	785	50.4	772	49.6
11	786	52.4	714	47.6	801	50.9	773	49.1	745	50.7	723	49.3
12	756	50.2	749	49.8	760	53.4	664	46.6	793	50.9	764	49.1
Total	9,577	50.8	9,285	49.2	9,743	50.9	9,401	49.1	9,789	50.9	9,461	49.1

		2018-	2019					
	Ма	ile	Fem	ale				
Grade	#	%	#	%				
K	721	52.3	658	47.7				
1	656	50.5	644	49.5				
2	760	52.1	700	47.9				
3	711	50.5	697	49.5				
4	755	50.9	729	49.1				
5	812	51.9	753	48.1				
6	733	48.8	768	51.2				
7	786	51.7	733	48.3				
8	704	48.8	739	51.2				
9	852	51.4	806	48.6				
10	849	50.7	824	49.3				
11	762	49.6	773	50.4				
12	735	50.6	718	49.4				
Total	9,836	50.8	9,542	49.2				

	2019	-2020				
Ma	le	Female				
#	%	#	%			
738	52.6	665	47.4			
735	52.0	679	48.0			
671	50.8	648	49.1			
791	52.9	703	47.1			
731	50.8	707	49.2			
791	51.9	732	48.1			
817	51.3	775	48.7			
762	48.9	794	51.0			
784	51.0	751	48.9			
727	49.0	754	50.8			
954	52.2	869	47.6			
819	50.6	797	49.3			
752	50.7	731	49.3			
10,072	51.2	9,605	48.8			



French Immersion

Thirty (30) schools in PEI offer French Immersion.⁷⁵ Data provided by the Department of Education and Lifelong Learning lists the number and percentage of female and male students enrolled in French immersion programs in PEI from the 2015-2016 school year to the 2019-2020 school year. In total, 5,271 students were registered in French immersion in the 2019-2020 school year. Of those, 2,990 (56.7%) were female and 2,276 (43.2%) were male.

TABLE 2-2 NUMBER AND PERCENTAGE OF FEMALE AND MALE STUDENTS REGISTERED IN FRENCH IMMERSION, PEI (2015-2016 TO 2019-2020)⁷⁶

		2015-2016				2016-2017				2017-2018			
	Ma	ile	Fem	nale	N	Male Female			Male	9	Fem	ale	
Grade	#	%	#	%	#	%	#	%		#	%	#	%
K	192	44.9	236	55.1	192	47.5	212	52.5		177	47.1	199	52.9
1	177	43.7	228	56.3	182	43.9	233	56.1		176	46.1	206	53.9
2	164	45.1	200	54.9	161	42.8	215	57.2		162	43.0	215	57.0
3	128	41.6	180	58.4	151	43.6	195	56.4		154	42.2	211	57.8
4	153	44.5	191	55.5	135	41.3	192	58.7		150	42.5	203	57.5
5	101	37.4	169	62.6	149	44.1	189	55.9		131	41.2	187	58.8
6	127	41.4	180	58.6	97	36.7	167	63.3		148	44.2	187	55.8
7	229	42.1	315	57.9	258	44.2	326	55.8		197	40.0	296	60.0
8	187	42.8	250	57.2	219	41.6	307	58.4		240	43.6	311	56.4
9	152	36.1	269	63.9	177	42.2	242	57.8		208	41.9	288	58.1
10	134	35.5	243	64.5	129	35.4	235	64.6		147	39.1	229	60.9
11	130	39.5	199	60.5	125	35.6	226	64.4		117	34.2	225	65.8
12	104	37.7	172	62.3	123	40.9	178	59.1		115	35.3	211	64.7
Total	1,978	41.1	2,832	58.9	2,098	3 41.8	2,917	58.2		2,122	41.7	2,968	58.3

	2018-2019					2019-2	Female # %					
	Mal	e	Female		Mal	e	Female					
Grade	#	%	#	%	#	%	#	%				
K	224	53.6	224	53.6	217	50.9	209	49.1				
1	200	54.9	200	54.9	186	46.0	218	54.0				
2	203	55.9	203	55.9	151	44.7	187	55.3				
3	209	57.4	209	57.4	151	44.4	189	55.6				
4	209	56.8	209	56.8	163	44.8	201	55.2				
5	196	56.8	196	56.8	160	43.8	205	56.2				
6	184	58.2	184	58.2	145	42.8	194	57.2				
7	310	55.3	310	55.3	228	42.2	312	57.8				
8	286	60.7	286	60.7	238	44.3	299	55.7				
9	303	57.1	303	57.1	175	39.1	272	60.9				
10	228	61.1	228	61.1	203	42.6	273	57.4				
11	226	61.7	226	61.7	147	36.9	251	63.1				
12	199	64.4	199	64.4	112	38.4	180	61.6				
Total	2,977	57.8	2,977	57.8	2,276	43.2	2,990	56.7				

French Language Schools

The French Language School Board/La Commission scolaire française de î.-P.-É. (CSLF) and its six schools offer elementary and secondary education that contributes to the vitality of Acadian and Francophone communities, language, and culture in PEI.⁷⁷ According to data from the Department of Education and Lifelong Learning, 1,043 students were enrolled in French language schools in 2019-2020. Of those, 583 (55.8%) were female and 460 (44.1%) were male.

TABLE 2-3 NUMBER AND PERCENTAGE OF FEMALE AND MALE STUDENTS REGISTERED IN FRENCH LANGUAGE SCHOOLS, PEI (2015-2016 TO 2019-2020)⁷⁸

		2015	-2016		2016-2017				2017-2018			
	Ma	le	Fer	male	Ma	le	Fen	nale	Ma	ale	Fei	male
Grade	#	%	#	%	#	%	#	%	#	%	#	%
K	47	51.1	45	48.9	34	38.6	54	61.4	57	50.9	55	49.1
1	32	41.6	45	58.4	46	52.3	42	47.7	38	38.0	62	62.0
2	34	43.6	44	56.4	31	39.2	48	60.8	48	51.6	45	48.4
3	25	36.8	43	63.2	35	46.1	41	53.9	32	40.0	48	60.0
4	27	36.0	48	64.0	23	35.4	42	64.6	37	46.3	43	53.8
5	40	57.1	30	42.9	27	35.5	49	64.5	23	34.3	44	65.7
6	38	50.0	38	50.0	38	55.9	30	44.1	27	35.5	49	64.5
7	29	48.3	31	51.7	34	50.7	33	49.3	35	53.8	30	46.2
8	31	49.2	32	50.8	29	52.7	26	47.3	32	48.5	34	51.5
9	17	34.7	32	65.3	29	47.5	32	52.5	29	52.7	26	47.3
10	28	54.9	23	45.1	16	43.2	21	56.8	24	47.1	27	52.9
11	31	58.5	22	41.5	28	52.8	25	47.2	16	41.0	23	59.0
12	16	43.2	21	56.8	30	60.0	20	40.0	28	53.8	24	46.2
Total	395	46.5	454	53.5	400	46.3	463	49.0	426	45.5	510	54.5

	2018-2019					2019-	2020			
	Ma	le	Female		Ma	le	Fen	nale		
Grade	#	%	#	%	#	%	#	%		
K	48	44.4	60	54.5	53	42.7	71	57.3		
1	48	44.4	60	56.6	45	42.9	60	57.1		
2	42	40.4	62	38.8	49	45.8	58	54.2		
3	48	50.0	48	47.9	46	43.4	60	56.6		
4	31	38.3	50	54.0	47	48.0	50	51.0		
5	35	43.8	45	51.4	32	39.0	50	61.0		
6	20	31.3	44	63.9	34	43.0	45	57.0		
7	27	36.5	47	53.5	22	34.4	42	65.6		
8	32	50.8	31	45.3	27	36.0	48	64.0		
9	33	50.0	33	45.5	31	51.7	29	48.3		
10	29	56.9	22	50.0	23	47.9	25	52.1		
11	24	50.0	24	46.3	26	55.3	21	44.7		
12	17	42.5	23	52.5	25	51.0	24	49.0		
Total	434	44.2	549	51.1	460	44.1	583	55.8		

Highest Educational Attainment

According to the most recent census, females in PEI were more likely than males to have a college, CEGEP or other non-university certificate or diploma, a university certificate or diploma below the bachelor level, or a university certificate, diploma or degree as their highest level of educational attainment. In contrast, males were more likely than females to have no certificate, diploma, or degree. Males were also more likely than females to have an apprenticeship or trades certificate or diploma and a high school certificate or equivalent as their highest level of education. This tracks closely with data from across Canada (Table 2-4).

The widest gap in highest level of educational attainment between females and males was in the apprenticeship or trades certificate or diploma category, where females accounted for 29.4%, while males comprised the remaining 70.6%. Significant gaps were also noted in college, CEGEP, or other non-university certificate or diploma, university certificate or diploma below the bachelor level, and university certificate, diploma or degree. Sixty-one percent (61.6%) of females and 38.4% of males listed their highest level of education as a college, CEGEP, or other non-university certificate or diploma. Of individuals with a university certificate or diploma below the bachelor level, 65.5% were female, and 34.2% were male.

TABLE 2-4 PERCENTAGE OF FEMALES AND MALES AGE 15 AND OVER BY HIGHEST LEVEL OF EDUCATION ATTAINMENT (2016)⁷⁹

	P	EI	Canada	
	Male	Female	Male	Female
no certificate, diploma or degree	56.0	44.0	50.9	49.1
high School certificate or equivalent	50.4	49.6	48.7	51.3
apprenticeship or trade certificate or diploma	70.6	29.4	68.1	31.9
college, CEGEP, or other non-university certificate or	38.4	61.6	41.9	58.1
university certificate or diploma below the bachelor level	34.2	65.5	40.8	59.1
university certificate, diploma or degree	41.5	58.4	46.1	53.8

Source: Statistics Canada Census

Data from Table 2-5 is based on the Aboriginal Population Profile from the most recent census. It outlines the highest level of education for Aboriginal females and males age 15 and older in PEI and Canada. Like the overall female population of PEI, Aboriginal females in PEI were more likely than males to have a college, CEGEP or other non-university certificate or diploma, a university certificate or diploma below the bachelor level, or a university certificate, diploma or degree as their highest level of educational attainment. Aboriginal males were more likely to have an apprenticeship or trades certificate or diploma (Table 2-5).

The widest gap in highest level of educational attainment between Aboriginal females and Aboriginal males in PEI was in the apprenticeship or trades certificate or diploma category. Aboriginal females made up 38.4%, while Aboriginal males comprised the remaining 61.5%. Significant gaps were also noted in college, CEGEP, or other non-university certificate or diploma, university certificate or diploma below the bachelor level, and university certificate, diploma or degree. Fifty-eight percent (58.1%) of Aboriginal females and 41.9% of Aboriginal males listed their highest level of education as a college, CEGEP, or other non-university certificate or diploma. Of individuals with a university certificate or diploma below the bachelor level, 66.7% were female and 33.3% were males. Of Aboriginal individuals with a university certificate, diploma, or degree, females accounted for 65.1%, while Aboriginal males comprised the remaining 36.9%.

TABLE 2-5 PERCENTAGE OF ABORIGINAL MALES AND FEMALES AND HIGHEST EDUCATIONAL ATTAINMENT FOR TOTAL ABORIGINAL POPULATION AGED 15 YEARS AND OVER (2016)80

	P	EI	Canada	
	Male	Female	Male	Female
no certificate, diploma or degree	53.5	46.5	51.9	48.1
high school certificate or equivalent	48.0	52.0	47.2	52.8
apprenticeship or trades certificate or diploma	61.5	38.4	68.7	31.2
college, CEGEP or other non-university certificate or diploma	41.9	58.1	36.4	63.6
university certificate or diploma below the bachelor level	33.3	66.7	33.3	66.7
university certificate, diploma or degree	36.9	65.1	35.0	65.0

Source: Statistics Canada Census

Table 2-6 compares the highest level of educational attainment for females and males and the total population in PEI and Canada based on the two more recent censuses. Notably, 11.8% of males in PEI had an apprenticeship or trade certificate as their highest level of education, compared to 4.6% of females. This is slightly lower than the percentage of Canadian females (6.1%). Twenty-eight percent (28.3%) of PEI females had a college, CEGEP or other nonuniversity certificate or diploma as their highest level of educational attainment, compared to 19.0% of PEI males and 22% of Canadian females. Twenty-one percent (21.5%) of females had a university certificate, diploma, or degree, compared to 16.5% of males and 24.5% of Canadian females.

TABLE 2-6 PERCENTAGE OF MALES AND FEMALES HIGHEST EDUCATIONAL ATTAINMENT FOR TOTAL POPULATION AGED 15 YEARS AND OVER IN (2011 AND 2016)81

	YEAR	Р	EI	Can	ada
		Male	Female	Male	Female
no certificate, diploma or degree	2011	25.1	18.7	20.6	19.6
no certificate, diploma of degree	2016	22.3	16.3	19.1	17.6
high school certificate or equivalent	2011	26.5	26.0	24.9	26.2
night school certificate of equivalent	2016	28.5	26.0	26.4	26.5
apprenticeship or trades certificate or diploma	2011	14.5	6.8	14.5	7.3
	2016	11.8	4.6	13.6	6.1
college, CEGEP or other non-	2011	15.9	25.9	15.9	20.4
university certificate or diploma	2016	19.0	28.3	16.6	22.0
university certificate or diploma below the	2011	2.2	4.5	3.9	4.9
bachelor level	2016	1.9	3.3	2.4	3.3
university certificate, diploma or degree	2011	15.8	18.2	20.2	21.5
university tertificate, diploma of degree	2016	16.5	21.6	21.9	24.5
TOTAL	2011	100.0	100.1	100.0	99.9
TOTAL	2016	100.0	100.0	100.0	100.0

Source: Statistics Canada Census (2011 and 2016)

Apprenticeship Enrollment

The Registered Apprentice Information System (RAIS) compiles data on the number of registered apprentices taking in-class and/or on-the-job training in trades that are either Red Seal or non-Red Seal and where apprenticeship training is either compulsory or voluntary.⁸² Table 2-7 displays the number of new registrants to apprenticeship programs by sex in PEI from 2016 to 2019. In 2019, females made up 11% of all new registrations to apprenticeship programs in PEI, while males comprised the remaining 89%.

TABLE 2-7 NEW APPRENTICESHIP REGISTRATIONS BY SEX, PEI (2015-2019) 83

Trades	20	15	20	16	20	17	2018 20			19
	М	F	М	F	М	F	М	F	М	F
Automotive Service	21	3	21		33		30	3	33	
Carpenters	27		30		27		39	3	42	6
Early childhood educators										
Community and social services										
Electricians	51		42		45		48	3	63	3
Electronics and	3									
instrumentation										
Exterior finishing					3		3		3	
Food service	15	9	18	6	12	6	18	12	12	12
Hairstylists and estheticians		3		6	3			6		3
Heavy duty equipment mechanics	3				3		6		6	
Heavy duty equipment and crane operators										
Interior finishing							3			
Landscape and horticulture technicians	3		3		3					
Machinists	3		6			3			6	
Metal workers	15				3		3		3	
Millwrights	3		3		3		6		3	
Oil and gas well drillers, servicers, testers										
Plumbers, pipefitters, and steamfitters	12		12		24		21		18	3
Refrigeration and air conditioning mechanics	6		6		6		6		9	
Sheet metal workers					3		3		3	
User support technicians										
Welders	48	3	39	3	21		33	3	30	
Stationary engineers/power plant operators										
Construction workers (other)										
Other major trade groups	15	9	12		18	6	12	3	12	3
Total major trade groups	228	27	195	15	204	18	231	33	243	30

Source: Statistics Canada Table 37-10-0023-01

College and University Enrollment

The Postsecondary Student Information System allows Statistics Canada to collect data related to postsecondary enrolments, by registration status, institution type, status of student in Canada and gender on an annual basis. The 2018-2019 school year is the most recent year with data on postsecondary enrolments.⁸⁴ In the 2018-2019 school year, there were 7,455 students enrolled in postsecondary programs in PEI colleges and universities. Of those, 53.5% (3,990) identified as female, 43.6% (3,252) identified as male, and 2.9% (213) were recorded as gender unknown.85

In the 2018-2019 school year, 2,991 students were registered in PEI colleges. This included 1,302 (43.5%) females, 1,509 (50.5%) males, and 183 (6%) students recorded as gender unknown. Over a five-year period, from the 2014-2015 to 2018-2019 school year PEI females were registered in colleges at lower percentages than PEI males. The percentage of females enrolled in colleges was also lower among PEI females in comparison to other Atlantic Provinces and Canada (Table 2-8).

TABLE 2-8 PROPORTION OF FEMALE STUDENTS ENROLLED IN COLLEGE, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)86

	2014-15	2015-16	2016-17	2017-18	2018-19
Prince Edward Island	43.6	43.0	41.6	46.4	46.3
Newfoundland and Labrador	48.8	48.3	47.7	46.1	46.9
Nova Scotia	51.4	50.7	49.9	50.2	50.9
New Brunswick	50.1	49.3	49.6	49.2	51.3
Canada	55.6	55.6	55.1	54.6	54.7

Source: Statistics Canada Table 37-10-0018-02

In the 2018-2019 school year, 4,461 students were enrolled in university. This included 2,688 (60.2%) females, 1,743 (39.2%) males, and 27 (.06%) students recorded as gender unknown. Over a five year period, from the 2014-2015 to 2018-2019 school years PEI females were registered in university at a higher percentage than PEI males. At the university level, PEI females have a higher percentage of enrolment in comparison to females in the Atlantic Provinces and Canada (Table 2-9).

TABLE 2-9 PROPORTION OF FEMALE STUDENTS ENROLLED IN UNIVERSITY, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)87

	2014-15	2015-16	2016-17	2017-18	2018-19
Prince Edward Island	62.5	62.0	61.5	61.6	60.6
Newfoundland and Labrador	58.4	57.8	57.7	57.4	56.8
Nova Scotia	57.8	57.8	58.0	58.0	57.9
New Brunswick	57.6	57.1	57.6	58.0	57.7
Canada	56.8	56.8	56.8	56.8	56.9

Source: Statistics Canada Table 37-10-0018-02

Part-Time Students

Data from the annual postsecondary enrolments, by registration status, institution type, status of student in Canada and gender is reported on an annual basis. In 2018-2019, PEI females made up 44.5% of all part-time students enrolled in PEI colleges, while males comprised the remaining 55.5% (Table 2-10).

TABLE 2-10 PERCENTAGE OF FEMALE STUDENTS ENROLLED IN COLLEGE PART-TIME, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)88

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
Prince Edward Island	75.6	80.6	63.2	40.5	44.5
Newfoundland and Labrador	47.5	47.7	46.2	42.3	48.6
Nova Scotia	52.8	52.7	50.7	53.6	55.7
New Brunswick	62.3	53.9	52.8	55.1	61.6
Canada	59.0	59.7	59.5	59.1	59.4

Source: Statistics Canada Table 37-10-0018-02

At the university level, females made up a slightly higher percentage of part-time students in PEI from 2014-2015 school year to the 2018-2019 school year. In the 2018-2019 school year, females made up 54.8% of part-time students enrolled in university, while males comprised the remaining 45.2% (Table 2-11).

TABLE 2-11 PERCENTAGE OF FEMALE STUDENTS ENROLLED IN UNIVERSITY PART-TIME, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)89

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
Prince Edward Island	58.3	55.1	55.2	53.1	54.8
Newfoundland and Labrador	60.0	58.8	57.9	58.7	59.4
Nova Scotia	63.6	63.5	64.3	65.4	62.4
New Brunswick	63.3	65.1	61.8	62.0	65.9
Canada	59.7	59.5	59.2	59.2	59.0

Source: Statistics Canada Table 37-10-0018-02

International Students

In 2018-2019 school year, 1,545 international students were enrolled in colleges and universities in PEI. International students represented 20.7% of all students enrolled in colleges and universities in PEI. Of those, 765 (49.5%) were female and 759 (49.1%) were male, and 18 (1.2%) were recorded as gender unknown. 90

Twenty-eight percent (438) of international students were enrolled in PEI colleges. Females accounted for 183 (41.7%) of students enrolled in college, compared to 240 (54.7%) males and 18 (4.1%) recorded as gender unknown. In the five year period from 2014-2015 to 2018-2019, female international students were registered in PEI colleges at lower percentages than males. Female participation ranged from a low of 28.7% in 2014-2015 to a high of 43.3% in 2018-19. The percentage of female international students enrolled in college was higher in PEI than other Atlantic Provinces, but lower than Canada (Table 2-12).

TABLE 2-12 PROPORTION OF FEMALE INTERNATIONAL STUDENTS ENROLLED IN COLLEGE, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)91

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
Prince Edward Island	28.7	34.6	34.5	40.2	43.3
Newfoundland and Labrador	16.3	32.7	37.5	35.3	30.8
Nova Scotia ⁹²	Х	Х	25.0	Χ	43.5
New Brunswick	25.7	26.8	33.3	39.1	39.8
Canada	43.7	42.9	42.9	42.9	44.4

Source: Statistics Canada Table 37-10-0018-02

The majority of international students (1,107) in PEI enrolled at the university level. The breakdown by sex includes 582 (52.8%) female, 522 (47.1%) male, and 3 (0.2%) recorded as gender unknown. Over a five year period from 2014-2015 to 2018-2019 female international students enrolled in higher percentages to PEI universities than male international students. Nationally, female international students made up 48.3% of registrants, while male international students comprised the remaining 48.1%. The percentage of female international students was higher in PEI than the other Atlantic Provinces and Canada (Table 2-13).

TABLE 2-13 PROPORTION OF FEMALE INTERNATIONAL STUDENTS ENROLLED IN UNIVERSITY, ATLANTIC PROVINCES AND CANADA (2014-2015 TO 2018-2019)93

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
Prince Edward Island	50.5	52.8	52.3	54.7	52.8
Newfoundland and Labrador	37.7	36.4	37.0	37.6	37.5
Nova Scotia	40.2	41.3	42.9	43.9	44.8
New Brunswick	46.8	46.0	50.5	50.6	47.1
Canada	46.4	47.0	47.6	48.1	48.3

Source: Statistics Canada Table 37-10-0018-02

Major Field of Study

Data from Statistics Canada outlines postsecondary graduates by field of study, program type, credential type, and gender. Table 2-14 displays the major field of study by percentage for females in universities and colleges in PEI and Canada from 2014 to 2018.94 In 2018, females in PEI were enrolled in health and related fields (27.2%), business management (19.3%), education (14.8%) and social and behavioral sciences and law (14.8%). Females in PEI were underrepresented in mathematics, computer or information sciences (1%), agriculture, natural resources, and conservation (1.6%), humanities (1.6%) and architecture/engineering (2.6%) (Table 2-14).

TABLE 2-14 MAJOR FIELD OF STUDY FOR FEMALE POPULATION, PEI AND CANADA (2014-2018)95

		Percentage of Females								
	201	4	20	15		2016	2017		20	018
Field of Study	PE	CA	PE	CA	PE	CA	PE	CA	PE	CA
Personal improvement and leisure	0.0	0.5	0.0	0.4	0.0	0.3	0.0	0.3	0.0	0.3
Education	14.6	8.5	9.7	8.0	12.8	6.8	12.0	7.0	14.8	7.0
Visual and performing arts, and communications technologies	3.4	4.4	3.2	4.3	2.1	4.2	3.9	4.1	3.2	4.0
Humanities	4.2	10.3	4.8	9.8	3.6	9.9	2.8	9.4	1.6	9.1
Social and behavioral sciences and law	17.8	18.3	19.1	18.3	16.1	18.1	15.1	18.2	14.8	17.4
Business, management and public admin	16.6	22.0	20.4	22.1	20.3	22.6	19.3	22.5	19.3	23.3
Physical and life sciences and technologies	6.0	5.9	6.2	6.0	6.5	6.2	6.4	6.1	8.0	6.3
Mathematics, computer and information sciences	0.4	1.4	0.5	1.4	0.8	1.5	0.8	1.8	1.0	2.0
Architecture, engineering, and related technologies	2.8	3.5	3.8	3.8	3.6	4.2	3.3	4.2	2.6	4.4
Agriculture, natural resources and conservation	0.6	1.5	1.3	1.5	1.3	1.6	1.6	1.6	1.6	1.7
Health and related fields	24.8	19.9	23.7	20.1	26.3	20.5	28.8	20.5	27.2	20.2
Personal, protective and transportation services	7.6	2.7	7.0	2.6	6.5	2.7	6.1	2.6	6.0	2.6
Other or unclassified	0.5	1.3	0.4	1.5	Х	1.4	Χ	1.5	0.1	1.5

Source: Statistics Canada Table 37-10-0012-01

Table 2-15 displays Statistics Canada data on postsecondary graduates by field of study and gender in PEI and Canada from 2018. As per the Statistics Canada Standard approved in January 2018, the Postsecondary Student Information System (PSIS) collects information on gender. Statistics Canada notes that due to low counts, the "Gender diverse" category was rolled into "Gender unknown" for the purposes of dissemination.

Examination of fields of study reveal gender differences, with more PEI females with postsecondary education in social and behavioural sciences and the law, education, and health and related fields than males. In contrast, PEI males were more likely to have postsecondary education in the following fields

of study: architecture, engineering and related technologies, mathematics, computers and information sciences, and personal, protective and transportation services.

In PEI, males made up 88% of individuals with a degree, certificate or diploma in architecture, engineering and related technologies, while females comprised 11% and those recorded as gender unknown comprised 1%.

In contrast, PEI females make up more than 71% of individuals who have completed postsecondary education in the field of education and 77.8% of individuals with completed post-secondary education in the field of social and behavioural sciences and law. Females also made up 71% of individuals who have completed post-secondary education in the field of health, and related fields.

TABLE 2-15 POSTSECONDARY GRADUATES BY FIELD OF STUDY AND GENDER, PEI AND CANADA (2018)96

		PEI			Canada	a
Field of Study	Male Gender	Female Gender	Gender Unknown	Male Gender	Female Gender	Gender Unknown
Education	66	168	0	6,477	22,440	45
Visual and performing arts, and communications	27	36	-	8,040	12,927	33
Humanities	9	18	-	16,773	29,148	69
Social and behavioural sciences and law	51	168	3	21,702	55,665	141
Business, management and public administration	192	219	-	62,229	74,640	183
Physical and life sciences and technologies	42	90	-	14,865	20,082	51
Mathematics, computers and information sciences	54	12	-	15,534	6,531	27
Architecture, engineering, and related technologies	240	30	3	60,243	14,055	132
Agriculture, natural resources and	27	18	-	4,749	5,595	21
Health, parks, recreation and fitness	123	309	3	17,532	64,512	123
Personal, protective and transportation	147	69	6	9,903	8,406	54

Source: Statistics Canada Table 37-10-0012-01

Holland College

Holland College is the provincial college of PEI, with campuses and centres across the province. 97 According to data from Holland College, females are more likely to be enrolled in the fields of health and community studies (practical nursing, early child care and education); business (accounting technology and medical support services); and tourism (travel and tourism management) (Table 2-16).

TABLE 2-16 PERCENTAGE OF FEMALE REGISTRANTS IN HOLLAND COLLEGE PROGRAMS (2015-2016 TO 2018-2019)98

PROGRAM	2015-2016	2016-2017	2017-2018	2018-2019
Applied Sciences and Engineering Technology	40	44	44	38
Atlantic Police Academy	20	19	20	22
Open Academic Studies	48	51	43	36
Culinary	49	47	54	53
Health and Community Studies	77	72	73	76
Marine	0	3	2	0
School of Visual Arts+ Computer Studies	26	43	26	34
School of Performing Art	50	57	58	45
Sports and Recreation	26	28	28	23
Tourism and Business	59	58	59	61
Trades and Industrial Technology	9	8	8	12
All Programs	44	47	46	44

Source: Holland College

Collège de l'Île

Since 2008, Collège de l'Île has issued college diplomas and certificates as outlined in a Memorandum of Agreement with the government of Prince Edward Island. As one of three publicly funded island post-secondary institutions, Collège de l'Île offers eight college programs in French as well as various language training options. The raison d'être of the college is to equip learners to ensure their personal and professional success. In the 2019-2020 academic year, 78% of registered students were female.⁹⁹



University of Prince Edward Island

The University of Prince Edward Island (UPEI) is recognized as the provincial university of Prince Edward Island. 100 Data from UPEI reveals that 4,853 students were enrolled in the 2019-2020 school year. Students at UPEI are not required to disclose their gender or sex. Over one percent (1.5%) of the 4,853 students enrolled at UPEI in 2019-2020 chose not to disclose their gender or sex (reported as gender unknown). However, 2,856 (59%) students identified as female and 1,926 (39.6%) students identified as male. Overall, females made up 59% of all students in all programs (Table 2-19).

In 2019-2020 females made up 56% of students in undergraduate programs, 75% of students in Bachelor of Education and Certificate Programs in Education, 83% of students in Doctor of Veterinary Medicine, and 62% of students in graduate programs (Table 2-19).

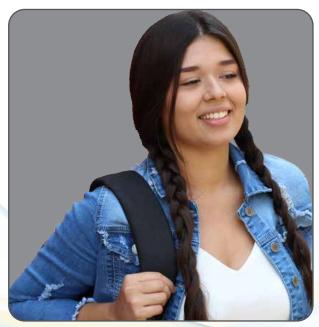
TABLE 2-19 TOTAL NUMBER OF STUDENTS ENROLLED IN UNDERGRADUATE AND GRADUATE PROGRAMS BY SEX $(2019-2020)^{101}$

UPEI Programs					
	Female	Male	Unknown	Total	Female %
First-entry undergraduate programs	2234	1668	64	3966	56%
Bachelor of Education and Certificate Programs in Education	86	27	1	114	75%
Doctor of Veterinary Medicine	222	43	1	266	83%
Graduate programs	314	188	5	507	62%
All programs	2856	1926	71	4853	59%

Source: University of Prince Edward Island

University of Prince Edward Island Faculty

As of September 30, 2019, the total number of full-time and part-time faculty was 422. The total number of women faculty was 207 (49.1%). These numbers include sessional instructors currently teaching as well as senior administrators and deans that hold an academic appointment. 102



Chapter Three: Work and Income

In this chapter, you will find sex-disaggregated statistics about work and income, including labour force participation, employment, unemployment, time lost from work, and wages. The COVID-19 pandemic began in 2020 and had an immediate impact on employment and income. Data from the Department of Finance and Statistics Canada offers the first look at the economic impact of COVID-19 on females in PEI. Sex disaggregated highlights on work and income in this chapter include:

- Females made up 47% of the PEI labour force in 2020. 103
- In 2020, the employment rate for females age 15 and older in PEI was 57.7%, compared to 53.9% for females nationally. 104
- Comparing 2020 over 2019, the number of females employed aged 15 and over decreased by 5.7% or 2,200, while there was no change in employment for males. 105
- The participation rate for females age 15 and older in PEI was 60.5% in 2020. 106
- Due to COVID-19, the unemployment rate for females increased 3.8 percentage points to 10.4%, and the total labour force decreased by 1.7% in 2020. 107
- Females in PEI worked fewer paid hours per week than males, averaging 33.9 hours, compared to males' 40.6 hours. 108
- In 2020, the proportion of part-time employment was 20.7% for females, compared to 10.1% for males. 109
- The average weekly wage rate for females working part-time was \$283.91, while for males the average rate was \$235.45.110
- Females lost an average of 15 days of work in 2020. The most commonly cited reason for absence was illness or disability, and personal and family reasons. 111
- Females in PEI were represented most predominantly in the following occupations; sales and service, business, finance and administration, law, and social community and government services, and health. 112
- Four thousand females in PEI were self-employed in 2020. 113
- In the most recent census, the median income for females in PEI was \$28,065, compared to \$32,062 for males in PEI.¹¹⁴
- According to the most recent census, the median income was \$21,562 for Indigenous females in PEI and \$24,932 for Indigenous males in PEI. 115
- The average hourly wage rate for PEI females in 2020 was \$24.08, compared to \$24.45 for males. 116

Labour Force Status

According to the most recent census (2016), 77,680 people over the age of 15 years participated in the labour force in PEI. 117 Females made up 49% (38,165) of labour force participants, while males comprised the remaining 51% (39,515). The majority of labour force participants were employed (87.7%); 12.3% were unemployed. Females made up 50% of all employed and 44% of all unemployed in PEI.

The most recent data available from Statistics Canada on labour force characteristics by sex and age is from 2020. In 2020, females made up 47% of the labour force in PEI, while males made up 53%. 118 This coincides with the COVID-19 pandemic and public health measures resulting from the pandemic. The percentage of females in the workforce has not been consistently falling since the last census.

Employment Rate

The employment rate for females and males in PEI based on the most recent census was 58.2%. The employment rate by sex was 55.9% for females and 60.7% for males. Nationally, the employment rate during this time period was 60.2%. The employment rate for females was 56.7% and 63.8% for males. 119

The Aboriginal profile from the most recent census provides data on the labour force characteristics of Indigenous persons. Based on the data, the employment rate for Aboriginal people in PEI was 53.8%. The employment rate for Aboriginal females in PEI was 52.6%, compared to 55.6% for Aboriginal males. In comparison, the rate of employment for Aboriginal people in Canada was 52.1%. The employment rate for Aboriginal females in Canada was 51.1% and 53.2% for Aboriginal males in Canada. 120

The Labour Force Survey (LFS) offers more recent data on the employment rate for females and males in PEI and Canada. 121 In 2020, the employment rate for females and males age 15 years and older in PEI was 57.7%. The employment rate for females was 54.2% and 61.3% for males. Nationally, the employment rate for females and males age 15 years and older was 58%. The employment rate for females was 53.9% and was 62.1% for males.

Participation Rate

Statistics Canada notes that the participation rate is the number of labour force participants expressed as a percentage of the population 15 years of age and over. The participation rate for a particular group (age, sex, marital status, etc.) is the number of labour force participants in that group expressed as a percentage of the population for that group. 122

According to the most recent census, the labour force participation rate for people over the age of 15 years in PEI was 66.4%. The participation rate by sex was 62.9% for females and 70.1% for males in PEI. In comparison, the labour force participation rate for people over the age of 15 years in Canada was 65.2%. The participation rate in Canada by sex was 61.0% for females and 69.6% for males.

The most recent census highlighted the participation rate for Aboriginal females and males at 69%. The participation rate of Aboriginal females was 64.9%, compared to 73.5% for males. At the national level the participation rate for Aboriginal females and males was 61.4%. The participation rate by sex included 58.6% for Aboriginal females and 64.5% for Aboriginal males in Canada. 123

Table 3-1 displays data from the 2020 Labour Force Survey on the participation rates of females and males in PEI and Canada. The participation rate for females and males in PEI was 64.4%. The participation rate for PEI females in 2020 was 60.5%, compared to 68.4% for PEI males. In comparison, the labour force participation rate in Canada was 64%. The participation rate for females in Canada was 59.5%, compared 68.6% for males.

TABLE 3-1 PARTICPATION RATE BY SEX, PEI AND CANADA¹²⁴

	F	Participation Rat	te						
	Female Male Both Sexes								
Canada	59.9	68.6	64.0						
Prince Edward Island	60.5	68.4	64.4						

Source: Statistics Canada Census

Unemployment Rate

The most recent census noted that the unemployment rate for males and females in PEI was 12.3%. The unemployment rate in PEI for females was 11.1% and 13.5% for males. In Canada, the unemployment rate for females and males was 7.7%. In Canada, the unemployment rate for females was 7.1%, compared to 8.3% for males. During the same time period, the unemployment rate for Aboriginal females in PEI was 19.7%, compared to a rate of 23.3% for Aboriginal males in PEI and a rate of 12.8% for Aboriginal females in Canada.

The most recent data from Statistics Canada on unemployment is based on the Labour Force Survey from 2020. In 2020, the unemployment rate for females and males in PEI was 10.4% respectively. In comparison, the unemployment rate nationally was 9.5%. The unemployment rate for females in Canada was 9.4%, compared to 9.5% for males. 125

Time Spent Doing Paid Work

Statistics Canada collects data on the actual hours worked by job type on an annual basis. Based on this data, PEI females worked fewer paid hours per week than males in 2019. Females worked on average 33.9 hours, compared to males' 40.6 hours. This tracks closely to the data for females and males in Canada. Nationally, females worked on average 32.9 hours in the reference week, compared to males' 38.5 hours. 126

Full-time Work

Statistics Canada defines full-time employment as people age 15 years and older working 30 hours or more per week at a main or only job. 127 According to the 2020 annual data on labour force characteristics by sex and age, the proportion of males and females employed full-time in PEI was 84.8%. The proportion of employed full-time by sex was 79% for females and 89.9% for males.128

Part-time Work

Part-time employment is defined as employment consisting of less than 30 hours per week at a main or only job for people age 15 years and older. 129 The 2020 annual data on labour force characteristics by age notes that the proportion of males and females employed part-time in PEI was 15.2%. The proportion of part-time employment by sex was 20.7% for females, compared to 10.1% for males. 130

Statistics Canada's monthly Labour Force Survey also collects data on part-time employment by reason. Table 3-2 displays data on part-time employment by reason for females and males in 2020. Overall, females were more likely than males to work parttime. In particular, females were more likely than males to work part-time due to caring for children and personal or family responsibilities.

TABLE 3-2 REASON FOR PART-TIME WORK IN CANADA BY SEX AND AGE (2020)¹³¹

	20)20
	Males	Females
Part-time employment – all reasons	4	7.5
Own illness	0.2	0.4
Caring for children	Х	0.8
Other personal or family responsibilities	Х	0.4
Going to school	1.2	1.6
Personal preference	1.2	1.7
Other voluntary reason	0.3	0.6
Business conditions, did not look for full-time work in last month	0.6	1.1
Could not find full-time work, did not look for full-time work in last month	Х	X
Business conditions, looked for full-time work in last month	0.2	0.6
Could not find full-time work, looked for full-time work in last month	Х	0.2

Source: Statistics Canada Table 14-10-0029-01

Time Lost from Work

In 2020, females in PEI lost an average of 15 days per worker, compared to 14.3 days for females nationally. Males in PEI lost an average of 9.2 days per worker, which is on par with the national average for males (Table 3-3). Table 3-4 displays hours lost by reason of absence and sex in PEI from 2016 to 2020. Females working full-time lost more hours of work due to illness or disability. Although this table does not include additional time spent doing unpaid work such as providing care to children, vulnerable adults, and seniors, it does show that females lost more hours of work due to personal and family reasons than males.

TABLE 3-3 NUMBER OF WORK ABSENCE OF FULL-TIME EMPLOYEES BY SEX AND REGION, ATLANTIC PROVINCES AND CANADA (2016-2020)¹³²

	2	2016	20	017	2	018	2019		20	020
Jurisdiction	Male	Female								
Canada	8	11.5	8	11.7	8.3	12.3	8.6	12.6	9.6	14.3
Newfoundland and Labrador	7.6	12.6	8.5	12.6	8.9	13.8	8.9	17.1	9.1	17.4
Prince Edward Island	7.9	13.4	7.1	11.6	7.5	12	9.7	11.7	9.2	15
Nova Scotia	8.3	13.3	8.7	13.1	8.7	13.6	8.7	14.9	10.7	14.4
New Brunswick	8.2	13.3	9.2	12.6	8.9	13.3	9.6	14.7	9.6	14.6

Source: Statistics Canada Table 14-10-0190-01

TABLE 3-4 HOURS LOST BY REASON OF ABSENCE AND SEX, PEI (2016-2020)¹³³

	2	016	2	017	2018		2018 2019		20	020
Reason of absence	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Employee away full week	57.8	101.5	57.8	89.4	56.5	95	68.4	105.7	86.5	127
Own illness or disability	18.9	32.7	19.2	26.4	19.6	28.8	29.7	29.9	28.3	38.4
Personal and family, away full week	4.8	35.2	2.9	25.2	3.9	29.5	3	35.8	4.9	37.1
Vacation away full week	25.1	30.2	27.2	31.7	26.3	31.7	26.2	34.6	29.1	29.3
Other reason, away full week	8.9	3.4	8.6	6.2	6.7	4.9	8.6	5.3	24.1	22.2
Employee away part week	55.6	64.3	62.9	81.4	42.5	50	67.1	73.7	60.4	65.9
Own illness or disability, away part week	9.8	12.7	8.5	14.1	10.1	12.8	10.6	13.1	9.8	12.5
Personal and family, away part week	4	6.1	3.8	7.1	4.1	6.9	6.1	7.5	5.6	7.5
Vacation or holiday, away part week	33.7	39.6	32.7	37.6	24.6	26.7	43.8	46.7	27.3	28.7
Temporary layoff due to business conditions, away part week	0.8	0.4	0.7	0.3	0.5	0.2	0.4	0.3	3.1	4
Weather, away part week	4.6	3.3	15	20	1.7	1.1	4.1	3.4	2.9	3.7
Job started or ended during week, away part week	0.3	Х	0.5	X	0.6	0.6	0.2	0.4	1.8	1.1
Working short time, away part week	0.4	0.4	0.3	0.7	0.6	0.5	0.5	0.2	3.4	2.1
Other reasons, away part week	1.9	1.8	1.5	1.6	0.4	1.3	1.2	1.8	6.4	6.3

Source: Statistics Canada Table 14-10-0122-01

Occupation

According to the 2020 Labour Force Survey, the most common occupations for PEI females 15 years and over were sales and service (27%); business, finance and administration (22%); education, law, and social community and government services (17%); and health (15%). This tracks closely with national data (Table 3-5).

TABLE 3-5 DISTRIBUTION OF FEMALE EMPLOYMENT, 15 YEARS AND OLDER, BY OCCUPATION, PEI AND CANADA (2020)¹³⁴

Distribution of Female Employment, 15 years and olde	er, by Oc	cupation
	PEI	Canada
Total, all occupations	100%	100%
Management occupations	7%	7%
Business, finance and administration occupations	22%	24%
Natural and applied sciences and related occupations	3%	5%
Health occupations	15%	13%
Occupations in education, law and social, community and government services	17%	17%
Occupations in art, culture, recreation and sport	2%	3%
Sales and service occupations	27%	25%
Trades, transport and equipment operators and related occupations	2%	2%
Natural resources, agriculture and related production occupations	2%	1%
Occupations in manufacturing and utilities	2%	2%

Source: Statistics Canada Table 14-10-0335-01

The Aboriginal Population Profile noted that Aboriginal females in PEI over 15 years of age were employed in the following occupations: sales and service (29.9%), business, finance and administrative (16.1%), and education, law and social, community and government services (14.5%). 135

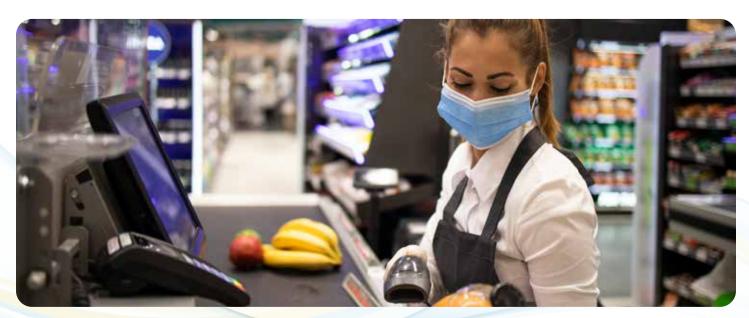


Table 3-6 displays the percentage of female employment by industry in 2020. In PEI, females were more likely to work in industries related to health care and social assistance; retail trade; and public administration and less likely to work in transportation and warehousing; forestry, fishing, mining, quarrying, oil and gas; and construction (Table 3-6).

TABLE 3-6 DISTRIBUTION OF FEMALE EMPLOYMENT, 15 YEARS AND OLDER, BY INDUSTRY, PEI AND CANADA (2020)¹³⁶

Distribution of Female Employment, 15 years and older, by Industry						
	PEI	Canada				
Total, all industries	100%	100%				
Agriculture	2%	1%				
Forestry, fishing, mining, quarrying, oil and gas	1%	1%				
Utilities	Χ	0%				
Construction	2%	2%				
Manufacturing	5%	5%				
Wholesale and retail trade	14%	15%				
Transportation and warehousing	1%	3%				
Finance, insurance, real estate, rental and leasing	4%	8%				
Professional, scientific and technical services	5%	8%				
Business, building and other support services	2%	3%				
Educational services	10%	11%				
Health care and social assistance	26%	23%				
Information, culture and recreation	2%	4%				
Accommodation and food services	7%	6%				
Other services (except public administration)	5%	4%				
Public administration	12%	6%				

Source: Statistics Canada Table 14-10-0023-01



Self-Employment

Self-employed workers made up 14.8% of the Island work force in 2020. In 2020, there were 4,000 self-employed females in PEI, 11% of all female workers. Self-employed males made up 18.2% of all male workers in PEI. Nationally, the self-employed comprised 12.5% of female workers and 18.3% of male workers. 137

TABLE 3-7 NUMBER OF SELF EMPLOYED BY SEX, ATLANTIC PROVINCES AND CANADA (2020) 138

Number of Self-Employed by Sex Atlantic Provinces and Canada								
Males Females								
Canada	1,745,100	1,059,500						
Newfoundland and Labrador	11,400	7,100						
Prince Edward Island	7,200	4,000						
Nova Scotia	34,000	23,100						
New Brunswick	24,900	15,000						

Source: Statistics Canada Table 14-10-0027-01

Place of Work

According to the most recent census, 81% of employed individuals age 15 years and older in PEI worked from a usual place. Females accounted for 54.4% of individuals that worked from a usual place, compared to 45.6% of males. Seven percent of individuals from PEI worked from home. Females made up 43.3% of the PEI population that worked from home, compared to 56.7% of males. 139

The most common mode of transportation to work for females employed with a usual place of work and females employed with no fixed workplace address was driving to work (83.2%), followed by driving as a passenger (8.9%). In comparison, 1.3% travelled to work by public transit, 5.7% walked, and 0.3% said they rode bicycle to work. 140

Income

The most recent census noted that the average total income for females \$34,171, compared to \$43,979 for males in PEI. 141 The median income for females in PEI was \$28,065, compared to \$32,062 for PEI males. 142 The Aboriginal Population Profile identified the average total income for Aboriginal females at \$33,043, compared to \$34,485 for Aboriginal males in PEI. The median income was \$21,562 for Aboriginal females in PEI, \$24,932 for Aboriginal males in PEI and \$23, 681 for Aboriginal females in Canada. 143

Family Type

Statistics Canada collects data related to income characteristics by family type and region. In 2018, the median income for all census families in PEI was \$79,440, compared to \$87,930 in Canada. The median income for couple families in PEI was \$86,890 and \$96,080 in Canada. The median income for lone-parent families was \$46,060 in PEI, compared to \$48,750 in Canada. 144 In PEI, females make up the majority of lone-parents (78.8%), and half of them made less than the median indicated amount (Table 3-8).

TABLE 3-8 MEDIAN TOTAL INCOME BY FAMILY TYPE, ATLANTIC PROVINCES AND CANADA (2018)¹⁴⁵

	Lone-parent families (\$)	couple families (\$)	all census families
Prince Edward Island	46,060	86,890	79,440
NovaScotia	42,470	88,440	78,920
New Brunswick	42,970	84,760	77,020
Newfoundland and Labrador	42,940	91,050	81,230
Canada	48,750	96,080	87,930

Source: Statistics Canada Census

Wages

According to the Labour Force Survey, PEI's average hourly wage rate was \$24.26 in 2020. This was an increase of \$1.52 or 6.7% over 2019. The average hourly wage rate for Canada was \$29.61 in 2020, an increase of 6.4% over 2019. Since 2010, PEI's average hourly wage has increased by 30.6%, while the average rate for Canada has increased by 32.0% over the same period. The average hourly wage rate for PEI females in 2020 was \$24.08, compared to \$24.45 for males.

Government Transfers

Statistics Canada defines government transfers as all cash benefits received from federal, provincial, territorial or municipal governments during the reference period. 146 In the most recent census, approximately twenty percent (20.6%) of PEI females' income came from government transfers, compared to 14.9% of Island males. 147 In comparison, 16.3% of Canadian females received income from government transfers.

Gender Wage Gap

The gender wage gap compares wages earned by females and males. A common method for calculating the gender wage gap is to compare the difference in full-time and full-year wages of females and males and noting discrepancies.

A comparison of Statistics Canada Census data shows that females working full-time (and fullyear) in PEI averaged \$46,855, or 84% of male's average income of \$55,726. During this same period, females in Canada who worked full-time (and full-year) averaged \$55,510, or 75% of male's average income of \$74,289. The gender wage gap in PEI is smaller than any other province in Atlantic Canada.

TABLE 3-8 AVERAGE EARNINGS OF FULL-TIME WORKERS AND THE GENDER WAGE GAP, ATLANTIC PROVINCES AND CANADA¹⁴⁸

	Average Earnings of Full- time Workers (dollars)		Gender Wage Gap for Average Earnings of Full-time Workers (%)
	Males	Females	
Canada	74,289	55,510	75%
Newfoundland and Labrador	77,000	55,100	72%
Nova Scotia	64,900	50,200	77%
Prince Edward Island	55,726	46,855	84%
New Brunswick	65,500	40,500	62%

Source: Statistics Canada Census

COVID-19

In 2020, the COVID-19 pandemic began to spread around the globe, forcing jurisdictions to initiate restrictions. As a result, most economies were negatively impacted. The following section outlines the Labour Force Survey Annual Report 2020 summary on labour force characteristics by age and sex, which was prepared by the PEI Department of Finance. 149

Overall, the COVID-19 pandemic had a larger impact on employment for females than for males on Prince Edward Island. According to the annual data, the number of employed females 15 and over decreased by 5.7% or 2,200 in 2020 over 2019, while there was no change in employment for males. At the peak of the COVID-19 restrictions in April 2020, total employment was down 8,400 year-over year, with males making up 3,200 of those losses while female employment was down 5,300.

As restrictions began to ease, male employment increased more rapidly than for females, and by October 2020 had exceeded the October 2019 employment level. Female employment in December 2020 was still 2,900 below the December 2019 level.

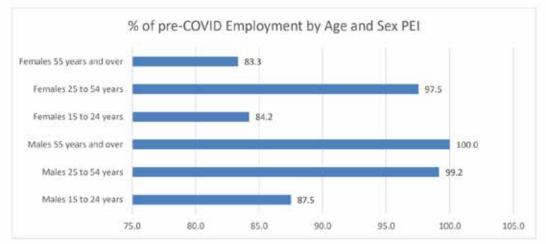


FIGURE 3-1 DECEMBER 2020 PERCENTAGE OF PRE-COVID EMPLOYMENT BY AGE AND SEX¹⁵⁰

Source: PEI Department of Finance

The unemployment rate for females increased 3.8 percentage points to 10.4 percent. The total labour force decreased by 1.7 percent. The unemployment rate for males was also 10.4 percent, down 0.4 percentage points from 2019, and the total labour force decreased by 0.5 percent.

