

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

Considered more as a descriptor than an indicator.

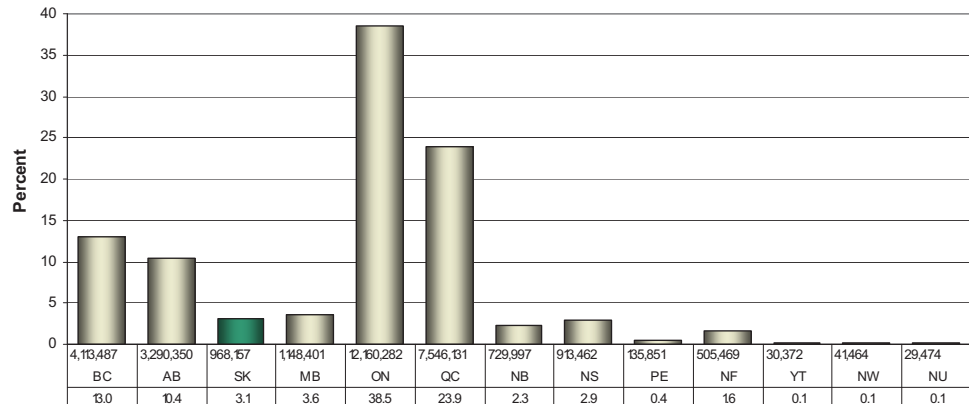
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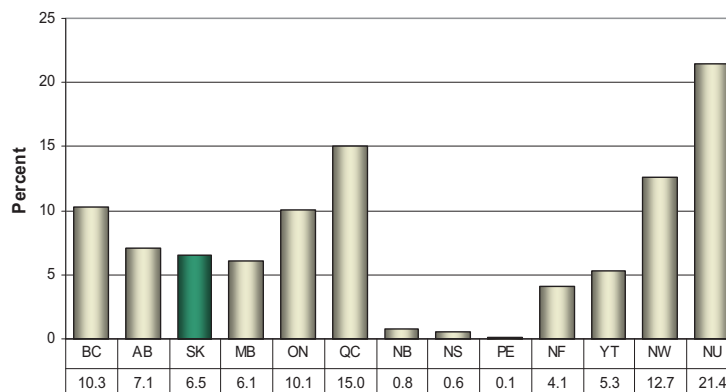
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Canadian population by province, percentage, 2006



Population: Canadian land mass by province, percent, 2006



SUMMARY OF FINDINGS:

Saskatchewan had the sixth largest population in Canada.

Of the three western prairie provinces, Saskatchewan had the smallest population. Alberta has the largest population, followed by Manitoba.

Saskatchewan had the seventh largest land mass in Canada.

Of the three western prairie provinces, Saskatchewan had the second largest land mass. Alberta had the largest land mass and Manitoba had the smallest.

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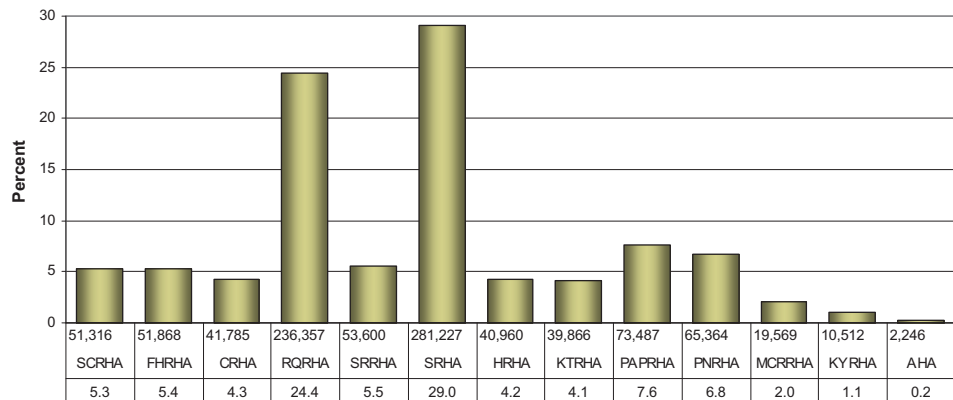
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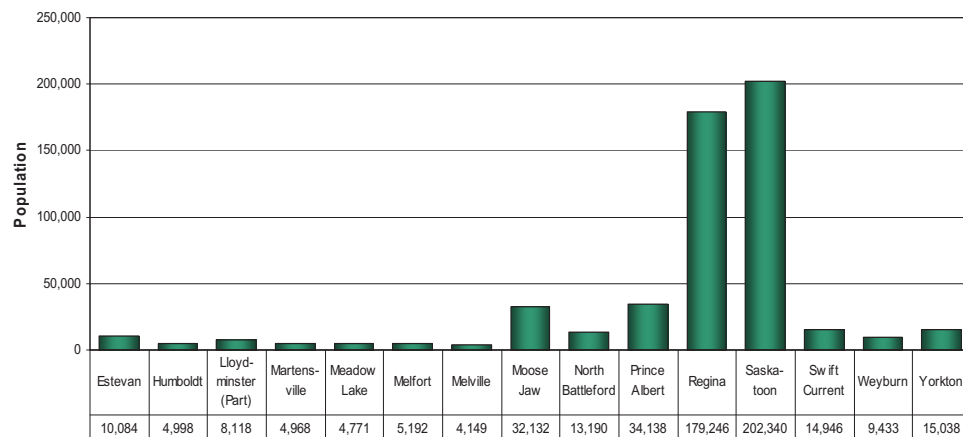
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Saskatchewan population by health region, percent, 2006



Population: Saskatchewan city populations, 2006



SUMMARY OF FINDINGS:

Of Saskatchewan's 13 regions, Saskatoon (SRHA) and Regina Qu'Appelle (RQRHA) contained the largest population percentages at 29 percent and 24.4 percent, respectively.

Saskatchewan's 15 cities comprised 56.1 percent of Saskatchewan's population (the city of Lloydminster crosses the Saskatchewan - Alberta border and only the population that resided in Saskatchewan were included in these percentages).

Regina and Saskatoon, with populations well-over 150,000 residents, contained almost 40 percent of the total Saskatchewan population.

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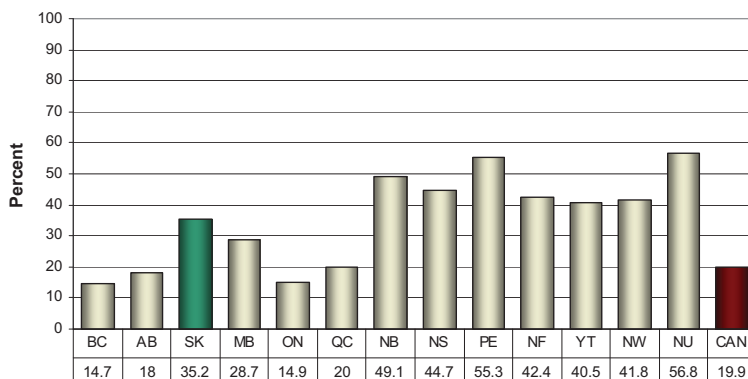
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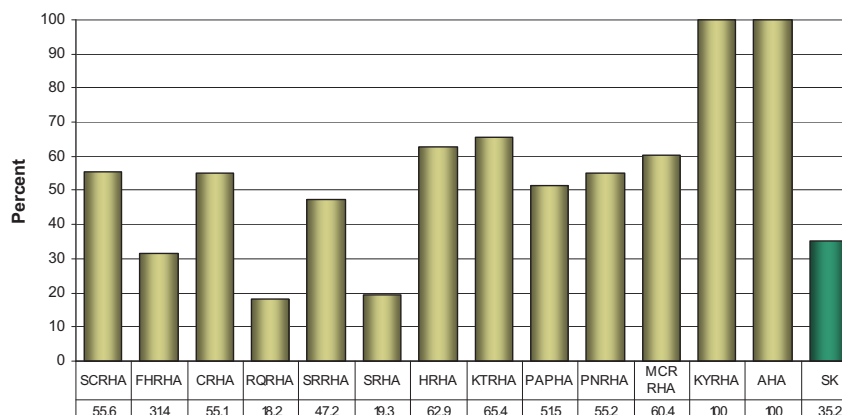
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Rural population by provinces, percent, 2006



Population: Rural population by RHA, percent, 2006



SUMMARY OF FINDINGS:

Saskatchewan had the eighth highest largest rural population percentage in Canada. Of the three western prairie provinces, Saskatchewan had the largest rural population percentage. Manitoba had the next largest rural population percentage and Alberta had the smallest percentage.