By age cohort, the largest decreases in employment occurred for females aged 25 to 44 (-5.2 percent or 800 persons), females aged 15 to 24 (-12.7 percent or 700 persons), and males aged 15 to 24 (-8.3 percent or 500 persons). The number of employed males aged 65 and over was 3,400, up from 3,000 in 2019, while the number of females employed in this age group decreased by 300 to 1,600. The population cohort with the lowest unemployment rate in 2020 was males aged 65 and over with a rate of 8.1 percent.

There were less youth aged 15 to 24 working or looking for work in 2020 than in 2019, as the labour force for that age group decreased by 3.9 percent or 500 persons. Employment for this age cohort decreased by 1,200, or 10.4 percent. As a result, the unemployment rate increased from 10.9 percent in 2019 to 16.9 percent in 2020.

The unemployment rate for females aged 15 to 24 rose from 8.3 percent to 15.8 percent, while the unemployment rate for males in this age group went from 14.3 percent in 2019 to 17.9 percent in 2020.

TABLE 3-9 LABOUR FORCE CHARACTERISTICS, AGE AND GENDER (2020)151

Labour Force Characteristics By Age and Gender Prince Edward Island 2020

	Labour Force				Employm	ent	Unemployment Rate		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
15 - 24	6.7	5.7	12.4	5.5	4.8	10.3	17.9	15.8	16.9
25 - 44	16.5	16.2	32.7	15.0	14.5	29.5	9.7	10.5	9.8
45 - 64	17.3	16.7	33.9	15.7	15.3	31.0	9.2	8.4	8.6
65+	3.7	1.8	5.6	3.4	1.6	5.0	8.1	16.7	10.7
Total	44.2	40.4	84.6	39.6	36.2	75.8	10.4	10.4	10.4

Persons, thousands (except unemployment rates)

Source: Statistics Canada, Labour Force Survey, Table 14-10-0327-01

PEI Business Women's Association

The Prince Edward Island Business Women's Association (PEIBWA) strengthens and diversifies PEI's economy by advancing women in business and women entrepreneurs. Offering training, networking and mentoring opportunities and business advisory services, PEIBWA helps women-led businesses scale-up, expand their reach, and contribute to the province's economic prosperity. PEIBWA supports the inclusion of underserved women in the trades, technology and STEM fields, Indigenous women, newcomers, women with disabilities, and women in rural areas. As PEI's only business women's association with an Island-wide mandate, PEIBWA promotes the province's overall economic growth, encourages business investment and job creation, and supports small and medium enterprises (SMEs) to innovate, become more productive, more competitive, and ready to export goods and services.

PEIBWA represents approximately 700 individuals across the province from 400+ member organizations. Of this membership, 65% are small businesses (including sole proprietorships), 20% are larger, private-sector corporations and organizations, and 15% are non-profit, charity, social enterprise or community-based organizations. 152



Chapter Four: Health

In this chapter, you will find a general overview of information about the physical and mental health of the female population in Prince Edward Island, with updates between 2015 and 2020. Data for Chapter four was collected from Statistics Canada, Canadian Health Institute for Health Information, Public Health Agency of Canada, Health PEI, and PEERS Alliance. Highlights related to female health in PEI include the following:

- Females in PEI live an average of 83.6 years, while males live an average of 79.6 years. 153
- Life expectancy at age 65 in PEI is 21.7 years for females and 18.4 years for males. 154
- Females living in PEI and Canada have lower mortality rates than males for the most frequent causes of death. 155
- As of December 2020, PEI had zero deaths (and hospitalizations) due to COVID-19. In Canada, more males than females succumbed to COVID-19 before age 80. At age 80 and over, the trend reversed, and more females than males died due to COVID-19.156
- In Canada, females have better outcomes related to 8 out of 9 health diseases and conditions than females in PEI. 157
- Rates of cancer for females were lower and better than the rates for males in PEI (453.0 versus 594.9) and Canada (461.6 versus 541.6). 158
- Lung, colorectal, and breast cancer are the leading causes of cancer deaths in PEI females. 159
- Daily smoking occurs among 9.7% of PEI females and 17.7% of PEI males. 160
- Heavy use of alcohol by females living in PEI (10.6%) is statistically lower than the percentage of heavy use among Canadian females (15.1%). 161
- Forty-three percent (43.6%) of PEI females practice immunization, which is 9.6% higher than PEI males and 9.1% higher than Canadian females. 162
- Eighty-four percent (84.2%) of females in PEI reported they had access to a regular health care provider, which was 3.7% higher than males, but 4.3% lower than the percentage of females in Canada who reported having access to a regular health care provider. 163
- The total number of inpatient hospitalizations in days was 72,762 for females and 62,225 for males. 164
- For the past two decades, PEI hospitals have delivered approximately 1,400 babies a vear.165
- Disability peaks for females between ages 45 and 64 in PEI and Canada. 166

Life Expectancy

Life expectancy, the most widely used measure of population health, measures the average number of years a typical person can expect to live, and is usually expressed as life expectancy at birth or life expectancy at age 65. Statistics Canada figures indicate that, at birth, PEI females can expect to live an average of 83.6 years while their male counterparts can expect to live an average of 79.6 years; 4.0 years less. And, at birth, PEI females can expect to live 0.6 year less than Canada females, who can expect 84.2 years¹⁶⁷ (Table 4-1).

The 83.6 year female life expectancy at birth in PEI is in line with female life expectancy in other provinces (82.0 to 84.8); is slightly higher than Atlantic females living in Newfoundland and Labrador (82.0); Nova Scotia (82.4); and New Brunswick (82.8); is slightly lower than Quebec (84.5); Ontario (84.5); Alberta (84.0) and British Columbia (84.8); and is more than a decade higher than life expectancies in each of the territories (79.1-72.8).

PEI female life expectancy exceeds that of PEI males by 4.2 years, and that of Canadian males by 4.6 years. Life expectancy at birth is slightly lower in PEI than Canada: 0.6 years lower for PEI females (83.6 versus 84.2), 0.4 years lower for PEI males (79.6 versus 80.0), and 0.6 years lower for PEI both sexes or combined sexes (81.6 versus 82.1).

TABLE 4-1 LIFE EXPECTANCY (IN YEARS) AT BIRTH AND AT AGE 65, PROVINCES, TERRITORIES, AND CANADA¹⁶⁸

Jurisdiction		Life <u>ex</u>	pectancy	at birth	Life expectancy at age 65				
	Both		Females		Both		Females		
Prince Edward Island	81.6	79.6	83.6	F (4.0)	20.1	18.4	21.7	F (3.3)	
Newfoundland	80.0	78.0	82.0	F (4.0)	19.2	17.9	20.4	F (2.5)	
Nova Scotia	80.4	78.3	82.4	F (4.1)	19.5	18.0	20.7	F (2.7)	
New Brunswick	80.7	78.6	82.8	F (4.2)	19.8	18.3	21.1	F (2.8)	
Quebec	82.9	81.1	84.5	F (3.4)	20.9	19.6	22.0	F (2.4)	
Ontario	82.4	80.3	84.5	F (4.2)	21.1	19.7	22.4	F (2.7)	
Manitoba	80.1	77.9	82.3	F (4.4)	20.1	18.5	21.5	F (3.0)	
Saskatchewan	80.3	78.0	82.7	F (4.7)	20.4	18.9	21.9	F (3.0)	
Alberta	81.6	79.4	84.0	F (4.6)	20.9	19.4	22.3	F (2.9)	
British Columbia	82.4	80.0	84.8	F (4.8)	21.4	20.0	22.8	F (2.8)	
Yukon	-	-	-	-	-	-	-	-	
Northwest Territories	77.4	75.6	79.1	F (3.5)	17.7	17.1	18.4	F (1.3)	
Nunavut	-	69.3	72.8	F (3.5)	15.4	16.4	14.2	F (-2.2)	
Canada	82.1	80.0	84.2	F (4.2)	20.9	19.5	22.2	F (2.7)	
Calculated comparisons:									
Average, provinces (P)	81.2	79.1	83.3	F (4.2)	20.3	18.8	21.6	F (2.8)	
Average, territories (T)	77.4	72.4	75.9	F (3.5)	16.5	16.7	16.3	F (1.7)	
Difference (P-T=)	3.8	6.7	7.4		3.8	2.1	5.3		

Source: Statistics Canada Table 13-10-0140-01

Life expectancy at age 65 years indicates the average number of years a person can expect to live after age 65. Life expectancy at age 65 in PEI is 21.7 years for females and 18.4 years for males. That is, at age 65, PEI females can expect to live an average of 3.3 years longer than PEI males (Table 4-2). Life expectancy at age 65 in Canada is 22.2 years for females and 19.5 years for males. That is, at age 65, females in Canada can expect to live an average of 2.7 years longer than males in Canada. In short, at age 65 the pattern of life expectancy is similar provincially and nationally with females outliving males by about three years (2.7 versus 3.3). When comparing life expectancy at age 65 in PEI to other jurisdictions it was seen that the figures for both PEI males (18.4 years) and PEI females (21.7 years) a) exceed comparable figures for each Atlantic province and Territory (14.2 to 21.1), and b) are exceeded by comparable figures for each of Quebec and provinces west of Quebec (18.5 to 22.8 years). Life expectancy at birth and life expectancy at 65 each favour females over males in PEI (by 4 years at birth and 3.3 years at age 65) and in Canada (by 4.2 years at birth and 2.7 years at age 65).

Table 4-2 compares life expectancy in PEI and Canada at five-year intervals starting with life expectancy at 0 years or birth in PEI (83.6 versus 79.6 years) and in Canada (84.2 versus 80.0 years), and gradually decreasing until death occurs. According to Table 4-2, female life expectancy exceeds male life expectancy at all five-year intervals. The amount of difference is about four years at each of the twelve five-year points between birth and age 55 in PEI (4.0 to 4.5 years) and the six five-year points between birth and age 25 in Canada (4.1 to 4.2 years). Thereafter, female life expectancy exceeds male life expectancy by a lesser amount, by about three years, at each of the three five-year points between age 50 to 69 in PEI (3.3 to 3.7 years) and at each of the eight five-year points between age 25 to 64 in Canada (3.0 to 3.9 years). By age 70 in PEI and by age 65 in Canada, males and females each have less than three years of life expectancy remaining (average figures). At the nine remaining five-year age intervals in the lifecycle, the differences in life expectancy between males and females are similar and are gradually decreasing in PEI (from 2.8 to 0.4 years) and Canada (from 2.7 to 0.1 years).

In short, considering the entire lifecycle, the life expectancy of females living in PEI always exceeds the life expectancy of males living in PEI with the difference starting at 4.5 years at birth and decreasing to 0.4 years near death. Similarly, the life expectancy of females living in Canada always exceeds the life expectancy of males living in Canada with the difference starting at 4.2 years at birth and decreasing to 0.4 years near death. Lastly, when comparing the life expectancy of females in PEI to females in Canada at the 24 five-year intervals across the lifecycle it can be seen that PEI exceeded Canada by 0.3 to 0.8 years in all instances (except birth and the 85-89 year interval). Few persons become a supercentarian (age 110 years or more) with mostly females and an occasional male. PEI's maximum age recorded for a male is 112, and for a female is 110 years. 169

TABLE 4-2 LIFE EXPECTANCY (YEARS) AT BIRTH AND THROUGHOUT LIFE BY FIVE YEAR INTERVALS, PEI AND CANADA¹⁷⁰

Cr	ANADA								
			PEI				CANADA		Result
Age	Both	Males	Females	Better results	Both	Males	Females	Better results	Better female
(years)	sexes			in male or	sexes			in male or	results in
				female (in years)?				female (in years)?	PEI or Canada (in years)?
0	81.6	79.6	83.6	Female (4.0)	82.1	80.0	84.2	Female (4.2)	Canada (0.2)
1 to 4	80.9	78.7	83.1	Female (4.4)	81.5	79.4	83.5	Female (4.1)	PEI (0.3)
5 to 9	77	74.7	79.2	Female (4.5)	77.5	75.4	79.6	Female (4.2)	PEI (0.3)
10 to 14	72.1	69.8	74.3	Female (4.5)	72.6	70.5	74.6	Female (4.1)	PEI (0.4)
15 to 19	67.1	64.8	69.3	Female (4.5)	67.6	65.5	69.6	Female (4.1)	PEI (0.4)
20 to 24	62.1	59.9	64.4	Female (4.5)	62.7	60.6	64.7	Female (4.1)	PEI (0.4)
25 to 29	57.3	55.1	59.5	Female (4.4)	57.9	55.9	59.8	Female (3.9)	PEI (0.5)
30 to 34	52.4	50.2	54.6	Female (4.4)	53.1	51.1	54.9	Female (3.8)	PEI (0.6)
35 to 39	47.5	45.4	49.6	Female (4.2)	48.3	46.4	50.1	Female (3.7)	PEI (0.5)
40 to 44	42.7	40.5	44.8	Female (4.3)	43.5	41.7	45.2	Female (3.5)	PEI (0.8)
45 to 49	37.9	35.8	39.9	Female (4.1)	38.7	37.0	40.4	Female (3.4)	PEI (0.7)
50 to 54	33.2	31.1	35.1	Female (4.0)	34.1	32.4	35.7	Female (3.3)	PEI (0.7)
55 to 59	28.6	26.7	30.4	Female (3.7)	29.5	27.9	31.1	Female (3.2)	PEI (0.5)
60 to 64	24.2	22.5	25.9	Female (3.4)	25.1	23.6	26.6	Female (3.0)	PEI (0.4)
65 to 69	20.1	18.4	21.7	Female (3.3)	20.9	19.5	22.2	Female (2.7)	PEI (0.6)
70 to 74	16.1	14.7	17.5	Female (2.8)	17.0	15.7	18.1	Female (2.4)	PEI (0.4)
75 to 79	12.5	11.1	13.7	Female (2.6)	13.3	12.2	14.2	Female (2.0)	PEI (0.6)
80 to 84	9.3	8.1	10.3	Female (2.2)	10.1	9.1	10.8	Female (1.7)	PEI (0.5)
85 to 89	6.6	5.8	7.1	Female (1.3)	7.3	6.5	7.8	Female (1.3)	Same
90 & over	4.5	4.2	4.6	Female (0.4)	5.0	4.5	5.3	Female (0.8)	PEI (0.4)
95					3.4	3.0	3.6	Female (0.6)	
100				•••	2.4	2.2	2.5	Female (0.3)	
105				•••	1.8	1.6	1.8	Female (0.2)	
110 &					1.5	1.4	1.5	Female (0.1)	
over									

Source: Statistics Canada Table 13-10-0114-01 (Canada) and Table 13-10-0140-01 (PEI)

Table 4-3 highlights life expectancy at birth for both PEI and Canada exceed (United Kingdom, United States, OECD) and almost exceed (Australia, New Zealand). Canada (82.1 for both sexes, 80.0 for males, and 84.2 for females) exceeds the OECD average (80 years for both sexes, 77.5 years for males, 82.8 years for females) in life expectancy at birth (by 2.1 years for both sexes, 2.5 years for males, and 1.4 years for females). OECD ranked Canada 14th in the world. In all comparisons, females exceeded males in life expectancy at birth (3.4-5.3 years).

TABLE 4-3 LIFE EXPECTANCY AT BIRTH (YEARS) IN COUNTRIES FREQUENTLY USED FOR HEALTH POLICY COMPARISONS¹⁷¹

Country	Both	Male	Female	Better (by how many years)
PEI	81.6	79.6	83.6	Female (4.0 years)
Canada	82.1	80.0	84.2	Female (4.2 years)
Australia	82.7	80.7	84.9	Female (4.2 years)
New Zealand	81.8	80.2	83.6	Female (3.4 years)
United Kingdom	81.2	79.5	83.1	Female (3.6 years)
United States	78.5	76.1	81.1	Female (5.0 years)
OECD countries	80.0	77.5	82.8	Female (5.3 years)
World	72.5	70.4	74.9	Female (4.9 years)

Source: World Bank, Life Expectancy at Birth.

Both life expectancy at birth and life expectancy at age 65 measure quantity of life whether starting from 0 years or 65 years. A third measure of life expectancy also considers quality of life: Health-Adjusted Life Expectancy or HALE. 172 The Health-Adjusted Life Expectancy measures the number of years in full health that an individual can expect to live given current morbidity and mortality conditions (whether measured from birth or age 65) (Table 4-4). At birth, the HALE was greater for females than males in PEI by 4.9 years (72.5-67.6), and the HALE was greater for females than males in Canada by 1.5 years (70.4-68.9). Regionally, the HALE for PEI females (72.5) exceeded that of other Atlantic females (Newfoundland, 66.3, Nova Scotia, 69.5; and New Brunswick, 68.9 years), meaning that PEI females, on average, lived slightly longer in full health before developing illness and dying.

By comparison, the latest health-adjusted life expectancies measured at age 65 for PEI (Canada, in brackets) are 15.0 (15.2) years for female and male sexes, 14.6 (13.7) years for males, and 15.4 (16.7) years for females. At age 65 years, the HALE is greater for females than males in PEI by 0.8 years (15.4-14.6), and the HALE is greater for females than males in Canada by 3.0 years (16.7-13.7). As with other expressions of life expectancy, female figures for HALE exceed male figures for HALE by about 1 to 5 years, for example, 0.8, 1.5, 3.0, 4.9 years. The difference in life expectancy at birth and life expectancy at age 65 each exceed the health-adjusted life expectancy at birth and age 65 for both PEI and Canada. This can be predicted from knowing the definition of terms. Life expectancy (whether at birth or age 65) exceeds the healthadjusted life expectancy because years of full health are included and years of ill health are excluded from the calculations. Further, knowing that females tend to be more healthy than males then the female values exceed the male values, as noted earlier (Table 4-4). In summary, the absolute value of each type of life expectancy measure s relatively similar across the sex categories (both sexes, males and females) with the differences being due to age (0 versus 65) when measured and allowance for quality of life (full health versus full health and illness).

TABLE 4-4 COMPARISON OF LIFE EXPECTANCY MEASURES AT BIRTH AND AGE 65 YEARS, PEI AND CANADA¹⁷³

LIFE EXPECTANCY			PEI		CANADA			
MEASURE(years)	Both	Males	Females	F >M by	Both	Males	Females	F>M by
At Birth								
Life expectancy at birth	81.6	79.6	83.6	F (4.0)	82.1	80.0	84.2	F (4.2)
HALE, All income groups	70.3	67.6	72.5	F (4.9)	69.7	68.9	70.4	F (1.5)
DIFFERENCE:	11.3	12.0	11.1	(-0.9)	12.4	11.1	13.8	2.7
At Age 65								
Life expectancy at age 65	20.1	18.4	21.7	F (3.3)	20.9	19.5	22.2	F(2.7)
HALE, All income groups	15.0	14.6	15.4	F (0.8)	15.2	13.7	16.7	F (3.0)
DIFFERENCE:	5.1	3.8	6.3	2.5	5.7	5.8	5.5	-0.3

Source: Statistics Canada Table 13-10-0370-01

Health-adjusted life expectancy at birth and health-adjusted life expectancy at age 65 shows an increased number of years of life expectancy for females than males in every sex comparison between PEI and Canada ("F>M by" columns, Table 4-5). The HALE at birth is consistently better for females in PEI than Canada, but the HALE at age 65 is consistently better for females in Canada than PEI (with one small exception) whether mixing all income levels together ("all income groups") or separating incomes into five levels ("quintiles").

HALE at birth is consistently better for females in PEI than Canada by 3.4 years for the "all income groups" and a range of 3.2 to 5.6 years for the "quintile groups." Conversely, HALE at age 65 is consistently better for females in Canada than in PEI by 2.2 years when measuring "all income groups" and was a range of 2 to 4.8 years for the "quintile groups." One small exception was Q2 being slightly better in PEI than in Canada by 0.9 years. HALE at birth (3.2 to 5.6 years) and at 65 years (2 to 4.8 years) are relatively similar due to HALEs health adjustment for time spent living in poor health.

HALE at birth and HALE at age 65 each gradually increased for both males and females as the income level increased from lowest (Q1) to highest (Q5) quintile. The health-adjusted life expectancy at birth increased in PEI (Canada) from 63.4 (64.7) years to 72.1 (72.3) years for males, and from 68.9 (67.0) years to 78.0 (75.0) years for females as income increased from Q1 to Q5. The health-adjusted life expectancy at age 65 increased in PEI (Canada) from 13.2 (11.1) years to 16.4 (17.6) years for males, and from 15.2 (16.6) years to 18.0 (21.5) years for females between Q1 and Q5.

TABLE 4-5 HEALTH-ADJUSTED LIFE EXPECTANCY (YEARS) AT BIRTH AND AGE 65 BY INCOME AND SEX, PEI AND CANADA¹⁷⁴

INCOME GROUP			PEI			CA	NADA	Better female results were in PEI or Canada? (years?)	
	Both	Males	Females	F >M by	Both	Males	Females	F>M by	
AT BIRTH									
All income groups	70.3	67.6	72.5	4.9	69.7	68.9	70.4	1.5	PEI (3.4)
Quintile I (lowest)	65.4	63.4	68.9	5.5	65.9	64.7	67.0	2.3	PEI (3.2)
Quintile 2	67.0	63.3	68.8	5.5	69.8	69.0	70.5	1.5	PEI (4.0)
Quintile 3	70.3	66.3	74.3	8.0	71.2	69.9	72.3	2.4	PEI (5.6)
Quintile 4	75.0	71.6	77.7	6.1	72.2	71.3	73.1	1.8	PEI (4.3)
Quintile 5	75.4	72.1	78.0	5.9	73.7	72.3	75.0	2.7	PEI (3.2)
Q5 minus Q1=	10.0	8.7	9.1	1.0	7.8	7.6	8.0	0.4	PEI (0.6)
AT AGE 65									
All income groups	15.0	14.6	15.4	0.8	15.2	13.7	16.7	3.0	Canada (2.2)
Quintile I (lowest)	14.3	13.2	15.2	2.0	13.2	11.1	16.6	5.5	Canada (3.3)
Quintile 2	15.7	15.1	16.2	1.1	14.1	14.0	14.2	0.2	PEI (0.9)
Quintile 3	16.5	15.5	17.4	1.9	15.0	12.4	19.1	6.7	Canada (4.8)
Quintile 4	16.4	16.0	16.7	0.7	18.8	17.5	20.2	2.7	Canada (2.0)
Quintile 5	17.1	16.4	18.0	1.6	19.4	17.6	21.5	3.9	Canada (2.3)
Q5 minus Q1=	2.8	3.2	2.8	0.8	6.2	6.5	4.9	1.6	Canada (0.8)

Source: Statistics Canada Table 13-10-0370-01

Mortality

Using 2019 Statistics Canada death data and including all causes of death, the PEI death rate was 729.8 persons per 100,000 population for both sexes. This average obscures the fact that the male rate (905.8) exceeds the female rate (586.1) by 319.7 persons per 100,000 deaths (Table 4-6). In PEI, among the thirteen causes of death categorized, the death rate was consistently lower for females than males (except for Alzheimer's which was almost equal for both sexes). The male rate (905.8 persons per 100,000 population) exceeded the female rate (586.1 persons per 100,000 population) for the category of all causes of death; and for the specific categories of cancer (264.9 versus 135.2 persons per 100,000 population) and cardiovascular disease (266.4 versus 155.0 persons per 100,000 population) by 129.7 and 111.4 persons per 100,000 population, respectively.

Although PEI females had consistently lower rates of death than PEI males (except for Alzheimer's) the differences were less pronounced for the remaining causes of death. These were, in descending order, accidents/unintentional injuries (25.8); intentional self-harm/suicide (16.2); influenza and pneumonia (13.1); diabetes mellitus (12.7); chronic respiratory diseases (7.6); chronic liver disease (6.9); nephritis, nephritic syndrome and nephrosis (6.9); and residual diseases (3.1). The remaining disease, Alzheimer's, had a lesser male-female difference (2.8) even though the absolute female death rate exceeded the absolute male death rate (8.4 versus 5.6 persons per 100,000 population).

When PEI and Canada death rates were compared for the eleven distinct cause-of-death categories, the female rates were lower in PEI than Canada for eight causes (by a rate of 0.5 to 24.3) and worse in PEI than Canada for three causes (by a rate of 3.4 to 26.5) where all disease rates were measured as number of persons per 100,000 population. Expressed as number of persons per 100,000, the disease categories for which PEI female rates were lower or more favourable than Canada female rates included malignant neoplasms (24.3), residual diseases (7.1), Alzheimer's disease (6.5), accidents/unintentional injuries (3.1), intentional selfharm/suicide (1.4), chronic liver disease (1.3), nephritis, nephritic syndrome and nephrosis (0.8), and diabetes mellitus (0.5). The remaining three categories for which PEI female rates were higher than Canada female rates included major cardiovascular diseases (26.2), chronic lower respiratory diseases (13.0), and influenza and pneumonia (3.4).

The difference in PEI and Canada female rates of death ranged from 0.5 to 24.3 for the disease rates favourable to PEI females, and from 3.4 to 26.2 for the disease rates favourable to Canada females that is a range of 23.8 and 22.8, respectively. PEI female death rates were better than Canada female death rates for eight causes of death. Conversely, PEI male death rates were worse than Canada male death rates for eight causes of death. Only the rates for residual diseases, Alzheimer's disease, and intentional self-harm/suicide were more favourable for PEI than Canada males. In summary, for all causes of death, females have lower absolute rates of death than males in both PEI and Canada (except for Alzheimer's). At death, the gap favours females (female life expectancy).

TABLE 4-6 AGE-STANDARDIZED MORTALITY RATES PER 100,000 POPULATION, PEI AND CANADA (2019)¹⁷⁵

Cause of mortality	Area	Both	Male	Female	Better results in PEI male	
(by ICD code)					or PEI female (by %)	PEI or Canada (by %)
Total, all causes of	PE	729.8	905.8	586.1	Female (319.7)	Canada (37.0)
death [A0-Y89]	CA	655.1	783.8	549.1	Female (234.7)	
Malignant neoplasms	PE	190.2	264.9	135.2	Female (129.7)	PEI (24.3)
[C00-C97]	CA	186.1	222.0	159.5	Female (62.5)	
Major cardiovascular	PE	203.3	266.4	155.0	Female (111.4)	Canada (26.2)
diseases [10-178]	CA	160.9	199.4	128.8	Female (70.6)	
All other diseases	PE	95.0	94.8	91.7	Female (3.1)	PEI (7.1)
(residual)	CA	103.5	108.0	98.8	Female (9.2)	
Accidents	PE	33.2	46.9	21.1	Female (25.8)	PEI (3.1)
(unintentional injuries)	CA	33.3	43.1	24.2	Female (18.9)	
[V01-X59,Y85-Y86]						
Chronic lower	PE	41.2	46.5	38.9	Female (7.6)	Canada (13.0)
respiratory diseases	CA	29.1	33.9	25.9	Female (8.0)	
[J40-J47]						
Influenza and	PE	22.4	29.8	16.7	Female (13.1)	Canada (3.4)
pneumonia [J09-J18]	CA	15.5	18.4	13.3	Female (5.1)	
Diabetes mellitus	PE	17.9	24.5	11.8	Female (12.7)	PEI (0.5)
[E10-E14]	CA	16.0	20.5	12.3	Female (8.2)	
Alzheimer's disease	PE	7.5	5.6	8.4	Male (2.8)	PEI (6.5)
[G30]	CA	13.7	11.6	14.9	Male (3.3)	· ·
Nephritis, nephrotic	PE	9.1	13.1	6.2	Female (6.9)	PEI (0.8)
syndrome and	CA	8.5	10.7	7.0	Female (3.7)	
nephrosis [N00-N07, N17-						
N19, N25-N27]						
Intentional self-harm	PE	11.5	19.9	3.7	Female (16.2)	
(suicide) [X60-X84, Y87.0)	CA	10.7	16.5	5.1	Female (11.4)	PEI (1.4)
Chronic liver disease	PE	8.1	11.6	4.7	Female (6.9)	
and cirrhosis [K70, K73-	CA	8.9	12.0	6.0	Female (6.0)	PEI (1.3)

Source: Statistics Canada Table 13-10-0800-01

Using actual number of deaths, deaths numbered 284,000 in Canada and 1,375 in PEI in 2019 (Table 4-7). There were 7,042 more male (145,562) than female deaths (138,562) in Canada, and 63 more male (719) than female deaths (656) in PEI in 2019 (sex ratio of 1.0 for Canada and PEI). Table-4-8 ranks causes by sex.

TABLE 4-7 ACTUAL NUMBER OF DEATHS BY CAUSE AND SEX, PEI AND CANADA (2019)¹⁷⁶

		Canada		PEI		
Cause of Death	Both	Males	Females	Both	Males	Females
Total, all causes of death	284,082	145,562	138,520	1,375	719	656
Malignant neoplasms	80,152	42,848	37,304	365	224	141
Diabetes mellitus	6,912	3,882	3,030	34	21	13
Alzheimer's disease	6,166	1,989	4,177	14	4	10
Major cardiovascular diseases	71,110	36,678	34,432	387	208	179
Influenza and pneumonia	6,893	3,265	3,628	43	22	21
Chronic lower respiratory diseases	12,823	6,342	6,481	81	38	43
Chronic liver disease and cirrhosis	3,662	2,365	1,297	15	10	5
Nephritis, nephrotic syndrome, nephrosis	3,767	1,904	1,863	17	10	7
All other diseases (residual)	46,012	19,319	26,693	177	73	104
Accidents (unintentional injuries)	13,746	7,829	5,917	57	35	22
Intentional self-harm (suicide)	4,012	3,058	954	17	14	3

Source: Statistics Canada Table 13-10-0800-01

TABLE 4-8 ACTUAL NUMBER OF DEATHS IN DESCENDING ORDER BY CAUSE AND SEX, PEI AND CANADA (2019)¹⁷⁷

	Canada			PEI	
Both	Males	Females	Both	Males	Females
Malignant neoplasms (80,152)	Malignant neoplasms (42,848)	Malignant neoplasms (37,304)	Major cardiovascular disease (387)	Malignant neoplasms (224)	Major cardiovascular disease (179)
Major cardiovascular disease (71,110)	Major cardiovascular disease (36,678)	Major cardiovascular disease (34,432)	Malignant neoplasms (365)	Major cardiovascular disease (208)	Malignant neoplasms (141)
All other diseases or residual (46,012)	All other diseases or residual (19,319)	All other diseases or residual (26,693)	All other diseases or residual (177)	All other diseases or residual (73)	All other diseases or residual (104)
Chronic lower respiratory disease (12,823)	Accidents, unintentional injuries (7,829)	Chronic lower respiratory disease (6,481)	Chronic lower respiratory disease (81)	Chronic lower respiratory disease (38)	Chronic lower respiratory disease (43)
Accidents, unintentional injuries (13,746)	Chronic lower respiratory disease (6,342)	Accidents, unintentional injuries (5,917)	Accidents, unintentional injuries (57)	Accidents, unintentional injuries (35)	Accidents, unintentional injuries (22)
Diabetes mellitus (6,912)	Diabetes mellitus (3,882)	Alzheimer's disease (4,177)	Influenza and pneumonia (43)	Influenza and pneumonia (22)	Influenza and pneumonia (21)
Influenza and pneumonia (6,893)	Influenza and pneumonia (3,265)	Influenza and pneumonia (3,628)	Diabetes mellitus (34)	Diabetes mellitus (21)	Diabetes mellitus (13)
Alzheimer's disease (6,166)	Intentional self- harm, suicide (3,058)	Diabetes mellitus (3,030)	Nephritis, nephrotic syndrome and nephrosis (17)	Intentional self- harm, suicide (14)	Alzheimer's disease (10)
Intentional self- harm, suicide (4,012)	Chronic liver disease and cirrhosis (2,365)	Nephritis, nephrotic syndrome and nephrosis (1,863)	Intentional self- harm, suicide (17)	Chronic liver disease and cirrhosis (10)	Chronic liver disease and cirrhosis (5)
Nephritis, nephrotic syndrome and nephrosis (3,767)	Alzheimer's disease (1,989)	Chronic liver disease and cirrhosis (1,297)	Chronic liver disease and cirrhosis (15)	Nephritis, nephrotic syndrome and nephrosis (10)	Nephritis, nephrotic syndrome and nephrosis (7)
Chronic liver disease and cirrhosis (3,662)	Nephritis, nephrotic syndrome and nephrosis (1,904)	Intentional self- harm, suicide (954)	Alzheimer's disease (14)	Alzheimer's disease (4)	Intentional self-harm, suicide (3)

Source: Statistics Canada Table 13-10-0800-01

An indicator that exhibits male-female differences is avoidable deaths. Risks of avoidable death from preventable causes is 90% higher for males than females, and from treatable causes is 15% higher for males than females (Statistics Canada, 2017). Avoidable deaths indicate the effectiveness of health care and health promotion and disease prevention policies in preventing premature death. By definition, avoidable death counts the number of deaths for every 100,000 people that could potentially have been avoided through better treatment and prevention efforts.

In 2017, Statistics Canada estimated that one in four deaths in Canadians younger than 75 were from preventable or treatable causes. Over the past 30 years, the avoidable death rate has decreased 50% in Canada. Table 4-9 summarizes the level of avoidable deaths per 100,000 across provinces/territories in 2016 to 2018, and indicates how each of the provincial/territorial areas compares to the national average, i.e., Canada. The rate of avoidable deaths per 100,000 population in PEI is the same as the national average (Canada) when PEI and Canada values are compared: both sexes, 184 versus 190; males, 230 versus 235; and females, 140 versus 146. Three provinces performed better than Canada, namely, Quebec, Ontario and British Columbia, with the remaining ones performing worse.

TABLE 4-9 AVOIDABLE DEATHS PER 100,000 POPULATION BY SEX, PROVINCES, TERRITORIES, AND CANADA (2016-2018)178

		2018)***									
	Avoid		aths per	Comparison to national (Canada)							
		100,00	0								
Area	Both	n Males Females		Both	Males	Females					
	sexes			sexes							
CA	190	235	146	Not applicable	Not applicable	Not applicable					
NL	230	287	174	Below average	Below average	Below average					
NS	225	284	170	Below average	Below average	Below average					
NB	213	259	168	Below average	Below average	Below average					
PE	184	230	140	Same as average	Same as average	Same as average					
PQ	170	201	140	Above average	Above average	Above average					
ON	187	233	143	Above average	Same as average	Above average					
MB	230	282	180	Below average	Below average	Below average					
SK	232	285	177	Below average	Below average	Below average					
AB	210	264	156	Below average	Below average	Below average					
ВС	179	230	129	Above average	Above average	Above average					
NT	270	319	213	Below average	Below average	Below average					
NU	455	528	379	Below average	Below average	Below average					

Source: Canadian Institute for Health Information (CIHI)

Preventable mortality rates were 2.6 times higher among males than among females across OECD countries (197 per 100,000 population for males, compared with 75 per 100,000 for females). Similarly, mortality rates from treatable causes were about 40% higher among males than females 87 per 100,000 population for males compared with 62 per 100,000 for females). These gaps are attributed to higher mortality rates among males, which are linked to risk factor exposure such as tobacco smoking.

In 2017, one quarter of all deaths, or almost 3 million premature deaths across OECD countries, could have been avoided through better prevention and health care interventions where about 1.85 million were considered preventable, and over 1 million were considered treatable. The potential for avoidable mortality of the preventable type includes some cancers (32%), road accidents and suicide (25%), heart attack, stroke and other circulatory diseases (19%), alcohol and drug-related deaths (9%); and some respiratory diseases like influenza and chronic obstructive pulmonary disease (8%). The main potential for treatable types includes premature deaths from circulatory diseases mainly heart attack and stroke (36%), cancers like colorectal and breast cancers (26%), endocrine sources like diabetes and other endocrine diseases (9%), and respiratory diseases like pneumonia and asthma (9%). Primary and secondary interventions are critical to avoidable mortality (OECD, 2019).

The COVID-19 global pandemic that was well underway by March 2020 has presented a new cause of death. Table 4-10 indicates that 13,579 deaths had occurred between March and December 18, 2020, which included 6,468 males (47.6%) and 7,111 females (52.3%). In Canada, more males (2,399) than females (1,603) succumbed to COVID-19 before age 80. At age 80+ the trend reversed and more females (5,508) than males (4,073) died due to COVID-19. The ratio of male-to-female deaths started at 2.0 in youth and decreased to 0.9 by age 80+. PEI has had zero deaths (zero hospitalizations) due to COVID-19.

TABLE 4-10 DISTRIBUTION OF COVID-19 DEATHS BY SEX IN CANADA AS OF DECEMBER 18, 2020¹⁷⁹

Age (years)	Males and females	Males	Females	Better Results	M/F ratio
0-19	3	2	1	Female (1)	2.0
20-29	18	11	7	Female (4)	1.5
30-39	33	23	10	Female (13)	2.3
40-49	90	59	31	Female (28)	1.9
50-59	341	197	144	Female (53)	1.3
60-69	995	626	369	Female (257)	1.6
70-79	2,518	1,477	1,041	Female (436)	1.4
80+	9,581	4,073	5,508	Male (1,435)	0.7
Total:	13,579	6,468	7,111	Male (643)	0.9

Source: Government of Canada Health, Infobase

The trend in male-female deaths across the lifespan is graphically noted in Figure 4-1. As stated earlier, all deaths occurred in provinces other than PEI.

Male Female Other n = 3 (0.0%) 20-29 n = 18 (0.1%) Age group (years) n = 33 (0.2%) = 90 (0.7%) n = 341 (2.5%) n = 995 (7.3%) 70-79 n = 2,518 (18.5%) n = 9,581 (70.6%) 80+ 1.000 3,000 10,000 2.000 8.000 11.000 5.000 Number (Proportion (%))

FIGURE 4.1 AGE AND GENDER DISTRIBUTION OF COVID-19 CASES DECEASED IN CANADA AS OF DECEMBER 18, 2020¹⁸⁰

Source: Government of Canada Health, Infobase

Table 4-11 displays age standardized mortality rates for both sexes, males, and females for the years 2016 through 2019 to provide a sense of variation across time. Inspection of the four-year trends reveals the level of variation that occurs across years, across causes, and across the sexes.

TABLE 4-11 DEATHS: AGE				sexes		Males				Females			
		Ag	e-standardize per 100,000	ed mortality Opopulation		Age	standardize per 100,000		ate	Age	-standardiz per 100,000	ed mortality O population	
Cause of death (ICD-10)	Are a	2016	2017	2018	2019	2016	2017	2018	2019	2016	2017	2018	2019
Total, all causes of death A00-Y89]	PE	661.2	742.1	722.4	729.8	861.2	986.6	886.5	905.8	522.4	589.3	593.1	586.1
	CA	664.4	668.3	671.8	655.1	800.2	806.9	802.4	783.8	557.1	557.8	564.5	549.1
Better area outcome (by?)		PE (3.8)	CA (73.8)	CA (50.6)	CA (74.7)	CA (61)	CA (179.7)	CA (84.1)	CA (122)	PE (34.7)	CA (31.5)	CA (28.6)	CA (37.0)
Malignant neoplasms [C00-C97]	PE	185.2	221.6	200.1	190.2	242.1	282.5	249.9	264.9	151.2	187.2	163.4	135.2
[C00-C97]	CA	198.6	195	190	186.1	235.2	231.9	224.9	222	172.6	168.3	164.1	159.5
Better area outcome (by?)		PE (13.4)	CA (26.6)	CA (10.1)	CA (4.1)	CA (6.9)	CA (50.6)	CA (25.0)	CA (42.9)	PE (21.4)	CA (18.9)	PE(0.7)	PE (24.3)
Diabetes mellitus [E10- E14]	PE	8.8	16.1	11.7	17.8	12.2	21.8	23.2	24.5	5.3	11.6	2.8	11.8
-1.1	CA	17	16.7	16.1	16	21.4	21.8	20.4	20.5	13.5	12.6	12.6	12.3
Better area outcome (by?)		PE (8.2)	PE (0.6)	PE (4.4)	CA (1.8)	PE (9.2)	SAME	CA (2.8)	CA (4.0)	PE (8.2)	PE (1.0)	PE (9.8)	PE (0.5)
Alzheimer's disease [G30]	PE	10.6	10.4	3.7	7.5	17.1	10.3	5.0	5.6	7.3	10.2	2.7	8.4
	CA	15.6	15.5	14.6	13.7	13.5	13.4	12.6	11.6	16.8	16.5	15.8	14.9
Better area outcome (by?)		PE (5.0)	PE (5.1)	PE (10.9)	PE (6.2)	CA (3.6)	PE (3.1)	PE (7.6)	PE (6.0)	PE (9.5)	PE (6.3)	PE (13.1)	PE (6.5)
Major cardiovascular diseases [100-178]	PE	189.2	215.7	205.4	203.3	218.7	304.3	249.1	266.4	157.5	159.6	166.4	155.0
uiscuses [100 170]	CA	170.4	170.2	165.8	160.9	212.4	214.3	206.1	199.4	136.3	134.4	132.4	128.8
Better area outcome (by)?		CA(18.8)	CA (45.5)	CA (39.6)	CA (42.4)	CA (6.3)	CA (90.0)	CA (43.0)	CA (67.0)	CA (21.2)	CA (25.2)	CA (34.0)	CA (26.2)
Influenza and pneumonia	PE	21.5	22.5	24.3	22.4	28.0	39.3	33.8	29.8	18.9	14.9	17.6	16.7
[J09-J18]	CA	15.1	17.2	19.5	15.5	18.5	20.3	23.1	18.4	12.9	15.3	17.0	13.3
Better area outcome (by?)		CA (6.4)	CA (5.3)	CA (4.8)	CA (6.9)	CA (9.5)	CA (19.0)	CA (10.7)	CA (11.4)	CA (6.0)	PE (-0.4)	CA (0.6)	CA (3.4)
Chronic lower respiratory diseases [J40-J47]	PE	40.7	35.7	41.8	41.2	62.7	46.8	52.7	46.5	28.1	27.7	33.4	38.9
uiseases [J40-J47]	CA	30.3	30.7	30.4	29.1	36.9	36.2	35.7	33.9	26.2	27.1	27.0	25.9
Better area outcome (by?)		CA(10.4)	CA (5.0)	CA (11.4)	CA (12.1)	CA (25.8)	CA (10.6)	CA (17)	CA (12.6)	CA (1.9)	CA (0.6)	CA (6.4)	CA (13.0)
Chronic liver disease and	PE	8.2	9.9	10.9	8.1	10.3	11.6	15.4	11.6	6.3	7.9	6.5	4.7
cirrhosis [K70, K73-K74]	CA	8.7	8.6	8.7	8.9	11.9	11.5	11.5	12.0	5.9	6.0	6.2	6.0
Better area outcome (by?)		PE (0.5)	CA (1.3)	CA (2.2)	PE (0.8)	PE (1.6)	CA (0.1)	CA (3.9)	PE (0.4)	CA (0.4)	CA (1.9)	CA (0.3)	PE (1.3)

			Both	sexes			Ma	les			Fen	nales	
		Age-standardized mortality rate per 100,000 population				Age-standardized mortality rate per 100,000 population				Age-standardized mortality rate per 100,000 population			
Cause of death (ICD-10)	Are a	2016	2017	2018	2019	2016	2017	2018	2019	2016	2017	2018	2019
Nephritis, nephrotic	PE	6.8	8.3	8.8	9.1	10.1	11.5	9.8	13.1	5.6	6.9	8.5	6.2
syndrome and nephrosis [N00-N07, N17-N19,N25- 27]	CA	7.5	7.8	8.4	8.5	9.3	9.9	10.1	10.7	6.2	6.4	7.2	7
Better area outcome (by?)		PE (0.7)	CA (0.5)	CA (0.4)	CA (0.6)	CA (0.8)	CA (1.6)	PE (0.3)	CA (2.4)	PE (0.6)	CA (0.5)	CA (1.3)	PE (0.8)
All other diseases	PE	93.4	100.4	93.2	95	112.6	128.9	91.2	94.8	80.6	82.6	93.6	91.7
(residual)25	CA	95.1	99.6	102.6	103.5	100.8	104.9	106.7	108	89.8	94.6	98.2	98.8
Better area outcome (by?)		PE (1.7)	CA (0.8)	PE (9.4)	PE (8.5)	CA (11.8)	CA (24)	PE (15.5)	PE (13.2)	PE (9.2)	PE (12)	PE (4.6)	PE (7.1)
Accidents (unintentional injuries) [V01-X59, Y85-	PE	29.9	24.1	26.6	33.2	46.9	36.7	34.9	46.9	18.4	14.3	19.7	21.1
Y86]	CA	32.4	35.5	33.1	33.3	43.2	48.5	43.4	43.1	22.6	23.5	23.5	24.2
Better area outcome (by?)		PE (2.5)	PE (11.4)	PE (6.5)	PE (0.1)	CA (3.7)	PE (11.8)	PE (8.5)	CA (3.8)	PE (4.2)	PE (9.2)	PE (3.8)	PE (3.1)
Intentional self-harm	PE	6.4	11.0	4.7	11.5	13.1	15.2	8.3	19.9	1.1	7.1	1.1	3.7
(suicide) [X60-X84, Y87.0]	CA	11	11.4	10.4	10.7	16.5	17.2	15.8	16.5	5.7	5.8	5.1	5.1
Better area outcome by jurisdiction (by?)		PE (4.6)	PE (0.4)	PE (5.7)	CA (0.8)	PE (3.4)	PE (2.0)	PE (7.5)	CA (3.4)	PE (4.6)	CA (1.3)	PE (4)	PE (1.4)

Source: Statistics Canada Table 13-10-0800-01

Health Diseases and Conditions

Nine commonly occurring health conditions are listed in Table 4-12. These chronic diseases, also referred to as non-communicable diseases (NCDs), include the four most prominent chronic diseases nationally and internationally – cardiovascular diseases, cancer, chronic obstructive pulmonary disease, and diabetes. 182 Other conditions such as high blood pressure, overweight and obesity, and mood disorders develop biological linkages that can cause and/or worsen the four most prominent diseases.¹⁸³ Most chronic diseases affect males and females somewhat differently. Examples are prevalence (ischemic heart disease in males and mood and/or anxiety disorders in females), health behaviours (females more compliant than males), life expectancy (females outlive males), and illness at end of life (females live longer in ill health than males).¹⁸⁴

In PEI and Canada, five diseases affected between 15% and 42% of males and females: adult overweight, adult obesity, youth overweight or obesity, high blood pressure and arthritis. Rounding figures, the remaining four diseases affected approximately 5% to 10% of males and females (diabetes, asthma, COPD and mood disorder). Compared to males, females in PEI and Canada respectively reported a better (lower) percentage of adult overweight (10.8% versus 10.2%), adult obesity (0.8% versus 2.2%), youth overweight or obesity (10.0% versus 8.4%), high blood pressure (11.6% versus 1.1%), diabetes (2.6% versus 2.0%), and PEI females reported a lower percentage of COPD than PEI males (1.4%). Males living in PEI and Canada reported a better (lower) percentage of arthritis (5.3% versus 6.3%), asthma (5.5% versus 2.1%), and mood disorder (5.6% versus 4.5%) than PEI females. Canada males reported a barely lower percentage of COPD than PEI males (0.4%).

Comparing PEI females to Canada females, Canada females experienced lower percentages of all nine diseases (0.9% to 9.0%) with one exception – PEI females reported less youth overweight or obesity (3.0%). Absolute differences in the percentage of respondents reporting a particular chronic disease were reported for 27 comparisons in the table (i.e., 9 PEI males versus PEI females, 9 Canada males versus Canada females, and 9 PEI females versus Canada females). In the male to female comparisons, 11 out of 18 comparisons favoured females and 7 out of 18 comparisons favoured males.

In the jurisdictional comparisons, Canada female outcomes were better than PEI females' outcomes for 8 out of 9 diseases, i.e. all except 1 out of 9, i.e., youth overweight or obesity, where PEI female outcomes were better than Canada females' outcomes. Overall, absolute differences were found for all 27 comparisons where the difference ranged from a minimum of 0.2% to a maximum of 9.0%. However, statistical differences (p<0.05) were reported in only three comparisons (which were outside the scope of the 27 comparisons relevant to this study). For adult obesity, the percentage of PEI males and Canada males (34.3% versus 28.0%) and the percentage of PEI females and Canada females (33.5% versus 25.8%) were each significantly different. The third statistically significant difference was between PEI males and Canada males reporting COPD (7.2% versus 4.0%).

TABLE 4-12 HEALTH DISEASES AND CONDITIONS BY SEX FOR ALL AGES 12 AND OVER (OR AS STATED) IN ATLANTIC PROVINCES AND CANADA (PERCENT)¹⁸⁵ Lower values are better values.

	Metric	Location	Both Sexes	Male	Female	Better results in PEI male or female by how much%	Better female results in PEI or Canada, by how much%
Overweight (as above, 18 and over)	Rate Rate	PE CA	36.5% 36.1%	42.0% 41.2%	31.2% 31.0%	Female (10.8%) Female (10.2%)	Canada (0.2%)
Obese (as above, 18 and over)	Rate Rate	PE CA	33.9% ⁺¹ 26.9%	34.3% ⁺¹ 28.0%	33.5% ⁺¹ 25.8%	Female (0.8%) Female (2.2%)	Canada (9.0)
Body Mass Index, overweight or obese, youth (age 12-17 years)	Percent Percent		23.3% ^E 25.8%	28.4% ^E 29.8%	18.4% ^E 21.4%	Female (10.0%) Female (8.4%)	PEI (3.0%)
High blood pressure (diagnosed by a health professional)	Rate Rate	PE CA	19.8% ⁺¹ 17.4%	20.6% 18.0%	19.0% 16.9%	Female (1.6%) Female (1.1%)	Canada (2.1%)
Arthritis (diagnosed by a health professional)	Rate Rate	PE CA	20.8% 19.1%	18.1% 15.9%	23.4% 22.2%	Male (5.3%) Male (6.3%)	Canada (1.2%)
Diabetes (diagnosed by a health professional) 133	Percent Percent		8.8% ⁺¹ 7.2%	10.1% 8.2%	7.5% 6.2%	Female (2.6%) Female (2.0%)	Canada (1.3%)
Asthma (diagnosed by a health professional)	Rate Rate	PE CA	8.6% 8.1%	5.8% ^E 7.0%	11.3% 9.1%	Male (5.5%) Male (2.1%)	Canada (2.1%)
Chronic obstructive pulmonary disease (diagnosed by a health professional as having COPD, emphysema or bronchitis)	Percent Percent		6.5% ⁺¹ 4.2%	7.2% ⁺¹ 4.0%	5.8% ^{E2} 4.4%	Female (1.4%) Male (0.4%)	Canada (1.4%)
Mood Disorder	Percent Percent		9.9% 8.8%	7.0% 6.5%	12.6% 11.0%	Male (5.6%) Male (4.5%)	Canada (1.6%)

Source: Statistics Canada Table 13-10-0113-01

In contrast to previous tables that were read top to bottom, Table 4-13 is designed to be read horizontally. Reading horizontally (green rows), one can see which sex has the better results for each health outcome within a particular province. Reading vertically, one can see if males or females did better for a particular health outcome. Looking vertically at the diseases, one sees that females consistently (in 5/5 jurisdictions) had better outcomes than males for adult overweight, diabetes and high blood pressure, while males consistently (5/5) had better outcomes for arthritis, asthma and mood disorder. For the remaining three conditions, females reported better results than males in most of the five jurisdictions (bracketed): adult obesity (4/5), youth overweight or obesity (4/5), and COPD (3/5).