Amongst the Saskatchewan RHAs, Keewatin Yatthé RHA (KYRHA) and Athabasca HA (AHA) had the largest rural population percentage. Amongst the non-northern RHAs, Kelsey Trail (KYRHA) and Heartland (HRHA) had the largest rural population percentages and Saskatoon RHA (SRHA) and Regina Qu'Appelle RHA (RQRHA) had the smallest percentage.

A. Definitions:

The total population size of a province or other defined area divided by its surface area.

B. Significance/Use:

The population density measures concentration of the human population in reference to space. It can be used as a partial indicator of human requirements and activities in an area.

This indicator has close linkages with other demographic indicators such as the population growth rate.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

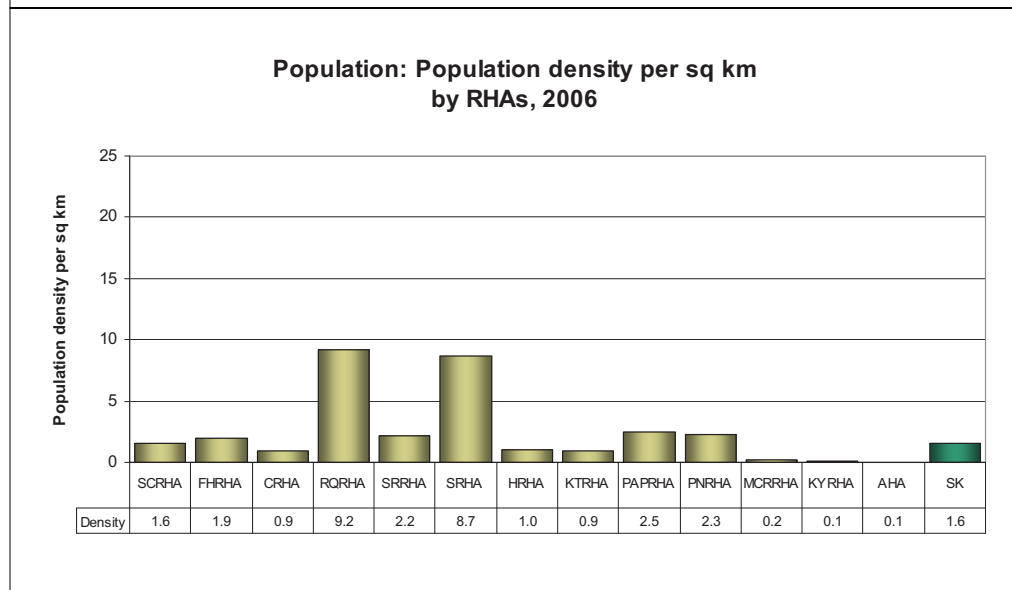
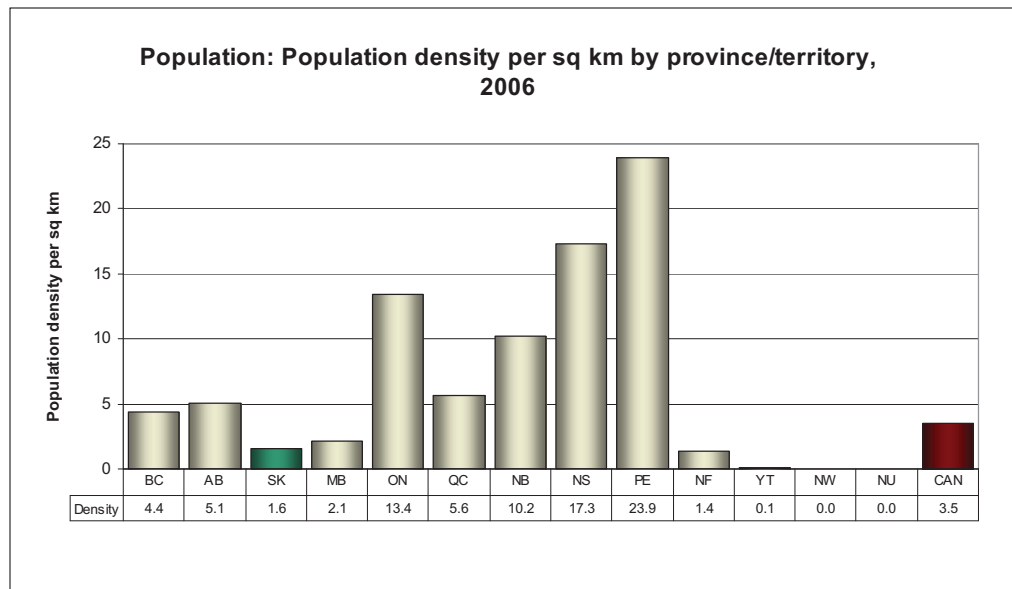
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D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Saskatchewan had the ninth highest population density of the Canadian provinces and of the three western provinces, Saskatchewan had the lowest population density.

Regina Qu'Appelle RHA (RQRHA) and Saskatoon RHA (SRHA) had highest population density (9.2 and 8.7 per sq km, respectively) of the Saskatchewan health authorities.

The three northern health regions, Mamawetan Churchill River RHA, Keewatin Yatthé RHA and Athabasca HA (AHA) had the lowest population densities (0.2, 0.1 and 0.1 per sq km, respectively).

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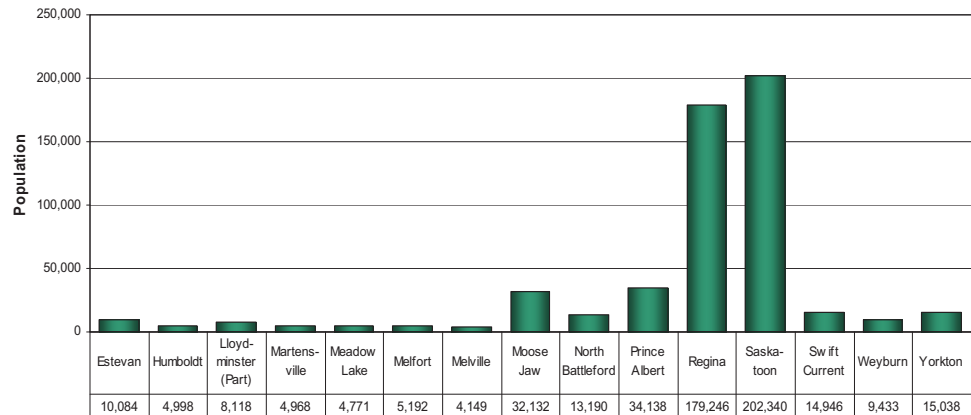
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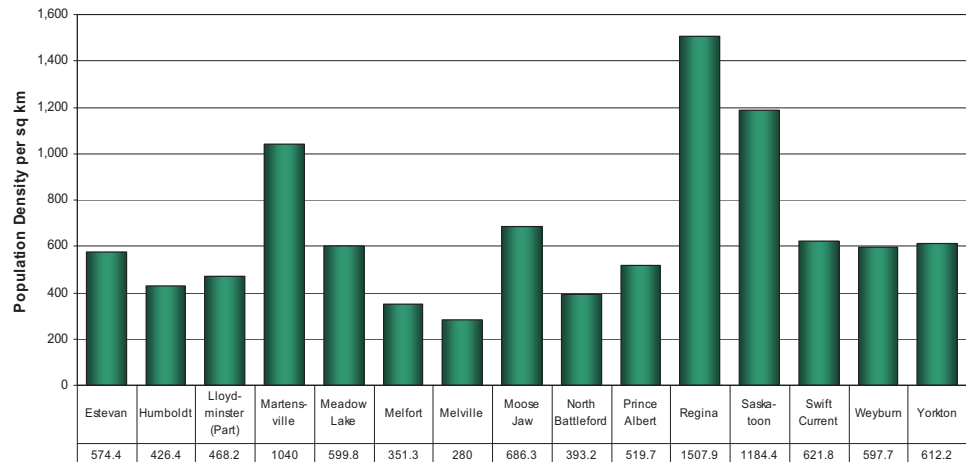
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Saskatchewan city populations, 2006



Population: Saskatchewan cities population density, 2006



SUMMARY OF FINDINGS:

Saskatchewan’s 15 cities varied in 2006 populations from a low of 4,149 for Melville to a high of 202,340 for Saskatoon.