Looking horizontally across the provinces for the jurisdictional performance, neither sex reported favourable results for all diseases in any of the five jurisdictions. However, females reported more favourable outcomes than males for 6 out of 9 diseases in PEI and NL, 5 out of 9 diseases in NS and CA, and 4 out of 9 diseases in NB, and the male-female outcomes were mixed within the four Atlantic Provinces. Note that when each comparison between PEI females and Canada females was tested statistically (p<0.05) a significant difference existed between PEI and Canada in only one instance (denoted by +1); i.e., adult obesity was reported by a greater percentage of females living in PEI (33.5%) than Canada (25.8%). Other PEI-Canada female differences exist numerically but are not statistically significant.

TABLE 4-13 HEALTH DISEASES AND CONDITIONS REPORTED BY SEX, ATLANTIC PROVINCES AND CANADA (PERCENT)186

				Health	Condition	or Disease				
Area	Sex / Better Outcome	Arthritis	Asthma	BMI 18 years & over, overweight	BMI 18 years & over, obese	BMI 12-17 years, overweight or obese	COPD	Diabetes	High Blood Pressure	Mood Disorder
PE	М	18.1	5.8E	42.0	34.3+1	28.4E	7.2+1	10.1	20.6	7.0
	F	23.4	11.3E	31.2	33.5+1	18.4E	5.8E	7.5	19.0	12.6
	Better outcome	Male (5.3)	Male (5.5)	Female (10.8)	Female (0.8)	Female (10.0)	Female (1.4)	Female (2.6)	Female (1.6)	Male (5.6)
NL	М	22.7+1	4.9E; -1	38.0	41.1+1	40.1+1	6.4+1	9.4	24.6+1	7.1
	F	31.4+1	9.3	35.6	37.2+1	28.2	5.4	8.7+1	22.0+1	11.3
	Better outcome	Male (8.7)	Male (4.4)	Female (2.4)	Female (3.9)	Female (11.9)	Female (1.0)	Female (0.7)	Female (2.6)	Male (4.2)
NS	М	24.2+1	7.4	39.1	35.3+1	27.1	6.4+1	10.0+1	23.3+1	8.7+1
	F	28.6+1	10.1	32.2	33.0+1	28.6	6.3+1	7.1	20.1	15.8+1
	Better outcome	Male (4.4)	Male (2.7)	Female (6.9)	Female (2.3)	Male (1.5)	Female (0.1)	Female (2.9)	Female (3.2)	Male (7.1)
NB	М	23.2+1	7.2	39.1	35.6+1	34.3	6.0+1	11.8+1	24.5+1	7.3
	F	26.9+1	10.5	33.0	37.4+1	27.8	6.1+1	8.7+1	22.3+1	10.8
	Better outcome	Male (3.7)	Male (3.3)	Female (6.1)	Male (1.8)	Female (6.5)	Male (0.1)	Female (3.1)	Female (2.2)	Male (3.5)
CA	М	15.9	7.0	41.2	28.0	29.8	4.0	8.2	18.0	6.5
	F	22.2	9.1	31.0	25.8	21.4	4.4	6.2	16.9	11.0
	Better outcome	Male (6.3)	Male (2.1)	Female (10.2)	Female (2.2)	Female (8.4)	Male (0.4)	Female (2.0)	Female (1.1)	Male (4.5)

Source: Statistics Canada Table 13-10-0113-01

Chronic Diseases: Outcomes by Level of Risk in Provinces and **Territories**

The Public Health Agency of Canada promotes gender-based analysis through the newly developed, sophisticated, and collaborative Canadian Chronic Disease Surveillance System (CCDSS). Reading Table 4-14 from top to bottom, sex-disaggregated outcomes are presented for thirty chronic diseases categorized by CCDSS as cardiovascular diseases (6), chronic respiratory diseases (2), mental illness (4), diabetes (1), musculoskeletal disorders (12), and neurological conditions (5). Reading left to right, sex-disaggregated (i.e., both sexes, males, females) outcomes are shown for all provinces, territories, and Canada using unique intuitive colour-coding system based on the Red/Amber/Green system. Applying the well-known RAG system, red indicates high risk (trouble; treatment may be required), three shades of orange indicate levels of moderate risk (danger; monitor condition), and green indicates low risk (good; maintain preventive practices). Therefore, CCDSS paints a picture of population level health across the nation with regard to the major chronic diseases that are included in most studies.

Comparison of male and female figures in Table 4-14 indicates that, of the 30 indicators, males have consistently higher prevalence of chronic disease than females for 16 indicators (M>F), and consistently lower rates for the remaining 14 indicators (M<F). The chronic diseases for which females experience higher rates than males (M<F) include rheumatoid arthritis, asthma, COPD, osteoporosis, two mental health service indicators, six types of fractures, dementia and multiple sclerosis.

TABLE 4-14 COMPARISON OF MALE AND FEMALE OUTCOMES FOR 30 CHRONIC DISEASES SHOWING PERCENTS/RATES AND LEVEL OF RISK, PROVINCES, TERRITORIES, AND CANADA¹⁸⁷ Starred (*) indicators are expressed as percent except when expressed as rate per 100,000 for stated sex category (hoth sexes males or females)

Femal 1	Disease/Condition	Sex	Distr	Distribution of risk	Ħ	# b/	^			ح	ada/P	rovince	/Territo	>					
)		роэ	s across			or <				٥ ر	Z	AB S		BC	YK	NT	N	
Note Street Str	der)*	Femal	1	7										9.20	9.10	9.18	12.8 8	26.4	
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Femila 1	:h mental	Both	2	7	0	12		15.1 1	<u>ق</u>				6.4	14.0	18.1	17.1	11.9 8	10.3 0	
Fernal 4 7 1 12 12 17 10 11 12 10 11 11 11 11	500	Male	2	7	0		M <f< td=""><td>13.1 2</td><td></td><td></td><td></td><td></td><td>3.6</td><td>13.7</td><td>14.8</td><td>14.4</td><td>10.3</td><td>8.78</td><td></td></f<>	13.1 2					3.6	13.7	14.8	14.4	10.3	8.78	
Both C 1 1 1 1 1 1 1 1 1	orders e 1 year	Femal	4	7	П	12							9.5	18.3	21.3	19.7	13.6	11.9	
Hole C 4 2 11 12 Mof 4.70 9.7 12 16.8 14.4 8.50 13.4 13.8 14.2 14.4 13.1 8.55 13.4 13.8 14.2 14.4 13.1 13.5 14.5 14.4 13.1 13.5 14.5 14.4 13.1 13.5 14.	h: mood	Both	4	7	1	12		10.2 9					2.5	11.3	11.5	68.6	6.64	4.75	
Femal 3 8		Male	9	4	2		M <f< td=""><td></td><td></td><td></td><td></td><td></td><td>.22</td><td>8.40</td><td>8.58</td><td>6.73</td><td>4.40</td><td>3.34</td><td></td></f<>						.22	8.40	8.58	6.73	4.40	3.34	
South Sout	nnual) e 1 year	Femal	m	∞	1							_	2.8	14.2	14.4	13.1 3	8.95	6.27	
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South Co 3 9 12 12 MAPF Co 0.49 Co	der)*	Femal		10	1 4									0.67	0.87	0.31	89.0	1.71	
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Femal - 2 10 12 12 12 13 13 10.15 13 10.15 13 10.15 13 10.15 13 10.15 13 10.15 13 13 13 13 13 13 13		Male	0	6			M>F						.49	0.41	0.65	0.43	0.42	1.26	
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/Provir	NO	1.26	2.14	0.43		1.28	0.82	1.71	6 3 1	5.63	603	6.0	10.8	3.61	17.1	601	403	292	124	95	147	230	125	325	91.2	62.4	113	6	57.3	131	116	107	122
Canada/Province/Territory	PQ	0.83	1.34	0.39		0.87	0.58	1.14	4 47	3 83	7.05		12.3	6.02	17.8	513	371	625	120	93	138	138	78	190	46.3	32.8	54	88	50.3	120	148	137	155
O	NB	1.53	2.49	0.62		99.0	0.41	06.0	7 79	6.81	27.2	67.6	6.09	1.51	10.0	591	402	744	154	112	184	176	86	246	47.8	33.0	26	52	23.7	92	199	167	226
	NS	1.71	2.75	0.76			0.64 (1.39 (. 05 9				8.35	2.91	3.05	536	319	717	125		158	178	81	566	67.3	42.9	84	102	51.6	145			112
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Disease/Condition		Gout and crystal	arthropathies	(active) (percent, age 20	years and older)*	Rheumatoid	arthritis	(percent, age 16 years and older)*	Use of health	services arthritis	(annual) -	(percent, age 20 years and older)*	Osteoporosis (percent, age 40	years and older)*		ANY FRACTURE	(annual)	(per 100,000, age 40 years and older)*	Hip fracture	(annual)	(per 100,000, age 40 years and older)*	Forearm fracture	(annual) (per 100,000, age 40	years and older)*	Pelvic fracture	(annual)	(per 100,000, age 40 years and older)*	Humerus fracture	(annual), (per	100,000, age 40 years and older)*	Spine fracture	(annual) (per	100,000, age 40

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Source: Canadian Chronic Disease Surveillance System (CCDSS)

The level of risk (RAG) was compared between males and females for the fourteen jurisdictions reported by CCDSS. For each of the 30 chronic disease indicators, the male and female rows of data were examined, and the number of each of the five colours assigned to each sex by CCDSS was recorded by jurisdiction. The male-to-female ratio was computed for each colour code. A ratio greater than one indicates that the colour code was assigned more often to males than females, i.e. 24 blue cells. A ratio less than one indicates that the code was assigned less often to males than females, i.e., 38 pink cells. A ratio of one indicates equality, or the colour code was used a similar number of times for males as females across the 30 diseases, i.e., 10 yellow cells (Table 4-15).

While Table 4-15 indicated that disease risk outcomes for males and females followed consistent patterns by disease and did so across all jurisdictions (with very few exceptions) the same is not true when examining level of risk across diseases and sex (Table 4-15). The red higher risk code was applied to males more often than females (8 versus 3). The green (and yellow) lower risk code was applied to females more often than males (10 versus 0). In fact, the green code was not applied to males using this high level analysis. The amber level of risk (yellow, gold, and orange) was applied equally to males and females based on male-to-female ratio of colour code use (16 pink versus 16 blue with 4 yellow). By this criterion, males are more in need of treatment for chronic disease than females, and the challenge for females is to maintain their lower risk status.

For disease-specific risk, patterns refer to the colour code patterns in Table 4-15. Remember that the ratios are summary numbers reflecting 30 diseases described in Table 4-14. With regard to PEI, greater proportions of males than females are experiencing high risk chronic disease though the ratio (1.1) is barely above one. Sub-groups of females are experiencing moderately high risk (orange; 0.4 ratio) so that monitoring or screening may be the level of intervention at present. Compared to Canada, PEI has more favourable ratios except for the lower risk colour codes (yellow and green). The minimum (0.3) and maximum (5.0) male-to-female ratios reflect a wide range of disease activity.

Table 4-15 MALE-TO-FEMALE RATIOS FOR CHRONIC DISEASE RISK LEVEL USING COLOUR CODE COUNTS, PROVINCES, TERRITORIES, AND CANADA¹⁸⁸

Risks						Jurisdi	ictions	;					Ra	tios
Colour	CA	PE	NL	NB	PQ	ON	MB	AB	ВС	YK	NT	NU	Minimum	Maximum
Red	1.5	1.1	1.8	1.0	0.5	1.3	1.4	1.3	5.0	3.5	0.8	0.6	0.5	5.0
Orange	1.0	0.4	0.3	0.7	1.6	0.5	0.8	1.3	1.1	0.4	0.6	0.7	0.3	1.6
Gold	1.8	1.3	1.2	1.4	1.3	1.5	1.0	0.6	0.8	0.8	4.0	1.7	0.6	4.0
Yellow	0.8	1.7	1.0	0.5	0.8	1.0	0.7	1.1	2.7	1.0	0.7	1.0	0.5	2.7
Green	0.4	0.6	0.9	1.0	0.7	0.5	0.8	0.5	0.4	0.8	0.4	1.0	0.4	1.0
TOTAL:	0.9	0.9	1.0	0.9	0.9	0.9	1.0	1.0	1.1	0.9	0.8	0.9	0.8	1.1

Source: Canadian Chronic Disease Surveillance System (CCDSS)

Broadly speaking and based on the row percentages for male and female sexes, the overall RAG or risk pattern described in the table is 15%-25% high risk (red), 50%-70% moderate risk (yellow), and 15%-20% low risk (green) with a few notable disease exceptions and sex exceptions within colour codes. First, examination of the high risk category (red) indicates that approximately 15% to 25% of the population in each chronic disease category experiences high risk with little variation across categories (about 5%) thereby suggesting a uniform level of high risk across disease categories in PEI. However, the high risk code has one very noticeable disease exception: diabetes.

Half of the population or 50% of both sexes living with diabetes experience high risk, which is higher for males (60%) and lower for females (40%). While diabetes is the most heavily represented disease in the high risk category, musculoskeletal disorders are the least heavily represented. For the musculoskeletal disorder category (composed of twelve different diseases/conditions), 12.6% of both sexes experience high risk with the risk unevenly divided between males (15.8%) and females (9.5%).

Second, examination of the amber moderate risk category that broadly speaking affects 50% to 70% of the disease population in PEI indicates disease category differences (e.g., 50% for cardiovascular and diabetes, 60% for mental illness, and 65%-70% for chronic respiratory, musculoskeletal and neurological conditions) with little difference between the sexes (about five percentage points). For this amber or moderate risk code, sex differences are pronounced for two categories, the chronic respiratory category (66.7% both sexes split 58.3% female and 75.0% male) and the diabetes category (50.0% both sexes split 41.7% males and 58.3% females).

Third, in PEI the green or low risk code exhibits much more variation than the high risk or moderate risk codes. Stunningly, none (0%) of the diabetes category is described as low risk, i.e., 0% males and 0% females. And, only 10.4% of the population in the chronic respiratory diseases category is described as low risk with females more likely than males to be low risk. The disease category accounting for the highest proportion of low risk is cardiovascular disease suggesting that some combination of disease severity and disease management measures is serving these persons well. Green code applies to about 20% of the population (both sexes) in the remaining disease categories, namely, mental, musculoskeletal, and neurological where females are markedly more likely than males to have low risk for mental illness and musculoskeletal but not neurological disease. In the low-risk situation, females' situation is more favourable than males'. In summary, based on RAG codes assigned to Prince Edward Islanders using health care services and tracked by CCDSS, the moderate risk amber code applies to the majority (about 60%) with the remainder almost equally divided between high risk red (20%) and low risk green (20%).

TABLE 4-16 PERCENTAGE DISTRIBUTION OF RED, ORANGE, AND GREEN RISK CODES BY DISEASE CATEGORY AND SEX, PEI (IN ROW PERCENTS)¹⁸⁹

Disease	THOW I ENCE	Re	ed	Ar	nber	Gr	een	All C	olours
Category (number of diseases)	Sex	#	%	#	%	#	%	#	%
Cardio-	Male	12	16.9%	36	50.0%	23	32.4%	71	100%
vascular	Female	12	16.9%	33	46.5%	26	36.6%	71	100%
Diseases (6)	Both:	24	16.9%	69	48.6%	49	34.5%	142	100%
Chronic	Male	5	20.8%	18	75.0%	1	4.2%	24	100%
Respiratory	Female	6	25.0%	14	58.3%	4	16.7%	24	100%
Diseases (2)	Both:	11	22.9%	32	66.7%	5	10.4%	48	100%
Mental Illness	Male	12	25.0%	29	60.4%	7	14.6%	48	100%
(4)	Female	8	16.7%	27	56.3%	13	27.1%	48	100%
	Both:	20	20.8%	56	58.3%	20	20.8%	96	100%
Diabetes (1)	Male	7	58.3%	5	41.7%	0	0.0%	12	100%
	Female	5	41.7%	7	58.3%	0	0.0%	12	100%
	Both:	12	50.0%	12	50.0%	0	0.0%	24	100%
Musculoskelet	Male	21	15.8%	93	69.9%	19	14.3%	133	100%
al Disorders	Female	13	9.5%	95	69.3%	29	21.2%	137	100%
(12)	Both:	34	12.6%	188	69.6%	48	17.8%	270	100%
Neurological	Male	7	13.2%	35	66.0%	11	20.8%	53	100%
Conditions (5)	Female	10	18.9%	34	64.2%	9	17.0%	53	100%
	Both:	17	16.0%	69	65.1%	20	18.9%	106	100%
TOTAL (30):	Male	64	18.8%	216	63.3%	61	17.9%	341	100%
	Female	54	15.7%	210	60.9%	81	23.5%	345	100%
	Both:	118	17.2%	426	62.1%	142	20.7%	686	100%

Source: Canadian Chronic Disease Surveillance System (CCDSS)

Cancer

The incidence rate of new cases of all primary cancers in both sexes was similar in PEI and Canada in 2017 – that is, 495.9 in PEI and 514.0 in Canada (expressed as age-standardized rate per 100,000). When expressed as the number of persons, this represented 930 Islanders and 149,415 Canadians (Table 4-17). Disaggregating or separating the sexes, the male cancer rate was 594.9 in PEI and 541.6 in Canada (a difference of 53.3 per 100,000 in favour of Canada males), and the female cancer rate was 453.0 in PEI and 461.6 in Canada (a difference of 8.6 in favour of PEI females).

When these incidence rates were compared across sexes the female rates were lower and better than the male rates in both PEI (453.0 versus 594.9) and Canada (461.6 versus 541.6), with a notable difference in each jurisdiction being 141.9 lower in PEI and 80.0 per lower in Canada (per 100,000). The female rate was better than the male rate whether comparing the female rates across PEI and Canada (453.0 versus 461.6, lower is better) or comparing male-female differences across PEI and Canada (141.9 versus 80.0, higher is better). In PEI, female cancer rates were slightly lower than male cancer rates for colorectal and rectal cancer (51.1 versus 70.1), and lung and bronchus cancer (72.5 versus 83.6), and the same trend occurred in Canada (43.9 versus 62.4 and 56.2 versus 63.4, respectively).

PEI rates for females were more favourable than Canada rates for both colorectal and lung cancers. The breast cancer rate was slightly better for PEI females than Canada females (110.7 versus 125.2), a difference of 14.5. The prostate rate was worse for PEI males than Canada males (143.5 versus 120.4), a difference of 23.1. These rates represent 130 females diagnosed with breast cancer and 100 males diagnosed with prostate cancer. Prostate cancer is a disease of male organs. Breast cancer primarily affects female breasts, with fewer than 10 cases affecting male breasts in the last ten years in PEI. 190

TABLE 4-17 AGE-STANDARDIZED RATES AND NUMBER OF NEW CASES OF MOST COMMON PRIMARY CANCERS, PEI AND CANADA (INCIDENCE RATE IS PER 100,000)¹⁹¹

Both sexes	Area	Male	Female	Better results in male or female (by X difference in rates)	Better female results in PEI or Canada (by x difference in rates)	Bot Rate (per 100,000	:h sexes Number of new cases
Total, all primary	PE	594.9	453.0	Female (141.9)	Canada (61.9)	514.0	930
cancer sites	CA	541.6	461.6	Female (80.0)		495.9	149,415
Colon and	PE	70.1	51.1	Female (19.0)	Canada (0.5)	59.7	105
rectum	CA	62.4	43.9	Female (18.5)		52.6	15,870
Lung and	PE	83.6	72.5	Female (11.1)	Canada (3.9)	77.0	145
bronchus	СА	63.4	56.2	Female (7.2)		59.2	18,220
Breast	PE		110.7	Not applicable	PEI (14.5)	59.2	100
	CA	1.1	125.2	Not applicable		65.6	19,330
	PE	143.5		Not applicable	Canada (23.1)	67.2	130
Prostate	CA	120.4		Not applicable		56.9	17,655

Source: Statistics Canada Table 13-10-0747-01

Table 4-18 shows a list of common cancers. Using absolute numbers, the incidence rate of new cases of all primary cancers (primary referring to the original site where cancer began) is 594.9 males and 453.0 females per 100,000 population in PEI (difference: 141.9) compared to 541.6 males and 461.6 females per 100,000 population in Canada (difference: 80.0). By jurisdiction, the male-female difference is 141.9 points in PEI, almost double the 80.0 point difference that exists between male and female incidence rates in Canada. By sex, females living in PEI experience a lower rate of all types of cancer than females living in Canada (141.9 versus 80.0, respectively) while males living in PEI experience a higher rate of all types of cancer than males living in Canada (594.9 versus 541.6, respectively). By sex, rates are similar for males (594.9 versus 541.6) and for females (453.0 versus 461.6), respectively. Therefore, sex or gender appears to be more important than geography in determining the incidence rate for new cancers. In summary, when considering all types of cancer, the rate for new cases among PEI females (453.0) are slightly more favourable than among Canada females (461.6) or markedly more favourable than among PEI males (594.9). The age-standardized incidence rates or ASIRs allow rates to be compared with reliability across time and place despite the rounding error that occurs when comparing jurisdictions having vastly different sizes of population, e.g., PEI, 159,713 versus Canada, 38,008,005 with a 238-fold difference in population. 192

When the individual types of cancer listed in Table 4-18 are considered, the female incidence rates are preferable to male incidence rates in both PEI and Canada with only two exceptions, i.e., myeloma and thyroid. For 17 of the 22 types of cancer listed, female rates are better than male rates in both PEI and Canada. Regarding the level of difference (and excluding breast cancer which can affect both sexes), in PEI, the male-female difference ranged from 2.2 (pancreas) to 33.4 (bladder) while in Canada the difference ranged from 2.4 (brain) to 31.3 (bladder). For one cancer, thyroid, the incidence rate appears better for males than females in both PEI and Canada. For breast cancer, the one sex organ cancer that can affect more than one sex, in Canada the female breast cancer incidence rate is 125.2 and the male rate is 1.1 (difference: 124.1) while in PEI the female breast cancer incidence rate is 110.7 and males have experienced fewer than ten cases of breast cancer in the past ten years.

For the five cancers specific to male or female sex organs where only jurisdictional comparisons are possible, rates for Canada males and Canada females are preferable to their PEI counterparts. For example, male prostate rates are 120.4 for males living in Canada compared to 143.5 for males living in PEI (difference: 23.1). Male testis cancer rates cannot be compared across jurisdictions due to lack of data. With regard to cancers of female organs, the Canada rates are lower and better than the PEI rates for uterus (33.8 versus 41.4; difference, 7.6), cervix (7.8 versus 10.7; difference, 3.7) and ovary (12.6 versus 12.5, difference, 0.1). In summary, in PEI fewer females than males were diagnosed with 15 of the 17 cancers affecting more than one of the sexes except breast cancer and thyroid cancer. The five sex-organ-specific cancers were, of course, diagnosed more often in the sex the organs are associated with, i.e., males (prostate and testis) and females (breast, cervix, ovary). Cancer affects males and females differently due to biological factors, risk factors, and/or health behaviours, according to "Canadian Cancer Statistics 2019." The incidence statistics reported in this section originate with the Canadian Cancer Registry (CCR), one of the highest quality national populationbased cancer systems in the world. 194 The CCR includes data collected and reported to Statistics Canada by each Provincial/Territorial Registry. Rates are expressed as the number of new cancer cases per 100,000 people (i.e., age-standardized incidence rates, ASIR).

TABLE 4-18 INCIDENCE RATES FOR PRIMARY CANCER, PEI AND CANADA (2017) (age-standardized per 100,000 population)195

				PEI			Ca	nada	
Common cancers	Code	Both	Male	Female	Better (by)	Both	Male	Female	Better (by)
All primary	C00-C80.9	514.0	594.9	453	F (141.9)	495.9	541.6	461.6	F (80.0)
Prostate	C61.9	67.2	143.5			56.9	120.4		•••
Breast	C50.0-C50.9	59.2		110.7		65.6	1.1	125.2	M (124.1)
Lung	C34.0-C34.9	77.0	83.6	72.5	F (11.1)	59.2	63.4	56.2	F (7.2)
Colorectal	C18.0-C18.9,	59.7	70.1	51.1	F (19.0)	52.6	62.4	43.9	F (18.5)
Bladder	C67.0-C67.9	25.8	44.7	11.3	F (33.4)	24.9	41.9	10.6	F (31.3)
Non-Hodgkin Lymphoma	All that were listed by Statistics	14.1	20.8	8.0	F (12.8)	23.3	27.6	19.6	F (8.0)
Leukemia	All that were listed by Statistics	10.6	14.7	2.6	F (12.1)	14.3	18.2	10.8	F (7.4)
Kidney	C64.9, C65.9	15.3	16.8	13.8	F (3.0)	15.8	21.6	10.5	F (11.1)
Melanoma	C44.0-C44.9, 8720,-8790	34.9	44.5	27.9	F (16.6)	21.7	24.8	19.2	F (5.6)
Oral	C00.0-C14.8	15.0	13.0			13.5	19.8	7.7	F (12.1)
Pancreas	C25.0-C25.9	16.1	16.8	14.6	F (2.2)	12.6	14.2	11.1	F (3.1)
Stomach	C16.0-C16.9	9.5	16.3	4.2	F (12.1)	8.8	12.3	5.7	F (6.6)
Brain	C71.0-C71.9	4.1	5.8			6.4	7.7	5.3	F (2.4)
Esophagus	C15.0-C15.9	5.0	9.3		••	5.5	8.9	2.5	F (6.4)
Myeloma	9731, 9732,	10.1	9.7	10.4	M (0.7)	8.0	9.9	6.3	F (3.6)
Testis	C62.0-C62.9		••			3.0	5.9		
Liver	C22.0	7.4	9.5	5.2	F (4.3)	5.8	9.4	2.6	F (6.8)
Thyroid	C73.9	2.6	**	5.2		15.2	8.2	22.0	M (13.8)
Uterus	C54.0-C54.9 & NOS C55.9	21.5		41.5		17.5		33.8	
Ovary	C56.9	6.8		12.5		6.6		12.6	
Cervix	C53.0-C53.9	5.5		10.7		4.0		7.8	
Larynx	C32.0-C32.9	3.5	7.2			2.4	4.4	0.7	F (3.7)

Source: Statistics Canada Table 13-10-0747-01

Table 4-19 below presents the number of new cases of primary cancers which the rates of new cases of primary cancers represented in PEI and Canada in Table 4-18 above. Note: The cancer codes applied to the incidence table above also apply to the numbers table below. In numbers, for the latest year for which incidence figures are available, the number trends follow the rate trends as one would expect. Figures describing new cases of 22 cancers are lower for females than males in Table 4-19 as in Table 4-18 (with the same exceptions). Considering all types of cancer, 930 new cases were diagnosed in PEI and 149,415 in Canada. The sex split was 500 males and 425 females in PEI so that 75 fewer females than males were affected by a new cancer in PEI in 2017. In Canada, 77,060 males and 72,355 females were diagnosed with a new case in 2017 so that 4,705 fewer females than males were diagnosed coast to coast to coast.

When the 22 individual types of cancer are examined using available figures for both sexes, the number of persons diagnosed with a new case of cancer ranged from 0 (testis) to 145 (lung). The sex specific figures indicate that 0 to 100 females received a new case diagnosis where 0 represented oral, brain, esophagus, larynx and maybe more cancers and 100 represented breast cancer. Among males, 0 to 130 males received new case diagnosis with 0 representing male breast, testis, thyroid and maybe other cancers, and 130 representing prostate cancer. Females experienced from 0 to 100 fewer cases of cancer than males in PEI with the usual difference between the sexes being five to ten cases. Using a cut-off number of 50 cases in PEI, it is prostate (130), female breast (100), lung (70 females and 75 males), and colorectal (50 females and 60 males) cancers that are dominant.

The "Report on Cancer Statistics in Prince Edward Island. Cancer Trends: 1982-2016" (2020) uses the PEI Cancer Registry (a province-wide database containing all cases of cancer diagnosed in PEI residents since 1969). Selected incidence highlights from this 2020 PEI report reinforce the cancer situation in PEI:196

- Incident rates in the last ten years have decreased significantly in males and have stabilized in females;
- PEI male incidence rates tend to be higher than Canada males, and PEI female rates tend to be similar to Canada females;
- In PEI, the most commonly diagnosed cancers are prostate in males and breast in females:
- The age-standardized incidence rate has decreased for prostate but not breast in the last decade;
- Age-standardized incidence of lung cancer decreased in males and increased in females in past decades;

TABLE 4-19 NUMBER OF NEW CASES OF SELECTED PRIMARY CANCER CASES BY SEX, PEI AND CANADA (2017)¹⁹⁷

TABLE 4-19 NOWIBER					sdiction	,		,,_,
		Canada	(except Qı	uebec)	Pri	nce Edwa	ard Island	
Type of cancer	Both	Males	Females	Better (by)	Both	Males	Females	Better (by)
	sexes			- ()	sexes			- ()
Total,	149,415	77,060	72,355	F (4,705)	930	500	425	F (75)
all primary sites	47.655	47.655			400	400		
Prostate	17,655	17,655			130	130		
Breast	19,330	155	19,175	M (19,020)	100	0	100	F (100)
Lung	18,220	9,050	9,170	M (120)	145	75	70	F (5)
Colorectal	15,870	8,805	7,070	F (1,735)	105	60	50	F (10)
Bladder	7,600	5,855	1,745	•	50	40	10	F (30)
Non-Hodgkin	6,985	3,875	3,115	F (760)	25	15	10	F (5)
lymphoma								
Leukemia	4270	2570	1700	F (870)	20	10	5	F (5)
Kidney	4,725	3,090	1,635	F (1,455)	25	15	15	SAME
Melanoma	6,460	3,495	2,965	F (530)	60	35	25	F (10)
Oral	4035	2825	1215	F (1,610)	35	10	0	F (10)
Pancreas	3,840	2,020	1,815	F (205)	25	15	15	SAME
Stomach	2,650	1,725	920	F (805)	20	10	5	F (5)
Brain/CNS	2,005	2,050	850	F (1,200)	10	5	0	F (5)
Esophagus	1,675	1,270	405	F (865)	10	5	0	F (5)
Myeloma	2,415	1,390	1,020	F (370)	15	5	10	M (5)
Testis	825	825			0	0		
Liver	1,785	1,360	425	F (935)	15	10	5	F (5)
Thyroid	4,315	1,150	3,160	M (2,010)	5	0	5	M (5)
Uterus	5,260	0	5,260		40		40	
Ovary	1,945	•••	1,945	•••	10	•••	10	
Cervix	1,125		1,125	•••	5		5	
Larynx	735	630	105	F (525)	5	5	0	F (5)

Source: Statistics Canada Table 13-10-0747-01

Age-standardized mortality rates (ASMRs) allow comparison of deaths across jurisdictions (just like ASIR allows comparison of new cases across jurisdictions). Using 2019 figures, the death rate for all causes of death for both sexes living in PEI was 729.8 per 100,000 population which was higher than 655.1 per 100,000 population in Canada. It follows that the sex-disaggregated rates were higher in PEI than Canada. For males the rate was 905.8 in PEI versus 783.8 in Canada, and for females the rate was 586.1 in PEI versus 549.1 in Canada. Of all causes of death in Canada, cancer (malignant neoplasms) accounted for 190.2 in PEI similar to 186.1 per 100,000 in Canada for both sexes. By sex, the death rate was 264.9 in PEI versus 222.0 in Canada for males, and was 135.2 in PEI versus 159.5 in Canada for females (when using the ICD-10 cancer coding scheme, A00-Y89). PEI females have a lower death rate (135.2) than PEI males (264.9) and Canada females (159.5) per 100,000 population when considering only cancer as a cause of death.

TABLE 4-20 DEATH RATE PER 100,000 POPULATION BY CANCER TYPE AND SEX, PEI AND CANADA¹⁹⁸

			Jurisdic	tion (deat	h rate per 10	00,000 p	oopulatio	on in 2019	9)
			Prince E	Edward Islar	nd		,	Canada	
Type of cancer	ICD Code	Both	Male	Female	Better (by)	Both	Male	Female	Better (by)
All cancers	C00-C97	190.2	264.9	135.2	F (129.7)	186.1	222.0	159.5	F (62. 5)
Prostate	C61	12.0	28.0			10.3	24.6		
Breast	C50	9.2	0	16.6		12.7	0.2	23.3	
Lung	C33-C34	46.6	67.9	30.4	F (37.5)	45.1	52.3	39.6	F (12.7)
Colorectal	C18-C21	19.1	20.3	17.4	F (2.9)	20.4	25.2	16.5	F (8.7)
Bladder	C67	2.1	3.8	1.1	F (2.7)	5.1	8.4	2.7	F (5.7)
Non-Hodgkin	C82-C86	6.2	10.3	2.8	F (7.5)	6.6	8.6	5.1	F (3.5)
Leukemia	C91-C95	4.3	6.2	3.0	F (3.2)	6.4	8.5	4.8	F (3.7)
Kidney	C64-C65	8.4	11.1	6.6	F (4.5)	4.2	6.1	2.6	F (3.5)
Melanoma	C43	6.0	13.4	0.9	F (12.5)	2.6	3.9	1.6	F (2.3)
Oral	C00-C14	3.0	6.9	1.0	F (5.9)	3.4	5.3	1.8	F (3.5)
Pancreas	C25	10.5	14.6	6.9	F (7.7)	12.1	13.8	10.6	F (3.2)
Stomach	C16	2.4	4.4	0.8	F (3.6)	4.7	6.5	3.2	F (3.3)
Brain/CNS	C70-C72	4.2	7.6	1.1	F (6.5)	5.4	6.9	4.1	F (2.8)
Esophagus	C15	7.7	11.4	4.5	F (11.4)	5.1	8.7	2.0	F (6.7)
Myeloma	C88, C90	4.1	5.9	2.9	F (3.0)	3.7	5.1	2.7	F (2.4)
Testis	C62.90		••			••			••
Liver	C22	4.9	8.7	2.4	F (6.3)	7.5	10.5	4.9	F (5.6)
Thyroid	C73	•••		•••				•••	•••
Uterus	C54-C55	2.3		4.4		3.0		5.6	•••
Ovary	C56	2.1		3.7		4.2		8.0	•••
Cervix	C53	1.6		2.8		1.1	•••	2.1	•••
Larynx	C32	2.8	4.8	0.9	F (3.9)	0.9	1.6	0.3	F (1.3)

Source: Statistics Canada Table 13-10-0800-01

When the individual types of cancer are inspected for their contribution to total cancer deaths, Table 4-20, the female mortality rates are more favourable than male mortality rates in both PEI and Canada for all 22 types of cancer studied. From lowest to highest, PEI male death rates ranged from 3.8 (bladder) to 67.9 (lung) and female death rates ranged from 0.8 (stomach) to 30.4 (lung). From lowest to highest, Canada male death rates ranged from 1.6 (larynx) to 52.3 (lung) and female death rates ranged from 0.3 (larynx) to 39.6 (lung). Lung cancer is the leading cause of death for male and female sexes accounting for approximately 26% of all cancer deaths in Canada. That is, one in four cancer deaths is due to lung cancer. 199

In PEI, the top three causes of cancer death among males are lung (67.9), prostate (28.0), and colorectal (20.3), and among females are lung (30.4), colorectal (17.4) and breast (16.6). By comparison, in Canada the top three causes of cancer death among males are lung (52.3), colorectal (25.2), and prostate (24.6), and among females are lung (39.6), breast (23.3), and colorectal (16.5). That is, the top three causes of cancer in both jurisdictions in both sexes are lung, colorectal, and the sex-associated cancer whether prostate (males) or breast (females). Lung cancer is the leading cause of cancer death for both sexes with the female rate lower than the male rate in both PEI (30.4 versus 67.9) and Canada (39.6 versus 52.3).

The colorectal death rates are lower for females than males, respectively, in PEI (17.4 versus 20.3) and Canada (16.5 versus 25.2). The sex associated rates are lower for female breast cancer than prostate cancer with the breast cancer death rate lower in PEI than Canada for breast (breast; 23.3 in Canada and 16.6 in PEI) lower in Canada than PEI for prostate (24.6 in Canada versus 28.0 in PEI). By sex, there were eight double-digit causes of cancer death among males in PEI [lung (67.9), prostate (28.2), colorectal (20.3), pancreas (14.6), melanoma (13.4), esophagus (11.4), kidney (11.1), and non-Hodgkins Lymphoma (10.3)] while among PEI females there were only three double digit causes of cancer mortality [lung (30.4), colorectal (17.4), and female breast (16.6)].

Looking only at cancer deaths, the ratio of male-to-female cancer deaths in Canada was 1.14, and in PEI was 1.58. Expressed as percentages, the ratio represents a 53.5% male death and 46.5% female death split due to cancer in Canada, and 61.4% (224/365) male death and 38.6% female death split due to cancer in PEI. The number of male cancer deaths exceeds the number of female cancer deaths by 5,544 persons in Canada, and by 83 persons in PEI.

TABLE 4-21 NUMBER OF CANCER DEATHS BY TYPE IN AND SEX, PEI AND CANADA (2019)²⁰⁰ Note: ICD-10 codes for types of cancer are the same as in the previous table (cancer rates per 100,000 population)

Note	: ICD-10 codes for	types of canc	er are the same	as in the previous	table (cance	r rates per 1	00,000 populat	ion).
	C	anada				Prince	Edward Isla	and
Type of cancer death	Both sexes	Males	Females	Better (by)	Both sexes	Males	Females	Better (by)
All cancers	80,152	42,848	37,304	F (5,544)	365	224	141	F (83)
Prostate	4,506	4,506			22	22		
Breast	5,311	43	5,268	Not applicable	17	0	17	Not applicable
Lung	19,699	10,383	9,316	F (1,067)	93	61	32	F (29)
Colorectal	8,745	4,800	3,945	F (855)	36	18	18	SAME
Bladder	2,216	1,543	673	F (870)	4	3	1	F (2)
Non-Hodgkin	2,850	1,644	1,206	F (438)	12	9	3	F (6)
lymphoma								
Leukemia	2,752	1,624	1,128	F (496)	9	6	3	F (3)
Kidney	1,800	1,182	618	F (564)	16	9	7	F (2)
Melanoma	1,109	749	360	F (389)	11	10	1	F (9)
Oral	1,472	1,058	414	F (644)	6	5	1	F (4)
Pancreas	5,214	2,718	2,496	F (222)	20	12	8	F (4)
Stomach	1,989	1,244	745	F (499)	5	4	1	F (3)
Brain	2,258	1,351	907	F (444)	8	7	1	F (6)
Esophagus	2,202	1,721	481	F (1,240)	15	10	5	F (5)
Myeloma	1,611	977	634	F (343)	1	1	0	F (1)
Testis	Not available							
Liver	3,235	2,102	1,133	F (969)	10	7	3	F (4)
Thyroid	Not available							
Uterus	1,294		1,294		5		5	•••
Ovary	1,795		1,795		4		4	
Cervix	434		434		3		3	
Larynx	377	312	65	247	5	4	1	F (3)

Source: Statistics Canada Table 13-10-0800-01

In descending order, the 13 types of cancers claiming more than 1,000 male lives in Canada in 2019 (Table 4-21) were as follows: lung cancer (10,383), colorectal (4,800), prostate (4,506), pancreas (2,718), liver (2,102), esophagus (1,721), non-Hodgkin lymphoma (1,644), leukemia (1,624), bladder (1,543), brain (1,351), stomach (1,244), kidney (1,182), and oral (1,058). The comparable list for cancers claiming more than 1,000 female lives included nine types of cancer as follows: lung (9,316), breast (5,268), colorectal (3,945), pancreas (2,496), ovary (1,795), uterus (1,294), liver (1,133), non-Hodgkin lymphoma (1,206), and leukemia (1,128). Cancers common to both lists were lung, colorectal, pancreas, liver, non-Hodgkin lymphoma, and leukemia plus sex-organ-specific cancers such as prostate cancer and breast cancer. When the number of male cancer deaths was compared to the number of female cancer deaths there were only two types of cancer where deaths differed by more than 1,000 individuals (esophagus cancer, 1,240 lives, and lung cancer, 1,067 lives) with the remaining thirteen cancers having a male-female difference ranging from 222 to 870 lives using 2019 as a source of recent representative statistics.

With 220 times as many cancer deaths in Canada as in PEI, the actual number of cancer deaths in PEI was markedly lower. In PEI, six types of cancer claimed a double-digit number of male lives, and three types of cancer claimed a double-digit number of female lives. In descending order, the types of cancer (number of males) claiming male lives were as follows: lung (61), prostate (22), colorectal (18), pancreas (12), melanoma (10) and esophagus (10). The remaining ten types of cancer claimed from one to nine male lives (excluding breast cancer which claimed 0 lives in 2019). Regarding female deaths, and using descending order, the three types of cancer that claimed a double digit number of female deaths were lung (32), colorectal (18), and breast (17). The remaining sixteen types of cancer claimed zero to eight female lives. Common to the male and female lists were lung, colorectal and a sex-associated cancer (prostate for males and breast for females). In PEI, when the number of male cancer deaths (224) was subtracted from the number of female cancer deaths (141) the difference was 83 deaths. Lung cancer accounted for 19 of these 83 deaths and the remaining 64 deaths with 14 different cancers claiming from one to nine lives.

Selected Canada mortality highlights from Canadian Cancer Statistics 2019²⁰¹

- The probability of dying from cancer is higher for males (26%) than females (23%);
- Fifty-three percent of all cancer deaths are expected to occur among males (47% among females);
- The probability of dying from cancer varies with the type of cancer. The estimated probabilities are for the general Canadian population and should not be interpreted as an individual's risk. For example, 1 in 17 Canadians will die of lung cancer, 1 in 29 males will die of prostate cancer, and 1 in 33 females will die of breast cancer;
- Lung cancer is the leading cause of cancer death for males and females (26% of all cancer deaths versus 12% colorectal for all cancer deaths, and 6% pancreatic for all cancer deaths).

Selected PEI mortality highlights from Report on Cancer Statistics in Prince Edward Island (2020)²⁰²

- Cancer deaths in male and female Islanders follow Canadian male and female death trends;
- Age-standardized mortality in PEI males has decreased and in females has been stable in past decades:
- Decreased mortality in PEI males is due to prostate, lung and colorectal decreases;
- Decreased mortality in PEI females is due to breast and colorectal decreases.

In conclusion, world-class Statistics Canada cancer products were used to inform sex and jurisdictional cancer outcomes for 22 types of cancer in PEI and Canada. According to the well-known and authoritative annual Canadian Cancer Statistics 2019 report, one in two Canadians is expected to be diagnosed with cancer in their lifetime, and it is estimated that one in four Canadians will die from cancer.²⁰³ The lifetime probability of dying from cancer is slightly higher for males compared to females. Age remains the foremost risk factor for developing cancer. In PEI, one-half of new cancers and cancer deaths are from lung, colorectal, prostate and breast cancers, according to statistics produced by the PEI Cancer Treatment Centre. The latter report describes cancer as creating a high burden of disease in PEI which is likely to continue with the aging population despite comprehensive lifestyle, screening, and treatment programs.

Overall, the sex-disaggregated analysis overwhelmingly showed better outcomes for females over males in both PEI and Canada when the current rates of 22 cancers were studied. The jurisdictional results were varied for PEI and Canada females. In some instances PEI females displayed better outcomes than Canada females. Cancer has an added impact in the sense that sex-specific cancers are some of the common cancers, e.g., prostate cancer and breast cancer.

Cancer Screening

Three types of cancer screening are reported in this section: cervical, colorectal, and breast. As Table 4-22 illustrates, the most recent figures indicate that 53% of PEI women ages 21 to 69 received a PAP screen across three years. By comparison, 25% of PEI women ages 50 to 74 received colorectal screenings across two years (2017 to 2018). The Canadian Partnership Against Cancer and the previous version of this report cited PEI screening figures for the 2010-2015 time period.²⁰⁴ Respectively, these two sources reported higher cervical screening (67.4% and 62.9% versus 53%), and lower colorectal screening (20.4% and 21.0% versus 25%). The 2010-2015 results, when compared to reporting provinces, were found to be average for cervical screening, below average for colorectal screening.

TABLE 4-22 CERVICAL AND COLORECTAL SCREENING IN WOMEN, PEI²⁰⁵

Uniqu	Cervical So Number of women Se PAP screen betwe 31, 2018 (three	who comple en Jan, 1 20:	L6 and Dec		Colorectal Number of women h successful screens of 1, 2017 to Dec 31, 2	naving one or ompleted between	ween
Age	Number screened across 3 years (2016-2018)	Total population	Percentage Screened	Age	Number screened across 2 years	Total Population	Percentage Screened
21-24	2,379	3,330	71%	50-54	1,042	5,825	18%
25-29	2,998	3,950	76%	55-59	1,338	5,915	23%
30-39	5,613	8,315	68%	60-64	1,449	5,475	27%
40-49	5,188	9,500	55%	65-69	1,470	5,110	29%
50-59	5,574	11,740	47%	70-74	1,185	3,455	34%
60-69	3,244	10,585	31%				
Total:	24,996	47,420	53%	Total:	6,484	25,780	25%

Source: PEI Cervical Screening Program and PEI Colorectal Screening Program.

Breast cancer is the most commonly diagnosed cancer in females. ²⁰⁶ Fortunately, the mortality rate is the lowest since 1950 (42.7% at peak in 1986 and 22.4 per 100,000 in 2019), and remains a leading cause of cancer death among females under 50 years of age. 207 "Screenings" in Table 4-23 are selfreferrals and the "diagnostics" are physician referrals. The total female population in PEI age 40 to 74 years numbered 50,345 using the 2016 Census figures as recommended by the screening program.²⁰⁸ By calculation, the 10,436 screening mammograms represented 20.7% of PEI females and the 3,622 diagnostic mammograms represented 7.2% of PEI female. Theoretically, the percentage screened in 2019 was 14,058 or 27.9% of the 50,345 PEI females age 40 to 74 years. This rate is lower than past rates. For example, the breast screening rate for PEI females ages 50 to 69 was 60% in 2012-2013.²⁰⁹ The breast screening rate was 59.7% in 2014 which was above average when compared to other provinces where the percentage ranged from 31.8% to 62.3%, according to website information currently provided.²¹⁰

TABLE 4-23 NUMBER OF MAMMOGRAPHY SCREENINGS AND DIAGNOSTICS CONDUCTED IN PEI HOSPITALS 2004-2019211

2	004-2019						
	Scree	ening			Diagnostic		Combined
Year	QEH	PCH	Total	QEH	PCH	Total	
2004-05	6,090	2,812	8,902	2,112	197	2,309	11,211
2005-06	4,843	2,180	7,023	2,039	1,006	3,045	10,068
2006-07	5,401	2,291	7,692	2,047	1,141	3,188	10,880
2007-08	7,133	2,113	9,246	2,253	1,175	2,428	11,674
2008-09	5,523	1,563	7,078	2,342	1,052	3,394	10,480
2009-10	6,394	1,742	8,136	2,681	1,006	3,687	11,823
2010-11	9,095	4,064	13,159	2,633	1,101	3,734	16,893
2011-12	6,769	3,546	10,315	2,998	1,136	4,134	14,449
2012-13	7,044	4,289	11,333	3,309	1,432	4,741	15,531
2013-14	6,143	4,094	10,237	3,548	1,746	5,294	15,531
2014-15	5,972	3,873	9,845	3,480	1,696	5,176	15,021
2015-16	6,750	3,736	10,486	3,045	1,692	4,737	15,223
2016-17	6,602	3,725	10,327	2,989	1,546	4,535	14,862
2017-18	6,783	3,805	10,588	2,473	1,220	3,693	14,281
2018-19	6,697	3,681	10,378	2,453	1,098	3,551	13,929
2019-20	6,595	3,841	10,436	2,532	1,090	3,622	14,058

Source: QEH Diagnostic Imaging

PEI data collected during the past ten years indicates that the annual average number of women who received mammograms of the screening and diagnostic type is 14,978. In 2019, 14,058 tests were performed at Prince County Hospital and Queen Elizabeth Hospital with the majority (10,436 or 74.2%) being screening tests and the remainder (3,622 or 25.8%) being diagnostic tests. Breast cancer incidence data provided by Statistics Canada figures for 2017 suggests that the breast cancer incidence rate was 125.2 per 100,000 for PEI (i.e., 100 women) and 110.7 for Canada (i.e., 19,175 women). These figures coupled with PEI screening statistics and full set of screening guidelines (below) suggest much opportunity exists for early detection and effective treatment (suggested in the cancer section of the report).

What are screening rates elsewhere? Cancer Care Ontario (2020) reported a breast screening rate of 63.9% in 2018-2019.²¹² OECD reported that the percentage of women aged 50-69 years who underwent breast screening in 2018 in Canada was 61.8%, Denmark was 83.2%, New Zealand was 72.3%, and in countries such as Costa Rica was about 30% (OECD, 2020).²¹³

Underlying Health Conditions

Almost forty percent (39.6%) of males and 36.1% of females living in Canada and 46.4% of males and 42.1% of females living in PEI reported having at least one of eight underlying health conditions: 1) chronic obstructive pulmonary disease (COPD), 2) obesity (BMI of 30 or more), 3) high blood pressure, 4) currently having cancer, 5) heart disease, 6) suffering from the effect of a stroke, 7) diabetes or 8) dementia. The PEI results were slightly better for females than males (by 1.5% to 5.6%) regardless of the number of underlying health conditions. The PEI-Canada jurisdictional results for underlying health conditions were slightly better for females living in Canada than females living in PEI (by 0.2% to 5.0%) regardless of the number of underlying health conditions.

TABLE 4-24 NUMBER OF UNDERLYING HEALTH CONDITIONS BY SEX, PEI AND CANADA²¹⁴

Number of underlying conditions	ng Area Both		Male	Female	Better results in male or female? By ? (a lower % is better)	Better female results in PEI or Canada? By %?
At least 1	CA	37.8%	39.6%	36.1%	Female (3.5%)	Canada (36.1%-42.1%=5.0%)
	PE	44.2%	46.4%	42.1%	Female (4.3%)	
At least 2	CA	13.4%	14.6%	12.2%	Female (2.4%)	Canada (15.3% -12.2%=3.1%)
	PE	18.0%	20.9%	15.3%	Female (5.6%)	
			. =	2 22/	- L (2.22()	
At least 3	CA	4.3%	4.7%	3.8%	Female (0.9%)	Canada (2.4%-0.9%=1.5%)
	PE	5.9%	7.2%	4.8%	Female (2.4%)	
				2 22/	- L (2 (1)	
At least 4	CA	1.0%	1.2%	0.8%	Female (0.4%)	Canada (0.8%-0.6%=0.2%)
	PE	1.3% ^E	2.1% ^E	0.6% ^E	Female (1.5%)	

Source: Statistics Canada Table 13-10-0777-01

At least one underlying health condition was reported by 23.3% of males and 22.6% of females living in PEI, and 19.0% of males and 17.3% of females living in Canada in the youngest age group (18 to 39 years). As age increased to 80 years and over, these figures more than tripled to be 72.4% for PEI males versus 71.9% for PEI females, and to be 71.9% for Canada females versus 73.2% for PEI females. The results favour PEI females over PEI males for all combinations of ages and conditions (by 0% to 21.9%) especially at age 80 years and over when at least two (4.0% versus 17.4%) or at least three (2.4% versus 21.9%) underlying conditions exist. Similarly, for all combinations of ages and conditions the jurisdiction results slightly favour females living in Canada over females living in PEI (by 1.3% to 5.3%). In short, the PEI results are better for PEI females than males, and the jurisdictional results were better for Canada females than PEI females.

TABLE 4-25 IMPACT OF AGE CATEGORY ON THE FREQUENCY OF EACH NUMBER OF UNDERLYING HEALTH CONDITIONS²¹⁵

Number of conditions	Age (Years)	Area	Both	Male	Female	Better results in male or female? By how much? (lower % is better)	Better female results in PEI or Canada? By how much? (lower % is better)
At least 1 condition	18 to 39	CA PE	18.2% 23.0%	19.0% 23.3%	17.3% 22.6%	Female (1.7%) Female (0.7%)	Canada (5.3%)
	40 to 59	CA PE	38.4% 42.7%	41.7% 47.4%	35.2% 38.2%	Female (6.5%) Female (9.2%)	Canada (3.0%)
	60 to 79	CA PE	60.1% 64.8%	63.6% 68.3%	56.9% 61.4%	Female (6.7%) Female (6.9%)	Canada (3.5%)
	80 and over	CA PE	72.1% 73.6%	72.4% 74.3%	71.9% 73.2%	Female (0.5%) Female (0.1%)	Canada (1.3%)
At least 2 conditions	18 to 39	CA PE	1.9% 3.2% ^E	2.2% F	1.6% F		
	40 to 59	CA PE	11.9% 16.2%	13.5% 20.3% ^E	10.3% 12.3% ^E	Female (3.2%) Female (8.0%)	Canada (2.0%)
	60 to 79	CA PE	28.5% 33.1%	31.7% 39.3%	25.5% 27.1%	Female (6.2%) Female (12.2%)	Canada (1.6%)
	80 and over	CA PE	35.1% 40.6%	37.4% 52.4% ^E	33.4% 35.4% ^E	Female (4.0%) Female (17.4%)	Canada (2.0%)
At least 3 conditions	18 to 39	CA PE	0.2% ^E F	0.2% ^E F	0.2% ^E F	Same (0%) 	
	40 to 59	CA PE	3.1% 2.8% ^E	3.4% F	2.8% F	Female (0.6%) 	
	60 to 79	CA PE	10.4% 13.7%	12.0% 16.1%	8.9% 11.4% ^E	Female (3.1%) Female (4.7%)	Canada (2.5%)
	80 and over	CA PE	12.8% 18.6% ^E	14.2% 33.8% ^E	11. 8% 11.9% ^E	Female (2.4%) Female (21.9%)	Canada (0.1%)
At least 4 conditions	18 to 39	CA PE	F F	F F	F F		
	40 to 59	CA PE	0.6% 0.7% 0.4% Female (0.3%) F F F				
	60 to 79	CA PE	2.5% 3.7% ^E	3.1% 5.8% ^E	1.9% F	Female (1.2%) 	
	80 and over	CA PE	4.2% F	5.2% F	3.5% F	Female (1.7%) 	

Source: Statistics Canada Table 13-10-0777-01

When the percentage frequency of "at least one underlying health condition" for males and females living in a province/territory was the criterion for ranking the thirteen jurisdictions in descending order it was observed that PEI ranked fourth highest for underlying health conditions (Newfoundland-Labrador, 49.8%; New Brunswick, 45.8%; Nova Scotia, 46.3%; and Prince Edward Island, 44.1%). Nine jurisdictions ranked lower (i.e., better) than PEI (Saskatchewan, 42.8%; Manitoba, 40.7%; Yukon, 39.7%; Northwest, 39.6%; Ontario, 37.6%; Quebec, 37.6%; Alberta, 36.7%; British Columbia, 33.8%; and Nunavut, 33.5%).

The analysis appears in Table 4-26. In the male-female analysis, females reported a lower (better) percentage of one, two, three or four underlying chronic diseases than males 1) in all ten provinces including PEI (one exception in NL), and 2) in one of the three territories (YK) but not the remaining two territories (NU and NT). Due to the different age structures, disease patterns, and mortality patterns in the territories a more in-depth analysis is required to understand differences between provinces and territories in underlying conditions. In the PEI-Canada jurisdictional analysis, females living in Canada reported a lower percentage of underlying chronic conditions than females living in provinces in 25 of the 40 provincial-national comparisons (Table 4-26). Among the 15 exceptions, six results were the SAME for the province and Canada (2 in PQ, 2 in ON, 1 in MB and 1 in BC), and nine results were slightly better for the province than for Canada (1 in PEI, 1 in ON, 4 in AB and 3 in BC). Contrary to most provincial-national comparisons in this report where Canada results are usually better results, the two most western provinces were equal to and more often slightly better than Canada with regard to the percentage of underlying health conditions whether one (2.0-4.8%), two (1.6%-2.0%), three (0.7-1.8%), or four (0.3%) underlying health conditions.

TABLE 4-26 ANALYSIS OF UNDERLYING HEALTH CONDITIONS BY SEX AND PROVINCE/TERRITORY²¹⁶ (in purple/pink bars lower figures are better figures, e.g., 36.1% is a *lower* % of underlying health conditions than 39.6%)

$E_{\mathcal{A}}$	fig	ures are better figures, e.g., 36.1)
	Area	Sex	N	lumber of underlying	health conditions	
		(lower % is better result)	1	2	3	4
	CA	Males	39.6%	14.6%	4.7%	1.2%
		Females	36.1%	12.2%	3.8%	0.8%
		Better result (by %)	Female (3.5%)	Female (2.4%)	Female (0.9%)	Female (0.4%)
	NL	Males	52.7%	20.3%	7.0%	1.2% ^E
		Females	47.1%	18.4%	5.5%	1.7% ^E
		Better result (by %)	Female (5.6%)	Female (1.9%)	Female (2.5%)	Male (-0.5%) ^E
		Better jurisdiction result (by %)	Canada (11.1%)	Canada (6.2%)	Canada (1.7%)	Canada (0.9%) ^E
	NS	Males	50.8%	21.0%	7.3%	2.0% ^E
		Females	42.2%	15.2%	5.4%	1.4% ^E
		Better result (by %)	Female (8.6%)	Female (1.9%)	Female (1.9%)	Female (0.6%) ^E
		Better jurisdiction result (by %)	Canada (6.1%)	Canada (3.0%)	Canada (1.6%)	Canada (0.6%)
	PE	Males	46.4%	20.9%	7.2%	2.1% ^E
		Females	42.1%	15.3%	4.8%	0.6% ^E
		Better result (by %)	Female (4.3%)	Female (5.6%)	Female (2.4%)	Female (1.5%) ^E
		Better jurisdiction result (by %)	Canada (6.0%)	Canada (3.1%)	Canada (1.0%)	PEI (-0.2%)
	NB	Males	49.7%	23.2%	9.8%	3.0% ^E
		Females	47.6%	18.1%	7.0%	2.0% ^E
		Better result (by %)	Female (2.1%)	Female (5.1%)	Female (2.8%)	Female (1.0%) ^E
		Better jurisdiction result (by %)	Canada (11.5%)	Canada (5.9%)	Canada (3.2%)	Canada (1.2%)
	PQ	Males	37.7%	13.3%	4.5%	1.2%
		Females	36.4%	12.2%	3.7%	0.8%
		Better result (by %)	Female (1.3%)	Female (1.1%)	Female (0.8%)	Female (0.4%)
		Better jurisdiction result (by %)	Canada (0.3%)	SAME	Canada (0.2%)	SAME
	ON	Males	39.5%	14.9%	4.6%	1.1%
		Females	35.8%	12.2%	4.0%	0.8%
		Better result (by %)	Female (3.7%)	Female (2.7%)	Female (0.6%)	Female (0.3%)
		Better jurisdiction result (by %)	Ontario (0.3%)	SAME	Canada (0.2%)	SAME
	MB	Males	42.1%	15.4%	4.3%	1.1% ^E
		Females	39.5%	12.9%	4.1%	0.8% ^E
		Better result (by %)	Female (2.6%)	Female (2.5%)	Female (0.2%)	Female (0.3%) ^E
		Better jurisdiction result (by %)	Canada (3.4%)	Canada (0.7%)	Canada (0.3%)	SAME
	SK	Males	44.1%	15.8%	5.5%	1.5% ^E
		Females	41.5%	14.1%	4.2%	0.9% ^E
		Better result (by %)	Female (2.6%)	Female (1.7%)	Female (1.3%)	Female (0.6%) ^E
		Better jurisdiction result (by %)	Canada (5.4%)	Canada (1.9%)	Canada (0.4%)	Canada ().1%)
	AB	Males	39.3%	13.8%	4.5%	1.0% ^E
		Females	34.1%	10.6%	2.8%	0.5% ^E
		Better result (by %)	Female (5.2%)	Female (3.2%)	Female (1.7%)	Female (0.5%) ^E
		Better jurisdiction result (by %)	Alberta (2.0%)	Alberta (1.6%)	Alberta (1.8%)	Alberta (0.3%)
	BC	Males	36.5%	12.8%	4.0%	1.1%
		Females	31.3%	10.2%	3.1%	0.8% ^E
		Better result (by %)	Female (5.2%)	Female (2.6%)	Female (1.1%)	Female (0.3%) ^E
		Better jurisdiction result (by %)	BC (4.8%)	BC (2.0%)	BC (0.7%)	SAME
	YK	Males	45.1%	15.7%	5.8% ^E	F
		Females	34.3%	13.4%	5.0% ^E	F
		Better result (by %)	Female (10.8%)	Female (2.3%)	Female (0.8%) ^E	Not available
		Better jurisdiction result (by %)	Yukon (1.8%)	Canada (1.2%)	Canada (1.2%)	Not available
	NT	Males	37.7%	14.2% ^E	4.3% ^E	F
		Females	41.6%	13.5%	3.5% ^E	F
		Better result (by %)	Male (-3.9%)	Female (0.7%) ^E	Female (0.8%) ^E	Not available
		Better jurisdiction result (by %)	Canada (5.5%)	Canada (1.3%)	Canada (0.3%)	Not available
	NU	Males	26.9%	11.0% ^E	3.5% ^E	F
		Females	40.8%	13.3% ^E	F	F
		Better result (by %)	Male (-13.9%)	Male (-2.3%)	Not available	Not available
		Better jurisdiction result (by %)	Canada (4.7%)	Canada (0.1%)	Not available	Not available
•	0	0 1 7 11 40 40 0777 04				

Source: Statistics Canada Table 13-10-0777-01

Mental Health and Well-being

The results for mental health and well-being (Table 4-27) consistently portray the PEI male population as healthier than the PEI female population (by 0.5% to 4.9%). But, when PEI females are compared to Canada females for mental health outcomes, PEI females are better than Canada females for six indicators (with a 0.5% to 7.5%), and Canada females are better than PEI females for two indicators (with a 1.1% to 2.1% difference).

TABLE 4-27 HEALTH INDICATORS FOR MENTAL HEALTH AND WELL-BEING BY SEX FOR ALL AGES, PEI AND CANADA

(2017-2018) ²³							
	Metric	Area	Both Sexes	Male	Female	Better results in (male or female) by ?	Better female results in PEI or Canada by
Life satisfaction	Rate	PE	92.8%	93.9%	91.8%	Male (2.1%)	Canada (1.1%)
(satisfied or very	Rate	CA	93.1%	93.4%	92.9%	Male (0.5%)	
Sense of belonging to local community	Rate	PE	74.3%	76.4%	72.4%	Male (4.0%)	PEI (2.6%)
(somewhat strong or very strong)	Rate	CA	68.9%	68.0%	69.8%	Female (1.8%)	
Perceived mental	Rate	PE	68.7%	70.0%	67.5%	Male (2.5%)	PEI (0.5%)
health (very good or excellent)	Rate	CA	69.4%	71.9%	67.0%	Male (4.9%)	
Perceived health (very	Rate	PE	62.3%	62.0%	62.6%	Male (0.6%)	PEI (2.0%)
good or excellent)	Rate	CA	60.8%	61.1%	60.6%	Male (0.5%)	
Perceived life stress	Rate	PE	16.0%	16.7%E	15.3%	Male (1.4%)	PEI (7.5%)
(quite a bit or extremely stressful)	Rate	CA	21.4%	19.9%	22.8%	Male (2.9%)	
Mood disorders (such	Rate	PE	9.9%	7.0%E	12.6%	Male (5.6%)	PEI (1.6%)
as depression, bipolar disorder, mania or dysthymia)	Rate	CA	8.8%	6.5%	11.0%	Male (4.5%)	
Perceived health	Rate	PE	12.7%	11.6%	13.7%	Male (2.1%)	Canada (2.1%)
(fair or poor)	Rate	CA	11.1%	10.6%	11.6%	Male (1.0%)	
Perceived mental	Rate	PE	7.2%	7.5%E	7.0%	Male (0.5%)	PEI (1.3%)
health (fair or poor)	Rate	CA	7.4%	6.4%	8.3%	Male (1.9%)	

Source: Statistics Canada Table 13-10-0113-01

Overall, across the five jurisdictions, male outcomes exceeded female outcomes for 27 of the 40 outcomes (two-thirds) and females exceeded males for 13 of the 40 outcomes (one-third) suggesting that females' outcomes are less positive than male outcomes.

TABLE 4-28 MENTAL INDICATORS BY SEX, ATLANTIC PROVINCES AND CANADA (AGE STANDARDIZED RATE PER 100,000)²¹⁸

	Mental Health													
	Sex	Life satisfaction (satisfied or very satisfied)	Mood disorders (diagnosis such as depression, mania, bipolar disorder, or dysthymia)	Perceived health (very good or excellent)		Perceived life stress (age 15 and over)	Perceived mental health (very good or excellent)	Perceived mental health (fair or poor)	Sense of belonging to local community (somewhat strong or very strong)					
	М	93.9	7.0	62.0	11.6	16.7	70.0	7.5	76.4 ⁺¹					
DE	F	91.8	12.6	62.6	13.7	15.3 ⁻¹	67.5	7.0	72.4					
PE	Better outcome	Male (2.1)	Male (5.6)	Female (0.6)	Male (2.1)	Male (1.4)	Male (2.5)	Male (0.5)	Male (4.0)					
	М	92.4	7.1	58.5	12.8+1	13.0 ⁻¹	71.4	7.2	76.9 ⁺¹					
NL	F	92.6	11.3	63.6	13.2	16.7 ⁻¹	67.1	6.8	78.6 ⁺¹					
INL	Better outcome	Female (0.4)	Male (4.2)	Female (5.1)	Male (0.4)	Male (3.7)	Male (4.3)	Female (0.4)	Male (1.7)					
	М	90.0 ⁻¹	8.7 ⁺¹	58.4	16.0 ⁺¹	15.7 ⁻¹	68.0 ⁻¹	8.3 ⁺¹	72.3 ⁺¹					
NC	F	91.9	15.8 ⁺¹	59.7	13.8+1	20.7-1	64.1 ⁻¹	11.2+1	73.6 ⁺¹					
NS	Better outcome	Female (1.9)	Male (7.1)	Male (1.3)	Female (2.2)	Male (5.0)	Male (3.9)	Male (2.9)	Male (1.3)					
	М	91.5 ⁻¹	7.3	53.9 ⁻¹	16.5 ⁺¹	17.0 ⁻¹	66.0 ⁻¹	8.9 ⁺¹	74.1 ⁺¹					
ND	F	93.3	10.8	58.0	14.6 ⁺¹	20.5 ⁻¹	66.5	6.7 ⁻¹	77.8+1					
NB	Better outcome	Female (1.8)	Male (3.5)	Female (4.1)	Female (1.9)	Male (3.5)	Female (0.5)	Male (2.2)	Female (3.7)					
	М	93.4	6.5	61.1	10.6	19.9	71.9	6.4	68.0					
C ^	F	92.9	11.0	60.6	11.6	22.8	67.0	8.3	69.8					
CA	Better outcome	Male (0.5)	Male (4.5)	Female (0.5)	Male (1.0)	Male (2.9)	Male (4.9)	Male (1.9)	Female (1.8)					

Source: Statistics Canada Table 13-10-0113-01

Life Satisfaction

The Canadian Community Health Surveys conducted in 2015-2016 and 2017-2018 asked a scientific sample of Canadians to rate their level of "life satisfaction" just as had been done in the four earlier surveys (2011, 2012, 2013 and 2014, Table 4-29). In the recent surveys, the highest percentage of females reporting "satisfied or very satisfied" in 2015-2016 was females living in PEI (93.7%) and in 2017-2018 was females living in Quebec (93.9%). The comparable male highs were for males living in Saskatchewan in 2015-2016 (94.8%), and males residing in Quebec in 2017-2018 (94.4%). In fact, in 2015-2016, the percentage of Saskatchewan males reporting "satisfied or very satisfied" was the highest in the nation (94.8%) with the lowest percentage in the nation in 2015-2016 being males living in Nunavut (83.2%). In 2017-2018 the highest and lowest male percentages reporting "satisfied or very satisfied," respectively, was males living in Quebec (94.4%) and Nunavut (85.9%).

Outcomes in the latest two surveys indicated that slightly more PEI males (94.6% and 93.9%) than PEI females (93.7% and 91.8%) reported being "satisfied or very satisfied," respectively. Slightly more PEI females than Canada females reported being "satisfied or very satisfied" in the 2015-2016 survey (93.7% versus 92.7%). Conversely, slightly more Canada females than PEI females reported being "satisfied or very satisfied" in the 2017-2018 survey (92.9% versus 91.8%).

Collectively, these statistics indicate that life satisfaction outcomes are very favourable in Canada. In the past four-years the provincial minimum-maximum ranged from 90.0% (males living in Nova Scotia in 2017-2018) to 94.8% (males living in Saskatchewan in 2015-2016). And, the territorial minimum-maximum ranged from 83.2% (males living in Nunavut in 2015-2016) to 94.3% (males living in Yukon in 2015-2016). No province reported a percentage below 90% where 90% was "high" for Northwest Territories and Nunavut. These percentages indicate little range from one jurisdiction to another, i.e., 4.8% (94.8% - 90.0%= 4.8%) in the provinces, and 11.1% (94.3% - 83.2%=11.1%) in the territories across the past four years reported.

Statistically, most of the provinces and territories were similar to Canada when measured during the past two Canadian Community Health Surveys (2015-2016 and 2017-2018). A few isolated statistical significances were observed across the country. Importantly, two clear trends were noted in Quebec and Nunavut. One, the better percentages observed for Quebec compared to Canada were statistically better for all three sex-disaggregated groups measured – males, females, and both sexes. Two, the lower percentages observed for Nunavut compared to Canada were statistically worse for all groups measured – males, females, and both sexes. At the jurisdictional level, Quebec and Nunavut outcomes in life satisfaction are opposite to Canada outcomes with Quebec being better and Nunavut being worse than the nation, Canada.

TABLE 4-29 LIFE SATISFACTION RATED AS "SATISFIED OR VERY SATISFIED" BY SEX AND JURISDICTION (PERCENT)²¹⁹

() = ()	2011	2012	2013	2014	2015/16	2017/18
Canada	92.3%	92.4%	91.7%	92.2%	92.9%	93.1%
Males	92.4	92.3	91.9	92.4	93.0	93.4
Females	92.1	92.5	91.5	92.1	92.7	92.9
Newfoundland and Labrador	92.9	92.1	93.0	93.2	92.0	92.5
Males	94.1	92.1	93.0	92.7	92.3	92.4
Females	91.7	92.0	92.9	93.7	91.6	92.6
Prince Edward Island	93.5	94.4	93.7	94.0	94.1+1	92.8
Males	92.6	94.2	95.0	93.2	94.6	93.9
Females	94.3	94.5	92.5	94.8	93.7	91.8
Nova Scotia	92.6	93.3	91.8	91.6	91.6-1	91.0-1
Males	93.7	93.4	92.6	93.4	91.5	90.0
Females	91.7	93.3	91.2	89.9	91.6	91.9
New Brunswick	93.5	93.5	92.0	91.7	91.6	92.4
Males	93.7	93.3	92.7	93.3	92.6	91.5-1
Females	93.3	93.6	91.5	90.1	90.7-1	93.3
Quebec	94.0	93.6	93.1	93.5	93.7+1	94.1+1
Males	93.6	93.6	93.3	93.0	93.8+1	94.4+1
Females	94.4	93.5	92.9	94.1	93.6+1	93.9+1
Ontario	91.2	92.4	90.7	91.2	92.6	93.2
Males	91.6	92.2	90.8	91.5	92.5	93.5
Females	90.9	92.6	90.5	90.9	92.6	92.8
Manitoba	91.0	90.6	92.1	93.4	92.3	93.2
Males	91.8	89.1	94.1	93.5	92.6	94.2
Females	90.2	92.1	90.2	93.3	92.0	92.3
Saskatchewan	92.9	92.2	93.4	94.4	93.8+1	92.7
Males	94.1	92.5	94.7	94.7	94.8	92.8
Females	91.8	92.0	92.0	94.2	92.9	92.6
Alberta	92.4	92.8	91.9	92.8	93.3	92.9
Males	91.5	92.8	91.1	93.7	93.6	92.8
Females	93.3	92.9	92.7	91.9	93.1	93.0
British Columbia	91.9	90.1	91.2	91.9	92.4	92.1-1
Males	92.6	90.2	91.4	92.1	92.5	92.6
Females	91.3	90.1	91.1	91.7	92.2	91.6-1
Yukon	94.7	93.0	90.9	92.3	93.8	91.4
Males	95.3	96.3	93.5	90.2	94.3	89.8-1
Females	94.2	89.7	88.3	94.4	93.3	92.9
Northwest Territories	91.0	89.2	91.6	88.8	90.0	90.0
Males	94.8	90.2	92.1	90.3	90.8	89.8
Females	86.8	88.2	91.1	87.3	89.2	90.3
Nunavut	91.8	83.8	87.0	86.6	85.6-1	85.5-1
Males	94.0	85.8	88.0	89.4	83.2-1	85.9-1
Females	89.4	81.6	86.0	83.5	88.2-1	85.0-1

Source: Statistics Canada Table 13-10-0113-01

Lifestyle

Healthy choices around behaviours such as physical activity, food intake, smoking, alcoholuse, immunization and health care can exert a protective effect on personal wellness and health system demand (Table 4-30). With regard to physical activity, PEI males have better health behaviours than females (by 7.9% among male adults and 10.2% among male youth). And, the percentage of females that are active is higher in Canada than PEI by 5.2% among adult females and by 11.2% among young females age 12 to 17 years. The percentage difference between PEI and Canada in physical activity is significant (p<0.05) for adult males and females and for youth males (but not youth females) in the 2017-2018 Canadian Community Health Survey. The physical activity criterion in the survey was 150 minutes a week for adults age 18 and over, and 60 minutes a day for persons age 12 to 17 years.

Smoking behaviour remains prevalent in PEI. Daily smoking occurs among 9.7% of PEI females and 17.7% of PEI males, compared to a similar rate among Canada females (9.6%) and a lower rate among Canada males (13.0%). By subtraction, occasional smoking is a practice of approximately 3%-4% of Island males and females which is better than Canada (but is offset by the higher percentage of daily tobacco use in PEI compared to Canada). Daily smoking among males is significantly greater in PEI than Canada (17.7% versus 13.0%), but not daily smoking among females living in PEI compared to Canada (9.7% versus 9.6%, respectively).

The percentage of heavy alcohol use is lower among females than males respectively in both PEI (10.6% versus 24.0%) and Canada (15.1% versus 23.7%). Heavy use of alcohol by females living in PEI (10.6%) is notably lower and statistically lower than the percentage of heavy use among Canada females (15.1%). Immunization is practiced by 43.6% of PEI females which is 9.6% higher than PEI males and 9.1% higher than Canada females. The female differences between PEI and Canada (43.6% versus 34.5%) are significant as are the male differences between provincial and national (34.0% versus 29.4%) immunization behavior. A regular health care provider was reported by 84.2% of PEI females which was 3.7% higher than the percentage of PEI males who reported having a regular health care provider yet 4.3% lower than the percentage of Canada females reporting a regular provider. Statistics Canada described the difference in percentages between PEI and Canada females as statistically significant (P<0.05).

Overall, among the seven lifestyle indicators, PEI females have better behaviour than PEI males with regard to daily tobacco use, heavy alcohol use, and immunization but have poorer practices with regard to physical activity. And PEI females have better practices than Canada females with regard to heavy alcohol use and immunization but not physical activity, tobacco use or regular health care provider.

TABLE 4-30 HEALTH INDICATORS FOR LIFESTYLE BY SEX FOR ADULTS, PEI AND CANADA (ALL AGES)²²⁰

Indicator	Metric	Area	Both Sexes	Male	Female	Better results in male or female? (by how much?)	Better female results in PEI or Canada? (by how much?)	
Physical activity, 150 minutes per week, adult	Percent	PE	51.0% ⁻¹	55.1%	47.2% ⁻¹	Male (7.9%)	Canada (5.2%)	
(18 years and over)	Percent	CA	56.0%	59.7% ⁻¹	52.4%	Male (7.3%)	Cariada (5.270)	
Physical activity, average 60 minutes per day, youth	Percent	PE	45.6% ⁻¹	50.6% ⁻¹	40.4%	Male (10.2%)	Canada (11.2%)	
(12 to 17 years old)	Percent	CA	57.8%	63.5%	51.6%	Male (13.7%)	Calidua (11.2%)	
Current Smoker, daily	Percent	PE	13.6%+1	17.7%+1	9.7%	Female (8.0%)	Canada (0.1%)	
current smoker, daily	Percent	CA	11.3%	13.0%	9.6%	Female (3.4%)		
Current Smoker, daily or	Percent	PE	17.0%	20.9%	13.3%	Female (7.6%)	SAME	
occasional	Percent	CA	16.0%	18.9%	13.3%	Female (5.6%)	SAIVIL	
Heavy drinking	Percent	PE	17.1% ⁻¹	24.0%	10.6% ⁻¹	Female (13.4%)	PEI (4.5%)	
Heavy utiliking	Percent	CA	19.3%	23.7%	15.1%	Female (8.6%)	FLI (4.370)	
Influenza immunization, in	Percent	PE	39.0%+1	34.0%+1	43.6%+1	Female (9.6%)	PEI (9.1%)	
past twelve months	Percent	CA	32.0%	29.4%	34.5%	Female (5.1%)		
Has a regular healthcare	Percent	PE	82.4% ⁻¹	80.5%	84.2% ⁻¹	Female (3.7%)	Canada (4.3%)	
provider	Percent	CA	84.9%	81.1%	88.5%	Female (7.4%)		

Source: Statistics Canada Table 13-10-0113-01

Tobacco use has been modernized by the introduction of e-cigarettes. E- cigarettes do not contain tobacco. E-cigarettes include vaporizers with e-juice, vape pen, tank, or mod and are available with or without nicotine (but not tobacco). Use of these products is monitored through the Canadian Student Tobacco, Alcohol and Drugs Survey commonly known as CSTADS. A total sample of 62,850 students in grades 7 to 12 completed the survey in ten provinces. (Table 4-31)

PEI use exceeded Canada use for each of the four product categories studied. In PEI, the percentage of female users exceeded the percentage of male users for all four products studied (by 1.5% to 3.3%). The jurisdictional analysis showed that, in PEI, female outcomes are preferable to male outcomes. And, female outcomes in Canada were preferable to female outcomes in PEI.

E-cigarette prevalence rates doubled among students in 2018-19 compared to 2016-17. Twenty percent (20%) of students had used an e-cigarette (with or without nicotine) in the past 30 days, an increase from 10% in 2016-17. The prevalence of past-30-day use of e-cigarettes was not different between male (21%) and female (19%) students.

E-cigarette use was higher among students in grades 10 to 12 (29%) than those in grades 7 to 9 (11%) suggesting that adoption increases during the high school years. Compared to the PEI tobacco use figures in the previous table, adult levels of smoking are almost reached during the high school years. Students who used an e-cigarette (with or without nicotine) in the past 30 days were vaping frequently, with 40% of the students reporting daily or almost daily use.

TABLE 4-31 PAST 30-DAY USE OF CIGARETTES, E-CIGARGRETTES, ANY TOBACCO PRODUCT BY SEX, PEI AND CANADA²²¹

Area	Sex	Cigarettes (%)	E-cigarettes (%)	E-cigarettes with nicotine (%)	E-cigarettes without nicotine (%)
PE	Both sexes	8.40%	26.7%	23.6%	15.6%
	Male	9.20%	27.7%	25.2%	14.8%
	Female	7.60%	25.6%	21.9%	16.3%
	Better results in PEI male or PEI female by x%	Female (1.6%)	Female (2.1%)	Female (3.3%)	Males (1.5%) Note: Use may be positive if it averts tobacco smoking, and/or supports tobacco cessation.
	Both sexes	5.4%	20.2%	17.7%	11.3%
	Male	5.7%	21.5%	18.8%	11.8%
CA	Female	5.2%	18.9%	16.5%	10.7%
	Better results in PEI female or Canada female by x%	Canada (2.4%)	Canada (6.7%)	Canada (5.4%)	Canada (5.6%)
	Better female results in PEI or Canada by x % difference	Canada (2.4%)	Canada (5.7%)	Canada (5.4%)	Canada (5.6%)

Source: Canadian Student Tobacco, Alcohol and Drugs Survey 2018-2019

Positive lifestyle behaviours are fundamental to good health. Table 4-32 summarizes five lifestyle indicators reported for PEI, Canada, and Atlantic Canada. Clear trends exist. In all five jurisdictions, the males consistently performed better than the females (adult and youth) for the two physical activity indicators while the females consistently performed better than the males for the remaining three indicators (alcohol, tobacco, and immunization).

In the Atlantic Provinces, lifestyle behaviours displayed consistent patterns (Table 4-32). Females consistently reported better outcomes than males regarding drinking, smoking, and immunization. Males in all jurisdictions consistently reported better outcomes for the two physical activity measures. Females report both less activity and more inactivity than males. In summary, for lifestyle outcomes, females showed higher rates of adopting positive behaviours and lower rates of adopting negative behaviours than males for four behaviours (fruit and vegetable consumption, drinking, smoking, and immunization), and males showed higher rates of adopting positive behaviours and lower rates of adopting negative behaviours than females for two behaviours (physical activity).

TABLE 4-32 PREVALENCE OF LIFESTYLE BEHAVIOURS FOR ALL AGES BY SEX, ATLANTIC PROVINCES AND CANADA (PERCENT)²²²

	Sex	Heavy drinking	Leisure time physical activity, moderately active or active	Leisure time physical activity, inactive	Current Smoker, daily or occasional	Influenza immunization, less than a year ago
	M	24.0	55.1	50.6	20.9	34.0 ⁺¹
PE	F	10.6	47.2	40.4	13.3	43.6 ⁺¹
PE	Better outcome	Female (13.4)	Male (8.9)	Male (10.2)	Female (7.6)	Female (9.6)
	M	34.8+1	56.4 ⁻¹	56.6	24.2+1	27.2
	F	18.8+1	47.4 ⁻¹	45.6	17.6 ⁺¹	34.3
NL	Better outcome	Female (16.0)	Male (9.0)	Male (11.0)	Female (7.8)	Female (7.1)
	M	26.9 ⁺¹	58.8	59.1	20.3	41.2 ⁺¹
	F	15.0	50.0	55.5	15.6 ⁺¹	50.3 ⁺¹
NS	Better outcome	Female (11.9)	Male (8.8)	Male (3.6)	Female (4.7)	Female (9.1)
	M	25.9	56.0 ⁻¹	59.8	16.3	33.9 ⁺¹
	F	13.1 ⁻¹	44.5 ⁻¹	41.9	12.5	41.6+1
NB	Better outcome	Female (12.8)	Male (11.50)	Male (17.9)	Female (3.8)	Female (7.7)
	M	23.7	59.7	63.5	18.9	29.4
	F	15.1	52.4	51.6	13.3	34.5
CA	Better outcome	Female (8.6)	Male (7.3)	Male (11.9)	Female (5.6)	Female (5.1)

Source: Statistics Canada Table 13-10-0113-01

Health Across the Life Cycle

Most of the health lifestyle indicators presented above described ages 12 and up as reported by the Canadian Community Health Survey. Health behaviors vary across the lifecycle for various reasons including developmental reasons (e.g., breast-feeding), legal reasons (e.g., tobacco use and alcohol use), incremental effect (e.g., overweight and obesity, and mental health and trauma), and other reasons. Age is important in survey results. A health issue may not affect one age category yet may be extremely prevalent in another age category. Usually, all persons surveyed are reported as a group; for example, "total, 12 years and over," or "total, 15 years and over." Therefore, the Canadian Community Health Survey provides age categories for a deeper dive into health behaviours across the life cycle. Table 4-33 elaborates on some earlier health outcomes by providing outcomes according to five individual age categories (12-17, 18-34, 35-49, 50-64, 65 and over), and a sixth summary category, i.e., "all ages" or age 12 years and over (all five age categories combined). When analyzing provincial data, it is sometimes essential to report the total sample because of the small number of observations in certain age categories (which may require suppression or rounding of output numbers). In contrast, large national samples usually permit age-based reporting without fear of personal identification).²²³



TABLE 4-33 HEALTH CHARACTERISTICS OF PERSONS AGE 12 YEARS AND OVER BY SEX AND AGE (CANADIAN COMMUNITY HEALTH SURVEY, 2017-2018)²²⁴

	<u>o</u>	%	%	%	%		%	v _o		%	%	%	\ 0	%
	Female	62.6%	%9.09	13.7%	11.6%	67.5	%0'.29	7.0%	8.3%	15.3%	22.8%	31.2%	31.0%	33.5%
All	Male	62.0%	61.1%	11.6%	10.6%	70.0	71.9%	7.5%	6.4%	16.7%	19.9%	42.0%	41.2%	34.3%
	Both	62.3%	%8.09	12.7%	11.1%	68.7	69.4%	7.2%	7.4%	16.0%	21.4%	36.5%	36.1%	33.9%
d over	Female	75.5%	47.8%	18.5%	19.6%	75.5%	71.0%	4.1% ^E	5.1%	8.3%E	12.4%	35.2%	37.0%	34.5%
65 years and over	Male	80.08	46.1%	19.4%	20.3%	80.0%	72.7%	3.8% ^E	5.3%	5.3% ^E	9.1%	48.5%	43.6%	36.3%
65 y	Both	77.6%	47.0%	18.9%	19.9%	77.6%	71.8%	4.0% ^E	5.2%	6.9% ^E	10.9%	41.3%	40.1%	35.4%
	Female	56.2%	26.0%	19.3% ^E	14.9%	%8:99	68.5%	6.5% ^E	8.0%	23.2%	24.2%	31.4%	33.7%	35.7%
50 – 64	Male	%9.09	54.6%	16.9% E	13.6%	64.2%	%6:02	8.8%E	7.0%	27.9%	23.5%	42.5%	43.5% 3	37.7%
	Both	58.3%	55.3%	18.1%	14.2%	65.3%	%2'69	7.6% ^E	7.5%	25.5%	23.9%	36.9%	38.7% 4	36.7%
	Female	74.2%	63.5%	11.5% ^E	%0.6	73.0%	%8'99	6.3% ^E	8.2%	14.4% ^E	30.0%	29.0%	29.7%	33.2%
35-49	Male	64.3%	64.6%	5.5% ^E	7.2%	71.8%	71.6%	ш	6.5%	18.8% ^E	26.8%	39.3%	43.8%	38.4%
	Both	69.4%	64.0%	8.6% ^E	8.1%	72.4%	%7:69	5.4% ^E	7.3%	16.5%	28.4%	34.0%	36.9%	35.7%
	Female	67.5	68.7%	7.2% ^E	6.7%	26.5%	61.8%	10.7% ^E	11.1%	15.3% ^E	24.9%	29.2%	24.9%	i
18-34	Male	%6'.29	70.3%	щ	6.4%	63.5%	70.8%	14.1% ^E	7.1%	17.1% ^E	20.8%	38.6%	35.4%	i
	Both	67.7%	%5'69	6.9% ^E	6.5%	%0:09	%8:99	12.4% ^E	9.1%	16.2%	22.9%	34.1%	30.3%	i
17	Female	70.1%	75.1%	ш	3.6%	64.3%	70.7%	ш	8.2%	щ	17.1%	ŧ	:	į
12-17	Male	72.7	74.5% 74.0%	Щ	3.6%	78.1	79.0%	ட	4.5%	Щ	8.6%	:	÷	i
	Both	71.5%	74.5%	6.1% ^E	3.6%	71.4%	74.9%	6.1% ^E	6.3%	6.9% ^E	12.7%	i	i	i
		PE	5	PE	S	PE	5	PE	S	PE	S	F	CA	PE
	Health indicator	Perceived health, very	excellent	Perceived health, fair or	poor	Perceived mental health, very	excellent	Perceived mental	health, fair or poor	Perceived life stress, most days quite a	bit or extremely stressful	Body Mass Index, adult (18 years and	over), overweight	Body Mass Index, adult (18 years

1.2	11.11		-															
	Female	25.8%	18.4€	21.4%	23.4%	22.2%	7.5%	6.2%\$	11.3%	9.1%	5.8% ^E	4.4%	19.0%	16.9%	12.6%	11.0%	13.3%	13.3%
II V	Male	28.0%	28.4€	29.8%	18.1%	15.9%	10.1%	8.2%	5.8% ^E	7.0%	7.2%	4.0%	20.6%	18.0%	7.0%	%5'9	20.9%	18.9%
	Both	26.9%	23.3 ^E	25.8%	20.8%	19.1%	8.8%	7.2%	8.6%	8.1%	6.5%	4.2%	19.8%	17.4%	%6.6	8.8%	17.0%	16.0%
over	Female	28.1%	i	i	20.8%	52.9%	15.2%	14.5%	7.3%E	%0.6	8.5% ^E	7.8%	20.6%	44.0%	8.1% ^E	7.9%	8.4% ^E	8.8%
65 years and over	Male	28.0%	i	i	38.4%	37.8%	25.4%	21.8%	5.2% €	2.9%	15.2% ^E	8.0%	48.3%	42.8%	5.1% €	2.5%	15.1% ^E	10.8%
65 y	Both	28.1%	ŀ	i	45.0%	45.9%	19.9%	17.9%	6.3%E	7.6%	11.6%	%v6'L	49.6%	43.5%	6.7% €	%8.9	11.5%	9.8%
64	Female	29.5%	i	i	30.7%	31.6%	11.2% ^E	8.7%	13.6% €	%9.6	7.9% ^E	4.2%	22.2%	23.7%	12.5% ^E	12.7%	19.2%	16.6%
50 – 6	Male	33.7%	:	ı	30.9%	23.1%	11.6% E	12.6%	5.6% €	%0.9	4.1% ^E	3.7%	25.5%	28.7%	6.9%	7.5%	22.7%	21.4%
	Both	31.6%	i	ŧ	30.8%	27.4%	11.4%	10.6%	9.7% ^E	7.8%	6.0% ^E	4.0%	23.8%	26.2%	%8.6	10.1%	20.9%	19.0%
	Female	28.0%	i	ŧ	8.7% ^E	10.3%	ш	3.6%	10.4% ^E	9.1%	ш	1.6%	5.8% ^E	7.7%	13.8%	11.8%	16.3% ^E	14.2%
35-49	Male	31.2%	i.	i	6.3% ^E	9.3%	6.5% €	4.0%	ш	%9.9	ш	1.1%	16.6%	10.8%	ш	%6.9	25.2% ^E	22.7%
	Both	29.7%	ŀ	i	7.5% ^E	8.6	4.1% ^E	3.8%	7.0% ^E	7.9%	щ	1.4%	11.0% ^E	9.5%	8.0% €	9.4%	20.6%	18.4%
	Female	18.3%	30.2 ^E	i	щ	2.5%	ш	1.2%	14.5% [€]	%0.6	:	:	Щ	1.6%	17.1% €	12.4%	11.2%	15.3%
18-34	Male	20.0%	25.0 ^E	ŧ	ч	2.5%	ш	1.0%	8.2% ^E	7.9%	:	:	Щ	2.5%	14.9% €	%2.9	26.4% ^E	23.2%
	Both	19.2%	27.5	i	ш	2.5% ^E	ш	1.1%	11.4% ^E	8.4%	:	:	ш	2.1%	16.0%	9.5%	18.9% ^E	19.3%
	Female	÷	18.4€	21.4%	щ	0.9%€	ш	0.5%E	ш	8.6%	:	:	Ŧ	0.5% ^E	ш	%0.9	18.9%	3.7%
12-17	Male	i	28.4 ^E	29.8%	щ	1.0% ^E	щ	0.6% ^E	ш	10.3%	·	:	щ	0.6% ^E 0.7% ^E	щ	3.1%	ш	3.0%
	Both	÷	23.3 ^E	25.8%	ш	0.9% ^E	ш	0.5% ^E	7.3%E	9.4%	:	:	щ	0.6% ^E	ш	4.5%	ш	3.3%
		క	PE	S	PE	S	PE	5	PE	S	PE	5	PE	5	PE	S	PE	క
	Health indicator	and over), obese	Body Mass Index, adult Youth (12 to 17 vears	old), overweight or obese	Arthritis (age 15 & up)		Diabetes		Asthma		Chronic obstructive pulmonary	disease or COPD (age 35 and up)	High blood	pressure	Mood .	disorder	Current Smoker,	daily or occasional

	<u>o</u>	%	%	%	%	%	%	%	%	%	%	√ E	%		
	Female	9.7%	%9.6	10.6%	15.1%	47.2%	52.4%	40.4%	51.6%	82.2%	%6.06	25.2% ^E	34.4%	:	:
All	Male	17.7%	13.0%	24.0%	23.7%	55.1%	29.7%	20.6%	63.5%	ij	÷	ij	ï	ŧ	·
	Both	13.6%	11.3%	17.1%	19.3%	51.0%	26.0%	45.6%	57.8%	82.2%	%6:06	25.2% [€]	34.4%	ŧ	÷
d over	Female	6.0% €	7.0%	3.1%	4.8%	23.2%	35.2%	i	i	:	:	:	÷	ŧ	:
65 years and over	Male	14.5% [€]	8.7%	15.4% ^E	10.9%	38.4%	43.2%	÷	÷	:	:	:	÷	ŧ	:
65)	Both	10.0%	7.8%	8.8%	%9'.	30.3%	38.9%	÷	i	:	÷	:	:	i	÷
- 64	Female	14.6% ^E	13.4%	11.2% ^E	14.2%	47.2%	53.1%	÷	i	i	ш	:	щ	:	:
20 – (Male	20.5%	17.4%	22.4%	23.6%	50.1%	57.2%	:	÷	÷	i	:	i	÷	:
	Both	17.4%	15.4%	16.7%	18.9%	48.7%	55.1%	i	:	:	щ	:	щ	ij	:
6	Female	12.0% ^E	10.5%	10.2% ^E	18.2%	62.0%	%6.99	i	i	79.8%	91.3%	ш	39.5%	÷	ı
35-49	Male	21.3% E	16.0%	22.8% ^E	28.0%	57.2%	61.9%	i	i	i	i	i	i	÷	:
	Both	16.5%	13.2%	16.2%	23.1%	29.7%	59.4%	i	÷	79.8%	91.3%	ட	39.5%	ŧ	:
	Female	7.9%E	9.4%	19.2% ^E	24.2%	26.0%	61.1%	i	i	83.2%	%9.06	19.4% ^E	30.8%	i	:
18-34	Male	19.4% ^E	12.8%	41.2%	34.2%	72.5%	71.1%	÷	i	i	i	i	i	ŧ	÷
	Both	13.7%	11.1%	30.3%	29.2%	64.4%	66.2%	:	:	83.2%	%9.06	19.4% ^E	30.8%	ï	:
	Female	ш	1.2% ^E	Щ	4.2%	i	ŧ	40.4%	51.6%	i	щ	i	щ	į	:
12-17	Male	ш	0.9%E	ட	3.5%	i	i	50.6	63.5	÷	i	i	÷	÷	:
	Both	ட	1.0%	Щ	3.8%	Ē	i	45.6%	57.8%	i	ш	i	Щ	:	:
		PE	క	PE	ర	PE	క	PE	প্র	PE	క	PE	క	PE	క
	Health indicator	Current smoker, daily		Heavy	φ 	Physical activity, 150 minutes per week, adult	(18 years and over)	Physical activity, 60 minutes per	day, youth (12-17 years)	Breast milk feeding, initiation		Exclusive breastfeedin g, at least 6	months	Fruit and vegetable consumption 5 times or	more per day

	Female	72.4%	%8.69	91.8%	92.9%	84.2%	88.5%	43.6%	34.5%
All	Male	76.4%	%0'89	93.9%	93.4%	80.5%	81.1%	34.0%	29.4%
	Both	74.3%	%6.89	92.8%	93.1%	82.4%	84.9%	39.0%	32.0%
dover	Female	84.9%	75.6%	92.8%	%9:06	94.0%	94.4%	%8:99	60.4%
65 years and over	Male	83.2%	76.3%	94.0%	%6:06	%6:06	93.7%	64.5%	%9.69
65 y	Both	84.1%	75.9%	93.0%	%8.06	92.6%	94.0%	%2'29	%0.09
4	Female	%8:69	%8'.29	89.0%	91.0%	%8.98	91.8%	45.4%	35.9%
50 – 64	Male	79.9%	68.6%	%9:06	91.4%	78.6%	87.8%	30.2%	30.4%
	Both	74.4%	68.2%	89.8%	91.2%	82.8%	89.8%	38.0%	33.1%
	Female	74.5%	68.3%	93.9%	92.8%	80.7%	88.2%	39.3%	26.4%
35-49	Male	72.1%	9 %0.99	94.0%	%9:86	81.6%	78.9%	25.3% ^E	21.8%
	Both	73.4%	67.2%	93.9%	93.2%	81.1%	86.3%	32.5%	24.1%
	Female	26.9%	64.3%	%9.96	95.1%	73.3%	81.2%	28.5%	23.3%
18-34	Male	%2'89	29.6%	95.7%	95.1%	72.6%	%9'29	21.0% ^E	16.3%
	Both	62.3%	62.0%	93.6%	95.1%	73.0%	74.3%	24.8%	19.8%
	Female	90.3%		95.2%	97.3%	89.0%	88.3%	27.5% ^E	25.1%
12-17	Male	82.9	84.0% 86.6%	98.2	98.2	80.0	84.8	32.7 %E	29.1
	Both	%9.98	85.2%	%2'96	97.8%	84.3%	86.5%	30.2%	27.1%
		PE	5	PE	СА	PE	5	PE	5
	Health indicator	Sense of belonging to local community, somewhat strong or very Life satisfied or very satisfied			Has a regular healthcare provider		Influenza immunization, in past 12 months		

Source: Statistics Canada Table 13-10-0113-01

Health Service Utilization

Consumers were asked to suggest specific health indicators that would answer the question, "How well is your health system actually working?" The consumers identified five aspects of health service utilization, namely, 1) access, 2) health promotion and disease prevention, 3) health outcomes, 4) quality of care, and 5) spending. Using this framework, the following indicators were identified and presented in a disaggregated manner (with male and female outcomes) to support heath care planning for females and males living in PEI²²⁵ (Table 4-34).

Among the ten health care utilization indicators are four access indicators, two health promotion and prevention indicators, and four health outcome indicators (Table 4-34). At the PEI level, eight indicators favoured female outcomes and two indicators favoured male outcomes. PEI male outcomes were worse than PEI female outcomes, respectively, for the hospital stays caused by drug abuse (816 versus 461 per 100,000), days of extended hospital stay awaiting home readiness prior to discharge (16 versus 11 days), having a regular health care provider (80.5% versus 84.2%), smoking daily or occasionally (17.9% versus 15.0%), life expectancy (82.0 versus 83.8 years), deaths avoidable with better prevention and care (230 versus 140 per 100,000), children vulnerable in areas of development (22.2% versus 11.4%), and hospitalizations entirely caused by alcohol (420 versus 168 per 100,000).

The two indicators where PEI females outcomes were worse than PEI males outcomes, respectively, were hospital admissions possibly averted by appropriate primary health care (418 versus 295 per 100,000 population, or ACSC or Ambulatory Care Sensitive Conditions), and adult obesity (36.2% versus 35.0%). ACSC rates are lowered when patients receive regular preventive care and/or regular treatment to manage specified conditions, e.g., angina, asthma, chronic obstructive pulmonary disorder, diabetes, epilepsy, heart failure, pulmonary edema and hypertension. ACSC related hospitalization represents 0.4% of Canadians under the age of 75, but represents 6% of all hospitalized individuals and nearly 11% of all hospital days making ACSC an important indicators. Canada male-female outcomes closely followed PEI male-female outcomes except for obesity (Canada females better than Canada males 26.9% versus 28.4%).

When PEI females were compared to Canada females the Canada females performed better than PEI females on nine of ten health indicators. Differences were small except for obesity among adult females (36.2% PEI versus 26.9% Canada). PEI females performed better than Canada females with regard to children vulnerable in areas of development. Only 11.4% of PEI children were vulnerable compared to 20.3% of Canada children. Sex-disaggregated data is not yet available for two aspects of care, i.e., spending and quality of care. Comparing provinces (both sexes) the cost of an average hospital stay is \$6,558 for PEI and \$6,162 for Canada. To put PEI in perspective, the maximum cost of an average stay is \$9,084 for a territory (NWT) and \$7,988 for a province (Alberta), and the minimum cost for an average hospital stay is \$5,484 (Ontario).