Regina and Saskatoon were the two largest cities in Saskatchewan with populations of 179,246 and 202,304 respectively.

Of the cities found in Saskatchewan, Regina had the highest population density (1507.9 people per square kilometre) and Melville had the lowest population density (280 people per square kilometre).

A. Definitions:

The ratio of the difference between the population at the end of the period and the population at the beginning of the period relative to the population at the beginning of the period.

B. Significance/Use:

Population growth measures how fast the population is changing. It usually has implications for indicators related to education, infrastructure, and employment and the need for health services.

Useful to determine required services in planning preventive and promotional interventions.

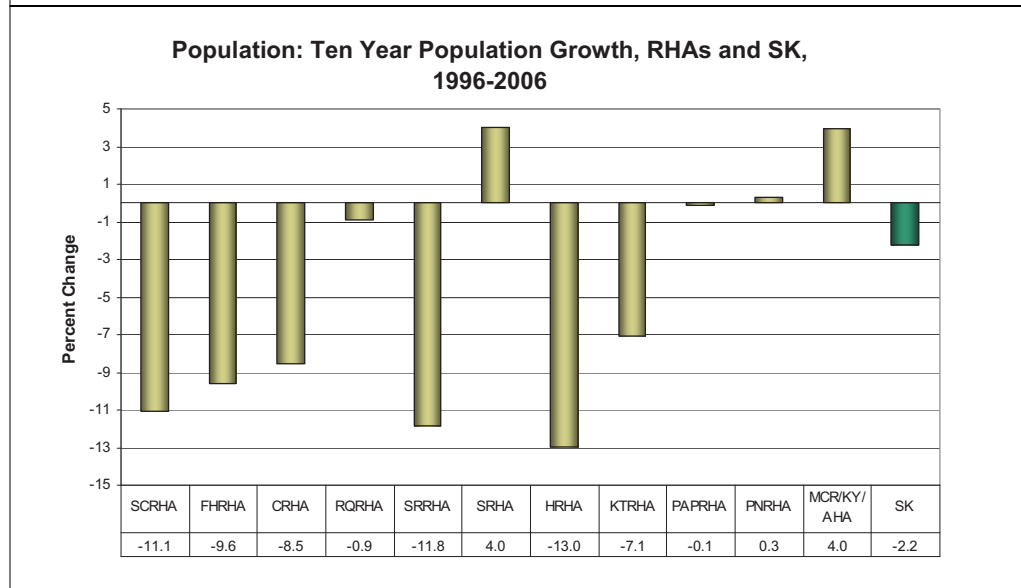
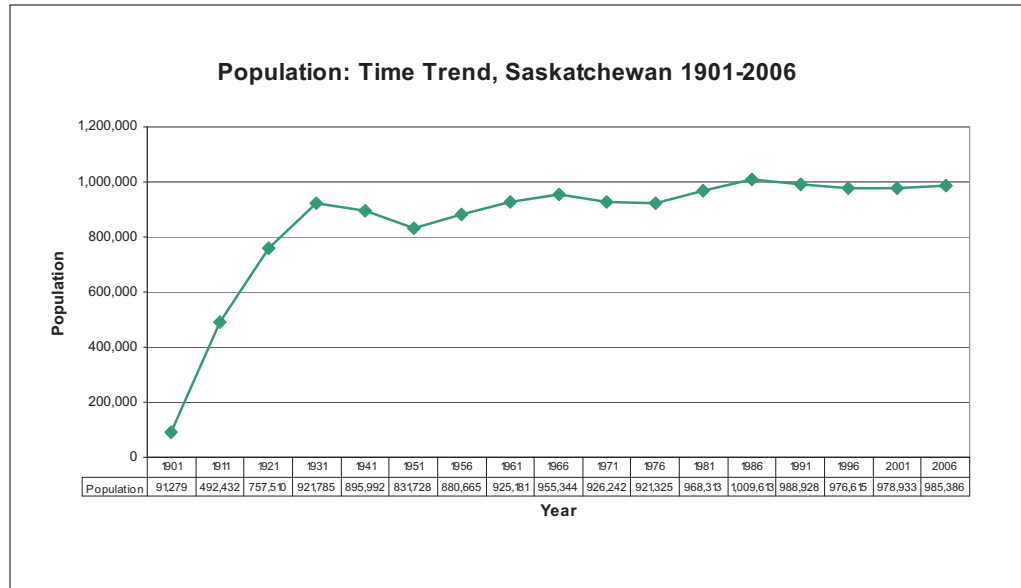
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D. Source:

Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Saskatchewan’s population had decreased by 2.2 percent over the ten years, from 1996 to 2006.

Most of the RHAs had also seen decreases in their populations during this same time period, ranging from less than one percent in Regina Qu’Appelle RHA (RQRHA) to 13 percent in Heartland RHA (HRHA).

The health regions that had an increase in their populations include Prairie North RHA (PNRHA) at 0.3 percent, Saskatoon RHA (SRHA) at four percent and the three northern regions, Mamawetan Churchill RHA (MCRRHA), Keewatin Yatthé RHA (KYRHA) and Athabasca HA (AHA) with a combine increase of four percent.

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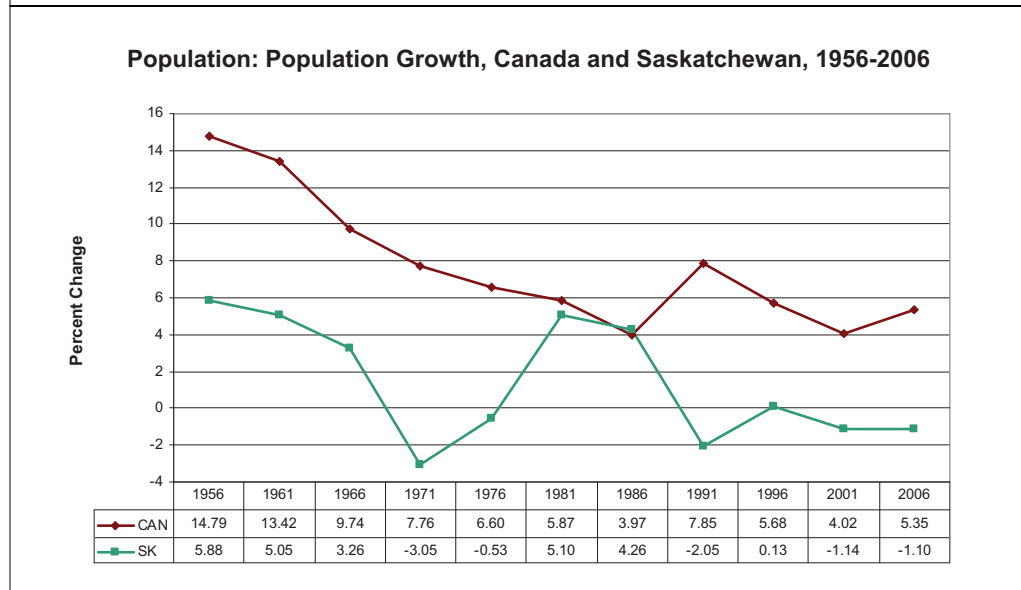
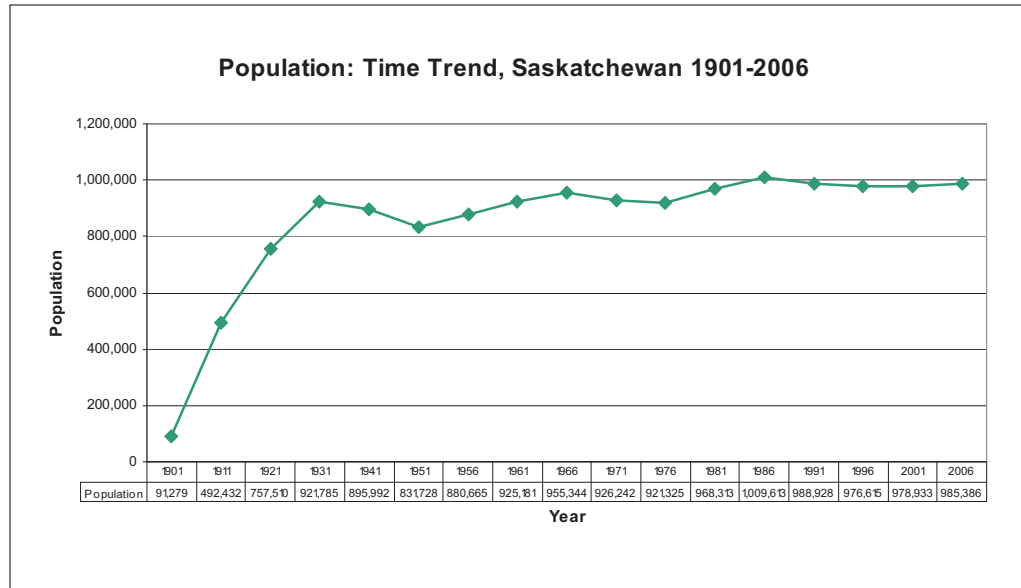
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SUMMARY OF FINDINGS:

Canada's population has been steadily increasing with one of the largest increases the population numbers occurring between 1986 and 1991.

In 1986 the Saskatchewan population climbed to over 1 million residents (1,009,610), but had since decreased to 968,157 in 2006.

Saskatchewan population fluctuated over the past several decades and as a result, the population growth between 1956 and 2006 had also fluctuated, showing both positive and negative growth.

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B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

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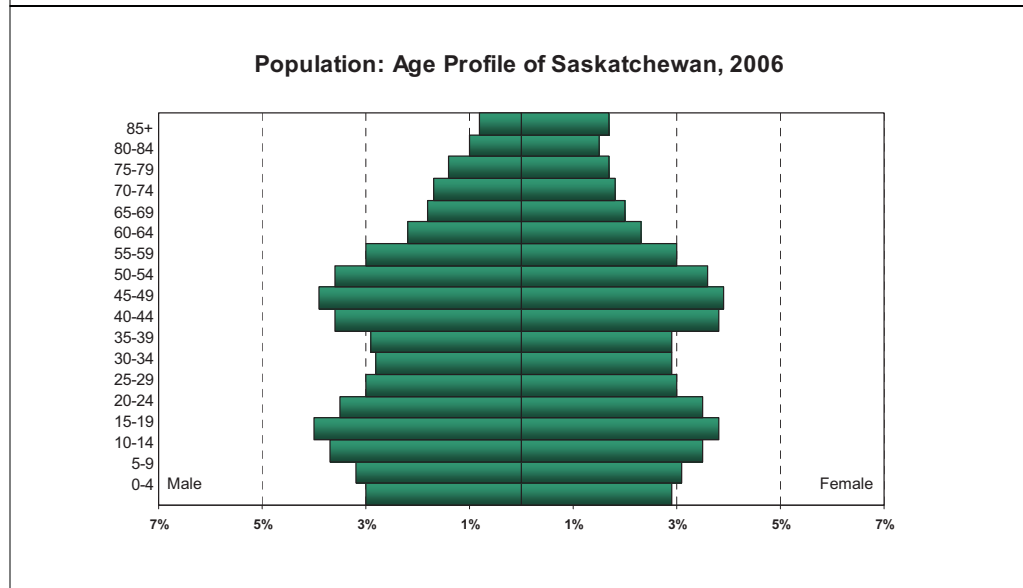
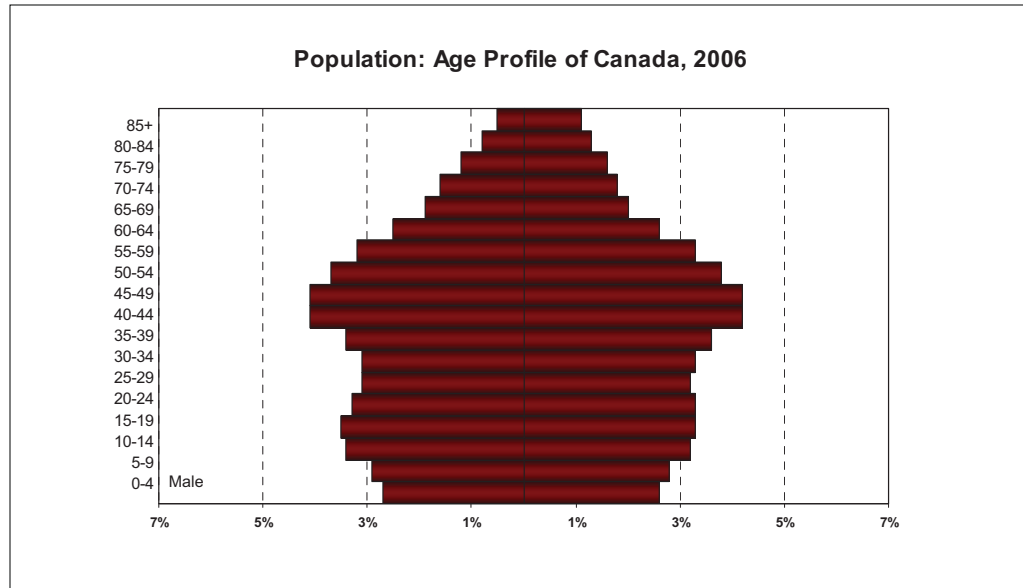
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2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Saskatchewan had a younger population in 2006 when compared to that seen for Canada.