TABLE 4-34 HEALTH SERVICE UTILIZATION INDICATORS, PEI AND CANADA²²⁹

ASPECT/ service	Area	Both Sexes	Male	Female	Better results in male or female by x difference in rates	Better female results in PEI or Canada by x difference in rates	
ACCESS (4)							
Hospital stays for harm caused by substance abuse	PE	635	816	461	Female (355)	Canada (90)	
(per 100,000)	CA	505	642	371	Female (271)	· ·	
Hospital stay extended until home care services or	PE	14	16	11	Female (5)	Canada (3)	
supports are ready (median, in days)	CA	8	8	8	SAME		
Hospital admissions that may be prevented or managed by	PE	356^	295	418^	Male (123)	Canada (72)	
appropriate primary health care (per 100,000 population under age 75 years)	CA	316	286	346	Male (60)		
Has a regular health care provider (%)	PE	82.4%	80.5%	84.2%	Female (3.7%)	Canada (4.3%)	
	CA	84.9%	81.1%	88.5%	Female (7.4%)		
HEALTH PROMOTION AND D	DISEASE	PREVENTI	ON (2)				
Obesity (age 18 and older) (%)	PE	35.6 ⁺¹	35.0 ⁺¹	36.2 ⁺¹	Male (1.2%)	Canada (9.3%)	
	CA	27.7%	28.4%	26.9%	Female (1.5%)		
Daily or occasional smokers (%)	PE	16.4%	17.9%	15.0%	Female (2.9%)	Canada (2.7%)	
Sillokers (70)	CA	14.8%	17.3%	12.3%	Female (5.0%)		
HEALTH OUTCOMES (4)							
Length a Canadian is expected to live (average	PE	82.0	82.0	83.8	Female (1.8)	Canada (0.3)	
years)	CA	82.1	82.1	84.1	Female (2.0)		
Deaths potentially avoidable with better	PE	184	230	140	Female (90)	PEI (6)	
prevention or care (per 100,000; lower was	CA	190	235	146	Female (89)		
Children vulnerable in areas of development (%)	PE	16.8%	22.2%	11.4%	Female (10.8%)	PEI (8.9%)	
- areas of acveropment (70)	CA	27.6%	34.7%	20.3%	Female (14.4%)		
Hospitalizations entirely caused by alcohol (per	PE	290	420	168	Female (252)	Canada (2)	
100,000)	CA	259	356	166	Female (190)		

Source: Canadian Institute for Health Information

The previous section concerned the health care system. The following section concerns specific health services frequently used by Islanders and Canadians (Table 4-35). Of the ten indicators, PEI males were favoured for six outcomes and females were favoured for three outcomes plus hysterectomy. Outcomes for Canadian females were more favourable than for PEI females for all health services except one: percutaneous coronary intervention.

TABLE 4-35 INDICATORS FOR SPECIFIC HEALTH SERVICES, PEI AND CANADA (RATE PER 100,000 POPULATION)²³⁰

FOFULATI						
Health services	Area	Both Sexes	Male	Female	Better results in male or female by x difference in rates	Better female results in PEI or Canada by x difference in rates
Hospitalized Hip Fracture Event	PE	702	849	479	Female (370)	Canada (111)
Fracture Event	CA	494	584	368	Female (216)	Canada (111)
Cardiac	PE	236	113	373	Male (260)	
Revascularization	CA	260	123	409	Female (286)	Canada (36)
Hospitalized Acute	PE	301^	206^	412^	Male (206)	0 1 (00)
Myocardial Infarction Event	CA	241	158	332	Male (174)	Canada (80)
Injury	PE	741^	716^	743^	Male (27)	Canada (123)
Hospitalization	CA	591	551	620	Female (69)	
Percutaneous	PE	180^	98	272^	Male (174)	DEL (42)
Coronary Intervention (PCI)	CA	204	102	314	Male (212)	PEI (42)
Knee Replacement	PE	243^	290^	192	Female (98)	Canada (5)
(All Types)	CA	217	245	187	Female (58)	
Coronary	PE	57	15	102	Male (87)	Canada (3)
Artery Bypass Graft (CABG)	CA	59	22	99	Male (77)	
Hospitalized Stroke	PE	172^	163^	181	Male (18)	Canada (15)
Event	CA	144	124	166	Male (42)	
Hip Replacement	PE	221^	253^	183	Female (70)	Canada (11)
Rate (All Types)	CA	185	194	172	Female (22)	
Hysterectomy-	PE	Not	Not	396^	Not applicable	Canada (108)
Female	CA	Not	Not	288	Not applicable	

Source: Canadian Institute for Health Information

Table 4-36 summarizes the absolute numerical differences between PEI females and Canada females where three procedures differed by more than 100 units, one by 50-99 units, and six by less than 50 points.

TABLE 4-36 DIFFERENCES IN HEALTH SERVICE RATES BETWEEN PEI-CANADA FEMALES (PART A) AND CANADA MALES CANADA FEMALES (PART B) SHOWING BETTER OUTCOME IN BRACKETS AND BY HOW MUCH²³¹

Differ by ≥100 units	Differ by	Differ by < 50 units
	50-99 units	
PART A. PEI FEMALE VS. CANADA FEMALE Injury hospitalization (CA, 123) ⁻¹ Hospitalized hip fracture event (CA, 111) Hysterectomy (CA, 108) ⁻¹	Hospitalized acute myocardial infarction event (CA, 80)-1	 Percutaneous coronary intervention (PE, 42)*1 Cardiac revascularization (CA, 36) Hospitalized Stroke Event (CA, 15) Hip Replacement Rate (CA, 11) Knee replacement, all types (CA, 5) Coronary artery bypass (CA,3)
PART B. CANADA MALE VS. CANADA FEMALE Cardiac revascularization (F, 286) Hospitalized hip fracture event (F, 216) Percutaneous coronary intervention (M, 212) Hospitalized acute myocardial infarction event (M, 174)	 Coronary artery bypass (M, 77) Injury hospitalization (F, 69) Knee replacement, all types (F, 58) 	 Hospitalized Stroke Event (M, 42) Hip Replacement Rate (F, 22)

Source: Canadian Institute for Health Information

"Hospital stays in Canada" is a rich source of data describing male and female hospitalization by 1) discharges, 2) total length of stay in days, and 3) average length of stay in days consistent with genderbased analysis plus, GBA+. 232 These in-patient hospitalization statistics are described in five-year age intervals to show how in-patient resources are used by gender (and therein by age). Gender and jurisdictional analyses were applied to this data using the same approach as applied elsewhere in this report even though hospital stay is known to be dependent on medical need (and only secondarily dependent on other factors such as adequate care, place to stay, and financial coverage).

The male-female outcomes were compared for the gender analysis. For the jurisdictional analysis, Canada figures would always be greater than PEI figures due to the difference in population size. Therefore, the space was used to present gender ratios (male-to-female, M/F and female-to-male, F/M) so that it would be easier to spot detailed gender trends in hospitalization (Table 4-37). Considering all ages discharged from hospital in PEI, fewer male discharges (6,015) than female discharges (7,739) occurred in 2018-2019, according to CIHI figures. This yielded a male-to-female (M/F) ratio of 0.78, and a female-to-male (F/M) ratio of 1.29 (which coincidentally were identical to the equivalent Canada ratios). Until 10 years of age fewer females than males were in-patients. From Age 10 onward more females than males were hospitalized as in-patients until age 60. Thereafter, more males than females were hospitalized until age 84 years. From 85 years to the end of life more males

than females are hospitalized in PEI. Hospitalization trends in Canada were the same as in PEI until age 50 years.

From 50 to 59 years, fewer females than males were hospitalized until age 80 years when fewer males than females were hospitalized until, the end of the lifecycle. The gender ratios for hospitalization varied throughout the life cycle. As stated, the M/F ratio for all ages was 0.78 in PEI and In Canada. In PEI, the lowest M/F ratio was 0.22 (30-34 years) and the highest was 1.55 (0-4 years). Similarly, in Canada, the lowest M/F ratio was 0.20 (30-34 years) and the highest was 1.31 (0-4 years). As stated, the F/M ratio was 1.29 for hospitalizations at all ages in both PEI and Canada. As would be expected, the F/M ratio was minimum and maximum at the same times as the M/F ratio. For PEI hospitalizations, the F/M ratio ranged from 0.65 (0-4 years) to 4.47 (30-34 years), and for Canada hospitalizations ranged from 0.76 (0-4 years) to 4.98 (30-34 years).

TABLE 4-37 INPATIENT HOSPITALIZATIONS: NUMBER OF PATIENT DISCHARGES BY AGE AND SEX, PEI AND CANADA $(2018-2019)^{233}$

Age (years)	Metric		Both Sexes	Male	Female	Better results in male or female? (by how much?)	Ratio			
		1					M/F	F/M		
All ages	Number	PE	13,754	6,015	·	Males (1,724)	0.78	1.29		
	Number	CA	3,086,942	1,348,170		Males (390,349)	0.78	1.29		
0-4	Number	PE	484	294	190	Females (104)	1.55	0.65		
	Number	CA	124,710	70,819	53,891	Females (70,819)	1.31	0.76		
5-9	Number	PE	201	119	82	Female (37)	1.45	0.69		
	Number	CA	33,595	18,749	14,846	Female (3,903)	1.26	0.79		
10-14	Number	PE	166	64	102	Male (38)	0.63	1.59		
	Number	CA	36,536	17,500	19,026	Male (1,526)	0.92	1.09		
15-19	Number	PE	339	130	209	Male (79)	0.62	1.61		
	Number	CA	69,322	26,937	42,339	Male (15,402)	0.64	1.57		
20-24	Number	PE	557	173	384	Male (211)	0.45	2.22		
	Number	CA	109,257	31,594	77,603	Male (46,009)	0.41	2.46		
25-29	Number	PE	737	141	596	Male (455)	0.24	4.23		
	Number	CA	185,166	35,170	149,957	Male (114,787)	0.23	4.26		
30-34	Number	PE	821	150	671	Male (521)	0.22	4.47		
	Number	CA	221,128	36,963	184,125	Male (147,162)	0.20	4.98		
35-39	Number	PE	561	143	418	Male (275)	0.34	2.92		
	Number	CA	165,907	40,470	125,422	Male (84,952)	0.32	3.10		
40-44	Number	PE	473	183	290	Male (107)	0.63	1.58		
	Number	CA	111,778	43,873	67,892	Male (24,019)	0.65	1.55		
45-49	Number	PE	436	171	265	Male (94)	0.65	1.55		
	Number	CA	114,908	54,522	60,379	Male (5,857)	0.90	1.11		
50-54	Number	PE	581	272	309	Male (37)	0.88	1.14		

	Number	CA	146,457	75,734	70,717	Female (5,017)	1.07	0.93
55-59	Number	PE	859	414	445	Male (31)	0.93	1.07
	Number	CA	198,466	106,763	91,703	Female (15,060)	1.16	0.86
60-64	Number	PE	1,083	559	524	Female (35)	1.07	0.94
	Number	CA	235,160	129,243	105,905	Female (23,338)	1.22	0.82
65-69	Number	PE	1,283	691	592	Female (99)	1.17	0.86
	Number	CA	257,752	140,997	116,750	Female (24,247)	1.21	0.83
70-74	Number	PE	1,475	808	667	Female (141)	1.21	0.83
	Number	CA	273,617	147,197	126,420	Female (20,777)	1.16	0.86
75-79	Number	PE	1,187	608	579	Female (29)	1.05	0.95
	Number	CA	247,133	128,041	119,092	Female (8,949)	1.08	0.93
80-84	Number	PE	1,037	520	517	Female (3)	1.01	0.99
	Number	CA	223,385	108,958	114,427	Male (5,469)	0.95	1.05
85-89	Number	PE	850	387	463	Male (76)	0.84	1.20
	Number	CA	188,940	84,184	104,756	Male (20,572)	0.80	1.24
90+	Number	PE	624	188	436	Male (248)	0.43	2.32
	Number	CA	143,725	50,456	93,269	Male	0.54	1.85

Source: Canadian Institute for Health Information

The total length of hospital stay measured in days was lower for males than females when discharges of all ages were counted in both PEI and Canada. The total length of stay in days was 62,225 for males and 72,762 for females living in PEI. Comparable figures for total length of stay Canada were 11,118,989 for males and 11,936,825 for females [almost 180 (178.6) times the number of PEI males and 164 times the number of PEI females] (Table 4-38).

TABLE 4-38 INPATIENT HOSPITALIZATIONS: TOTAL LENGTH OF STAY IN DAYS BY AGE AND SEX, PEI AND CANADA (2018-2019)²³⁴

						AND SEX, PEI AND CANA Better results in	Rat		
Age (years)	Metric	Area	Both	Male	Female	male or female?	M/F	F/M	
			Sexes			(by how much?)	, .	.,	
All ages	Days	PE	137,998	65,225	72,762	Male (7,537)	0.90	1.12	
	Days	CA	596,126	321,635	274,477	Female (47,158)	1.17	0.85	
0-4	Days	PE	1,770	1,110	659	Female (452)	1.69	0.59	
	Days	CA	596,126	321,635	274,477	Female (47,158)	1.17	0.85	
5-9	Days	PE	544	317	227	Female (90)	1.40	0.72	
	Days	CA	109,798	62,127	47,671	Female (14,456)	1.30	0.77	
10-14	Days	PE	1,053	323	730	Male (407)	0.44	2.26	
	Days	CA	173,145	77,920	95,206	Male (17,286)	0.82	1.22	
15-19	Days	PE	2,699	902	1,791	Male (889)	0.50	1.99	
	Days	CA	370,782	160,774	209,697	Male (48,923)	0.77	1.30	
20-24	Days	PE	3,283	1,417	1,866	Male (449)	0.76	1.32	
	Days	CA	516,357	227,773	288,454	Male (60,681)	0.79	1.27	
25-29	Days	PE	3,216	896	2,320	Male (1,424)	0.39	2.59	
	Days	CA	721,358	261,172	460,071	Female (198,899)	0.57	1.76	
30-34	Days	PE	3,449	904	2,545	Male (1,641)	0.36	2.82	
	Days	CA	790,712	253,102	537,369	Male (284,267)	0.47	2.12	
35-39	Days	PE	3,446	1,182	2,264	Male (1,082)	0.52	1.92	
	Days	CA	711,853	283,132	428,626	Male (145,494)	0.66	1.51	
40-44	Days	PE	2,992	1,544	1,443	Female (101)	1.07	0.93	
	Days	CA	616,689	293,128	323,510	Male (30,382)	0.91	1.10	
45-49	Days	PE	5,294	2,101	3,193	Male (1,092)	0.66	1.52	
	Days	CA	718,984	368,817	350,100	Male (18,717)	1.05	0.95	
50-54	Days	PE	4,245	2,238	2,007	Female (231)	1.12	0.90	
	Days	CA	990,290	532,353	457,892	Female (74,461)	1.16	0.86	
55-59	Days	PE	9,825	5,203	4,622	Female (581)	1.13	0.89	
	Days	CA	1,426,189	787,278	638,886	Female (148,392)	1.23	0.81	
60-64	Days	PE	10,833	5,280	5,553	Male (273)	0.95	1.05	
	Days	CA	1,744,900	989,231	775,214	Female (214,017)	1.28	0.78	
65-69	Days	PE	12,373	6,312	6,061	Female (251)	1.04	0.96	
	Days	CA	2,065,651	1,141,622	923,967	Female (217,655)	1.24	0.81	
70-74	Days	PE	1,615	8,914	7,245	Female (1,669)	1.23	0.81	
	Days	CA	2,360,764	1,262,593	1,098,150	Female (164,443)	1.15	0.87	
75-79	Days	PE	14,172	7,255	6,917	Female (338)	1.05	0.95	
	Days	CA	2,391,545	1,225,954	1,165,562	Female (60,392)	1.05	0.95	
80-84	Days	PE	16,709	9,303	7,406	Female (1,897)	1.26	0.80	
	Days	CA	2,483,849	1,196,351	1,287,498	Male (91,147)	0.93	1.08	
85-89	Days	PE	14,609	6,472	8,137	Male (1,665)	0.80	1.26	
	Days	CA	2,330,705	1,018,018	1,312,687	Male (294,669)	0.78	1.29	
90+	Days	PE	11,327	3,551	7,776	Male (4,225)	0.46	2.19	
	Days	CA	1,917,864	656,009	1,261,788	Male (605,779)	0.52	1.92	

Source: Canadian Institute for Health Information

The average length of stay in hospital in days is more commonly used as a healthcare indicator than total discharges or total length of stay (Table 4-39). For all ages, the average length of stay was 10.8 days for PEI males and 9.4 days for PEI females. Days were fewer for Canada than PEI hospitalizations. For all ages, the average length of stay was 8.2 days for Canada males and 6.9 days for Canada females. The analysis favoured females in both jurisdictions, yet the difference between males and females in both PEI and Canada was similar, that is, 1.4 days in PEI and 1.3 days in Canada. The jurisdictional analysis favoured Canada females since the average length of hospital stay was 9.4 for all PEI females and 6.9 for all Canada females. A difference of 2.5 days is notable when describing costly hospital stays.

The minimum and maximum average length of stay in PEI was 2.7 to 18.9 days for males and 2.8 to 17.8 days for females, where the minimum was 5-9-year-olds and the maximum was 90+ years of age. The minimum-maximum average length of stay was lower in Canada than PEI. Specifically, the minimum and maximum average length of stay in Canada was 3.3 to 13.0 days for males and 2.9 to 13.5 days for females. Interestingly, the minimum average length of stay occurred at age 5-9 years for males and 30-34 years for females while the maximum occurred at 90+ years for both males and females.

Of the 19 age-sex categories listed (besides "all ages"), females had the shorter average length of stay in twelve of these age categories in PEI and nine in Canada. It follows that males had the shorter average length of stay in six PEI age categories and ten Canada age categories. In the analysis, the better results were attained by the same sex (four male and six female) in ten age categories and by different sexes (mixed male and female) in nine age categories. Overall, females living in PEI had the shorter average length of stay (i.e., better outcome) more often than females in Canada (12 versus 9 age categories), and more often than males living in PEI (12 versus 6 age categories).

In the jurisdictional analysis, Canada female outcomes were favoured over PEI female outcomes for seventeen age categories. Only in two age categories (0-4 and 5-9) were PEI females favoured over Canada females. And, PEI and Canada average length of hospital stay was the same for one age category (50-54 years) accounting for the 20 age categories reported. Lastly, the level of difference in this PEI-Canada analysis ranged from 0 days (PEI and Canada each 6.2 days at 50-54 years) to 6.2 days (45-49 year age category).

TABLE 4-39 INPATIENT HOSPITALIZATIONS: AVERAGE LENGTH OF STAY IN DAYS BY AGE AND SEX, PEI AND CANADA (2018-2019)²³⁵

	NADA (2018-2	013)					Better female
						Better results in	results in PEI or
			Both			male or female?	Canada? (by how
Age (years)	Metric	Area	Sexes	Male	Female	(by how much?)	much?)
All ages	Days	PE	10.0	10.8	9.4	Females (1.4)	Canada (2.5)
	Days	CA	7.5	8.2	6.9	Females (1.3)	
0-4	Days	PE	3.7	3.8	3.5	Females (0.3)	PEI (1.6)
	Days	CA	4.8	4.5	5.1	Males (0.6)	
5-9	Days	PE	2.7	2.7	2.8	Males (0.1)	PEI (0.4)
	Days	CA	3.3	3.3	3.2	Females (0.1)	
10-14	Days	PE	6.3	5.0	7.2	Males (2.2)	Canada (2.2)
	Days	CA	4.7	4.5	5.0	Males (0.5)	
15-19	Days	PE	7.9	8.6	6.9	Females (1.7)	Canada (0.9)
	Days	CA	5.3	5.0	6.0	Males (1.0)	
20-24	Days	PE	5.9	4.9	8.2	Males (3.3)	Canada (1.0)
	Days	CA	4.7	3.7	7.2	Males (3.5)	
25-29	Days	PE	4.4	6.4	3.9	Females (2.5)	Canada (0.8)
	Days	CA	3.9	7.4	3.1	Females (4.3)	
30-34	Days	PE	4.2	6.0	3.8	Females (2.2)	Canada (0.9)
	Days	CA	3.6	6.8	2.9	Females (3.9)	
35-39	Days	PE	6.1	8.3	5.4	Females (2.9)	Canada (2.0)
	Days	CA	4.3	7.0	3.4	Females (3.6)	
40-44	Days	PE	6.3	5.0	8.4	Males (3.4)	Canada (1.7)
	Days	CA	5.5	4.8	6.7	Males (1.9)	
45-49	Days	PE	12.1	12.3	12.0	Females (0.3)	Canada (6.2)
	Days	CA	6.3	6.8	5.8	Females (1.0)	
50-54	Days	PE	7.3	8.2	6.5	Females (1.7)	SAME
	Days	CA	6.8	7.0	6.5	Females (0.5)	
55-59	Days	PE	11.4	12.6	10.4	Females (2.2)	Canada (3.4)
	Days	CA	7.2	7.4	7.0	Females (0.4)	
60-64	Days	PE	10.0	9.4	10.6	Males (1.2)	Canada (3.3)
	Days	CA	7.5	7.7	7.3	Females (0.4)	
65-69	Days	PE	9.6	9.1	10.2	Males (1.1)	Canada (2.3)
	Days	CA	8.0	8.1	7.9	Females (0.2)	
70-74	Days	PE	11.0	11.0	10.9	Females (0.1)	Canada (2.2)
	Days	CA	8.6	8.6	8.7	Males (0.1)	
75-79	Days	PE	11.9	11.9	11.9	SAME	Canada (2.1)
	Days	CA	9.7	9.6	9.8	Males (0.2)	
80-84	Days	PE	16.1	17.9	14.3	Females (3.6)	Canada (3.0)
	Days	CA	11.1	11.0	11.3	Males (0.3)	
85-89	Days	PE	17.2	16.7	17.6	Males (0.9)	Canada (5.1)
	Days	CA	12.3	12.1	12.5		
90+	Days	PE	18.2	18.9	17.8	Females (1.1)	Canada (4.3)
	Days	CA	13.3	13.0	13.5	Males (0.5)	

Source: Canadian Institute for Health Information

It is notable that the number one reason for hospitalization and discharge is specific to females and people with uteruses. And, this fact applies across jurisdictions, provincial and national as shown in Table 4-40. And, giving birth contributes to a substantial portion of hospital days: 11.6 in Canada, 9.3% in PEI, 7.9% in Newfoundland-Labrador, 9.2% in Nova Scotia, and 8.2% in New Brunswick. Besides providing background information to interpret the discharge tables above, this table sets the stage for a later section, "Maternal and Newborn Outcomes."

Table 4-40 RANK, NUMBER, AND PERCENTAGE FOR HOSPITAL DISCHARGES, ATLANTIC PROVINCES AND CANADA FOR TOP 10 HIGH-VOLUME IN-PATIENT HOSPITALIZATIONS IN PEI COMPARED TO ATLANTIC PROVINCES AND CANADA (where possible), (2018–2019)²³⁶

HOSPITALIZATIONS IN PEL COMPARED TO ATLANTIC PROVINCES AND CANADA (WHERE POSSIBLE), (2010–2019)													,		
		CA			PE			NL			NS			NB	
Diagnosis	Rank	#	%	Rank	#	%	Rank	#	%	Rank	#	%	Rank	#	%
Giving birth	1	359,469	11.6	1	1,280	9.3	1	3,922	7.9	1	7,806	9.2	1	6,280	8.2
COPD and bronchitis	2	89,775	2.9	2	484	3.5	3	1,777	3.6	4	2,740	3.2	3	2,953	3.9
Heart failure	3	71,262	2.3	8	312	2.3	7	1,102	2.2	6	1,798	2.1	7	1,801	2.4
Acute myocardial infarction	4	71,237	2.3	3	422	3.1	2	1,825	3.7	2	3,747	4.4	2	3,282	4.3
Osteoarthritis of the knee	5	70,333	2.3	7	318	2.3	6	1,129	2.3	5	2,333	2.7	5	1,894	2.5
Pneumonia	6	66,897	2.2	5	352	2.6	5	1,198	2.4	8	1,613	1.9	6	1,855	2.4
Mood (affective) disorders	7	51,551	1.7	4	373	2.7							8	1,387	1.8
Other medical care (e.g., palliative care, chemotherapy)	8	51,528	1.7	9	302	2.2	4	1,303	2.6	3	2,955	3.5	4	2,206	2.9
Substance use disorders	9	46,764	1.5	6	329	2.4				9	1,418	1.7	•••		•••
Care involving rehabilitative procedures			•••	10	297	2.2			•••					•••	

Source: Canadian Institute for Health Information

Age Categories in Health Surveys

Age is important in survey results. A health issue may not affect one age category yet may be extremely prevalent in another age category.²³⁷ Usually, all persons surveyed are reported as a group (for example, "total, 12 years and over," or "total, 15 years and over)." Few surveys report distinct age categories. The well-known Canadian Community Health Survey uses five age categories and reports age by life stages, for example, 12 to 19 years (adolescents), 20 to 34 years (young adults), 35 to 44 years (young adults), 45 to 64 years (middle- aged adults), and 65 years and over (seniors). By comparison, the Chronic Disease and Injury Indicators Framework uses 21 age categories and reports findings by five-year intervals starting at five years of age (that is, under 1 year; 1 to 4 years; 5 to 9 years; 10 to 14 years; 15 to 19; and so on up to 90 years and over).

When analyzing provincial data, it is sometimes necessary to report the total sample rather than smaller sub-samples such as age categories within the total sample; that is, to report 1 to 17 years of age rather than report age as 1 to 4, 4 to 11, and 12 to 17 year (three sub-samples) because of their smaller number of observations which may require suppression or rounding of output numbers. In contrast, large national samples usually permit age-based reporting with statistical power and without fear of personal identification. In the Canadian Health Survey on Children and Youth only three of sixteen health indicators possessed adequate sample size for a full comparison between PEI and Canada.

Youth (Ages 1 to 17)

Five indicators of youth mental health are summarized in Table 4-41. Perceived health and perceived mental health outcomes for ages 1 to 17 years are favourable (excellent or very good) for more than 79% of the youth population (range: 79.0% - 91.6%) while the life satisfaction indicator (reported for only 12 to 17 year olds) is very favourable for 87.6% to 93.2% of the sample with a slightly higher percentage of males than females being satisfied or very satisfied in life.

For ages 1 to 17 years, three of the first four PEI results show PEI males having better results than PEI females (by 1.4% to 2.8%), one result is the same for both sexes, and results are not available for the fourth indicator. The results for Canada indicate that females have better results than males for two of four indicators, females lead for one indicator, and females are the same as males for one indicator. Practically speaking, the results for PEI and Canada portray the male and female sexes as very similar in their health-related perceptions with males having better outcomes than females in both PEI and Canada by 1.9% and 5.6%, respectively, for life satisfaction. With regard to the jurisdictional results, the Canada female results are better than the PEI female results for the perceived health and perceived mental health indicators for age 1 to 17 years (by 0.8% – 4.5%). The fifth jurisdictional indicator, life satisfaction among 12 to 17 year olds, indicates better results for PEI females than Canada females (by 2.1%).

TABLE 4-41 HEALTH INDICATORS FOR MENTAL HEALTH AND WELL-BEING BY SEX FOR AGES 1 TO 17 YEARS, PFI AND CANADA (2019)²³⁸

FLI AND CAN							
Health Indicators	Metric	Area	Both	Male	Female	Better results	Better female
			Sexes			in PEI (male or	results in PEI or
						female) by ?	Canada by?
Perceived health (very	Rate	PE	88.3%	88.3%	88.3%	SAME (0%)	Canada (0.8%)
good or excellent)	Rate	CA	88.8%	88.5%	89.1%	Male (0.6%)	
Perceived health (fair	Rate	PE	2.0%	х	2.9%	х	Canada (2.2%)
or poor)	Rate	CA	1.7%	1.8%	1.7%	Female (0.1%)	
Perceived mental	Rate	PE	80.5%	81.8%	79.0%	Male (2.8%)	Canada (4.5%)
health (very good or	Rate	CA	83.2%	82.9%	83.5%	Female (0.6%)	
excellent)						, ,	
Perceived mental	Rate	PE	4.6%	3.9%	5.3%	Male (1.4%)	Canada (1.2%)
health (fair or poor)	Rate	CA	4.1%	4.1%	4.1%	SAME (0%)	
Life satisfaction	Rate	PE	90.7%	91.6%	89.7%	Male (1.9%)	PEI (2.1%)
(satisfied or very	Rate	CA	90.5%	93.2%	87.6%	Male (5.6%)	
satisfied). Age 12-17							
only.							
Offity.							

Source: Statistics Canada Table 13-10-0763-01

Overall, results are excellent or very good for 79.0% to 89.1% of 1 to 17 year olds, both males and females, and challenging for 1.7% to 5.3% of the males and females having fair or poor ratings. These figures can inform planning for health care including mental health care. More indepth analysis of youth age 1 to 17 follows where all ages (1 to 17) are separated into three age categories (1 to 4, 5 to 11, 12 to 17) for analysis by age, sex, and jurisdiction using data from The Canadian Health Survey on Children and Youth (2019).

Perceived health is an indicator of overall health status. Respondents provide one of four responses (excellent, very good, fair or poor) after being told that they are to think of health as not merely the absence of disease or injury but as the overall physical, mental and social wellbeing, i.e., to define health as defined by the World Health Organization. Perceived health can capture aspects of health that are difficult to capture clinically, such as the prediction of helpseeking behaviours and health service use.²³⁹

Considering both sexes and ages 1 through 17 years, more than 85% of respondents assigned an excellent or very good rating to perceived health. The analysis for PEI indicates that the percentage of females described as having excellent or very good health respectively exceeded the percentage of males at ages 1 to 4 years (90.1% versus 88.9%) and 5 to 11 years (90.8% versus 86.6%) and the female percentage was slightly lower than the male percentage by age 12 to 17 years (89.9% versus 90.1%). Similarly, Canada figures indicated a slightly greater percentage of Canada females than Canada males with excellent or very good rating for perceived health at ages 1 to 4 years (92.6% versus 91.0%), and 5 to 11 years (90.2% versus 88.4%) with the Canada female percentage less than the Canada male percentage by age 12 to 17 years (85.3% versus 86.9%).

Regarding the female jurisdictional analysis for perceived health, the percentage of PEI females was less than the percentage of Canada females at ages 1 to 4 years (90.1% versus 92.6%), slightly greater at 5 to 11 years (90.8% versus 90.2%), and slightly less at 12 to 17 years (83.9% versus 85.3%). PEI females were not notably different from PEI males nor Canada females regarding perceived health, and all comparisons, sex and jurisdictional, ranged from 86.6% to 90.8%. It follows that the percentage of youth having perceived health rated as fair or poor was low across age, sex, and jurisdiction with the range less than 4% (low: 0.97% Canada females; high: 4.6% PEI females).

Perceived mental health (also rated as excellent, very good, fair, or poor in the survey) is a general indicator of the portion of the population suffering some form of mental disorder, mental or emotional problem or distress not necessarily reflected in self-perceived health. It is a subjective measure of overall mental health status that may help to predict service use that is associated with factors such as social class, family support, community belonging, service use, medication use, activity restriction, and role functioning. Persistent socioeconomic disadvantage (e.g., education, income, and/or housing) poses risks to mental health.²⁴⁰

The analysis for PEI indicates that, respectively, the percentage of females versus males having an excellent or very good rating for perceived mental health at ages 1 to 4 (93.5% versus 92.8%), 5 to 11 (79.0% versus 80.2%), and 12 to 17 years (71% versus 77%) shows both a gradual decline in perceived mental health scores for both sexes with a greater worsening between 1 to 4 years and 12 to 17 years for females (93.5% to 71.0%, a 22.5% decrease) than males (92.9% to 77.0%, a 15.9% decrease). That is, both the absolute values and the change values favour males over females by age 12 to 17 years. Canada females exhibit a similar trend (94.2% to 74.0%, a 20.2% decrease) compared to Canada males (92.7% to 79.0%, a decrease of 13.7%) as they develop between preschool and high school.

Regarding the female jurisdictional analysis for perceived mental health, the percentage of PEI females was lower than the percentage of Canada females at all three points in time, i.e., ages 1 to 4 years (93.5% versus 94.2%), 5 to 11 years (79.0% versus 85.0%), and 12 to 17 years (71.0% versus 74.0%) with the absolute scores decreasing about 20 percentage points for both jurisdictions from preschool to high school. PEI females were not notably different from PEI males nor Canada females regarding perceived mental health at any age, but the age, sex, and jurisdictional outcomes each clearly decreased from preschool to high school. It follows, that the percentage of youth with perceived mental health rated as fair or poor was higher than perceived health starting at age 5 to 11 years (1.38% - 1.91% versus 2.8% - 6.1%) and approximately doubling by 12 to 17 years (1.88% - 4.6% versus 5.3% - 7.9%). Perceived mental health worsens between preschool and high school in males and females and in both jurisdictions.

Life satisfaction has been used by Canada's statistical agency as a measure of subjective wellbeing and societal progress for more than 40 years. Life satisfaction can help to predict future demands on the health care system. Self-assessed life satisfaction is a consistently informative measure of life experience that helps to describe the interplay between health, social, and economic aspects of life.²⁴¹ As noted earlier, life satisfaction was reported for only 12 to 17 year olds. Ratings were very favourable and were slightly higher, in PEI than Canada, respectively among both males (91.6% and 93.2%) and females (89.7% versus 87.6%).

While the life satisfaction outcomes were very favourable by age, sex, and jurisdiction the remainder of the responses, that is, the percentage of fair or poor ratings suggest room for improvement among 2.4%-4.6% of respondents for perceived health and 7.2%-11.0% of respondents for perceived mental health. Note that when the five mental health indicators were reviewed across five jurisdictions for youth aged 12 to 17 years (Table 4-42) there were 19 of these 25 indicator that favoured males over females (by 0.1%-11.4%) and one outcome that favoured females over males (perceived health for NL; by a mere 0.1%). Outcomes were not available for five outcomes for the reference period 2019 (perceived health for each of four Atlantic Provinces and perceived mental health for Newfoundland).

Three of the five mental health indicators revealed better outcomes for males than females in all five jurisdictions for perceived mental health (very good or excellent), perceived mental health (fair or poor), and life satisfaction. Males displayed better outcomes than females for perceived health (very good or excellent) in all jurisdictions except Newfoundland (where females had a slightly better performance than males by 0.1%). Perceived health (fair or poor) did not report outcomes for the reference period (2019) for the provinces, and in the larger Canada sample the males had a slightly better performance than females (by 0.7%). By sex and by jurisdiction the male outcomes are favoured over the female outcomes in both the number of indicators (19/25) and the small percentage difference between the sexes (low: 0.1% for perceived health in NL females; high: 11.4% for perceived mental health in NL males).

TABLE 4-42 COMPARISON OF MENTAL HEALTH INDICATORS BY SEX FOR YOUTH AGE 12-17 YEARS, ATLANTIC PROVINCES AND CANADA (PERCENTAGE)²⁴²

	Mental Health Indicators													
		Metric	Perceived health (very good or excellent)	Perceived health (fair or poor)	Perceived mental health (very good or excellent)	Perceived mental health (fair or poor)	Life satisfaction (satisfied or very satisfied)							
	М	Number	4,400	100E	3,800	300	4,600							
PE	F	Number	4,000	200	3,400	300	4,300							
""	М	Percent	90.1%		77.0%	5.5%	91.6%							
	F	Percent	83.9%	4.6%	71.0%	7.2%	89.7%							
	Better Sex (by)		Males (6.2%)		Males (6.0%)	Males (1.7%)	Males (1.9%)							
	М	Number	13,200	700E	12,700	700E	14,400							
NL	F	Number	13,100	300 E	10,800	1,200	13,100							
	М	Percent	88.0%		84.4%		93.3%							
	F Percent		88.1%		73.0%	8.3%	86.7%							
	Better	Sex (by)	Female (0.1%)		Males (11.4%)		Males (6.6%)							
	М	Number	24,600	500E	20,500	1,600	25,000							
NS	F	Number	22,300	1,100	18,900	2,900	22,900							
	М	Percent	89.2%		75.0%	5.8%	91.2%							
	F	Percent	84.5%		72.0%	11.0%	86.4%							
	Better	Sex (by)	Males (4.7%)		Males (3.0%)	Males (5.2%)	Males (4.8%)							
NB	М	Number	20,400	1,100	18,600	1,700	22,100							
	F	Number	18,300	500 E	15,000	2,000	19,400							
	М	Percent	87.0%		79.0%	6.9%	93.6%							
	F	Percent	85.8%		71.0%	9.7%	88.0%							
	Better	Sex (by)	Males (1.2%)		Males (8.0%)	Males (2.8%)	Males (5.6%)							
CA	М	Number	1,002,500	21,700	904,500	60,900	1,087,300							
	F	Number	933,800	28,700	812,400	86,800	971,100							
	М	Percent	86.9%	1.9%	79.0%	5.3%	93.2%							
	F	Percent	85.3%	2.6%	74.0%	7.9%	87.6%							
	Better	Sex (by)	Males (1.6%)	Males (0.7%)	Males (5.0%)	Males (2.6%)	Males (5.6%)							

Source: Statistics Canada Table13-10-0763-01

The Canadian Health Survey on Children and Youth (2019) also reported the prevalence of eleven common diseases/conditions among youth age 1 to 17 years using self-report technique. These conditions are common occurrences in the adult population in Canada and have their roots in the younger years in some instances. The prevalence among youth ages 12 to 17 appears in Table 4-43. Results by individual age categories (1 to 4, 5 to 11, 12 to 17 and 1 to 17 years) appear in Table 4-44, a comprehensive summary table. This table was compiled from the Canadian Health Survey on Children and Youth. The prevalence of each condition was grouped in categories starting with 1% (or less) and successively moving to the next higher prevalence category by 10% increments.

Sex-disaggregated analysis was possible for most indicators (7/11) for PEI and all indicators (11/11) for Canada. The four conditions not reported numerically for the 2019 reference period for PEI youth were diabetes, epilepsy, mood disorder, and eating disorder. Among the seven reported indicators for PEI youth, the female outcomes were better than male outcomes for asthma (2.2% versus 2.4%) and learning disability (6.5% versus 16.5%). Conversely, male outcomes were better than female outcomes for the remaining five reported outcomes. These five conditions and their respective male and female outcomes (brackets) were anxiety disorder (7.8% versus 9.3%), stomachache (13.9% versus 26.0%), backache (17.7% versus 29.0%), headache (19.2% versus 38.0%), and difficulties getting to sleep (27% versus 45%).

The percentage differences between female outcomes in PEI and Canada were very small (0% to 3%). For these seven outcomes, female outcomes were better, respectively, in PEI than Canada for two outcomes, anxiety disorder (9.3% versus 9.6%) and learning disabilities (6.5% versus 7.5%). Female outcomes were better in Canada than PEI, respectively (lower is better), for four outcomes: stomachache (22% versus 26%), backache (28% versus 29%), headache (35% versus 38%), and difficulties in getting to sleep (44% versus 45%). Female results were the same in both jurisdictions for asthma (7.7% versus 7.7%).

TABLE 4-43 DISEASE INDICATORS BY SEX FOR YOUTH AGES 12 TO 17 YEARS, PEI AND CANADA (2019)²⁴³

Health Indicators	Metric	Area	Both	Male	Female	Better results	Better female
			Sexes			in PEI (male or	results in PEI
						female) by ?	or Canada by?
Asthma	Rate	PE	8.8%	9.9%	7.7%	Female (2.2%)	SAME
	Rate	CA	8.9%	10.1%	7.7%	Female (2.4%)	
Diabetes	Rate	PE	••		••		
	Rate	CA	0.4%	0.5%	0.3%	Female (0.2%)	
Epilepsy	Rate	PE	••				
	Rate	CA	0.6%	0.5%	0.6%	Male (0.1%)	
Anxiety disorder	Rate	PE	8.6%	7.8%	9.3%	Male (1.5%)	PEI (0.3%)
	Rate	CA	7.4%	5.2%	9.6%	Male (4.4%)	
Mood disorder	Rate	PE	5.3%	X	5.9%		
	Rate	CA	3.8%	2.4%	5.3%	Male (2.9%)	
Eating disorder	Rate	PE					
	Rate	CA	0.6%	0.2%	0.9%	Male (0.7%)	
Learning disability or	Rate	PE	11.6%	16.5%	6.5%	Female (10.0%)	PEI (1.0%)
learning disorder	Rate	CA	10.0%	12.4%	7.5%	Female (4.9%)	
Headache	Rate	PE	28.0%	19.2%	38.0%	Male (18.8%)	Canada (3%)
	Rate	CA	26.0%	18.2%	35.0%	Male (16.8%)	
Stomachache	Rate	PE	19.7%	13.9%	26.0%	Male (12.1%)	Canada (4%)
	Rate	CA	16.3%	10.8%	22.0%	Male (11.2%)	
Backache	Rate	PE	23.0%	17.7%	29.0%	Male (11.3%)	Canada (1%)
	Rate	CA	22.0%	16.6%	28.0%	Male (11.4%)	
Difficulties in	Rate	PE	36.0%	27.0%	45.0%	Male (18.0%)	Canada (1%)
getting to	Rate	CA	37.0%	31.0%	44.0%	Male (13.0%)	
sleep							

Source: Statistics Canada Table 13-10-0763-01

The health of youth ages 1 to 17 years is described in Table 4-44 using sixteen health indicators and four age categories from the latest Canadian Health Survey on Children and Youth (Statistics Canada, 2019). The indicators were informed by a parent or guardian proxy for ages 1 to 11 years and self-report for ages 12 to 17 years. The data are cross-sectional and portray health in the context of growth and development using three age intervals (1-4, 5-11 and 12-17 years). Ages 12-17 years were emphasized in this section because it was self-report data, not proxy data.

TABLE 4-44 HEALTH CHARACTERISTICS OF CHILDREN AND YOUTH AGED 1 TO 17 YEARS BY SEX AND AGE, PEI AND CANADA (2019)²⁴⁴

								А	ge (years)					
			1	1 to 4 year	'S	5	to 11 yea	rs	17	2 to 17 yea	rs	Tota	l, 1 to 17 ye	ars
			Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
Health indicator	Metric	Area	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019
Perceived	Number	PE	5,500	2,800	2,700	10,700	5,200	5,500	8,400	4,400	4,000	24,600	12,400	12,200
ealth, very good or	Number	CA	1,408,200	716,800	691,400	2,453,500	1,244,900	1,208,600	1,936,300	1,002,500	933,800	5,798,000	2,964,200	2,833,80
excellent	Percent	PE	89.5%	88.9%	90.1%	88.7%	86.6%	90.8%	87.1%	90.1%	83.9%	88.3%	88.3%	88.3%
	Percent	CA	91.8%	91.0%	92.6%	89.3%	88.4%	90.2%	86.2%	86.9%	85.3%	88.8%	88.5%	89.1%
	Better (by)?	Diff.	CA (2.3%)	CA (2.1%)	CA (1.5%)	CA (0.6%)	CA (0.2%)	PE (0.6%)	PE (0.9%)	PE (3.2%)	CA (0.6%)	CA (0.5%)	CA (0.2%)	CA (0.8%
Perceived	Number	PE	100 ^E	0	100 ^E	200 ^E	100 ^E	100 ^E	300	100 ^E	200	600	200 ^E	400
nealth, fair	Number	CA	17,100	9,800	7,300	45,400	26,900	18,500	50,400	21,700	28,700	112,900	58,400	54,500
or poor	Percent	PE	x	·	x	X	X	X	2.8%	X	4.6%	1.95%	x	2.9%
	Percent	CA	1.12%	1.25%	0.97%	1.65%	1.91%	1.38%	2.2%	1.88%	2.6%	1.73%	1.75%	1.71%
	Better (by)?	Diff.	х		x	х	х	x	CA (0.6%)	Х	CA (2.0%)	CA (0.22%)	х	CA (1.19
Perceived mental health, very good or	Number	PE	5,600	2,900	2,700	9,600	4,800	4,800	7,200	3,800	3,400	22,400	11,500	10,900
	Number	CA	1,431,900	728,500	703,400	2,275,400	1,137,600	1,137,800	1,716,900	904,500	812,400	5,424,200	2,770,600	2,653,60
	Percent	PE	93.2%	92.8%	93.5%	79.0%	80.2%	79.0%	74.0%	77.0%	71.0%	80.5%	81.8%	79.0%
excellent	Percent	CA	93.4%	92.7%	94.2%	82.9%	80.9%	85.0%	77.0%	79.0%	74.0%	83.2%	82.9%	83.5%
	Better (by)?	Diff.	CA (0.2%)	PE (1.0%)	CA (0.7%)	CA (3.9%)	CA (0.7%)	CA (0.6%)	CA (3.0%)	CA (2.0%)	CA (3.0%)	CA (2.7%)	CA (1.1%)	CA (4.5%
Perceived	Number	PE	100 ^E	0	100 ^E	600	300	300	600	300	300	1,300	600	700
mental	Number	CA	14,100	10,000	4,100	104,900	66,900	38,000	147,700	60,900	86,800	266,700	137,800	128,900
health, fair or poor	Percent	PE	Х		х	4.9%	3.7%	6.1%	6.3%	5.5%	7.2%	4.6%	3.9%	5.3%
01 9001	Percent	CA	0.92%	1.27%	0.56%	3.8%	4.8%	2.8%	6.6%	5.3%	7.9%	4.1%	4.1%	4.1%
	Better (by)?	Diff.	х		х	CA (1.1%)	PE (1.1%)	CA (3.3%)	CA (0.3%)	PE (0.2%)	PE (0.7%)	CA (0.5%)	PE (0.2%)	CA (1.2%
Life	Number	PE							8,900	4,600	4,300			
atisfaction,	Number	CA							2,058,400	1,087,300	971,100			
satisfied or	Percent	PE							90.7%	91.6%	89.7%			
very atisfied (12	Percent	CA		•			••		90.5%	93.2%	87.6%			••
to 17 years	Better (by)?	Diff.			•					93.2% CA (1.6%)				
old)	Better (by):	DIII.				"			PE (0.2%)	CA (1.6%)	PE (2.1%)	"	"	
Asthma	Number	PE	300	200	100 ^E	1,300	1,000	300	900	500	400	2,500	1,700	800
	Number	CA	69,700	42,300	27,400	184,400	117,500	66,900	203,100	117,600	85,500	457,200	277,400	179,800
	Percent	PE	4.4%	6.1%	x	10.7%	16.1%	5.4%	8.8%	9.9%	7.7%	8.7%	11.7%	5.6%
	Percent	CA	4.6%	5.4%	3.7%	6.7%	8.4%	5%	8.9%	10.1%	7.7%	7%	8.3%	5.6%
	Better (by)?	Diff.	PE (0.2%)	CA (0.7%)	x	CA (4.0%)	CA (7.7%)	PE (0.4%)	PE (0.1%)	PE (0.2%)	SAME	CA (1.7%)	CA (3.4%)	SAME

Diabetes	Number	PE	0	0	0	0	0	0	0	0	0	0	0	0
	Number	CA	800 ^E	800 ^E	0	6,800	2,800	4,000	9,100	5,400	3,700	16,700	9,000	7,700
	Percent	PE												
	Percent	CA	Х	Х		0.25%	0.2%	0.3%	0.4%	0.46%	0.33%	0.26%	0.27%	0.24%
	Better (by)?	Diff.	х	х										
Epilepsy	Number	PE	0	0	0	100 ^E	100 ^E	0	0	0	0	100 ^E	100 ^E	0
	Number	CA	4,100	2,400	1,700	12,600	5,900	6,700	12,600	6,100	6,500	29,300	14,400	14,90
	Percent	PE				X	X					X	X	
	Percent	CA	0.27%	0.31%	0.23%	0.46%	0.42%	0.51%	0.55%	0.52%	0.59%	0.45%	0.43%	0.479
	Better (by)?	Diff.				Х	X					x	X	
	20110: (277)													
Anxiety	Number	PE				500	300	200 ^E	900	300	400			
lisorder (5	Number	CA				84,700	52,600	32,100	167,700	61,300	106,400			
o 17 years	Percent	PE				3.8	4.6%	32,100 X	8.6%	7.8%	9.3%	**		
old)														
	Percent	CA				3.1%	3.8%	2.4%	7.4%	5.2%	9.6%			
	Better (by)?	Diff.				CA (0.7%)	CA (0.8%)	Х	CA (1.2%)	CA (2.6%)	PE (0.3%)			
-														
Mood	Number	PE				200 ^E	100 ^E	100 ^E	500	200 ^E	300			
lisorder (5	Number	CA				16,100	12,400	3,700	86,800	27,800	59,000			
o 17 years old)	Percent	PE				Х	X	Х	5.3%	X	5.9%			
,														
	Percent	CA				0.59%	0.89%	0.28%	3.8%	2.4%	5.3%			
	Better (by)?	Diff.				Х	х	XXX	CA (1.5%)	Х	CA (0.6%)	••		
E 41		25				•			•	•	•			
Eating isorder (5	Number	PE				0	0	0	0	0	0			
17 years	Number	CA				3,300	2,300 ^E	1,000 ^E	12,500	2,400	10,100			
old)	Percent	PE												
	Percent	CA				0.12%	0.17%	Х	0.55%	0.2%1	0.91%			
	Better (by)?	Diff.												
_														
Learning	Number	PE				900	600	300	1,100	800	300			
sability or	Number	CA				195,200	128,600	66,600	227,100	144,400	82,700			
learning	Percent	PE				7.5%	9.3%	5.7%	11.6%	16.5%	6.5			
isorder (5 o 17 years														
old)	Percent	CA				7.2%	9.2%	5%	10%	12.4%	7.5			
	Better (by)?	Diff.				CA (0.3%)	CA (0.1%)	CA (0.7%)	CA (1.6%)	CA (4.1%)	PE (1.0%)			
						(0.370)								
leadache	Number	PE				900	500	400	2,800	1,000	1,800			
(5 to 17	Number	CA				169,400	72,600	96,800	599,600	211,800	387,800			
ears old)	Percent	PE				8.2%	9%	7.4%	28%	19.2%	38%			
	Percent	CA				6.3%	5.2%	7.3%	26%	18.2%	35%			
	Better (by)?	Diff.				CA (1.9%)	CA (3.8%)	CA (0.1%)	CA (2.0%)	CA (1.0%)	CA (3.0%)			
Character II	Normal	05				4 200	700	600	2.000	700	4 200			
Stomach ache (5 to	Number	PE				1,300	700	600	2,000	700	1,300			
17 years	Number	CA				254,400	102,500	151,900	369,400	125,200	244,200			
old)	Percent	PE				11.4%	12.2%	10.6%	19.7%	13.9%	26%			
	Percent	CA				9.4%	7.4%	11.5%	16.3%	10.8%	22%			
	Better (by)?	Diff.	**			CA (2.0%)	CA (4.8%)	PE (0.9%)	CA (3.4%)	CA (3.1%)	CA (4.0%)			••
ckache (5	Number	PE				100 ^E	100 ^E	0	2,300	900	1,400			
17 years	Number	CA				50,100	23,500	26,600	499,000	191,800	307,200			
old)	Percent	PE				Х	Х		23%	17.7%	29%			
	Percent	CA				1.86%	1.69%	2%	22%	16.6%	28%			
	Better (by)?	Diff.				X	X		CA (1.0%)	CA (1.1%)	CA (1.0%)			
	(-11-		"						. ()	(=:=:-)	(2.2.2)			
ifficulties	Number	PE				2,400	1,100	1,300	3,500	1,400	2,100			
n getting														
sleep (5	Number	CA				512,000	252,200	259,800	842,600	355,600	487,000			
17 years	Percent	PE				20%	18.4%	22%	36%	27%	45%			
old)	Percent	CA				18.9%	18.2%	19.7%	37%	31%	44%			
	Better (by)?	Diff.				CA (1.1%)	CA (0.2%)	CA (2.3%)	PE (1.0%)	PE (4.0%)	CA (1.0%)			
	Dette (5)/:	9111.				C. (1.1/0)	C. (J.Z/0)	C/ (2.5/0)	(2.070)	. = (+.070)	C. (1.070)			

Source: Statistics Canada Table 13-10-0763-01

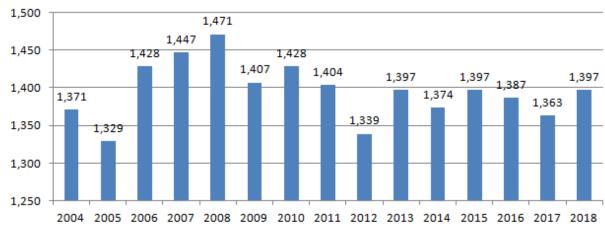
Maternal and Newborn Care

For the past two decades PEI hospitals have delivered approximately 1,400 babies a year. Birth outcomes for mothers and newborns are affected by a multitude of social, economic, psychological, and biological factors.

The trend in PEI population growth due to births is depicted in Figure 4-3. Between 2004 and 2018, the annual number of births fell within the 1,400 to 1,500 range stabilizing at about 1,400 a year for the past decade.²⁴⁵ Delivery data mirrors these data.²⁴⁶

FIGURE 4-3 ANNUAL NUMBER OF BIRTHS, PEI (2004-2018)²⁴⁷

Annual Number of Births in PEI: About 1,400



Source: PEI Statistics Bureau Department of Finance

Birth weight indicators appear in Table 4-45. PEI reported the best rates in Canada for three of four indicators. One, the rate of low birth weight for babies weighing less than 2,500 grams (5 pounds 8 ounces) was 5.1% (range: PE, 5.1 – AB, 7.5). Two, the rate of low birth weight for babies weighing 500-2,499 grams was 4.9% (range: PE, 4.9 - AB, 7.3). Three, the preterm birth rate was 6.1% (range: PE, 6.1 – AB, 9.2).

TABLE 4-45 PEI BIRTH INDICATORS COMPARED TO CANADA AND OTHER PROVINCES (2018-2019)²⁴⁸

Indicator	PEI	Canada	Which province and territory is better (by how much?)	Highest	Lowest
Low birth weight (<2,500 grams), rate	5.1	6.6	PEI (1.4%)	7.5 (AB)	5.1 (PE)
Low birth weight (500 – 2,499 grams), rate	4.9	6.5	PEI (1.6%)	7.3 (AB)	4.9 (PE)
Preterm birth rate (<37 weeks)	6.1	8.1	PEI (2.0%)	9.2 (AB)	6.1 (PE)
Small-for-gestational agerate	8.2	9.2	PEI (1.0%)	10.0 (AB)	7.2 (NL)

Source: Canadian Institute for Health Information

The Health PEI Perinatal Report also provided information regarding newborn birth weight indicators. The birth weight records for the years between 2014 and 2019 indicate a high level of consistency in the percentage of singleton newborns having low weight (<2,500 grams), normal weight (2,500-4,000 grams), and high birth weight (>4,000 grams) each year. (Figure 4-4) Essentially, year to year, PEI births included 6% low birth weight, 14% high birth weight, and 80% normal birth weight. Therefore, 80% of births are low risk and 20% are high risk due to inadequate or excessive body weight.

Low birth weight ■ Normal birth weight 120% 100% 80% 79.96% 79.69% 79.91% 81.24% 80.43% 60% 40% 20% 14.33% 14.90% 14.75% 12.24% 10.45% 13.65% 5.74% 8.31% 5.41% 5.34% 6.32% 5.92% 0% 2014 2015 2016 2017 2018 2019

FIGURE 4-4 PERCENT DISTRIBUTION OF BIRTHWEIGHTS AS LOW< NORMAL AND HIGH, PEI (2014-2019).²⁴⁹

Source: Canadian Institute for Health Information

Eleven routinely monitored birth procedures appear in Table 4-46. Birth procedures are sometimes required despite the fact that low-risk vaginal births are promoted. Special birth procedures can mitigate high-risk births so that the health of mother and/or baby is protected. Among the eleven routinely reported indicators describing birth procedures, the outcomes for PEI and Canada show PEI leading in seven instances and Canada leading in the remaining four instances.

TABLE 4-46 BIRTH PROCEDURES ACCOMPANYING LABOUR AND POSTPARTUM (2018-2019)²⁵⁰

Birth Procedure	PEI	Canada	Which is better	By how much?
Forceps-assisted deliveries, vaginal deliveries, rate (%)	2.3	3.4	PEI	1.1
Epidural rate for vaginal deliveries	49.9	60.4	PEI	10.5
Epidural rate for all deliveries	41.2	51.1	PEI	9.9
Assisted delivery rate (overall) among vaginal	11.9	12.7	PEI	0.8
Assisted delivery rate (vacuum extraction) among	8.9	8.7	Canada	0.2
Assisted delivery rate (forceps) among vaginal	2.3	3.4	PEI	1.1
Episiotomies ³				
Total caesarean section rate	30.5	29.4	Canada	1.1
Primary caesarean section rate	19.1	19.7	PEI	0.6
Primary caesarean rate (C-section for first time),	19.0	18.7	Canada	0.3
Primary caesarean rate (C-section for first time),	19.5	23.5	PEI	4.0
Repeat caesarean section rate	89.5	81.8	Canada	7.9

Source: Canadian Institute for Health Information

Forceps delivery rate in PEI was 1.1% better than the Canada rate (2.3 % versus 3.4%) cited in Quickstats Childbirth Indicators by Place of Residence (CIHI, 2020). The Health PEI Perinatal Report (2020) cites a notably higher rate than CIHI for instrument assisted delivery rate for vaginal deliveries. PEI health care services reported instrument assisted delivery rates of 9.7% in 2016, 9.0% in 2017, 11.9% in 2018, and 9.6% in 2019. The rate was stable over the four-year interval (minimum: 9.0%; maximum, 11.9%). To cite one study as a point of reference, the use of forceps, vacuum or other device to extract the fetus from the vagina with or without maternal pushing (operative vaginal delivery) occurred in 3.1% of all deliveries in the United States in 2017 with forceps used for 0.5% of vaginal births and vacuum used for 2.6% of vaginal births. The same authors recognize that rates of operative vaginal delivery vary widely within and across geography (suggesting that evidence-based guidelines are inadequate or randomly applied).

The Health PEI Perinatal Report (2020) reported laceration rates of approximately 60% annually. PEI rates of lacerations in recent years were 60.7% (2016), 56.7% (2017), 58.1% (2018) and 59.8% (2019) of all deliveries. The majority of PEI lacerations were the less severe first degree or second degree tears (about 95%) and the minority of PEI lacerations were more severe third degree or fourth degree tears (about 5%). PEI figures indicate that in 2017 and 2018 some 30.0% and 22.9% of lacerations, respectively, were associated with instrument deliveries though this was not true in 2016 and 2019 (Health PEI, 2020).

Induction is used to induce labour in about one-third of births in PEI, according to the Health PEI Perinatal Report (2020). Recent PEI induction rates range from 30.2% to 36.2%,

³ The Canadian Institute for Health Information table does not include episiotomy data. Data from Health PEI indicates that the episiotomy rate is 10-12% in PEI.

specifically, 30.2% (2016), 33.7% (2017), 36.2% (2018) and 36.2% (2019) where the method and timing of induction was not stated. Elective induction at 39 may not make as much difference in rate of death or serious complication for babies as induction at 41 weeks which is more likely to reduce stillbirths and poor health outcomes for babies especially in first time mothers.²⁵²

Epidural rates per 100 deliveries in PEI are about ten points lower (better) than Canada rates, whether an epidural for vaginal deliveries (49.9 versus 60.4) or an epidural for all deliveries (41.2 versus 51.1) based on CIHI indicators (2020). Figure 4-5 displays PEI epidural rates reported in the Health PEI Perinatal Report (2020). The epidural rate was lower by approximately 7 percentage points when considering all deliveries (38.5%) than when considering only vaginal deliveries (41.5%) performed in PEI.

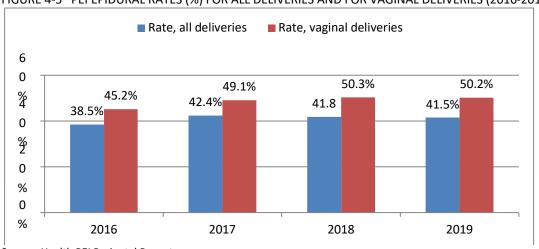


FIGURE 4-5 PEI EPIDURAL RATES (%) FOR ALL DELIVERIES AND FOR VAGINAL DELIVERIES (2016-2019)²⁵³

Source: Health PEI Perinatal Report

Episiotomies were performed in approximately 10% to 12% of all PEI deliveries between 2016 and 2019, according to Health PEI.²⁵⁴ The annual rates for episotomy were 10.6% in 2016, 9.9% in 2017, 11.7% in 2018, and 11.2% in 2019. The incision made in the perineum (muscular area between vagina and anus) during childbirth enlarges the vaginal opening to facilitate the delivery of the baby. Though once routine, episiotomies have been on the decline in Canada since 2004 for spontaneous and operative vaginal deliveries. Examination of 23.5 million childbirths over 13 years found that episiotomies were performed for 43.2% of assisted births in 2017 compared to 53.1% in 2004.²⁵⁵ The same authors found that the procedure can reduce the risk of getting injuries, such as anal sphincter injury (severe tearing), by 42% when vacuums or obstetrical forceps are used during birth. For unassisted births, injury rates fell from 13.5% in 2004 to 6.5% in 2017.²⁵⁶

For the three assisted delivery birth procedures (overall, vacuum, and forceps), the PEI outcomes are slightly better than Canada outcomes, respectively, for overall (11.9 versus 12.7) and forceps (2.3 versus 3.4). And, PEI outcomes are almost as good as Canada outcomes for vacuum assisted delivery (8.9 versus 8.7).

Five C-section rates are reported in Table 4-46. Primary C-section rates reveal little difference between PEI and Canada rates (0.3 versus 4.0), according to CIHI data. However, total C-section rates are about ten points higher than primary rates (~20 versus ~30) due to the repeat C-section rates which are notably higher for both PEI (89.5) and Canada (81.8).

And, the repeat C-section rate in PEI (89.5) exceeds Canada (81.8) by 7.9 points. The PEI repeat Csection rate is higher than other provinces (minimum, MB 73.9 versus maximum, PE 89.5), yet PEI was not an outlier (95% CI: 85.3-93.6). CIHI information about C-section rates can be supplemented by Health PEI Perinatal Report (2020) where between 2016 and 2019 the Csection rate was 29.6%, 31.8%, 31.0% and 31.4%, respectively. The minimum (29.6%) and the maximum (31.8%) PEI C-section rates are in the vicinity of the total C-section rates that CIHI reports for PEI (30.5) and Canada (29.4). Gu et al (2020) reported a C-section rate of 29.6 for PEI for 2016-2017.257

In Canada, C-section delivery rates doubled from 1997 (18.7%) to 2016 (28.2%). In 2016-2017 the rate rose to 29.1% (slightly higher than the OECD average, 27.9%). The Canadian increase was attributed to women giving first birth at a later age, maternal obesity, fertility treatments, convenience, and more women inclined to have a C-section delivery.²⁵⁸ But, C-section rates have increased in most OECD countries with the OECD average increasing from 20% in 2000 to 28% in 2017. OECD C-section rates vary widely from a low of 14.8 (Israel) to a high of 53.1 (Turkey) per 100 live births with the current OECD average rate being 28.1 per 100 live births.²⁵⁹

Maternal Health

Maternal health indicators monitored by the Public Health Agency of Canada (PHAC) inform the maternal role in providing a protective and safe environment for the developing baby. According to PEI's Annual Statistical Review 2019 (2020), there were 33,672 females age 15-45 years or of childbearing age living in PEI, and they gave birth to about 1,400 births during the year (as had occurred annually in PEI for the past two decades). 260

The first three maternal outcomes (prenatal smoking, exposure to secondhand smoke, and alcohol intake) do not have a PEI-Canada comparison due to the small unreliable sample sizes. Therefore, the highest-lowest (or, minimum-maximum) figures are used as a substitute to indicate the range within which PEI figures are likely to fall. Figures are available for four underlying conditions that can pose a stress to the pregnant person. PEI reported a more favourable (lower) rate of maternal gestational diabetes than Canada (78.5 versus 90.0 per 1,000 total births). However, Canada reported slightly better rates than PEI for maternal excess weight gain (43.7% versus 44.3%), pre-gestational hypertension (7.7 versus 10.5 per 1,000 total births), and gestational hypertension (62.2 versus 70.9 per 1,000 live births) (Table 4-47).

Lastly, exclusive breastfeeding for six months indicated that PEI mothers chose the recommended Baby Friendly option for their newborns almost as often as Canada mothers: 28.9% versus 32.2% (3.3% difference). The Baby Friendly Initiative (BFI), a global effort to improve health services so that mothers make informed infant feeding choices and support breastfeeding.²⁶¹ Overall, PEI maternal outcomes are better than Canada for gestational diabetes (78.5 versus 90.0 per 1,000 births), and similar in performance to other Canadian

jurisdictions the remaining indicators as indicated by the value and the minimum-maximum figures.

TABLE 4-47 MATERNAL HEALTH INDICATORS, PEI AND CANADA (2017)²⁶²

TABLE 4-47 WATERNAL HEALTH INDICATORS, FE	, 12	., ., . ,	• ,					
Indicator	PEI	Canada	Which province and territory is better (by how much?)	Highest	Lowest			
MATERNAL BEHAVIOURS								
Maternal smoking during pregnancy, 2017 (%)	F	8.2%	Not available	17.2% (NS)	5.3% (BC)			
Maternal exposure to secondhand smoke during pregnancy, 2017 (%)	F	7.1%	Not available	15.5% (NS)	4.6% (AB)			
Maternal alcohol consumption during pregnancy, 2017 (%)	F	4.2%	Not available	11.6% (PQ)	2.9% (AB)			
MATERNAL CONDITIONS								
Pregnant women with diagnosed diabetes, i.e., gestational diabetes, 2017 (rate per 1,000 total births)	78.5	90.0	PEI (11.5)	132.0 (BC)	70.8 (NL); 44.5 (NU)			
Women who report gestational weight gain above recommended Health Canada guideline, by age group, 2017 (%)	44.3%	43.7%	Canada (0.6%)	58.3% (NL)	38.2% (MB)			
Pregnant women with diagnosed pre-gestational hypertension, 2017 (rate per 1,000 total births)	10.5 (PE/NL)	7.7	Canada (2.8)	15.6 (NB)	5.9 (SK)			
Pregnant women with diagnosed gestational hypertension, 2017 (rate per 1,000 live births)	70.9	62.2	Canada (8.7)	80.4 (NL) 91.6 (NU)	56.5 (ON)			
NEWBORN BEHAVIOUR								
Exclusive breastfeeding for at least the first six months, 2017 (%)	28.9%	32.2%	Canada (3.3%)	47.2% (BC)	23.8% (PQ)			

Source: Centre for Surveillance and Applied Research, Public Health Agency of Canada.

The main outcome sought from a pregnancy is a live birth with a healthy newborn. Table 4-48 summarizes live births by age of mother. Age of the mother is known to impact the success of pregnancy with extreme ages posing not the only risk but added risk to both mother and offspring. Age categories reported ranged from under 15 years to 45-49 years where the percentage difference in live births between PEI and Canada varied from 0.1% to 5.7%, a relatively small difference. Considering all births (100%), the percentage of births increases until age 30-34 years and then began to decrease. Few Canada mothers (<1%) and no PEI mothers reported a birth to a mother under 15 years of age.

The percentage of live births increased from ages 15 to 19 years to 20 to 24 years, to 25 to 29 years in PEI (2.1% to 12.0% to 33.1%) and Canada (1.7% to 10.1% to 27.6%), respectively. These PEI outcomes were incrementally higher than these Canada outcomes by 0.4%, 1.9% and 5.7%, respectively. In the later five-year age categories (30 to 34, 35 to 39, 40 to 44, 45 to 49), the trend reversed and the percentage of live births to Canada mothers (36.3%, 19.8%, 4.1%, 0.3%) exceeded PEI mothers (32.8%, 16.7%, 3.1%, 0.2%) by small percentages (3.5%, 3.1%, 1.0% 0.1%, respectively). Looking at the distribution of all births by age category, the

rule of thirds applies, with approximately one-third born to mothers age 25 to 29, one-third to mothers age 30 to 34, and the remaining one-third born to mothers under age 25 and over age 34 years. In other words, age 25 to 34 account for most births when examining percentage births to each five-year maternal age category.

Two other ways to describe birth outcomes are the percentage of mothers with either a duration of gestation or a live birth at three specific gestation intervals: <37 weeks (early term pregnancy), 37 to 41 weeks (full term pregnancy), and ≥42 weeks (post term pregnancy). Statistics Canada figures were identical for both duration of gestation and live births. Therefore, the two indicators were paired for presentation in Table 4-48. The percentage of early term, full term, and post term pregnancies was similar in PEI (9.3%, 90.5%, 0.2%) and Canada (7.9%, 91.7%, 0.3%), with small differences (1.4%, 1.2%, 0.1%), respectively. Most births are full term and live births (90.5% in PEI and 91.7% in Canada) with the percentage of early term births (9.3% in PEI and 7.9% in Canada) exceeding the percentage of post term births (0.2% in PEI and 0.3% in Canada) in both PEI and Canada by a very small percentage (0.1% to 1.4%). PEI and Canada outcomes were mid-pack, i.e., within the minimum-maximum percentages reported by other jurisdictions.

TABLE 4-48 LIVE BIRTHS BY AGE OF MOTHER, PEI AND CANADA (2019)²⁶³

Indicator LIVE BIRTHS BY AGE OF MOTHER	PEI PEI	Canada Canada N=372,03	Which province and territory is better (by how much?)	Highest	Lowest
Live births, by age of mother, under 15 years, 2019 (% and number)	0% (0)	0% (64)	SAME	0.1% (SK) 0.6% (NU)	0.0%, all other
Live births, by age of mother, 15 to 19 years, 2019 (% and number)	2.1% (28)	1.7% (6,385)	PEI (0.4%)	4.4% (SK) 18.3% (NU)	1.1% (BC)
Live births, by age of mother, 20 to 24 years, 2019 (% and number)	12.0% (159)	10.1% (37,574)	PEI (1.9%)	18.0% (NB); 28.6% (NU)	7.7% (BC)
Live births, by age of mother, 25 to 29 years, 2019 (% and number)	33.1% (439)	27.6% (102,823)	PEI (5.7%)	33.1% (PE)	24.0% (BC)
Live births, by age of mother, 30 to 34 years, 2019 (% and number)	32.8% (435)	36.3% (135,214)	Canada (3.5%)	38.3% (BC)	17.6% (NU)
Live births, by age of mother, 35 to 39 years, 2019 (% and number)	16.7% (222)	19.8% (73,844)	Canada (3.1%)	23.9% (BC)	7.3% (NU)
Live births, by age of mother, 40 to 44 years, 2019 (% and number)	3.1% (41)	4.1% (15,077)	Canada (1.0%)	4.6% (BC)	2.0% (NB); 1.9% (NU)
Live births, by age of mother, 45 to 49 years, 2019 (% and number)	0.2% (2)	0.3% (985)	Canada (0.1%)	0.3% (ON & BC)	0% (NL, NT, NU)
DURATION OF GESTATION					
Duration of gestation of mother, <37 weeks (%), or Live births, gestation less than 37 weeks (%)	9.3%	7.9%	Canada (1.4%)	9.4% (MB & NU)	7.0% (PQ)
Duration of gestation of mother, 37 to 41 weeks (%), or Live births, gestation 37-41 weeks (%)	90.5%	91.7%	Canada (1.2%)	92.8% (PQ)	88.7% (MB); 87.5% (NU)
Duration of gestation of mother, 42 weeks or more (%), or Live births, gestation 42 or more weeks (%) Source: Statistics Canada Table 13-10-0416-01 and Ta	0.2%	0.3%	PEI (0.1%)	1.9% (MB)	0.1% (NL)

Source: Statistics Canada Table 13-10-0416-01 and Table 13-10-0425-01

Fetal Deaths and Infant Deaths

Fetal deaths are described by weeks of gestation at time of death. Weeks of gestation of 20 weeks or more is an early fetal death, and weeks of gestation of 28 weeks or more is a late fetal death. Early fetal death has an added criterion in this report, i.e., a birth weight of 500 grams. 264 Both categories are considered stillbirths if born without signs of life, and both differ from miscarriage (early pregnancy loss), and live births (even if death occurs shortly after live birth) (Table 4-49). In 2019, in PEI and Canada, the number of early fetal deaths was 11 in PEI and 3,191 in Canada and exceeded the number of late fetal deaths (8 in PEI and 1,066 in Canada) by 3 deaths in PEI and 2,125 in Canada. Between 2016 and 2019 the number of early fetal deaths ranged from 9 to 12 in PEI and 3,061 to 3,191 in Canada, and the number of late fetal deaths ranged from 2 to 8 in PEI and from 1,040 to 1,073 in Canada. One concludes that the 2019 figures are on the high side of the 2016-2019 range (but not outliers). When minimum and maximum figures for 2019 were compared across jurisdictions the provinces of Ontario and PEI had the highest and lowest counts for early

fetal death and late fetal death, respectively. The lowest territorial count (NT) was lower than the lowest provincial count (PE) for both early and late fetal death (Table 4-49).

Total infant deaths where age at time of death was under 1 year showed a rate of 3.8 for PEI and 4.4 for Canada making the PEI result better than Canada by 0.6 per 1,000 live births. The actual number of infant deaths in 2019 was 5 in PEI and 1,634 in Canada. The PEI rate of 3.8 suggests 7-8 infant deaths in 2019 (possibly a rounding error since PEI has about 1,400 births a year). Regardless, in PEI in 2019 the total number of infant deaths under 1 year of age was 5 which is equal to the sum of the 3 neonatal deaths (from 0-27 days, or 1 month after birth) and the 2 post-neonatal deaths (from 1-11 months). Below, readers can see the distribution of these 5 deaths by age. PEI death rates are among the lowest in Canada. Among the provinces, PEI has the lowest death rate for late fetal deaths (8), neonatal deaths (0-27 days, under 1 day, 1 to 6 days, but not 7 to 27 days), and post-neo-natal (6-11 months, but not 1-2 or 3-5 months). Reported territorial rates were sometimes lower than provincial rates. Lowest and highest death rates were displayed for both provincial and territorial jurisdictions for comparison (since small numbers may skew results as in PEI).

TABLE 4-49 MORTALITY RATE (PER 1,000 LIVE BIRTHS) AND NUMBER OF INFANT DEATHS, PEI (2019)²⁶⁵

Infant deaths by age	PEI	Canada	Which province and territory is better (by how much?)	Highest	Lowest				
FETAL DEATHS (early and late)									
Early fetal deaths (number only)	11	3,191	Rate not given; cannot compare	1,421 (ON)	8 (NT) TERR. & 11 (PE) PROV.				
Late fetal deaths (number only)	8	1,066	Rate not given; cannot compare	438 (ON)	3 (NT) TERR. & 8 (PE) PROV.				
TOTAL INFANT DEATHS AT AGE UNDER 1 YEAR (NEO & POST-NEO)	3.8 (5)	4.4 (1,634)	PEI by 0.6 (1,629)	5.8 (SK) PROV; 16.7 (NU) TERR	3.3 (BC) PROV; 1.7 (NT) TERR				
A. NEONATAL DEATHS (0-27 days)	A. NEONATAL DEATHS (0-27 days)								
Neonatal, age at time of death, 0 to 27 days	2.3 (3)	3.3 (1,243)	PEI by 1.0 (PEI by 1,241)	4.2 (SK) PROV; 9.5 (NU) TERR	2.3 (PE) PROV; 1.7 (NT) TERR				
Neonatal, age at time of death, under 1 day	1.5 (2)	2.2 (827)	PEI by 0.7 (PEI by 825)	2.4 (NU) TERR; 2.9 (NL) PROV	1.5 (PE) PROV; 1.7 (NT) TERR				
Neonatal, age at time of death, 1 to 6 days	0 (0)	0.6 (227)	PEI by 0.6 (PEI by 227)	1.1 (SK) PROV; 2.4 (NU) TERR	0 (PE) PROV; 0 (NT) TERR				
Neonatal, age at time of death, 7 to 27 days	0.8 (1)	0.5 (189)	Canada by 0.3 (PEI by 188)	0.9 (SK) PROV; 4.8 (NU) TERR	0.3 (NL & NB) PROV; 0 (NU) TERR				
B. POST-NEONATAL DEATHS (0-11 mon	ths)								
Post-neonatal, age at time of death, 1 to 11 months	1.5 (2)	1.1 (391)	Canada by 0.4 (PEI by 289)	2.4 (MB) PROV; 7.1 (NU) TERR	0.7 (PQ) PROV; 0 (NT) TERR				
Post-neonatal, age at time of death, 1 to 2 months	0.8 (1)	0.5 (197)	Canada by 0.3 (PEI by 196)	1 (NS & MB) PROV;	0 (NB) PROV; 0 (NT) TERR				
Post-neonatal, age at time of death, 3 to 5 months	0.8 (1)	0.3 (105)	Canada by 0.5 (PEI by 104)	0.8 (PE) PROV;	0 (NL) PROV: 0 (NT & NU) TERR				
Post-neonatal, age at time of death, 6 to 11 months	0 (0)	0.2	PEI by 0.2 (PEI by 89)	0.7 (MB) PROV; 1.2 (NU) TERR	0 (NL & PE) PROV; 0 (NT) TERR				

Sources: Statistics Canada Table 13-10-0427-01 and Table 13-10-0713-01

Breastfeeding

In PEI, breastfeeding behaviour was supported by a breastfeeding policy (2012) and more recently by the Infant Feeding Policy (2016) which is based on the Baby Friendly Initiative (BFI), a global effort to improve health services so that mothers make informed infant feeding choices and support breastfeeding.²⁶⁶ BFI is a strong policy that promotes and protects breastfeeding in the hospital and community, and creates a culture conducive to breastfeeding. A positive breastfeeding culture respects the right to breastfeed in a public area without discrimination or harassment. The previous report, Women in Prince Edward Island: Statistical Review 2015 described the PEI rate of breastfeeding as approximately 75%, and similar to Nova Scotia and New Brunswick.²⁶⁷ Since the last report, breastfeeding rates have increased in PEI. Sustained efforts have led to a provincial breastfeeding rate that is 80% and increasing, with increases at both Prince County Hospital and Queen Elizabeth Hospital (Figure 4-6).

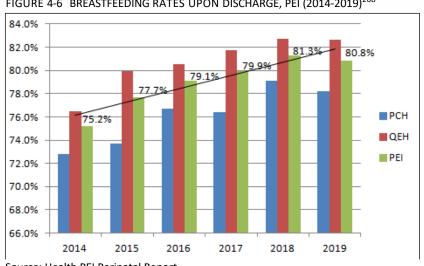
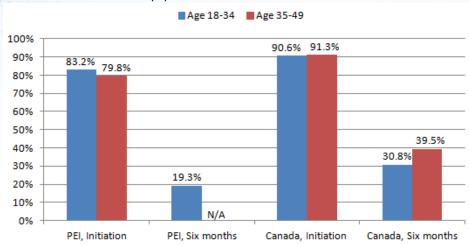


FIGURE 4-6 BREASTFEEDING RATES UPON DISCHARGE, PEI (2014-2019)²⁶⁸

Source: Health PEI Perinatal Report

These breastfeeding initiation rates for PEI and its hospitals are similar to Canada rates reported in the 2017-2018 Canadian Community Health Survey (Figure 4-7). In PEI, breastfeeding initiation rates were 83.2% for mothers age 18 to 34 years and 79.8% for mothers age 35 to 49 years while initiation rates reported for Canada counterparts were higher, 90.6% and 91.3%, respectively. By subtraction, the difference between PEI and Canada breastfeeding rates was 7.4 percentage points for women age 18 to 34 years, and 11.5 percentage points for women age 35 to 49 years. In PEI, the breastfeeding initiation rate decreased 3.4 percentage points (83.2% versus 79.8%) from the younger 18 to 34 year category to the older 35 to 49 year old category. By comparison, the rate increased slightly among Canada women, increasing 0.7% percentage points from 90.6% for the younger mothers to 91.3% for the older mothers. It is well known that in developed countries more women initiate breastfeeding than continue breastfeeding for six months (as universally recommended in breastfeeding policies). In PEI, the rate of exclusive breastfeeding at six months was about one-quarter the initiation rate, approximately 20% versus 80%. Further, the exclusive breastfeeding rate in PEI was 19.4% which was about two-thirds the Canada rate (30.8%) for women age 18 to 34 years of age, and about one-half the Canada rate (39.5%) for women age 35 to 49 years.²⁶⁹

FIGURE 4-7 BREASTFEEDING: INITIATION AT BIRTH VS. EXCLUSIVE BREASTFEEDING AT SIX MONTHS, PEI AND CANADA (%)270



Source: Statistics Canada Table 13-10-0113-01



Breastfeeding rates for initiation and continuation to six months vary across the fourteen jurisdictions in Canada (Figure 4-8). The 18 to 34 year old and the 35 to 49 year old mothers initiate breastfeeding at a similarly high rate, 90.6% versus 91.3%, respectively. The same age groups each decrease exclusive breastfeeding at a somewhat similar rate by six months, 30.8% versus 39.5%, respectively (citing Canada figures, i.e., the average for provinces and territories). In both age groups, less than half the women who initiate breastfeeding at birth (90.6% and 91.3%) practice exclusive breastfeeding at six months (30.8% and 39.5%), as advised by breastfeeding policy. The highest rates of initiation for 18 to 34 year old mothers occurs in British Columbia (95.7%) and for 35 to 49 year old mothers occurs in British Columbia (97.5%), Manitoba (97.6%) and Saskatchewan (97.5%). After six months, the highest rate of exclusive breastfeeding for 18 to 34 year old mothers is in the province of British Columbia (40.4%) and the territory of Yukon (53.0%). And, after six months, the highest rate of exclusive breastfeeding for 35 to 49 year old mothers is in the provinces of

British Columbia (57.1%) and Manitoba (58.4%) with no territory reporting figures for six month exclusive breastfeeding.

The lowest rates of initiation are in the province of Newfoundland-Labrador for women age 18 to 34 years (74.5%) and 35 to 49 years (66.8%). In the territories, Yukon led with an initiation rate of 98.8% (NT, 77.9% and NU, 64.0%) for age 18 to 34 year old mothers, and 96.1% for 35 to 49 year old mothers living in NT. Continued policy implementation is required to achieve the goal of exclusive breastfeeding from birth to six months.²⁷¹

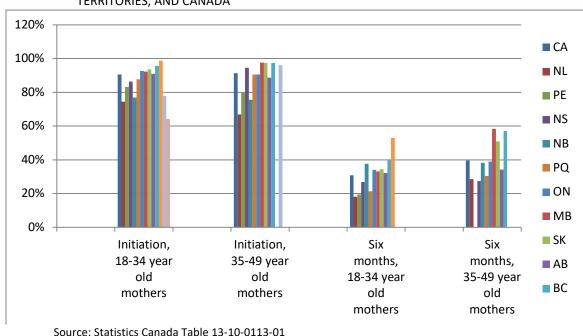


FIGURE 4-8 BREASTFEEDING RATES (%): INITIATION VS. SIX MONTH BY AGE OF MOTHER, PROVINCES, TERRITORIES, AND CANADA²⁷²

The majority of mothers living in Canada breastfeed their newborn. Almost two-fifths of mother's breastfed exclusively for six months or more which is an increase from the last

PEI Births by Maternal Age

Figure 4-9 displays the percentage of births from four different maternal age categories: under 20 years, 20 to 29 years, 30 to 39 years, and 40 years or over. The women gave birth in PEI hospitals between 2016 and 2019. When the percentage distribution figures were averaged across the four-year period, the distribution of maternal ages was as follows: 2.4% under age 20 years, 45.4% age 20 to 29 years, 49.3% age 30 to 39 years, and 2.9% age 40 years and over. A total of 10% of the mothers were either under 20 years of age (4.7%) and over 40 years of age (5.3%) and represented the highest risk mothers. It follows that 90% of mothers were lower risk mothers. In the latest year (2019), the distribution of maternal ages at birth was 2.3% under 20 years of age, 44.6% 20 to 29 years, 50.4% 30 to 39 years, and 2.7% age 40 or over.

national survey.

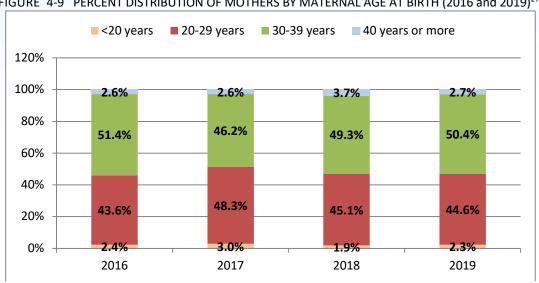


FIGURE 4-9 PERCENT DISTRIBUTION OF MOTHERS BY MATERNAL AGE AT BIRTH (2016 and 2019)²⁷³

Source: Health PEI Perinatal Report (September 10, 2020)

A study of maternal age and likely complications identified patterns by maternal age.²⁷⁴ Complications for 11 to 18 year old mothers tended to be preterm delivery, bacterial infection of chorion, inflammation of the lining of the uterus, and mild preeclampsia. Pregnant women who were 15 to 19 years old had greater likelihood for severe preeclampsia, eclampsia, Pregnant women who were over 35 years old had an increased likelihood of preterm delivery, hypertension, and preeclampsia. Older women (over 40 years old) had increased likelihood of mild preeclampsia, fetal distress, and poor fetal growth. Less information is available regarding maternal age and birthing, maternal age and parity, and maternity and substance use in PEI due to loss of PEI Reproductive Care Program Perinatal Database Report which was last released in 2011.²⁷⁵ Historical information from Women in PEI: A Statistical Review 2015 indicated that the average maternal age in PEI was 28.0 years in 1998, and 29.2 years in 2011.²⁷⁶



Maternal Diabetes

Diabetes mellitus can increase the level of risk associated with a pregnancy. Over 92% of prenatal clients do not live with diabetes mellitus. However, about 8% of prenatal clients do live with a diabetes condition of some type (82 to 108 individuals a year). The majority of these individuals, almost 85% (83.7/99.0=84.5%), live with gestational diabetes (Table 4-50). In PEI, the provincial maternal gestational diabetes rates for the years from 2016 to 2019 were as follows: 2016, 6.3%; 2017, 6.9%, 2018, 5.4%; and 2019, 7.5%.

TABLE 4-50 MATERNAL DIABETES STATUS OF PRENATAL CLIENTS, PEI (2016-2019)²⁷⁷

			Types of	diabetes			
Year	No Diabetes mellitus	Diabetes mellitus not elsewhere classified	Diabetes mellitus Type I	Diabetes mellitus Type II	Gestational diabetes	Diabetes of some type	Total maternal clients
2016	1,247	2	12	10	84	108 (7.9%)	1,355
2017	1,156	2	7	5	86	100 (8.0%)	1,256
2018	1,198	3	5	5	69	82 (6.4%)	1,280
2019	1,181	0	6	4	96	106 (8.2%)	1,287
Average	1,196	1.8	7.5	6.0	83.7	99.0 (7.6%)	1,295

Source: Health PEI Perinatal Report

Women's Wellness Program and Sexual Health Services

Since January 2017 this new program has been providing reproductive and sexual health care to all genders, ages, and orientations at five different locations (a combination of hospitals and health centres). The program operates within Health PEI policy and legislative frameworks to provide services in a non-discriminatory manner and make available accommodations and adaptive supports. Reproductive health services include initial fertility assessment for couples without a primary care provider; prenatal care for individuals without a primary care provider; menopause counselling and care for individuals without a primary care provider; maternal (perinatal and postpartum) mental health services; pregnancy loss counselling; and pap/pelvic exams. Sexual health services include sexual health education and counselling; sexually transmitted infection screening and treatment; birth control counselling and prescriptions; pregnancy counselling, testing and support; and abortion services (medication abortion and aspiration abortion).²⁷⁸

Abortion services within Women's Wellness Program and Sexual Health Services (WWP & SHS) were initiated in January 2017. Aspiration abortions are available up to 12 weeks 6 days gestation. Medication abortion (MAB) services through the Program became available in 2018 when Health Canada approved the medication Mifegymiso. Medication abortion is an option up to 9 weeks gestation. The decision between aspiration abortion versus medication abortion is based on the patients' medically informed personal preference, as well as gestational age.

Between January 2017 and December 2020, the new Women's Wellness Program and Sexual Health Services has provided aspiration and medication abortion services to 842 clients composed of 541 aspiration and 301 medication abortions. The average number of clients per month is 9.2 medication (range: 4-16), and 11.1 aspiration (range: 4-20). Added, this range is 8 to 36 clients a month. Total days of service number 1,661 for medication abortion and 3,229 for aspiration abortion. Wait times average 10 days for medication abortion and 15 days for aspiration abortion, where wait time definitions are strictly adhered to by program staff at Women's Wellness Program.²⁷⁹ The Program service volume for the latest calendar year is summarized in Table 4-51.

TABLE 4-51 SUMMARY OF MEDICATION ABORTION AND ASPIRATION ABORTION SERVICES. PEI (2020)²⁸⁰

	MEDICA	TION ABO	RTIONS	ASPIRATION ABORTIONS			
Months	Number of clients	Total Days	Wait time (days)	Number of clients	Total Days	Wait time (days)	
January	9	109	12	14	306	22	
February	13	120	9	9	57	6	
March	10	67	7	13	155	12	
April	16	129	8	13	159	12	
May	15	85	6	4	27	7	
June	12	102	9	12	161	13	
July	13	121	9	13	209	16	
August	8	85	11	6	94	16	
September	7	59	8	7	89	13	
October	9	39	4	8	81	10	
November	10	69	7	10	124	12	
December	11	81	7	9	82	9	
SUMMARY INFO:							
Cumulative total	133	1066	97	118	1544	148	
Average/month	11.0	88.8	8.0	9.8	128.6	12.3	
Minimum, month	7	39	4	4	27	6	
Maximum, month	16	129	12	14	306	22	

Source: Women's Wellness Program

Differences in Types of Disability

Since 1983, Canada has gradually evolved a new definition of disability. The shift was from a more medical model (that focused on physical and sensory impairments, and health conditions) to a more social model (that acknowledges cognitive and mental impairments plus barriers that prevent or limit full participation in society). Seven Canadian surveys have advanced sampling and questioning methodology in Canada's main source of data on disabilities to inform public policy in the areas of inclusion, diversity, human rights, employment equality, and gender equality for persons living with disabilities. The newer and broader definition of disability has led to a situation where surveys report more disability than is generally believed to exist, i.e., one in five or 22% of Canadians aged 15 and over reported one or more disabilities in 2017. Among these 6.2 million Canadians there is lost potential (mainly due to mild disabilities) that contributes to unemployment and poverty. Opportunities exist for more progress (Statistics Canada, 2019).

The latest Canadian Survey on Disability (2017) reported that 29,820 Prince Edward Islanders aged 15 years and older live with one or more of the eleven types of disabilities measured, and that disability impacts 1.3 times as many females as males (Table 4-52 Part A). Among Islanders, of the eleven types of disability reported, eight types were reported markedly more often by females than males: pain-related (10,540 females and 8,300 males), flexibility (7,660 females and 5,910 males), mobility (7,300 females and 5,200 males), mental health-related (6,520 females and 3,220 males), seeing (3,930 females and 2,320 males), dexterity (3,280 females and 2,660 males), memory (2,480 females and 1,900 males), and unknown types of disability (360 females and an undetermined number of males). Three types of disabilities were reported slightly more frequently by males than females: hearing (3,000 females and 3,230 males), learning (2,310 females and 2,350 males), and developmental (560 females and 610 males). These trends were true in Atlantic Canada, but not Canada where all eleven types of disability were reported by more females than males.

The dominant type of disability in PEI was pain, which affected 7,520 females and 5,020 males (Table 4-52 Part A, number of persons affected). In order of decreasing prevalence, flexibility disabilities affected 5,760 females and 3,840 males, while mobility disabilities affected 5,480 females and 3,950 males. All three of the most prevalent disabilities affected 1.5 times more PEI females than PEI males (by ratio of 1.5, 1.5 and 1.4, respectively) which represented approximately 2,000 more PEI females than males. The top three types of disability in PEI (that is, pain, flexibility and mobility) were also the top three disabilities in Atlantic Canada and Canada. Approximately 1,500 to 2,600 Islanders reported having the next four most prevalent disabilities - hearing, mental psychological, dexterity and seeing disabilities where approximately 400 to 500 more PEI females than PEI males reported these four types of disability (except for hearing disability, which was reported by approximately 200 more PEI males than PEI females.

Table 4-52 (Part B, column percentages) reveals four general categories of prevalence or frequency of occurrence at a given time for the eleven disabilities. The column percentages indicate that 60% to 70% of survey respondents experienced pain-related disability, the most frequent type of disability which affected 10,540 females and 8,300 males living in PEI. Generally speaking, 25% to 50% of respondents experienced flexibility, mobility or mental health-related disabilities, and 15% to 25% experienced memory, learning, dexterity, hearing or seeing disabilities. Lastly, fewer than 5% experienced developmental or unknown types of disabilities.

Table 4-52 (Part C, row percentages) indicates a higher percentage of females than males reported all disabilities in Atlantic Canada and Canada except for hearing, learning, developmental and unknown types of disabilities. Broadly speaking, the female-to-male ratio was slightly greater than one (i.e., the male-to-female ratio was slightly less than one) across the three jurisdictions. One male-female difference occurred that was unique, consistent, and markedly different. That is, about two-thirds of females and one-third of males reported mental health-related disabilities. Twice as many females as males suffered mental health issues, a trend that was true for PEI, Atlantic Canada, and Canada. Table 4-52 (Part C) indicates that the male to female ratio for each type of disability was approximately 40% to 60% (two males affected for every three females affected with regard to pain, flexibility, mobility, mental/psychological, dexterity, seeing, and memory type of disabilities). Among the remaining four types of disability, the male to female ratio was almost equal for hearing (52% to 48%) and learning (47% to 53%), and was reversed for developmental disabilities (61% male to 39% females).

TABLE 4-52 PERSONS WITH SPECIFIC TYPES OF DISABILITY IN PEI, ATLANTIC, AND CANADA BY A) NUMBER, B) PERCENT (COLUMN %), AND C) SEX (ROW %)²⁸¹

Disability type	Prince	Edward	l Island	Atlantic			Canada		
Part A. Number (of persons)	Both	Male	Female	Both	Male	Female	Both	Male	Female
TOTAL	29,820	12,980	16,840	522,420	233,510	288,910	6,246,640	1,687,770	3,483,090
Pain-related	18,830	8,300	10,540	339,880	144,570	195,310	4,062,000	1,226,140	2,374,230
Flexibility	13,560	5,910	7,660	248,870	112,170	136,690	2,795,110	1,075,350	1,568,970
Mobility	12,500	5,200	7,300	232,280	99,760	132,520	2,676,370	754,880	1,601,010
Mental health-related	9,740	3,220	6,520	186,670	70,850	115,820	2,027,370	616,800	1,272,490
Seeing	6,250	2,320	3,930	115,300	48,550	66,750	1,519,840	715,160	903,040
Hearing	6,230	3,230	3,000	117,710	66,910	50,800	1,334,520	491,490	619,360
Dexterity	5,940	2,660	3,280	114,930	50,760	64,170	1,275,610	544,700	784,120
Learning	4,660	2,350	2,310	85,370	43,640	41,720	1,105,680	475,080	560,970
Memory	4,380	1,900	2,480	85,400	39,460	45,930	1,050,840	192,160	575,760
Developmental	1,170	610 ^E	560 ^E	23,900	13,720	10,180	315,470	80,660	123,310
Unknown disability type	640 ^E	F	360 ^E	14,670	7,000	7,670	155,810	2,763,540	75,150
Part B. Percent (Column %)	Both	Male	Female	Both	Male	Female	Both	Male	Female
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Pain-related	63.1	63.9	62.6	65.1	61.9	67.6	65.0	61.1	68.2
Flexibility	45.5	45.5	45.5	47.6	48.0	47.3	44.7	44.4	45.0

Disability type	Prince	Edward	lsland		Atlantic	C	Canada		
Part A. Number (of persons)	Both	Male	Female	Both	Male	Female	Both	Male	Female
Mobility	41.9	40.1	43.3	44.5	42.7	45.9	42.8	38.9	46.0
Mental health-related	32.7	24.8	38.7	35.7	30.3	40.1	32.5	27.3	36.5
Seeing	21.0	17.9	23.3	22.1	20.8	23.1	24.3	22.3	25.9
Hearing	20.9	24.9	17.8	22.5	28.7	17.6	21.4	25.9	17.8
Dexterity	19.9	20.5	19.5	22.0	21.7	22.2	20.4	17.8	22.5
Learning	15.6	18.1	13.7	16.3	18.7	14.4	17.7	19.7	16.1
Memory	14.7	14.6	14.7	16.3	16.9	15.9	16.8	17.2	16.5
Developmental	3.9	4.7	3.3 ^E	4.6	5.9	3.5	5.1	7.0	3.5
Unknown disability type	2.1 ^E	F	2.1 ^E	2.8	3.0	2.7	2.5	2.9	2.2
Part C. Sex (Row %)	Both	Male	Female	Both	Male	Female	Both	Male	Female
TOTAL	100.0%	43.5%	56.5%	100%	44.7%	55.3%	100.0%	44.2%	55.8%
Pain-related	100.0%	44.1%	56.0%	100.0%	42.5%	57.5%	100.0%	41.6%	58.4%
Flexibility	100.0%	43.6%	56.5%	100.0%	45.1%	54.9%	100.0%	43.9%	56.1%
Mobility	100.0%	41.6%	58.4%	100.0%	42.9%	57.1%	100.0%	40.2%	59.8%
Mental health-related	100.0%	33.1%	66.9%	100.0%	38.0%	62.0%	100.0%	37.2%	62.8%
Seeing	100.0%	37.1%	62.9%	100.0%	42.1%	57.9%	100.0%	40.6%	59.4%
Hearing	100.0%	51.8%	48.2%	100.0%	56.8%	43.2%	100.0%	53.6%	46.4%
Dexterity	100.0%	44.8%	55.2%	100.0%	44.2%	55.8%	100.0%	38.5%	61.5%
Learning	100.0%	50.4%	49.6%	100.0%	51.1%	48.9%	100.0%	49.3%	50.7%
Memory	100.0%	43.4%	56.6%	100.0%	46.2%	53.8%	100.0%	45.2%	54.8%
Developmental	100.0%	52.1% ^E	47.9% ^E	100.0%	57.4%	42.6%	100.0%	60.9%	39.1%
Unknown disability type	100.0%	F	56.3% ^E	100.0%	47.7%	52.3%	100.0%	51.8%	48.2%

Source: Statistics Canada Table 13-10-0376-01

The next two tables, Table 4-53 and Table 4-54, provide visual displays of the distribution of disabilities in PEI in the Canadian Survey of Disabilities. These tables reveal two key aspects of PEI disabilities: magnitude of disabilities (counts and percentages), and life cycle or agecategory patterns (but not severity of disability).

TABLE 4-53 RELATIVE NUMBER OF MALES AND FEMALES AFFECTED BY EACH TYPE OF DISABILITY BY AGE AND SEX, PEI (M=MALE AND F=FEMAI F)²⁸²

rs & All Ages r (15 and over) d,130 Male = 12,980 5,100 Female = 16,840 Pain (10,540 F) Pain (8,300 M)
H,130 Male = 12,980 5,100 Female = 16,840 Pain (10,540 F)
Pain (10,540 F)
Pain (8,300 M)
Pain (8,300 M)
Pain (8,300 M)
Flexibility (7,660 F) Mobility (7,300 F)
Mental (6,520 F)
Flexibility (5,910 M) Mobility (5,200 M)
0 F) Seeing (3,930 F) 3,350 Dexterity (3,280 F) Hearing (3,230 M) (3,120 Mental (3,220 M) Hearing (3,000 F)
0 M) Dexterity (2,660 M) (2,510 Memory (2,480 F) Learning (2,350 M) 2,490 Seeing (2,320 M) Learning (2,310 F)
.,630 Memory (1,900 M) (1,570 .,370 290 F) (1,200
.0 M)
660
80 F) Development (610 M) 500 F) Development (560 F)
2 (()

400	Pain (430 M) Learning (410 F)	Mobility (480 M) Learning (470 M)		Learning (450 M) Learning (440 F)	
300	Unknown (360 F) Flexibility (340 F) Memory (310 F)	Dexterity (370, M) Seeing (330 M) Hearing (330 M) Hearing (330 F) Dexterity (300 F)		Mental (380 M)	Unknown type (360 F)
200	Development(260F) Seeing (270 F) Development(200 M)	Memory (290 M)			
100		Development (180, M)			
F	Dexterity (MF) Flexibility (M) Hearing (MF) Mobility (MF) Memory (F) Seeing (M) Unknown (MF)	Development (F) Unknown type (MF)	Development (MF) Unknown type (MF)	Development (MF) Unknown type (MF)	Unknown type (M)

Source: Statistics Canada Table 13-10-0376-01

(Table 4-54) The following visual display uses percentage of male (M) and female (F) Islanders reporting each type of

disability and five age categories to portray the distribution of the eleven disabilities in the PEI population based on the Canadian Survey on Disability (2017). The vertical columns provide a percentage scale (by increments of 10% points). The horizontal rows indicate four age categories and total population age 15 and older. Disability data appears to be more robust from age 25 years and over given the seven types of disability having unusable results for age 15 to 24 years. The results range from a minimum of 2.1% (unknown type of disability in the total population of females age 15 years and older) to 74.8% (for mental health-related disabilities among age 15 to 24 year females closely followed by 74.7% of 45 to 64 year old males reporting pain-related disability). This table and the previous table provide a synopsis of the giant table that follows, Table 4-56.

TABLE 4-54 RELATIVE PERCENTAGE OF MALES AND FEMALES REPORTING EACH TYPE OF DISABILITY BY AGE (arranged in descending order where M blue denotes Male and F red denotes Female) 283

	15 to 24 years	25 to 44 years	45 to 64 years	65 years & over	All Ages (15 & over)
	Males=1,160 = 100%	Males =2,340 = 100%	Males=5,340 = 100%	Males=4,130 = 100%	Males=12,980 = 100%
	Females=1,470 = 100%	Females=4,050 = 100%	Females=6,220 = 100%	Females=5,100 = 100%	Females=16,840 100%
Percent↓					
100%					
90%					
80%					
70%	Mental (74.8% F)		Pain (74.7% M)		
60%		Mental (61.5% F)	Pain (66.2% F)	Pain (69.2% F) Mobility (65.7% F) Pain (65.1% M) Flexibility (61.2% F) Flexibility (60.8% M) Mobility (60.3% M)	Pain (63.9% M) Pain (62.6% F)
50%	Mental (56.9% M)	Pain (56.5% F) Pain (50.9% M)			
40%	Learning (44.8% M) Pain (40.8% F)		Flexibility (47.4% M) Flexibility (47.7% F)		Flexibility (45.5% F) Flexibility (45.5% M)
			Mobility (45.2% F) Mobility (40.6% M)		Mobility (43.3% Mobility (40.1% M)
30%	Pain (37.1% M)	Flexibility (30.4% F) Flexibility (34.2% M) Mental (34.2% M)	Mental (37.9% F)	Hearing (39.5% M) Dexterity (30.8% F)	Mental (38.7% F
20%	Learning (27.9% F) Flexibility (23.1% F) Memory (21.1% F)	Seeing (25.2% F) Mobility (22.7% F) Mobility (20.5% M) Learning (20.1% M)	Mental (25.7% M) Hearing (23.6% M) Seeing (21.7 % F) Dexterity (21.4% F) Seeing (20.8% M)	Dexterity (29.1% M) Hearing (26.9% F) Seeing (25.3% F)	Hearing (24.9% Mental (24.8% M Seeing (23.3% F) Dexterity (20.5% M)
10%	Seeing (18.4% F) Development (17.7% F) Development (17.2% M)	Memory (17.5% F) Learning (16.8% F) Dexterity (15.8% M) Seeing (14.1% M) Hearing (14.1% M) Memory (12.4% M)	Dexterity (19.1% M) Hearing (18.5% F) Learning (17.0% M) Memory (15.3% F) Memory (14.6% M) Learning (12.5% F)	Seeing (17.2% M) Memory (16.0% M) Mental (11.4% F) Learning (10.9% M)	Dexterity (19.5% F) Learning (18.1% M) Seeing (17.9% M Hearing (17.8% F Memory (14.7% Memory (14.6% M) Learning (13.7%
0%		Hearing (8.1% F) Development (7.7% M) Dexterity (7.4% F)		Memory (9.8% F) Mental (9.2% M) Learning (8.6% F)	Development (4.7% M) Development (3.3%F) Unknown type (2.1% F)
F	Dexterity (MF) Flexibility (M) Hearing (MF) Mobility (MF) Memory (M) Seeing (M) Unknown type (MF)	Development (F) Unknown type (MF)	Development (MF) Unknown type (MF)	Development (MF) Unknown type(MF)	Unknown type (F

Source: Statistics Canada Table 13-10-0376-01

Disability planning attends to the life cycle male-to-female (M/F) ratios of three populations reported in the Canadian Survey on Disabilities: all persons (i.e., total population with and without disabilities), persons with disabilities, and persons without disabilities. Table 4-55 compares M/F ratios across the Atlantic provinces, Atlantic Canada and Canada. For the total population, the highest male-to-female ratios hover around 1.05 and occur at age 15-24 years. The lowest male-to-female ratios are in the range of 0.75 to 0.80 (0.93 in PEI) and occurs at age 75 and over. For the population with disabilities there is a notably lower male-to-female ratio ranging from a minimum of 0.58 (PE and NS, 25-44 years) to a maximum of 0.97 (NL, 65-74 years). These M/F ratios reflect the higher number of females than males who have disabilities at all ages. Clearly, the population with disabilities has a lower proportion of males than the general population (with and without disabilities, or persons without disabilities) especially among 15 to 24 and 25 to 44 years. Thereafter, the ratio approaches one or equal number of males and females, i.e., closing this gap for persons living with disabilities. Among persons without disabilities, the M/F ratio range is 0.63 (NS, 75 years and over) to 1.15 (NS, 15-24 years), and is similar to the total population (with and without disabilities) for the life span.

TABLE 4-55 MALE-TO-FEMALE RATIO (M/F) FOR TOTAL POPULATION WITH AND WITHOUT DISABILITIES BY AGE CATEGORIES²⁸⁴

				Age Cate	gories (year	s)	
Area	Population	15-24	25-44	25-64	65-74	75 & over	15 and over
Canada	Total population, with and without disabilities	1.05	0.96	0.95	0.92	0.78	0.95
	Persons with disabilities	0.72	0.70	0.88	0.84	0.71	0.79
	Persons without disabilities	1.1	1.01	0.98	0.96	0.85	1.00
Atlantic	Total population, with and without disabilities	1.04	0.94	0.93	0.94	0.77	0.93
	Persons with disabilities	0.69	0.61	0.89	0.96	0.80	0.81
	Persons without disabilities	1.14	1.04	0.95	0.93	0.75	0.99
NL	Total population, with and without disabilities	1.04	0.94	0.94	0.95	0.81	0.94
	Persons with disabilities	0.68	0.60	0.89	0.97	0.75	0.80
	Persons without disabilities	1.12	1.03	0.96	0.94	0.84	0.99
PE	Total population, with and without disabilities	1.04	0.91	0.92	0.94	0.77	0.93
	Persons with disabilities	0.79	0.58	0.86	0.82	0.79	0.77
	Persons without disabilities	1.09	1.02	0.95	1.00	0.75	0.99
NS	Total population, with and without disabilities	1.03	0.92	0.93	0.92	0.75	0.92
	Persons with disabilities	0.69	0.58	0.88	0.95	0.90	0.80
	Persons without disabilities	1.15	1.06	0.95	0.91	0.63	0.98
NB	Total population, with and without disabilities	1.04	0.95	0.94	0.96	0.78	0.94
	Persons with disabilities	0.68	0.69	0.92	0.99	0.71	0.83
	Persons without disabilities	1.14	1.02	0.94	0.94	0.85	0.99

Source: Statistics Canada Table 13-10-0374-01

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Disability type Metric Ar	Area	Both	15 to 24 years Male F	rs Female	Soth Both	25 to 44 years	irs Female	8oth	45 to 65 years	irs Female	65 yr	65 years and over th Male Fen	over Female	All (15 Both	All (15 years and over) 3oth Male Fema	i over) Female
	ш	1,030	430E	3009	3,480	1,190	2,290	8,110	3,990	4,120	6,220	2,690	3,530	18,830	8,300	10,540
Number	5	180,800	60,420	120,380	072,777	305,910	471,370	1,734,820	772,700	962,110	1,369,110	548,740	820,370	4,062,000	1,687,770	2,374,230
Percent P	PE 3	39.20%	37.1%E	40.8%E	54.50%	20.90%	96.50%	70.20%	74.70%	66.20%	67.30%	65.10%	69.20%	63.1%	63.90%	62.60%
Percent C	CA 3	33.10%	26.20%	38.10%	26.80%	54.20%	28.60%	73.50%	%06'69	76.70%	69.40%	%09'89	74.0%	%0'59	61.10%	68.20%
Better (by) Di	Diff. CA	CA (6.1%)	CA (10.9%)	CA (2.7%)	PE (2.3%)	PE (3.3%)	PE (2.1%)	PE (3.3%)	CA (4.8%)	PE (10.5%)	PE (2.1%)	CA (1.5%)	PE (4.8%)	PE (1.9%)	CA (2.8%)	PE (5.6%)
Number	PE	400E	L	340E	2,030	800	1,230	5,500	2,530	2,970	5,640	2,510	3,120	13,560	5,910	7,660
Number	5	71,930	30,090	41,840	361,590	158,580	203,010	1,173,560	530,440	643,120	1,188,020	507,030	066'089	2,795,110	1,226,140	1,568,970
Percent P	PE 1	15.2%E	ш	23.1%E	31.8%	34.2%	30.4%	47.6%	47.4%	47.7%	61.0%	98.09	61.2%	45.5%	45.5%	45.5%
_	5	13.2%	13.1%	13.2%	26.4%	28.1%	25.2%	49.7%	48.0%	51.3%	60.2%	58.7%	61.4%	44.7%	44.4%	45.0%
Better (by) Di	Diff. CA	CA (2.0%)	F	CA (9.9%)	CA (5.4%)	CA (6.1%)	CA (5.2%)	PE (2.1%)	PE (0.6%)	PE (3.6%)	CA (0.8%)	CA (2.1%)	PE (0.2%)	CA (0.8%)	CA (1.1%)	CA (0.5%)
Number	PE .	290E	ш	ш	1,400	480E	920	4,970	2,170	2,810	5,840	2,490	3,350	12,500	5,200	7,300
Number	5	65,080	21,290	43,790	290,900	114,210	176,700	1,064,110	438,100	626,010	1,256,280	501,750	754,530	2,676,370	1,075,350	1,601,010
Percent P	я. 	11.0E	_	_	21.9%	20.5%E	22.7%	43.0%	40.6%	45.2%	63.2%	96.3%	65.7%	41.9%	40.1%	43.3%
Percent C	5	11.9%	9.2%	13.9%	21.3%	20.2%	22.0%	45.1%	39.6%	49.9%	63.7%	58.1%	%0.89	42.8%	38.9%	46.0%
Better (by) Di	Diff. PE	PE (0.9%)	ı.	u.	CA (0.6%)	CA (0.3%)	CA (0.5%)	PE (2.1%)	CA (1.0%)	PE (4.7%)	CA (0.5%)	CA (2.2%)	PE (2.3%)	PE (0.9%)	CA (1.2%)	PE (2.7%)
Number	PE	1,760	9099	1,100	3,290	800	2,490	3,730	1,370	2,360	096	380E	580	9,740	3,220	6,520
Number	3	325,670	112,040	213,630	658,460	236,240	422,230	762,810	293,530	469,270	280,430	113,070	167,360	2,027,370	754,880	1,272,490
Percent P	PE 6	%6.99	26.9%	74.8%	51.5%	34.2%	61.5%	32.3%	25.7%	37.9%	10.4%	9.2%E	11.4%	32.7%	24.8%	38.7%
Percent C	8	29.6%	48.6%	%9'.29	48.1%	41.9%	52.5%	32.3%	26.5%	37.4%	14.2%	13.1%	15.1%	32.5%	27.3%	36.5%
Better (by) Di	Diff. CA	CA (7.3%)	CA (8.3%)	CA (7.2%)	CA (3.4%)	PE (7.7%)	CA (9.0%)	SAME	PE (0.8%)	CA (0.5%)	PE (3.8%)	PE (3.9%)	PE (3.7%)	CA (0.2%)	PE (2.5%)	CA (2.2%)
Number	F.	440E	ш	270E	1,350	330E	1,020	2,470	1,110E	1,350	2,000	710	1,290	6,250	2,320	3,930
Number	S S	006'26	32,280	65,630	257,460	92,370	165,090	656,140	293,820	362,330	508,330	198,340	309,990	1,519,840	616,800	903,040
Percent P	PE 1	16.7%E	ı.	18.4%E	21.1%	14.1%E	25.2%	21.4%	20.8%	21.7%	21.8%	17.2%	25.3%	21.0%	17.9%	23.3%
Percent C	5	17.9%	14.0%	20.8%	18.8%	16.4%	20.5%	27.8%	26.6%	28.9%	25.8%	23.0%	28.0%	24.3%	22.3%	25.9%
Better (by) Di	Diff. PE	PE (1.2%)	ı	PE (2.4%)	CA (2.3%)	PE (2.3%)	CA (4.7%)	PE (6.4%)	PE (0.2%)	PE (7.2%)	PE (4.2%)	PE (5.8%)	PE (2.7%)	PE (3.3%)	PE (4.4%)	PE (2.6%)
Number	PE	ч	ı.		9029	330E	330E	2,410	1,260	1,150	3,010	1,630	1,370	6,230	3,230	3,000
Number	a S	35,850	16,280	19,570	150,820	78,770	72,050	511,740	293,980	217,760	636,100	326,130	309,970	1,334,520	715,160	619,360
Percent P	끮	ш	ш	ш	10.5%E	14.1%E	8.1%E	20.8%	23.6%	18.5%	32.6%	39.5%	26.9%	20.9%	24.9%	17.8%
Percent C	S	%9.9	7.1%	6.2%	11.0%	14.0%	%0.6	21.7%	26.6%	17.4%	32.3%	37.8%	27.9%	21.4%	25.9%	17.8%
Better (by) D	Diff	ı.	ı.	4	PE (0.5%)	CA (0.1%)	PE (0.9%)	PE (0.9%)	PE (3.0%)	CA (1.1%)	CA (0.3%)	CA (1.7%)	PE (1.0%)	PE (0.5%)	PE (1.0%)	SAME
Number	PE	F	F	ч	099	370E	300E	2,350	1,020	1,330	2,780	1,200	1,570	5,940	2,660	3,280
Number	CA 4	45,430	24,240	21,200	134,330	49,700	84,630	526,300	205,350	320,960	569,540	212,200	357,340	1,275,610	491,490	784,120
Percent P	PE	F	F	F	10.3%	15.8%E	7.4%E	20.3%	19.1%	21.4%	30.1%	29.1%	30.8%	19.9%	20.5%	19.5%
	5	8.3%	10.5%	9.7%	%8'6	8.8%	10.5%	22.3%	18.6%	25.6%	28.9%	24.6%	32.2%	20.4%	17.8%	22.5%
Better (by) Di	Diff			4	CA (0.5%)	CA (7.0%)	DF (2 1%)	DE (3 1%) DE (2 0%)	CA (0 5%) DF (4 2%)	176C V) 3G	CA (1 292)	CA /A EQ.	DE (1 A92)	1/03 0/ 30	1/04 PL AN	1/00 6/ 24

			15	15 to 24 vears	ars	25	25 to 44 vears	Sis	45	45 to 65 vears	Sis	9	65 years and over	nd over	All (15	All (15 years and over)	d over)
Disability type Metric	Metric	Area	Both	Male	Female	Both	Male	Female	Both	Male	Female	Both	Male	Female	Both	Male	Female
	Number	H.	930	520E	410E	1,150	470E	089	1,690	910E	780E	890	450E	440E	4,660	2,350	2,310
	Number	S	227,220	119,990	107,220	323,840	159,590	164,250	381,940	184,930	197,010	172,690	80,190	92,500	1,105,680	544,700	560,970
Sumpar	Percent	핊	35.4%	44.8%E	27.9%E	18.0%	20.1%E	16.8%	14.6%	17.0%E	12.5%E	%9.6	10.9%E	8.6%E	15.6%	18.1%	13.7%
	Percent	5	41.6%	52.1%	33.9%	23.7%	28.3%	20.4%	16.2%	16.7%	15.7%	8.8%	9.3%	8.3%	17.7%	19.7%	16.1%
	Better (by)	Diff.	CA (6.2%)	PE (7.3%)	PE (6.0%) CA (5.7%)		PE (8.2%)	PE (3.6%)	PE (1.6%)	CA (0.3%)	PE (0.2%)	CA (0.8%)	CA (1.6%)	CA (0.3%)	PE (2.1%)	PE (1.6%)	PE (2.4%)
	Number	PE	480E	F	310E	1,000	290E	710E	1,730	780	950	1,160	3099	200	4,380	1,900	2,480
	Number	S	103,450	45,210	58,240	238,340	104,480	133,860	425,790	199,900	225,890	283,260	125,480	157,780	1,050,840	475,080	575,760
Memory	Percent	핊	18.3%E	ш	21.1%E	15.6%	12.4%E	17.5%E	15.0%	14.6%	15.3%	12.6%	16.0%	9.8%	14.7%	14.6%	14.7%
	Percent	S	18.9%	19.6%	18.4%	17.4%	18.5%	16.6%	18.0%	18.1%	18.0%	14.4%	14.5%	14.2%	16.8%	17.2%	16.5%
	Better (by)	Diff.	PE (0.6%)	F	CA (2.7%)	PE (1.8%)	PE (6.1%)	CA (0.9%)	PE (3.0%)	PE (3.5%)	PE (2.7%)	PE (1.8%)	CA (1.5%)	PE (4.4%)	PE (2.1%)	(5.6%)	PE (1.8%)
	Number	PE	460E	200E	260E	330E	180E	ч	280E	ш	4	ч	ш	ч	1,170	610E	260E
_	Number	8	100,700	69,140	31,570	106,460	67,130	39,330	82,620	42,910	39,710E	25,690E	12,980E	12,710E	315,470	192,160	123,310
Developmental	Percent	ЬE	17.5%E	17.2%E	17.7%E	5.2%E	7.7%E	F	2.4%E	Ь	F	Ъ	Ь	F	3.9%	4.7%	3.3%E
	Percent	5	18.4%	30.0%	10.0%	7.8%	11.9%	4.9%	3.5%	3.9%	3.2%E	1.3%E	1.5%E	1.1%E	5.1%	7.0%	3.5%
	Better (by)	Diff.	PE (0.9%)	PE (0.9%) PE (12.8%) CA (7.7%)	_	PE (2.6%)	PE (4.2%)	F	PE (1.1%)	F	F	F	F	Ь	PE (1.2%)	PE (2.3%)	PE (0.2%)
	Number	Эd	F	Н	F	F	F	F	270E	F	F	F	F	F	640E	F	360E
Habaan	Number	S	16,380E	8,430E	7,950E	48,140	16,370E	31,770	51,600	29,750E	21,850E	39,690	26,100E	13,580E	155,810	80,660	75,150
	Percent	Эd	F	F	F	Ь	F	F	2.3%E	F	F	F	F	F	2.1%E	F	2.1%E
	Percent	S	3.0%E	3.7%E	2.5%E	3.5%	2.9%E	4.0%	2.2%	2.7%E	1.7%E	5.0%	3.0%E	1.2%E	2.5%	2.9%	2.2%
	Better (by)	Diff.	F	Н	F	F	F	F	CA (0.1%)	F	F	F	F	F	PE (0.4%)	F	PE (0.1%)
Reference Use:																	
Total population	Number	34	2,630	1,160	1,470	6,390	2,340	4,050	11,560	5,340	6,220	9,240	4,130	5,100	29,820	12,980	16,840
with disabilities	Number	5	546,410	230,480	315,930	315,930 1,368,270 564,150	564,150	804,120	804,120 <mark>2,359,650</mark> 1,105,670 1,253,990 <mark>1,972,310</mark> 863,250 1,109,050 <mark>6,246,640</mark> 2,763,540 3,483,090	1,105,670	1,253,990	1,972,310	863,250	1,109,050	6,246,640	2,763,540	3,483,090

Source: Statistics Canada Table 13-10-0376-01

Abbreviations:

use with caution too unreliable to be published

difference

not available for a specific reference period Diff.

not applicable

Seniors Health

Canadian Health Survey on Seniors (CHSS) describes the health of Canadians ages 65 and over. The data can also be used to better understand the factors contributing to healthy aging. This voluntary survey asked seniors about their health status, chronic conditions, and the use of health care services, health supports, and social and health determinants. Reported in two steps, Table 4-57 reports on 23 health characteristics, and Table 4-58 reports on 26 chronic conditions as they pertain to seniors age 65 and over.

TABLE 4-57 HEALTH CHARACTERISTICS OF SENIORS AGED 65 AND OVER BY AGE AND SFX (2019)²⁸⁶

#	Seniors Survey 2019			65	to 74 y	ears	75	to 84 y	ears	85 y	ears and	over	65 a	nd over	(total)
	Health characteristic	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
1	Health is perceived to	Number	PE	2,900	1,100 ^E	1,800	1,000 ^E	300 ^E	700 ^E	500 ^E	F	F	4,400	1,500	2,800
	be somewhat better or much better than 1 year ago	Number	CA	613,700	288,90 0	324,800	227,200	109,90 0	117,300	55,100	16,900 ^E	38,200	896,000	415,700	480,300
	year ago	Percent	PE	15.7	11.9 ^E	19.3	11.4 ^E	6.1 ^E	16.0 ^E	19.6 ^E	F	F	14.8	10.9	18.2
		Percent	CA	16.4	16	16.9	12	12.7	11.4	7.6	6.1 ^E	8.6	14.1	14.1	14.1
		Better (by)?	Diff.												
2	Health is perceived to be somewhat worse or	Number	PE	3,300	1,800 ^E	1,500	1,900	900 ^E	1,000 ^E	800 ^E	F	500 ^E	6,000	3,000	3,000
	much worse than 1	Number	CA	574,900	255,40 0	319,500	397,400	165,10 0	232,300	238,100	85,700	152,400	1,210,40 0	506,200	704,200
	year ago	Percent	PE	17.4	19.6 ^E	15.3	23.0	25.0 ^E	22.0 ^E	33.0 ^E	F	35.0 ^E	20.0	22.0	19.2
		Percent	CA	15.4	14.1	16.6	21.0	19.2	23.0	33.0	31.0	34.0	19.1	17.2	21.0
		Better (by)?	Diff.												
3	Required a visit to a medical specialist for a	Number	PE	8,100	3,800	4,300	2,300	1,000	1,300	800 ^E	F	600 ^E	11,200	5,000	6,200
	diagnosis or a consultation in the	Number	CA	1,523,00 0	764,30 0	758,700	815,100	392,90 0	422,200	216,000	88,000	128,000	2,554,10 0	1,245,20 0	1,308,900
	past 12 months	Percent	PE	46.0	47.0	45.0	33.0	34.0	32.0	41.0 ^E	44.0 ^E	40.0 ^E	42.0	43.0	41.0
		Percent	CA	43.0	45.0	41.0	47.0	51.0	44.0	38.0	43.0	36.0	44.0	46.0	41.0
		Better (by)?	Diff.												
4	Had the	Number	PE	5,800	2,300	3,500	3,500	1,600	1,900	1,200	300 ^E	900	10,500	4,200	6,300
	pneumococcal vaccine	Number	CA	1,587,20 0	676,30 0	910,900	1,023,80 0	435,10 0	588,700	378,500	137,100	241,400	2,989,50 0	1,248,50 0	1,741,000
		Percent	PE	33.0	27.0	39.0	46.0	47.0	45.0	50.0	40.0 ^E	55.0	38.0	33.0	42.0
		Percent	CA	45.0	40.0	49.0	58.0	55.0	60.0	57.0	54.0	59.0	50.0	46.0	54.0
		Better (by)?	Diff.												

#	Seniors Survey 2019			65	to 74 y	ears	75	to 84 ye	ears	85 y	ears and	over	65 a	nd over ((total)
	Health characteristic	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
5	Had the shingles	Number	PE	4,900	2,100	2,900	2,200	1,000	1,200	700 ^E	200 ^E	500 [€]	7,900	3,300	4,600
	vaccine	Number	CA	1,342,40 0	629,70 0	712,700	575,500	265,50 0	310,000	170,300	65,300	105,000	2,088,20	960,500	1,127,700
		Percent	PE	26.0	23.0	30.0	27.0	27.0	27.0	34.0 ^E	43.0 ^E	30.0€	27.0	25.0	29.0
		Percent	CA	37.0	36.0	38.0	31.0	31.0	31.0	26.0	25.0	26.0	34.0	33.0	34.0
		Better (by)?	Diff.												
6	Influenza	Number	PE	11,500	4,600	6,900	5,100	2,300	2,800	1,300	300 ^E	1,000	17,900	7,200	10,700
	immunization in the past 12 months	Number	CA	1,967,30 0	939,50 0	1,027,800	1,167,80 0	529,50 0	638,300	414,700	153,300	261,400	3,549,80 0	1,622,30 0	1,927,500
		Percent	PE	65.0	55.0	73.0	70.0	79.0	65.0	77.0	67.0 ^E	80.0	67.0	61.0	71.0
		Percent	CA	55.0	55.0	55.0	68.0	69.0	67.0	74.0	74.0	73.0	61.0	60.0	61.0
		Better (by)?	Diff.												
7	Used the Internet in the past 12 months	Number	PE	15,400	7,100	8,300	4,900	2,300	2,600	700 ^E	200 ^E	500 [€]	21,000	9,600	11,400
	the past 12 months	Number	CA	3,102,90 0	1,476,4 00	1,626,500	1,160,60 0	576,00 0	584,600	240,200	110,300	129,900	4,503,70 0	2,162,70 0	2,341,000
		Percent	PE	82.4	79.0	86.1	58.0	60.0	57.0	29.0 ^E	26.0 ^E	30.0 ^E	71.0	70.0	72.0
		Percent	CA	83.0	81.7	84.2	62.0	67.0	57.0	33.0	40.0	29.0	71.0	73.0	69.0
		Better (by)?	Diff.												
8	Has trouble sleeping	Number	PE	9,000	4,800	4,200	4,400	2,100	2,300	1,100	200 ^E	900	14,500	7,100	7,400
	or staying asleep a little of the time or none of the time	Number	CA	2,101,90 0	1,134,5 00	967,400	1,020,20	515,70 0	504,500	318,300	139,800	178,500	3,440,40 0	1,790,00 0	1,650,400
	none of the time	Percent	PE	51.0	57.0	45.0	62.0	74.0	53.0	64.0	57.0 ^E	66.0	54.0	62.0	49.0
		Percent	CA	59.0	66.0	52.0	59.0	67.0	53.0	57.0	69.0	51.0	59.0	67.0	52.0
		Better (by)?	Diff.												
9	Has trouble sleeping or staying asleep most	Number	PE	3,300	1,300 ^E	2,000	1,500	400 ^E	1,100 ^E	300 ^E	F	F	5,100	1,800	3,300
	of the time or all of the time	Number	CA	583,700	211,80 0	371,900	272,300	95,700	176,600	91,900	26,700 ^E	65,200	947,900	334,200	613,700
		Percent	PE	19.1	15.9 ^E	22.0	20.0	13.4 ^E	25.0 ^E	13.9 ^E	F	F	19.1	15.0	22.0

#	Seniors Survey 2019			65	to 74 y	ears	75	to 84 y	ears	85 y	ears and	over	65 a	nd over	(total)
	Health characteristic	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
		Percent	CA	16.4	12.4	20.0	15.8	12.4	18.4	16.5	13.2 ^E	18.5	16.2	12.5	19.4
		Better (by)?	Diff.												
10	Instrumental and basic	Number	PE	18,000	8,700	9,300	7,600	3,400	4,200	1,900	600	1,300	27,500	12,700	14,800
	activities of daily living classification: Mild	Number	CA	3,594,80 0	1,746,4 00	1,848,400	1,703,00 0	780,40 0	922,600	519,000	208,700	310,300	5,816,80 0	2,735,50 0	3,081,300
	impairment/no functional impairment	Percent	PE	97.9	98.2	97.6	92.4	89.6	94.8	79.0	75.0	81.3	94.8	94.5	95.1
		Percent	CA	97.3	97.6	97.0	93.2	92.4	93.9	75.0	78.0	73.0	93.6	94.3	93.0
		Better (by)?	Diff.												
11	Instrumental and basic	Number	PE	200 ^E	F	F	F	F	F	F	F	F	800 ^E	500 ^E	F
	activities of daily living classification: Severe	Number	CA	33,400 ^E	16,800 ^E	16,600 ^E	54,500 ^E	28,300 ^E	26,200 ^E	71,300	27,100 ^E	44,200	159,200	72,200 ^E	87,000
	impairment or total impairment	Percent	PE	1.0 ^E	F	F	F	F	F	F	F	F	2.5 ^E	3.6 ^E	F
		Percent	CA	0.9 ^E	0.9 ^E	0.9 ^E	3.0 ^E	3.4 ^E	2.7 ^E	10.3	10.2 ^E	10.4	2.6	2.5 ^E	2.6
		Better (by)?	Diff.												
12	Health of mouth - very	Number	PE	11,400	5,400	6,000	5,600	2,400	3,200	1,600	500 ^E	1,100	18,600	8,300	10,300
	good or excellent	Number	CA	2,371,00 0	1,109,8 00	1,261,200	1,158,60 0	532,70 0	625,900	369,000	127,600	241,400	3,898,60	1,770,10 0	2,128,500
		Percent	PE	61.0	60.0	62.0	67.0	64.0	71.0	65.0	64.0 ^E	65.0	63.0	62.0	65.0
		Percent	CA	63.0	61.0	65.0	62.0	62.0	61.0	51.0	46.0	54.0	61.0	60.0	63.0
		Better (by)?	Diff.												
13	Health of mouth - fair	Number	PE	1,800	800 ^E	1,000 ^E	500 ^E	300 ^E	F	200 ^E	F	F	2,500	1,200	1,300 ^E
	or poor	Number	CA	335,500	153,70 0	181,800	172,300	75,900	96,400	85,100	45,000 ^E	40,100 ^E	592,900	274,600	318,300
		Percent	PE	10.1	9.9 ^E	10.2 ^E	6.1 ^E	8.2 ^E	F	6.6 ^E	F	F	8.6	9.3	8.1 ^E
		Percent	CA	9.0	8.5	9.4	9.2	8.8	9.5	11.8	16.2 ^E	9.0 ^E	9.3	9.3	9.4
		Better (by)?	Diff.												
14	Able to brush teeth	Number	PE	18,400	8,900	9,500	8,300	3,700	4,600	2,400	800	1,600	29,100	13,400	15,700
	without help	Number	CA	3,694,50 0	1,778,8 00	1,915,700	1,865,40 0	846,80 0	1,018,600	699,200	262,600	436,600	6,259,10 0	2,888,20 0	3,370,900
		Percent	PE	98.8	98.2	99.4	98.7	97.7	99.6	98.2	97.3	98.7	98.8	98.0	99.4

#	Seniors Survey 2019			65	to 74 ye	ears	75	to 84 y	ears	85 y	ears and	over	65 a	nd over	(total)
	Health characteristic	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
		Percent	CA	98.9	98.3	99.4	98.8	98.3	99.2	96.9	94.4	98.5	98.6	97.9	99.2
		Better (by)?	Diff.												
15	Home has adaptations	Number	PE	5,600	2,400	3,200	3,700	1,500	2,200	1,800	600 ^E	1,200	11,100	4,500	6,600
		Number	CA	817,800	322,10 0	495,700	709,600	272,80 0	436,800	432,400	146,100	286,300	1,959,80	741,000	1,218,800
		Percent	PE	30.0	27.0	33.0	44.0	41.0	47.0	72.0	65.0 ^E	75.0	38.0	33.0	41.0
		Percent	CA	22.0	17.8	26.0	38.0	32.0	43.0	60.0	53.0	65.0	31.0	25.0	36.0
		Better (by)?	Diff.												
16	Had a fall in the past	Number	PE	2,700	1.400 ^E	1,300€	1,600	900€	700 ^E	600 ^E	F	400 ^E	4,900	2.500	2,400
	12 month	Number	CA	556,500	239,60	316,900	354,600	151,50 0	203,100	170,300	75,600	94,700	1,081,40	466,700	614,700
		Percent	PE	14.4	15.6 ^E	13.2 ^E	19.2	22.0 ^E	16.4 ^E	25.0 ^E	F	27.0 ^E	16.6	17.8	15.5
		Percent	CA	14.9	13.2	16.4	18.8	17.6	19.9	24.0	27.0	21.0	17.0	15.8	18.1
		Better (by)?	Diff.												
17	Received assistance	Number	PE	2,600	1,200 ^E	1,400	2,100	800 ^E	1,300	1,400	400 ^E	1,000	6,100	2,400	3,700
	from family, friends or neighbours for a	Number	CA	413,200	155,90 0	257,300	414,200	139,10 0	275,100	313,200	94,400	218,800	1,140,60 0	389,400	751,200
	health problem or limitation in the past	Percent	PE	14.2	13.4 ^E	14.8	25.0	22.0 ^E	28.0	58.0	53.0 [€]	61.0	21.0	18.0	23.0
	12 months	Percent	CA	11.1	8.6	13.3	22.0	16.1	27.0	43.0	34.0	49.0	18.0	13.2	22.0
18		Better (by)?	Diff.												
	Received community	Number	PE	1,700 ^E	800 ^E	900€	1,300	600 ^E	700 ^E	500 ^E	F	400 ^E	3,500	1,500 ^E	2,000
	support services in the past 12 months	Number	CA	230,600	88,200	142,400	212,500	79,000	133,500	154,100	43,900	110,200	597,200	211,100	386,100
		Percent	PE	8.8 ^E	8.3 ^E	9.3 ^E	16.3	16.4 ^E	16.2 ^E	19.6 ^E	F	24.0 ^E	11.8	10.6 ^E	12.8
		Percent	CA	6.2	4.9	7.4	11.3	9.2	13.0	21.0	16.0	25.0	9.4	7.2	11.4
		Better (by)?	Diff.												
19	Felt a lack of	Number	PE	1,200 ^E	700 ^E	500 ^E	400 ^E	300 ^E	100 ^E	F	F	F	1,700	1,000 ^E	700 ^E
	companionship - often	Number	CA	204,400	77,100	127,300	90,000	30,400	59,600	44,100 ^E	18,300 ^E	25,800 ^E	338,500	125,800	212,700
		Percent	PE	6.5 ^E	8.2 ^E	4.9 ^E	6.2 ^E	10.1 ^E	3.5 ^E	F	F	F	6.3	8.6 ^E	4.6 ^E
		Percent	CA	5.8	4.5	6.9	5.2	4.0	6.3	7.9 ^E	9.0 ^E	7.3 ^E	5.8	4.7	6.7
		Better (by)?	Diff.												

#	Seniors Survey 2019			65	to 74 y	ears	75	to 84 ye	ears	85 y	ears and	over	65 a	nd over	(total)
	Health characteristic	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
20	Felt left out - often	Number	PE	500 ^E	F	300 ^E	F	F	F	F	F	F	800 ^E	500 ^E	300 ^E
		Number	CA	103,400	42,000 ^E	61,400	41,600	17,400 ^E	24,200 ^E	14,300 ^E	F	8,900 ^E	159,300	64,800	94,500
		Percent	PE	2.8 ^E	F	2.6 ^E	F	F	F	F	F	F	2.9 ^E	4.1 ^E	2.0 ^E
		Percent	CA	2.9	2.5 ^E	3.3	2.4	2.3 ^E	2.5 ^E	2.6 ^E	F	2.6 ^E	2.7	2.4	3
		Better (by)?	Diff.												
21	Felt isolated from	Number	PE	800 ^E	500 ^E	300 ^E	F	F	F	F	F	F	900 ^E	500 ^E	400 ^E
	others - often	Number	CA	100,600	34,200	66,400	36,200	11,800 ^E	24,400 ^E	14,700 ^E	F	9,800 ^E	151,500	50,900	100,600
		Percent	PE	4.5 ^E	6.0 ^E	3.2 ^E	F	F	F	F	F	F	3.3 ^E	4.7 ^E	2.3 ^E
		Percent	CA	2.8	2.0	3.6	2.1	1.5 ^E	2.5 ^E	2.6 ^E	F	2.8 ^E	2.6	1.9	3.2
		Better (by)?	Diff.												
22	Felt like they wanted	Number	PE	3,600	1,400	2,200	1,200	500 ^E	700 ^E	200 ^E	F	200 ^E	5,000	1,900	3,100
	to participate in more social, recreational or	Number	CA	710,700	305,10 0	405,600	275,300	90,900	184,400	85,400	28,800 ^E	56,600	1,071,40 0	424,800	646,600
	group activities in past 12 months	Percent	PE	20.0	16.9	24.0	17.0	18.9 ^E	15.7 ^E	12.0 ^E	F	15.2 ^E	19.0	16.9	21.0
		Percent	CA	20.0	17.9	22.0	16.0	11.8	19.3	15.2	14.0 ^E	15.9	18.3	15.9	20.0
		Better (by)?	Diff.												
23	Has valid driver's license	Number	PE	17,600	8,700	8,900	7,100	3,600	3,500	1,700	700	1,000	26,400	13,000	13,400
	ce.ise	Number	CA	3,331,90 0	1,683,3 00	1,648,600	1,481,30 0	765,20 0	716,100	335,100	183,000	152,100	5,148,30 0	2,631,50 0	2,516,800
		Percent	PE	94.2	96.1	92.4	85	92.5	79	67	88.4	58	89.4	94.7	84.8
		Percent	CA	89	93	85.3	78	88.8	70	46	66	34	81	89.2	74
		Better (by)?	Diff.												

TABLE 4-58 CHRONIC CONDITIONS AMONG SENIORS AGED 65 AND OLDER BY AGE AND SEX²⁸⁷

#	Seniors Survey 2019			65 t	o 74 ye	ars	75	to 84 ye	ears	85 ye	ears and	over	65 aı	nd over (total)
	Health condition	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
1	Age-related	Number	PE	400 ^E	F	300 ^E	1,000 ^E	500 ^E	500 ^E	400 ^E	F	300 ^E	1,800	700 ^E	1,100
	macular degeneration	Number	CA	177,200	70,500	106,700	171,500	69,200 ^E	102,300	139,300	40,600	98,700	488,000	180,300	307,700
	(AMD)	Percent	PE	2.3 ^E	F	3.5 ^E	11.5 ^E	12.3 ^E	10.9 ^E	16.2 ^E	F	19.6 ^E	6.1	4.6 ^E	7.3
		Percent	CA	4.8	3.9	5.6	9.2	8.1 ^E	10.1	19.7	15.2	22.0	7.8	6.2	9.1
		Better (by)?	Diff.												
2	Cataracts	Number	PE	3,400	1,500 ^E	1,900	1,800	700 ^E	1,100	600 ^E	F	400 ^E	5,800	2,400	3,400
		Number	CA	638,700	255,30 0	383,400	395,000	161,200	233,800	117,700	38,800 ^E	78,900	1,151,40 0	455,300	696,100
		Percent	PE	18.2	16.9 ^E	19.4	22.0	17.8 ^E	25.0	26.0 ^E	F	28.0 ^E	19.8	17.4	22.0
		Percent	CA	17.2	14.1	20.0	21.0	18.8	23.0	16.3	14.0 ^E	17.8	18.2	15.5	21.0
		Better (by)?	Diff.												
3	Diabetic retinopathy	Number	PE	300 ^E	200 ^E	F	F	F	F	F	F	F	400 ^E	300 ^E	F
		Number	CA	48,500 ^E	28,300 ^E	20,200 ^E	45,800 ^E	27,000 ^E	F	6,600 ^E	F	F	100,900	57,000 ^E	43,900 ^E
		Percent	PE	1.4 ^E	2.2 ^E	F	F	F	F	F	F	F	1.2 ^E	1.8 ^E	F
		Percent	CA	1.3 ^E	1.6 ^E	1.1 ^E	2.4 ^E	3.2 ^E	F	0.9 ^E	F	F	1.6	1.9 ^E	1.3 ^E
		Better (by)?	Diff.												
4	Glaucoma	Number	PE	1,200 ^E	700 ^E	500 ^E	700 ^E	200 ^E	500 ^E	300 ^E	F	200 ^E	2,200	1,000 ^E	1,200 ^E
		Number	CA	208,400	94,800	113,600	136,300	60,000	76,300	88,600	31,900 ^E	56,700	433,300	186,700	246,600
		Percent	PE	6.4 ^E	7.8 ^E	5.0 ^E	8.0 ^E	4.7 ^E	10.8 ^E	13.4 ^E	F	14.2 ^E	7.4	7.2 ^E	7.6 ^E
		Percent	CA	5.6	5.3	6.0	7.2	7.0	7.5	12.4	11.6 ^E	12.9	6.9	6.3	7.3
		Better (by)?	Diff.												
_			25	4 200	400F	0005	1005	_	4005			-	4.000	1005	4 400
5	Asthma	Number	PE	1,300	400 ^E	900 ^E	400 ^E	F	400 ^E	F 20.500	F	F 24 0005	1,800	400 ^E	1,400
		Number	CA	277,700	102,00 0	175,700	138,000	50,900	87,100	38,600	6,800 ^E	31,800 ^E	454,300	159,700	294,600
		Percent	PE	6.8	4.0 ^E	9.4 ^E	4.6 ^E	F	6.7 ^E	F	F	F	6.1	3.3 ^E	8.5
		Percent	CA	7.4	5.6	9.1	7.3	5.9	8.5	5.4	2.5 ^E	7.2 ^E	7.2	5.4	8.7
		Better (by)?	Diff.												

#	Seniors Survey 2019			65 t	o 74 ye	ars	75	to 84 ye	ars	85 ye	ears and	over	65 ar	nd over (total)
	Health condition	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
6	Chronic bronchitis,	Number	PE	1,700	900 ^E	800 ^E	700 ^E	300 ^E	400 ^E	600 ^E	F	400 ^E	3,000	1,400 ^E	1,600
	emphysema or chronic	Number	CA	242,500	117,50 0	125,000	148,600	66,900	81,700	67,700	24,700 ^E	43,000 ^E	458,800	209,100	249,600
	obstructive pulmonary disease	Percent	PE	8.8	9.6 ^E	8.0 ^E	8.9 ^E	8.8 ^E	9.0 ^E	23.0 ^E	F	24.0 ^E	10	10.1 ^E	10
	(COPD)	Percent	CA	6.5	6.5	6.5	7.9	7.8	8.0	9.4	8.9 ^E	9.7 ^E	7.2	7.1	7.3
		Better (by)?	Diff.												
7	Anxiety disorder	Number	PE	1,500 ^E	500 ^E	1,000 ^E	300 ^E	F	F	F	F	F	1,900	800 ^E	1,100 ^E
		Number	CA	213,000	63,400	149,600	102,100	43,600 ^E	58,500	39,600 ^E	F	18,300 ^E	354,700	128,300	226,400
		Percent	PE	7.9 [£]	5.6 ^E	10.0 ^E	3.3 ^E	F	F	F	F	F	6.2	5.3 ^E	6.9 ^E
		Percent	CA	5.7	3.5	7.7	5.4	5.1 ^E	5.7	5.5 ^E	F	4.1 ^E	5.6	4.3	6.7
		Better (by)?	Diff.												
8	Mood disorder	Number	PE	1,900	800 ^E	1,100 ^E	400 ^E	F	200 ^E	F	F	F	2,300	1,000 ^E	1,300 ^E
0	Wiood disorder	Number	CA	267,100	96,600	170,500	104,400	42,100 ^E	62,300	44,800 ^E	F	22,300 ^E	416,300	161,200	255,100
		Percent	PE	9.9	8.0 ^E	11.7 ^E	4.1 ^E	42,100 F	3.3 ^E	44,000 F	· F	F	7.7	6.9 ^E	8.3 ^E
		Percent	CA	7.1	5.3	8.8	5.5	4.9 ^E	6.1	6.2 ^E	F	5.0 ^E	6.6	5.5	7.5
		Better (by)?	Diff.												
9	Post-traumatic stress disorder	Number	PE	500 ^E	F	300 ^E	F	F	F	F	F	F	600 ^E	300 ^E	300 ^E
		Number	CA	78,500	27,400 ^E	51,100	36,000 ^E	F	14,800 ^E	15,200 ^E	F	7,800 ^E	129,700	56,000 ^E	73,700
		Percent	PE	2.5 ^E	F	3.1 ^E	F	F	F	F	F	F	2.0 ^E	2.2 ^E	1.9 ^E
		Percent	CA	2.1	1.5 ^E	2.7	1.9 ^E	F	1.5 [£]	2.1 ^E	F	1.8 ^E	2	1.9 ^E	2.2
		Better (by)?	Diff.												
10	Alzheimer's	Number	PE	F	F	F	F	F	F	F	F	F	400 ^E	300 ^E	F
10	disease	Number	CA	32,400 ^E	14,200 ^E	18,200 ^E	74,200 ^E	32,500 ^E	41,700 ^E	47,700	14,300 ^E	33,400 ^E	154,300	61,000	93,300 ^E
		Percent	PE	52,100 F	F F	F	7 1,200 F	52,500 F	F	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F .,555	F	1.5 ^E	2.3 ^E	F
		Percent	CA	0.9 ^E	0.8 ^E	0.9 ^E	3.9 ^E	3.8 ^E	4.1 ^E	6.6	5.1 ^E	7.6 ^E	2.4	2.1	2.7 ^E
		Better (by)?	Diff.												
		Detter (by):													

#	Seniors Survey 2019			65 t	o 74 ye	ars	75	to 84 ye	ears	85 ye	ears and	over	65 aı	nd over (total)
	Health condition	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
11	Parkinson's disease	Number	PE	F	F	F	F	F	F	F	F	F	F	F	F
	uisease	Number	CA	21,800 ^E	14,600 ^E	7,200 ^E	21,600 ^E	14,200 ^E	7,400 ^E	F	F	F	50,100	29,900 ^E	20,200 ^E
		Percent	PE	F	F	F	F	F	F	F	F	F	F	F	F
		Percent	CA	0.6 ^E	0.8 ^E	0.4 ^E	1.2 ^E	1.6 ^E	0.7 ^E	F	F	F	0.8	1.0 ^E	0.6 ^E
		Better (by)?	Diff.												
12	Bowel disorder	Number	PE	2,000	800 ^E	1,200	700 ^E	F	600 ^E	400 ^E	F	300 ^E	3,100	1,000 ^E	2,100
		Number	CA	262,500	62,200	200,300	117,900	33,500	84,400	40,400 ^E	F	26,200 ^E	420,800	109,900	310,900
		Percent	PE	10.8	8.8 ^E	12.7	7.7 ^E	F	11.9 ^E	15.3 ^E	F	21.0 ^E	10.3	6.7 ^E	13.3
		Percent	CA	7.0	3.4	10.4	6.3	3.9	8.2	5.6 ^E	F	6.0 ^E	6.6	3.7	9.2
		Better (by)?	Diff.												
13	Chronic kidney disease	Number	PE	300 ^E	F	F	F	F	F	F	F	F	600 ^E	F	400 ^E
		Number	CA	75,000	30,600	44,400	75,800	44,400	31,400 ^E	55,300 ^E	28,000 ^E	27,300 ^E	206,100	103,000	103,100
		Percent	PE	1.5 ^E	F	F	F	F	F	F	F	F	2.2 ^E	F	2.4 ^E
		Percent	CA	2.0	1.7	2.3	4.0	5.2	3.1 ^E	7.7 ^E	10.0 ^E	6.2 ^E	3.2	3.5	3
		Better (by)?	Diff.												
14	Urinary	Number	PE	1,800	600 ^E	1,200 ^E	1,400	600 ^E	800 ^E	400 ^E	F	300 ^E	3,600	1,300 ^E	2,300
	incontinence	Number	CA	341,400	95,600	245,800	250,300	85,500	164,800	157,400	47,000 ^E	110,400	749,100	228,100	521,000
		Percent	PE	9.6	6.3 ^E	12.8 ^E	17.1	16.2 ^E	17.8 ^E	13.0 ^E	F	14.0 ^E	12	9.3 ^E	14.3
		Percent	CA	9.1	5.3	12.7	13.3	9.9	16.2	22.0	16.9 ^E	25.0	11.8	7.7	15.4
		Better (by)?	Diff.												
15	High blood	Number	PE	6,300	3,400	2,900	2,700	1,400	1,300	600 ^E	300 ^E	300 ^E	9,600	5,100	4,500
	cholesterol	Number	CA	1,037,500	573,60	463,900	546,500	262,100	284,400	195,800	93,000	102,800	1,779,80	928,700	851,100
		Percent	PE	34.0	38.0	30.0	32.0	35.0	30.0	25.0 ^E	38.0 ^E	18.9 ^E	33	37	29
		Percent	CA	28.0	32.0	24.0	29.0	31.0	28.0	28.0	34.0	24.0	28	32	25
		Better (by)?	Diff.												
16	High blood pressure	Number Number	PE CA	8,500 1,491,200	4,600 762,00	3,900 729,200	3,800 929,800	1,800 367,000	2,000 562,800	1,400 358,700	400 ^E	1,000 248,200	13,700 2,779,70	6,800 1,239,50	6,900 1,540,200
		Number	- CA	1,431,200	702,00	723,200	323,600	307,000	302,000	336,700	110,500	240,200	2,779,70	1,239,30	1,340,200

co	Health condition	Metric Percent Percent Better (by)?	Area PE	Both sexes	Males	Females									
17 Fib	ibromvalgia	Percent				i ciliales	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
17 Fib	ibromvalgia			46.0	52.0	40.0	45.0	45.0	45.0	57.0	42.0 ^E	64.0	46	49	44
17 Fib	ibromvalgia	Better (bv)?	CA	40.0	42.0	38.0	49.0	43.0	55.0	50.0	40.0	56.0	44	42	45
17 Fib	ibromvalgia	(-//-	Diff.												
		Number	PE	500 ^E	F	500 ^E	F	F	F	F	F	F	700 ^E	F	700 ^E
	, , , , ,	Number	CA	121,200	14,100 ^E	107,100	46,300	7,800 ^E	38,500 ^E	12,200 ^E	F	9,700 ^E	179,700	24,400 ^E	155,300
		Percent	PE	2.5 ^E	F	4.6 ^E	F	F	F	F	F	F	2.5 ^E	F	4.4 ^E
		Percent	CA	3.3	0.8 ^E	5.6	2.5	0.9 ^E	3.8 ^E	1.7 ^E	F	2.2 ^E	2.8	0.8 ^E	4.6
		Better (by)?	Diff.												
18 Os	steoporosis	Number	PE	1,400	200 ^E	1,200	1,000 ^E	F	1,000 ^E	700 ^E	F	600 ^E	3,100	300 ^E	2,800
		Number	CA	450,500	71,400	379,100	281,100	50,800 ^E	230,300	139,300	14,400 ^E	124,900	870,900	136,600	734,300
		Percent	PE	7.8	2.7 ^E	12.6	12.5 ^E	F	22.0 ^E	25.0 ^E	F	33.0 ^E	10.5	2.6 ^E	17.4
		Percent	CA	12.1	4.0	19.8	15.1	5.9 ^E	23	19.6	5.2 ^E	29.0	13.8	4.6	22
		Better (by)?	Diff.												
19	Arthritis	Number	PE	8,900	4,200	4,700	4,400	1,700	2,700	1,300	200 ^E	1,100	14,600	6,100	8,500
		Number	CA	1,610,700	663,50 0	947,200	961,300	363,600	597,700	401,800	113,400	288,500	2,973,90 0	1,140,50 0	1,833,400
		Percent	PE	48.0	47.0	49.0	53.0	46.0	58.0	53.0	25.0 ^E	66.0	50.0	45.0	53.0
		Percent	CA	43	37	49	51	42.0	58.0	56.0	41.0	65.0	47.0	39.0	54.0
		Better (by)?	Diff.												
20 Bac	ck problems	Number	PE	4,700	2,200	2,500	1,300	600 ^E	700 ^E	400 ^E	F	300 ^E	6,400	2,900	3,500
		Number	CA	867,700	403,20	464,500	440,400	192,900	247,400	184,200	60,900	123,300	1,492,30	657,000	835,300
		Percent	PE	25.0	25.0	26.0	15.4	15.0 ^E	15.7 ^E	17.4 ^E	F	21.0 ^E	22.0	21.0	22.0
		Percent	CA	23	22	24	23	22.0	24.0	26.0	22.0	28.0	24.0	22.0	25.0
		Better (by)?	Diff.												
21	Cancer	Number	PE	600 ^E	500 [€]	F	400 ^E	300 ^E	F	F	F	F	1,300 ^E	1,000 ^E	300 [€]
		Number	CA	172,900	115,40 0	57,500	110,600	69,100	41,500 ^E	43,300 ^E	22,700 ^E	20,600 ^E	326,800	207,200	119,600
		Percent	PE	3.2 ^E	5.7 ^E	F	4.6 ^E	7.3 ^E	F	F	F	F	4.3 ^E	7.0 ^E	2.0 ^E
		Percent	CA	4.6	6.4	3.0	5.9	8.0	4.0 ^E	6.0 ^E	8.2 ^E	4.6 ^E	5.2	7	3.5
		Better (by)?	Diff.												
22 Chro	ronic fatigue	Number	PE	300 ^E	F	100 ^E	F	F	F	F	F	F	500 ^E	F	300 ^E

#	Seniors Survey 2019			65 t	o 74 ye	ars	75	to 84 ye	ears	85 ye	ears and	over	65 aı	nd over (total)
	Health condition	Metric	Area	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females	Both sexes	Males	Females
	syndrome	Number	CA	80,700	17,900 ^E	62,800	48,100 ^E	24,800 ^E	23,300 ^E	16,600 ^E	F	F	145,400	47,800 ^E	97,600
		Percent	PE	1.4 ^E	F	1.7 ^E	F	F	F	F	F	F	1.7 ^E	F	2.3 ^E
		Percent	CA	2.2	1.0 ^E	3.3	2.5 ^E	2.9 ^E	2.3 ^E	2.3 ^E	F	F	2.3	1.6 ^E	2.9
		Better (by)?	Diff.												
23	Diabetes	Number	PE	3,100	1,900	1,200	2,100	1,200	900 ^E	500 ^E	F	F	5,700	3,300	2,400
		Number	CA	704,100	411,70 0	292,400	422,000	229,200	192,800	98,400	46,800	51,600	1,224,50 0	687,700	536,800
		Percent	PE	16.5	21.0	12	25.0	32.0	19.3 ^E	19.4 ^E	F	F	19.2	24.0	14.9
		Percent	CA	18.9	23.0	15.2	22.0	27.0	18.8	13.6	16.8	11.6	19.3	23.0	15.8
		Better (by)?	Diff.												
24	Heart disease	Number	PE	2,500	1,700 ^E	800 ^E	1,600	1,000 ^E	600 ^E	900 ^E	300 ^E	600 ^E	5,000	3,000	2,000
		Number	CA	431,900	280,70 0	151,200	348,700	200,600	148,100	176,500	74,100	102,300	957,100	555,500	401,600
		Percent	PE	13.2	18.5 [€]	8.2 ^E	19.5	26.0 ^E	14.0 ^E	38.0 ^E	39.0 ^E	38.0 ^E	17.1	22	13
		Percent	CA	11.6	15.6	7.9	18.6	23	14.5	25	27	23	15.2	18.9	11.9
		Better (by)?	Diff.												
25	Sleep apnea	Number	PE	2,100	1,300 ^E	800 ^E	500 [€]	300 ^E	200 ^E	F	F	F	2,700	1,700 ^E	1,000 ^E
		Number	CA	410,000	248,90 0	161,100	180,200	116,600	63,600	42,600 ^E	19,400 ^E	23,200 ^E	632,800	384,900	247,900
		Percent	PE	11.4	15.1 ^E	7.8 ^E	5.7 ^E	7.7 ^E	4.1 ^E	F	F	F	9.4	13.1 ^E	6.2 ^E
		Percent	CA	11.0	13.8	8.4	9.6	13.6	6.2	5.9 ^E	7.0 ^E	5.2 ^E	10	13.1	7.3
		Better (by)?	Diff.												
26	Suffers from the	Number	PE	700 ^E	200 ^E	500 ^E	500 ^E	400 ^E	100 ^E	200 ^E	F	F	1,400 ^E	700 ^E	700 ^E
	effects of a stroke	Number	CA	114,600	57,600	57,000	106,900	59,100 ^E	47,800 ^E	46,900	19,300 ^E	27,600 ^E	268,400	136,000	132,400
		Percent	PE	3.7 ^E	2.9 ^E	4.5 ^E	6.4 ^E	10.3 ^E	3.1 ^E	7.4 ^E	F	F	4.8 ^E	5.2 ^E	4.4 ^E
		Percent	CA	3.1	3.2	3.0	5.7	6.9 ^E	4.7 ^E	6.5	6.9 ^E	6.2 ^E	4.2	4.6	3.9
		Better (by)?	Diff.												
	eas Statistics Canada														

Source: Statistics Canada Table 13-10-0788-01

Symbol legend: E use with caution; F too unreliable to be published

Services Offered at PEERS Alliance

PEERS Alliance strives to address the underlying issues affecting the health and welfare of various communities, including the 2SLGBTQ+ community in PEI, by countering stigma and creating environments where all are welcome. PEERS Alliance serves people of all genders and sexual orientations in the promotion of sexual health well-being. In addition, PEERS Alliance supports and promotes harm reduction strategies to people who use drugs so they can work to reduce their risk of negative health outcomes. PEERS Alliance engages, supports, and educates all Islanders on issues related to sexual health and harm reduction in the context of drug use. PEERS Alliance works to contribute to the prevention of HIV, Hepatitis C, and all sexually transmitted and blood borne infections (STBBIs) in a non-judgmental environment free from stigma. PEERS Alliance strives to increase positive health outcomes by engaging and supporting those living with, and most impacted by HIV and Hepatitis C while creating opportunities for partnerships, community engagement, and systems change.²⁸⁸

To participate in PEERS Alliance programming and services, individuals do not need to disclose personal information such as their gender identity or sexuality. As PEERS Alliance receives funding from federal and provincial organizations to provide project-based programming and services, they do have reporting obligations to funders that include some demographic data. This data is nuanced as it is an approximation of the program participant demographics. For example, for the 2SLGBTQ+ Youth Drop-In program, also known as the Queer Youth Collective (QYC), and the 2SLGBTQ+ Adult Drop-In program, PEERS Alliance does provide funders with program data (number of individuals served and in what locations). Reported demographic data is an approximation, as participants are not required to disclose gender identity or sexuality. Through relationship building and establishing rapport with participants, PEERS Alliance does have a general idea of participant demographics. Among both youth and adult participants, gender identities include cis and trans women, cis and trans men, non-binary and agender people, and other gender identities and expressions. In reference to the two programs listed above, PEERS Alliance provides services to approximately 114 to 170 youth per program year and approximately 30 to 50 adults per program year.²⁸⁹

Chapter Five: Justice

This chapter includes information about access to justice in PEI, including services such as legal aid, corrections, and maintenance enforcement. It also provides statistics about courts in PEI. Chapter 5 includes sex and gender-disaggregated data from the Department of Justice and Public Safety and Community Legal Information. Highlights related to women and justice in PEI include:

- Community Legal Information received 1,472 inquiries through the inquiry line, with females accounting for 63.7% of inquiries.²⁹⁰
- Females made up 71% of family and civil law legal aid recipients and 26% of criminal law legal aid recipients in PEI (adult and youth).²⁹¹
- In 2019-2020, PEI correctional centres recorded 41,169 total bed days for the Provincial Correctional Centre and Prince County Correctional Centre. Women accounted for 15% of total actual bed days.²⁹²
- In 2019-2020, the average number of monthly bed days was 513, with an average daily count of 17 women in adult custody.²⁹³
- Community and Correctional Services' Community Program Section supervised 163 women under court order in the community on probation, conditional sentence or alternative measures.²⁹⁴

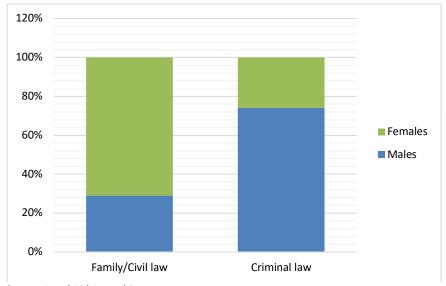
Community Legal Information

Community Legal Information (CLI) is a registered charity that helps residents of Prince Edward Island understand the law and navigate the justice system in the province. Community Legal Information provides support through an inquiry line, lawyer referral service, tenant support centre, the RISE program and plain language legal publications and presentations. ²⁹⁵ From April 1, 2020, to November 13, 2020, CLI received 1,472 inquiries through the inquiry line. Of those, 938 (63.7%) were female and 534 (36.3%) were male.²⁹⁶

Legal Aid

In 2018-2019, 900 adult Islanders accessed legal aid for criminal cases; females accounted for 26% of the total. Of the 71 youth criminals who accessed criminal legal aid in the same year, 25% were female. In addition, 462 family and civil applications for legal aid were received in 2018-2019. Of those, 71% of applicants were female.²⁹⁷

FIGURE 5-1 LEGAL CLIENT, BY TYPE AND SEX, PEI 2018-2019)²⁹⁸



Source: Legal Aid Annual Report

Adult Custody

In 2019-2020, PEI correctional centres recorded a total of 41,169 total bed days for the Provincial Correctional Centre and Prince County Correctional Centre. Women accounted for 15% (6,160) of total actual bed days.

In 2019-2020, the average number of monthly bed days was 513, with an average daily count of 17 women in adult custody. These numbers include all women housed in custody, including sentenced, remand, lock up and federally sentenced offenders.

TABLE 5-1 TOTAL AMOUNT OF WOMEN BED DAYS ACTUAL TO CAPACITY FOR PROVINCIAL CORRECTIONAL CENTRE AND PRINCE COUNTY CORRECTIONAL CENTRE (2015-2020)²⁹⁹

Fiscal Year	Total Actual Bed Days	Bed Day Capacity	Under (Over) Capacity	Average Monthly Bed Days	Average Daily count	PCC Bed Days	PRCC Bed Days ⁴	Total Bed Days	% are Women	Women Bed Days at PrCC (all Police Lockups)
2015-									7%	11
2016	2,277	1,460	(817)	190	6	27,741	3,127	30,868		
2016-									11%	5
2017	3,292	1,460	(1,832)	274	9	27,229	2,527	29,756		
2017-									14%	9
2018	4,666	1,460	(3,206)	389	13	29,497	3,063	32,560		
2018-									15%	14
2019	5,614	1,460	(4,154)	468	15	33,827	4,053	37,880		
2019-									15%	2
2020	6,160	1,460	(4,700)	513	17	36,679	4,490	41,169		

Source: Community and Correctional Services

Community and Correctional Services

According to Justice and Public Safety, in 2019-2020, Community and Correctional Services' Community Programs Section supervised 163 women under court order in the community on probation, conditional sentence or alternative measures.

Over a six-year period, the number of Community and Correctional Services adult probation cases in PEI declined and rose again. In 2014-2015, the total number of adult probation cases was 854, which included 187 (22%) women and 667 (78%) men. In 2019-2020, the total number of adult protection cases was 839, which included 163 (19%) women and 676 (81%)

FIGURE 5-2 GENDER AND LEGAL CLIENT BY TYPE, PEI (2014-2015 TO 2019-2020) 300

Comm	unity & Correct	cional Services							
Adult	Adult Probation Cases by Gender								
Fiscal Year	Men	Women	Total						
2014-15	667	187	854						
2015-16	582	126	708						
2016-17	550	156	706						
2017-18	585	167	752						
2018-19	663	172	835						
2019-20	676	163	839						

Source: Community & Correctional Services

⁴ PRCC is not equipped to house women offenders and only does so in the case of a police lockup in the Western end of the Island. For that reason all women offender bed days are reported as a total number and not broken out by facility. Please note that a police lockup cannot exceed 24 hours therefore would never be more than 1 bed day per offender.

Clinical Services (Adult)

The Community and Correctional Services' Clinical Services team is a provincial resource which provides clinical assessment and treatment to offenders and high risk community members. Programs and services include individual counselling and group interventions, such as Anger Management, Sexual Deviance Assessment and Treatment Program, and the Turning Point Program (a program that provides counselling to men who want to stop controlling and abusive behaviour towards their female partner).

According to Justice and Public Safety, in 2019-2020:

- 46 referrals for women were received by Clinical Services;
- 26 women were referred to the anger management program;
- Two emotional regulation groups for females were offered at the Provincial Correctional Centre, and one was offered in the community;
- Four women were referred for Indigenous case worker service; and
- 13 women were referred to mental health counselling.

Maintenance Enforcement

The Maintenance Enforcement Program (MEP) of PEI plays an important and integral role in the timely disbursement of support to Islanders. MEP manages any child and spousal support payments contained in a court order or separation agreement and registered with the PEI program.³⁰¹

MEP is a free, voluntary, neutral support program. A person making payments is called the payer; the person receiving payments is the recipient. Under the Maintenance Enforcement Act, enforcement officers have authority to take action to enforce maintenance obligations in arrears. Current enforcement measures may include garnishing wages, intercepting funds from federal sources, seizing and/or selling assets, suspension of federal licenses and passports, suspending PEI driver's licenses, and court default proceedings.

Table 5-2 displays data on maintenance enforcement cases by sex of payer and recipient from 2016 to 2020. Females made up the majority of recipients and males made up the majority of payers.

TABLE 5-2 MAINTENANCE ENFORCEMENT CASES ENROLLED, BY SEX OF RECIPIENT AND PAYER, PEI³⁰²

	Total Active Cases	Sex of Payer: Male	Sex of Payer: Female	Unknown	Sex of Recipient: Male	Sex of Recipient: Female	Unknown
2016	2,055	1,957	88	10	87	1,958	10
2017	1,958	1,866	81	11	77	1,869	12
2018	1,902	1,809	78	15	78	1,801	23
2019	1,887	1,739	80	68	77	1,727	83
2020	1,895	1,730	74	91	70	1,713	112

Source: Maintenance Enforcement Program

Appointed Judiciary

In 2020, women accounted for 42.8% (6/14) of those currently sitting at all levels of court in Prince Edward Island. In PEI, females make up 33% (1/3) of the Supreme Court Appeal Division, 50% (4/8) of the Supreme Court Trial Division and 33% (1/3) of the Provincial Court. 303

TABLE 5-4 NUMBER AND PERCENTAGE OF APPOINTED JUDICIARY BY SEX, PEI³⁰⁴

Prince Edward Island								
	Female	Male	Total %					
Provincial Court	1	2	33.3%					
Supreme Court Trial	4	4	50%					
Supreme Court Appeal	1	2	33.3%					

Source: The Courts of Prince Edward Island



Chapter Six: Violence Against Women and Shelter Services

This chapter includes statistics related to violence against women in PEI. Sex-disaggregated data was provided by Victims Services and the School Health Action Planning Evaluation System/Youth Smoking Survey (SHAPES). Gender-disaggregated data was provided by PEI Family Violence Prevention Services (PEI FVPS), Chief Mary Bernard Memorial Shelter, Blooming House Women's Shelter, and PEI Rape and Sexual Assault Centre (RSAC). Statistical highlights on violence against women and shelter services in PEI include the following:

- Seventy-one percent (71%) of new referrals to Victim Services in 2019-2020 were female.³⁰⁵
- Since the proclamation of the *Victims of Family Violence Act* in 1996, 1,114 applications have been received for Emergency Protection.³⁰⁶
- Females have consistently made up at least 94% of recipients of Emergency Protection Orders under PEI's *Victims of Family Violence Act*. 307
- Seventy-nine women and 24 children were admitted to Anderson House in 2019-2020.³⁰⁸
- The age group with the highest proportion of admittances to Anderson House was between the ages of 25 and 34 (40%).³⁰⁹
- PEI Family Violence Prevention Services assisted 313 women through outreach services in 2019-2020. The highest proportion (44.4%) accessed FVPS for the first time.³¹⁰
- Chief Mary Bernard Memorial Shelter was at full capacity 100 nights in 2019-2020.³¹¹
- Since opening in 2019, Blooming House has provided shelter for 115 individual women.³¹²
- Ninety-five percent of people accessing therapy at PEI Rape and Sexual Assault Centre in 2019-2020 were women.³¹³



Victim Services

Victim Services is a free provincial government service which assists victims of crime across PEI throughout their involvement in the criminal justice system. Victim Services staff members are professionals with backgrounds in social work and criminal justice. In 2019-2020, Victim Services received 919 new referrals. Seventy-one percent of Victim Service's new clients were female, and 29 percent were male.

Over a five-year period, the number of referrals to Victim Services steadily increased and peaked in 2018-2019 before dropping in 2019-2020. Over this period, on average, 72% of the new cases to Victim Services were female. 314 Of the 919 new referrals to Victim Services in 2019-2020, there was a family type relationship between the victim and the suspect or offender in 247 cases, or 30% (Table 6-1).

TABLE 6-1 VICTIM SERVICES TRENDS, PEI (2014-2015 TO 2019-2020)³¹⁵

Year	New Referrals/ Cases	% New Referrals / Cases of which were female	Cases involved some form of abuse within a family relationship	Sexual Abuse Cases	Female % awarded compensation under Criminal Injuries Compensation Program
2014-2015	762	68%	290 (38% of all new cases)	51	47% (33 of 70)
2015-2016	783	73%	305 (39% of all new cases)	91	53% (19 of 36)
2016-2017	902	72%	374 (42% of all new cases)	85	63% (27 of 43)
2017-2018	1,001	72%	403 (40% of all new cases)	122	57% (27 of 47)
2018-2019	1,280	74%	491 (48% of all new cases)	134	46% (26 of 57)
2019-2020	919	71%	247 (30% of all new cases)	106	68% (40/59)

Source: Victim Services

Victims of Family Violence Act

The Victims of Family Violence Act came into effect in December 1996. This provincial law addresses the

need for victims to stay in their own homes, provides an additional remedy to complement the Criminal Code and enables the justice system to provide a more effective and timely response. Under this act, Emergency Protection Orders are available 24 hours a day from designated justices of the peace. In non-emergency situations, longer-term Victim Assistance Orders are available by application to the Supreme Court.

Victim Services staff assist with training and ongoing monitoring and promotion of the use of the Victims of Family Violence Act. Police officers and victim services workers are designated under the Act to make application for Emergency Protection Orders. Since the proclamation of the Act in December 1996, there have been a total of 1,114 Emergency Protection applications.

Females continue to make up the vast majority of emergency protection order applications in PEI. Over the past five years (from 2015-2016 to 2019-2020) females account for more than 95% of emergency protection order applications in PEI (Table 6-2). In 2019-2020, there were 61 applications for Emergency Protection Orders under the Victims of Family Violence Act. Orders ranged from 7 days to 90 days in duration, with an average length of 59 days. During this time, there were six applications for a Victim Assistance Order.

TABLE 6-2 EMERGENCY PROTECTION ORDER APPLICANTS BY SEX

	2015-16	2016-17	2017-18	2018-19	2019-20
Female	62	73	66	77	59
Male	1	4	1	3	2
Total	63	77	67	80	61

Source: Victim Services

PEI Family Violence Prevention Services Inc.

Family Violence Prevention Services Inc. (PEI FVPS) is a community volunteer organization, based on the principles of justice, equality, and peace. It is dedicated to the eradication of physical, sexual, and emotional violence in families through advocacy, prevention programs, and the provision of quality services designed to empower and support those affected by family violence. PEI FVPS operates Anderson House, Outreach Services, and Second Stage Housing.

Anderson House is the provincial emergency shelter for women and children fleeing violence. Anderson House services are available 24 hours a day, 7 days a week through a toll-free, confidential information and support line. Outreach Services are confidential support services for victims of abuse. Staff provide one on one support, safety planning, information, referrals to other agencies, and advocacy to clients living in their home communities. Regional offices are located in Queens County, East Prince, West Prince, and Eastern PEI. PEI FVPS also operates Second Stage Housing, which provides longer term, secure, temporary housing to women at risk of family violence.³¹⁶

Anderson House

Over a five-year period admissions to Anderson House increased from 72 women in 2015-2016 to 79 women in 2019-2020, with a peak of 83 women in 2018-2019. During this same time period first-time admissions increased from 39 in 2015-2016 to 45 in 2019-2020, with a peak of 48 in 2017-2018.

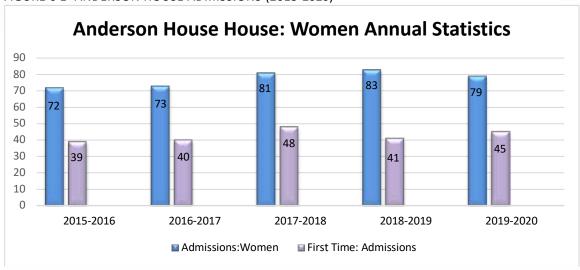


FIGURE 6-1 ANDERSON HOUSE ADMISSIONS (2015-2020)

The age distribution of women admitted to Anderson House fluctuated between 2015-2016 and 2019-2020. However, women aged 25 to 34 consistently accounted for the most admissions during the five year period, followed by women aged 35 to 44 and 18 to 25.

In 2019-2020, the total number of women admitted to Anderson House was 79, with the highest proportion of women admitted between the ages of 25 to 34 (40%). This was followed by women aged 35 to 44 (31.6%), 45 to 54 (17%), 18 to 24 (8.9%), 55 to 64 (2.5%), and 65 plus (2.5%). (Figure 6-4)

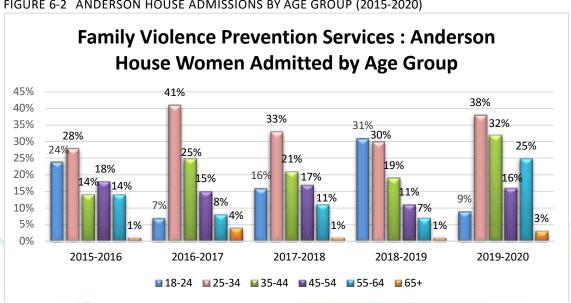


FIGURE 6-2 ANDERSON HOUSE ADMISSIONS BY AGE GROUP (2015-2020)

Anderson House collects statistics on the marital status of women who access shelter services. The largest proportion of women admitted to Anderson House from 2015-2016 to 2019-2020 was never married, followed by common-law, and married. In 2019-2020, the most common marital status of women admitted to Anderson House included the following: 41.8% never married, 22.8% married, 18.9% common-law relationship, 15.2% separated, 1.2% divorced, and 1.2% widowed.

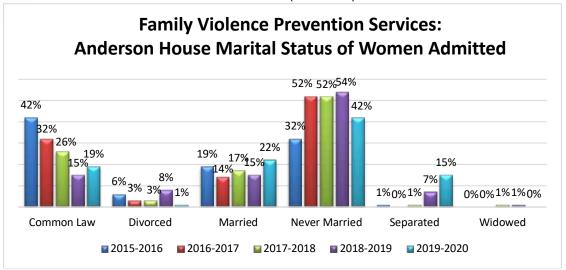


FIGURE 6-3 ANDERSON HOUSE MARITAL STATUS (2015-2020)

The majority of women admitted to Anderson House between 2015-2016 and 2019-2020 were from Queens County, followed by East Prince and Eastern Kings. Women from West Prince, Southern Kings, and out of province made up a small percentage of admissions to Anderson House.

Figure 6-4 displays the percentage of women admitted to Anderson House based on region in PEI. In 2019, 79 women were admitted to Anderson House from five different regions. The majority of women admitted to Anderson House were from Queens County (77.2%), followed by East Prince (10.1%), Eastern Kings (7.6%), West Prince (3.8%), and Southern Kings (1.3%).

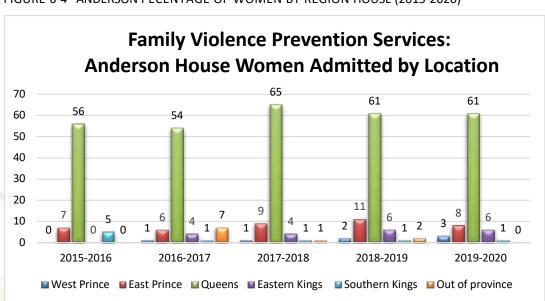


FIGURE 6-4 ANDERSON PECENTAGE OF WOMEN BY REGION HOUSE (2015-2020)

Over a five-year period the overall number of children admitted to Anderson House peaked at 47 in 2017-2018 and decreased to 33 in 2019-2020. The number of children admitted to Anderson House for the first time peaked at 40 in 2017-2018 and decreased to 19 in 2019-2020.

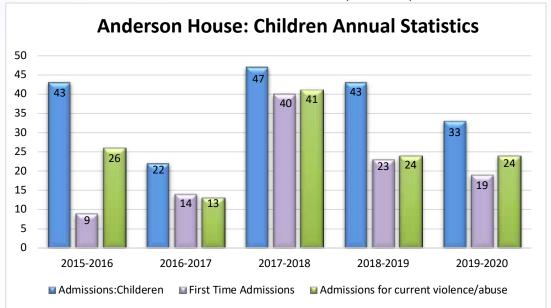
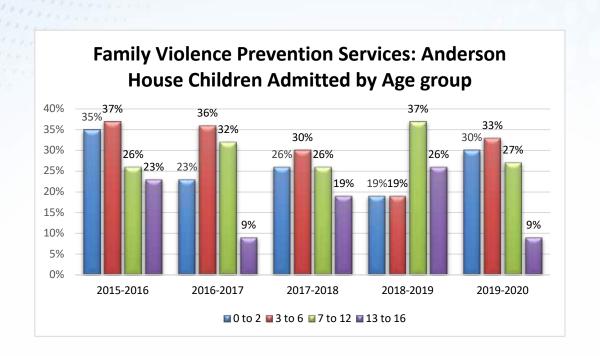


FIGURE 6-5 ANDERSON HOUSE TOTAL CHILD ADMISSIONS (2015-2020)

The age distribution of children admitted to Anderson House between the time period 2015-2016 and 2019-2020 varied. Overall, children aged 3-6 accounted for the most admissions over the five-year period. Taken together, children aged 0-2, 3-6, and 7-12 accounted for the largest group of admissions in four of the five years displayed in Figure 6-6 below, with the exception of 2018-2019 when children aged 7-12 accounted for the highest proportion of admissions.

In 2019-2020, the total number of children admitted to Anderson House was 33, with the highest age group aged 3 to 6 (33.3%) followed by 0 to 2 (30.3%), 7 to 12 (27.2%), and 13 to 16 (9.1%). The total number of female children admitted was 17 or 51.5% of total admissions. The total number of male children admitted was 16 or 48.5% of total admissions.

FIGURE 6-6 ANDERSON HOUSE CHILDREN ADMISSION BY AGE GROUP (2015-2020)



Outreach

Family Violence Prevention Services also gathers data related to outreach services in four regions of PEI.³¹⁷ In 2019-2020, a total of 313 women were served by PEI FVPS outreach services. Of those, 139 (44.4%) received outreach services for the first time (Figure 6-7)

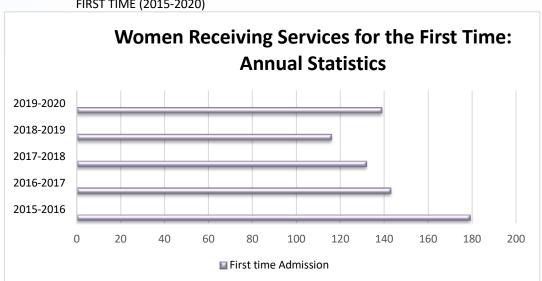


FIGURE 6-7 OUTREACH SERVICES: PERCENTAGE OF WOMEN RECEIVING SERVICES FOR THE FIRST TIME (2015-2020)

In 2019-2020, the largest proportion of women (34%) who received outreach services were aged 25 to 34 followed by women aged 35 to 44 (33%). Eleven percent of women were aged 45 to 54, while 10% of women were aged 18 to 24. Only 6% of women were aged 55to 64, 5% of women were 65 or older and approximately 1% of women served under 18 (youth).

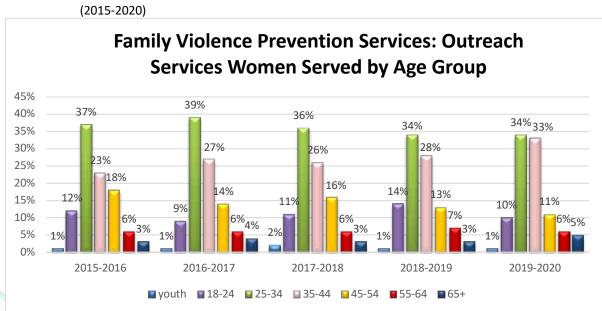
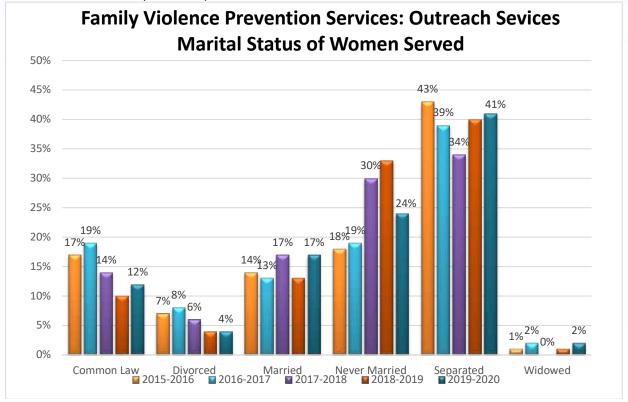


FIGURE 6-8 OUTREACH SERVICES: PERCENTAGE OF WOMEN SERVED BY AGE GROUP

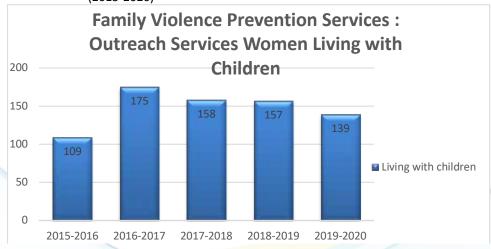
In 2019-2020, the most common marital status of outreach service clients was separated (41%), followed by women who were never married (24%), married (17%), common-law (10%), divorced (4%), or widowed (2%).

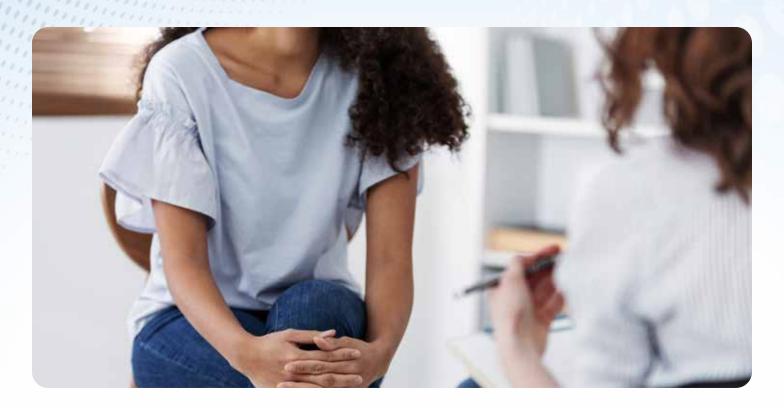
FIGURE 6-9 OUTREACH SERVICES: PERCENTAGE OF WOMEN SERVED BY MARITAL STATUS(2015-2020)



Over a five year period from 2015-2016 to 2019-2020, the number of women accessing outreach services and living with children peaked in 2016-2017 and declined from the period of 2017-2018 to 2019-2020. In 2019-2020, 139 women who accessed outreach services were living with children.

FIGURE 6-10 OUTREACH SERVICES: PERCENTAGE OF WOMEN SERVED BY MARITAL STATUS (2015-2020)





Chief Mary Bernard Memorial Women's Shelter

Chief Mary Bernard Memorial Women's Shelter is a shelter for women in distress, women without housing, or for young mothers who need extra support. Shelter residents have access to employment services, parenting, and life skills programs, and services at the Lennox Island Health Centre. Chief Mary Bernard Memorial Shelter provides safe and supportive housing on Lennox Island to both Aboriginal and non-Aboriginal women and their children who are experiencing family violence. 318

Statistics from Chief Mary Bernard Memorial Shelter from the 2019-2020 year indicate that 32 individuals and 5 children were served through the year. The number of shelter bed nights was 1,492 and the average length of stay was 34.5 days. The shelter was at full capacity 100 nights in 2019-2020.319

Blooming House Women's Shelter

Blooming House Women's Shelter Inc. is a registered charity, nonprofit organization whose primary goal is to provide safe overnight shelter for women on PEI. This shelter serves as a low-barrier, harm-reduction, and safe space for all women. Blooming House opened its doors on January 25th, 2019 and operates an overnight shelter, seven nights a week.³²⁰

In 2019, 61 individual women accessed shelter at Blooming House. A total of 1,271 bed nights was recorded, with an average occupancy rate per night of 45%. In 2020, Blooming House recorded 2,826 bed nights. 321 Since 2019, Blooming House has provided shelter for 115 individual women. This is approximately five individual women per month (in 24 months) seeking shelter. Table 6-3 compares data from 2019 and 2020 and notes increases for three of the four quarters. The second quarter of 2020 was negatively impacted by the COVID-19 pandemic.

TABLE 6-3 BLOOMING HOUSE OCCUPANCY RATES PER QUARTER (2019 TO 2020)³²²

	2019	2020	Increase %
January-March	10%	47%	37%
April-June	42%	30.33%5	
July-September	75.2%	86%	10%
October-December	54%	61%	7%

Source: Blooming House Women's Shelter

In addition, Blooming House collects data on mental health and substance use. In a six-month period from July to December 2020, Blooming House noted that of the women accessing shelter services 1% identified addiction issues, 30% identified mental health issues, and 69% identified both mental health and addiction issues.

TABLE 6-4 SIX MONTH SNAPSHOT OF MENTAL/ADDICTION, MENTAL HEALTH, ADDICTION (2020)³²³

JULY 2020	AUG 2020	SEPT 2020	OCT 2020	NOV 2020	DEC 2020
17 WOMEN	10 WOMEN	15 WOMEN	16 WOMEN	13 WOMEN	13 WOMEN
MH/ADD	MH/ADD	MH/ADD	MH/ADD	MH/ADD	MH/ADD
13 = 76%	8=80%	11=73%	10=63%	6=46%	10=77%
MH	MH	MH	MH	MH	MH
3=18%	2=20%	4=27%	6=37%	7=53 %	3=23%
ADD.	ADD	ADD	ADD	ADD	ADD
1 = 6%	0	0	0	0	0
	Eight returning women from July. Two new for the month.	Eleven returning women from August. Four new for the month.	Twelve returning women from September. Four new for the month	Ten returning women from October. Three new for the month.	Ten returning women from November. Three new for the month.

Source: Blooming House Women's Shelter

⁵ This number was impacted by the COVID-19 pandemic.

PEI Rape and Sexual Assault Centre

The Prince Edward Island Rape and Sexual Assault Centre (PEIRSAC) is a not-for-profit, government-funded organization that provides service to adult and youth (over age 16) survivors of recent or historic sexual assault and childhood sexual abuse. Services include therapy, information, and education. The main office is located in Charlottetown, but limited service is also provided in Summerside and Alberton. 324

Counselling and Therapy Services

Clients in individual therapy may access service one time only or over the course of many years. From April 1, 2019, to March 31, 2020, 206 people received individual therapy. Women made up 95% (195), while men comprised the remaining 5% (11). The majority of all clients (66%) were seen in Charlottetown, followed by 24% in Summerside, and 10% in Alberton. The PEI Rape and Sexual Assault Centre also offers Men Matter, a group program for men who have experienced sexual abuse; 18 men accessed this program during 2019-2020 in Charlottetown.

Reasons for Seeking Therapy

For the first time in PEIRSAC history, requests from survivors of adult sexual violence exceeded requests from survivors of childhood sexual abuse in 2019-2020.

TABLE 6-5 NUMBER OF NEW REQUESTS FOR PEI RAPE AND SEXUAL ASSAULT CENTRE COUNSELING AND THERAPY SERVICES, BY REASON FOR SEEKING THERAPY³²⁵

Fiscal Year	New Requests	Recent Assault (<3 months)	Historic Assault	Child Sexual Abuse
2019-2020	152	31%	22%	47%
2018-2019	114	27%	17%	56%
2017-2018	112	18%	20%	62%
2016-2017	112	16%	23%	61%
2015-2016	119	11%	21%	68%

Source: PEI Rape and Sexual Assault Centre

Age of Clients

The ages of those 152 persons requesting service from April 1, 2019, to March 31, 2020, were as follows:

- 34% were from persons under the age of 24 years.
- 40% were from persons aged 25-39 years.
- 25% were from persons aged 40-59 years.
- 1% were from persons aged 60+ years.

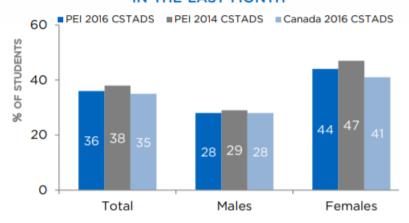
Bullying

Health Canada's 2016-2017 health profile for PEI details results from the Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS). Grade 7-12 students with parental permission from randomly selected schools in each province were invited to participate in the pan-Canadian survey. Participating students were asked questions about tobacco, alcohol and drug use, in addition to questions about bullying, school connectedness and mental wellness.326

The survey describes bullying as a form of abuse that takes different forms at different ages. Bullying is often an aggressive behaviour imposed from a position of power, which is repeated over time. With each repeated bullying incident, the student who is bullying increases in power, while the student being victimized loses power. In Prince Edward Island, 36% of students reported being bullied by other students in the last month, compared to 35% of students in Canada (2016-2017 CSTADS). Females made up 44% of students who reported being bullied, compared to 28% of males.

FIGURE 6-13 YOUTH WHO REPORT BULLYING OF BEING BULLIED³²⁷

STUDENTS WHO REPORT BEING BULLIED IN THE LAST MONTH



Chapter Seven: Women in Leadership

In this chapter, you will find gender-disaggregated statistics about women elected and appointed to public office. For the first time, the Statistical Review includes data related to appointments to Provincial Agencies, Boards, and Commissions and Chief Public Health Officers. In most cases, the number of women elected and appointed to leadership positions in PEI and Canada remains well below parity, with the exception of appointments within Chief Public Health Offices. The gap is more pronounced for women from diverse backgrounds, including Black, Indigenous, women of colour, young women, and women with disabilities. Highlights related to women in leadership in PEI include the following:

- Following the 2018 municipal elections, women made up 39.7% of councillors and 26.9% of mayors in cities, towns, and rural municipalities in PEI.328
- In 2020, seven of twenty-seven (25.9%) Members of the Legislative Assembly (MLAs) of PEI were women, increasing from 18.5% in 2015.³²⁹
- PEI ranked tenth among provinces and territories regarding gender in elected office in 2020.
- Following the 2019 federal election, all four PEI Members of Parliament were men. To date, only three women have ever been elected as Members of Parliament for PEI.³³⁰
- In 2020, one of four (25%) appointed PEI Senators was a woman.³³¹
- In 2020, two of four (50%) members of Lennox Island First Nation Band Council were women, including the Chief.³³²
- As of 2020, one woman (25%) was elected as a councillor of the Abegweit First Nation Band Council.333
- The President and CEO of the Native Council of PEI was a woman.³³⁴
- Forty-eight percent (48%) of individuals appointed to provincial agencies, boards, and commissions in 2020 were female.³³⁵
- In 2020, PEI's Chief Public Health Officer was a woman. 336

Municipal Government

PEI has 63 municipalities including 2 cities, 10 towns, 50 rural municipalities, and one resort municipality. Municipal elections are held every four years and follow procedures outlined in the Municipal Government Act (MGA), the Municipal Election Regulations, the Campaign Contributions and Election Expenses Bylaw Regulations, and the Plebiscite Regulations. 337

The most recent municipal elections were held on November 5, 2018. In total, women represented 37.7% of all candidates for council positions and 28.4% for mayoral positions.³³⁸ Following the election, women accounted for 39.7% of municipal councillors and 26.9% of mayors elected in cities, towns, and rural municipalities across PEI.³³⁹ According to the Federation of Canadian Municipalities, in Canada, women occupy 28% of councillors' positions and 18% of mayors' positions.340

The percentage of women elected to municipal council in PEI's two cities, Charlottetown and Summerside, is lower than the provincial average. Taken together women make up 22.2% of elected councillors in Charlottetown and Summerside. Women account for 20% (2/10) of Charlottetown City councillors and 37.5% (3/8) of Summerside City councillors. In 2020, both the mayors of Charlottetown and Summerside were men. To date, only one woman has been elected mayor of Charlottetown. Likewise, only one woman has been elected Mayor of Summerside. Table 7-1 displays 2018 election data from the four municipalities whose elections were administered by Elections PEI.

TABLE 7-1 MUNICIPAL FLECTION DATA BY GENDER (2018)341

Municipality	Women Candidates	Women Elected
Charlottetown	5/36 (13.9%)	2/11 (18.2%)
Cornwall	6/13 (46.2%)	3/7 (42.9%)
Stratford	4/15 (26.7%)	2/7 (28.5%)
Summerside	8/25 (32%)	3/9 (33.3%)
Total	23/89 (25.8%)	10/34 (29.4%)

Source: Elections PEI

Provincial Government

The Legislative Assembly is the parliament of Prince Edward Island and includes 27 elected members who represent the people who live in PEI's 27 electoral districts. 342 The most recent provincial general election was held on April 23, 2019, followed by the District 9 deferred election on July 15, 2019.

Women comprised 33% (35/105) of candidates nominated to run for the four parties in the 2019 provincial election, an increase of four percentage points from the 2015 general election. 343 Following the 2019 provincial election and the District 9 deferred election, 7 of 27 (25.9%) Members of the Legislative Assembly (MLAs) were women.³⁴⁴ This marks an increase from 18.5% (5/27) in 2015. As of 2020, there were two (2/10 or 20%) women members of Executive Council (Cabinet) in PEI.345

The 27 Members of the Legislative Assembly of PEI represent three political parties. The gender composition of each party caucus follows: Progressive Conservative Party of Prince Edward Island 2/14 (14.2%) women, Green Party of Prince Edward Island 5/8 (62.5%) women, and the Liberal Party of Prince Edward Island 0/5 (0%) women.

Following the Saskatchewan election in October 2020, PEI ranked tenth with regard to women elected to provincial and territorial government. When you include provincial and territorial legislatures, the average percentage of women elected across Canada is 32.8% (Table 7-2).

TABLE 7-2 PERCENTAGE OF WOMEN IN FEDERAL, PROVINCIAL, AND TERRITORIAL LEGISLATURES (2020)

Rank	Province/Territory	Elected Women/ Total Seats	% of Elected Women
	Canada (Federal)	98/388	29%
1	Northwest Territories	9/19	47%
2	British Columbia	35/85	41.2%
3	Quebec	51/127	40%
4	Ontario	38/107	39.5%
5	Yukon	7/19	37%
6	Nova Scotia	17/51	33.3%
7	Alberta	26/87	29.8%
8	New Brunswick	14/49	28.6%
9	Manitoba	15/57	26.3%
10	Prince Edward Island	7/27	25.9%
11	Saskatchewan	15/58	25.8%
12	Newfoundland and Labrador	9/40	22.5%
13	Nunavut	3/22	13.6%
	ercentage of women elected across Canada rovincial and Territorial Elections)	246/748	32.8%

Nominating Women in PEI Provincial General Elections

Research from the PEI Coalition for Women in Government notes a correlation between the proportion of women nominated and the proportion of women elected in general elections.³⁴⁶ In 2019, women accounted for 33% (35/105) of total candidates nominated to run for the four parties in the 2019 provincial election.³⁴⁷ This was an increase from 29.5% (31/105) in 2015, and marked a historic high for the province. Table 7-3 displays historical nomination and election data by party over a thirty-year period.

TABLE 7-3 NUMBERS AND PERCENTAGES OF WOMEN NOMINATED AND ELECTED IN PEI ELECTIONS $(1989-2019)^{348}$

Year	PC	Liberal	NDP	Green	Island Party	Total Nominated	Total Elected
1989	10/32 31.3%	7/32 21.9%	5/17 29.4%			22/81 27.2%	7/32 21.9%
1993	5/32 15.6%	8/32 25%	7/23 30.4%			20/87 23%	8/32 25%
1996	4/27 14.8%	5/27 18.5%	11/27 40.7%			20/81 24.7%	4/27 14.8%
2000	7/27 25.9%	3/27 11.1%	10/27 37%			20/81 24.7%	6/27 22.2%
2003	6/27 22.2%	5/27 18.5%	10/26 38.5%			21/80 26.3%	6/27 22.2%
2007	4/27 14.8%	6/27 22.2%	7/14 50%	6/15 40%		23/83 27.7%	7/27 25.9%
2011	7/27 25.9%	6/27 22.2%	6/14 42.9%	13/22 59.1%	0/12	32/102 31.1%	6/27 22.2%
2015	6/27 22.2%	7/27 26%	9/27 33.3%	9/24 37.5%		31/105 29.5%	5/27 18.5%
2019	7/27 25.9%	8/27 29.6%	11/24 45.8%	9/27 33.3%		35/105 33.3%	7/27 25.9%

Source: PEI Coalition for Women in Government

Federal Government

Members of Parliament (MPs) represent 338 federal ridings across Canada, including four in PEI. Following the most recent federal election on October 21, 2019, 29% (98/338) of MPs elected are women.³⁴⁹ In PEI, none of the four elected MPs are women. Historically, only three women have ever served as MPs for PEI. Currently, women make up 50% (18/18) of the federal cabinet positions.³⁵⁰

TABLE 7-4 NUMBER OF FEDERAL WOMEN CANDIDATES (2019)³⁵¹

Party	Candidates	Elected	Percentage Elected
Total	744	98	13%
New Democratic Party	164	9	5%
Green Party of Canada	156	2	1 %
Liberal Party of Canada	133	52	39%
Conservative Party of Canada	108	22	20%
Bloc Québécois	36	12	33%
Independent	20	1	5%
Marxist-Leninist Party of Canada	25	0	0%
Libertarian Party of Canada	1	0	0 %
Stop Climate Change Party	1	0	0 %
Communist Party of Canada	5	0	0 %
Animal Protection Party of Canada	10	0	0 %
Christian Heritage Party of Canada	18	0	0 %
Rhinoceros Party of Canada	4	0	0 %
Parti pour l'independence du Quebec	3	0	0 %
People's Party of Canada	55	0	0 %
National Citizen Alliance of Canada	1	0	0 %
United Party of Canada	2	0	0%
Veterans Coalition Party of Canada	2	0	0%

Source: Parliament of Canada

Senate of Canada

The Senate is the Upper House in Canada's bicameral parliamentary democracy. It includes 105 seats across Canada, including four in PEI. Senators are appointed by the federal government to fill vacancies. Women made up 47/105 (44.7%) of Senators, with 11 vacancies across Alberta, British Columbia, Nova Scotia, Ontario, Quebec, and Saskatchewan. As of October 2019, 25% (1/4) of PEI senators is a woman and 75% (3/4) of PEI senators are men.

First Nations Government, Native Council, and AWA

Lennox Island Mi'Kmaq First Nation is represented by the Lennox Island Band Council, which consists of the Chief, two on-reserve councillors, and one off-reserve councillor. All Electors of the Lennox Island Band are eligible to vote in Band Elections held in accordance with these Custom Election Rules, for the positions of Chief, on-reserve councillors and off-reserve councillor. In 2020, two of four (50%) members of the Lennox Island First Nation Band Council were women, including the Chief.³⁵³

Abegweit First Nation is a custom band governed by the Chief and three councillors that are elected every four years. The most recent election was held on June 14, 2019, resulting in one woman elected as a councillor (1/4 or 25%). This was the first election following a Federal Court of Canada decision that won voting rights for off-reserve members of Abegweit First Nation.354

The Native Council of Prince Edward Island is a membership organization providing programs and services to non-status and off-reserve Indigenous people residing in Prince Edward Island. In 2020, the President and CEO of the Native Council of PEI was a woman. 355

The Aboriginal Women's Association of PEI Inc (AWAPEI) is a non-profit, representative organization, administered by a voluntary Board of Directors and an Executive Committee. The programs and services enhance, support, educate, and empower the well-being of Aboriginal women through capacity building, focus groups, prevention, awareness, and equal opportunities.³⁵⁶

School Boards

The Public Schools Branch is governed by a board of Directors, appointed by the Minister of Education and Lifelong Learning. In 2019, the PEI Government started the process to reinstate an elected school board for English-language schools. Information gathered from online consultations will be reviewed by the Department of Education and Lifelong Learning and will inform a new governance model, as well as required legislative and regulatory changes under the Education Act.357 In 2020, 66.6% (2/3) appointed members of the Public Schools Branch were women.³⁵⁸

The Commission scolaire de langue française de l'Île-du-Prince-Édouard is directed by a board responsible for the management of French-language education in Prince Edward Island. The board is made up of nine members representing the six Acadian and francophone regions of the province. As of 2020, women made up 4/9 (44.4%) members of the board, with one seat vacant.³⁵⁹

Provincial Agencies, Boards, and Commissions

Engage PEI oversees the recruitment of applicants and manages the appointment process for over 70 provincial government agencies, boards and commissions (ABCs). 360 There are three types of ABCs:

- Advisory ABCs provide information to government that will assist in developing policy or delivering programs.
- Operational ABCs provide goods and/or services to implement approved government policy and programs.
- Regulatory ABCs control public or private sector operations, review licenses, or hear appeals regarding government and third-party decisions.

In 2020, Engage PEI appointed 201 individuals to provincial agencies, boards, and commissions. Appointments included 97 (48%) females and 104 (52%) males. In 2020, 13 individuals were appointed as Chairs of agencies, boards, and commissions. Six (46%) females were appointed as Chairs and seven (54%) males were appointed as Chairs.³⁶¹

Chief Public Health Officers

The government of Canada created the position of Chief Public Health Officer (CPHO) in 2004. CPHO is a title held by Canadian government health professional official who acts as the head of Public Health Agency of Canada on matters related to the health and safety of Canadians. 362 The primary responsibilities of CPHOs include providing public health advice to the Minister of Health and to the President of the Public Health Agency of Canada, taking a leadership role in national public health matter and assuming the role of the federal government spokesperson on public health issues. 363

In public health emergencies such as outbreaks and natural disasters, CPHOs at the federal, provincial, and territorial levels are responsible for working with relevant professionals and elected officials to plan responses, to communicate to the public about protecting themselves and families. Chief Public Health Officers across Canada are integral public leaders in the COVID-19 pandemic response.

As of 2020, the Chief Public Health Officer of PEI was a woman. At the federal level, the Chief Public Health Officer was also a woman. Of the 14 provincial and national chief medical officers and public health officers in 2020, 7 (50%) were women.³⁶⁴

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