The population of Saskatchewan is aging as shown by the contractive pattern representing lower percentages of younger people.

A bulge was seen in the 40 to 59 year males and females (28.4% of the total population), the tail end of the baby boomers, and a second bulge in the 10 to 19 year males and females (15 percent of the total population) representing the echo boom children of the 40 to 59 years population.

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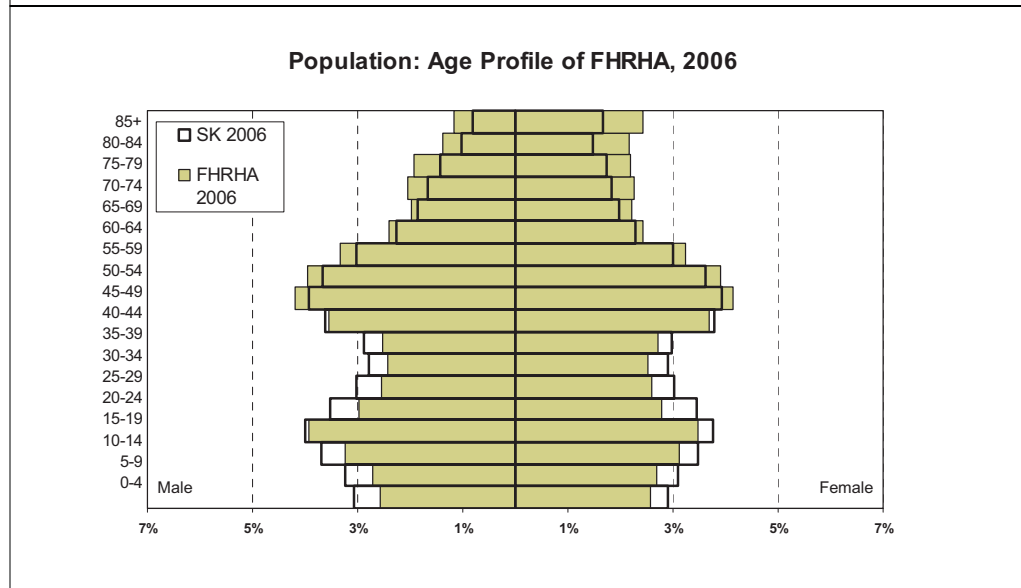
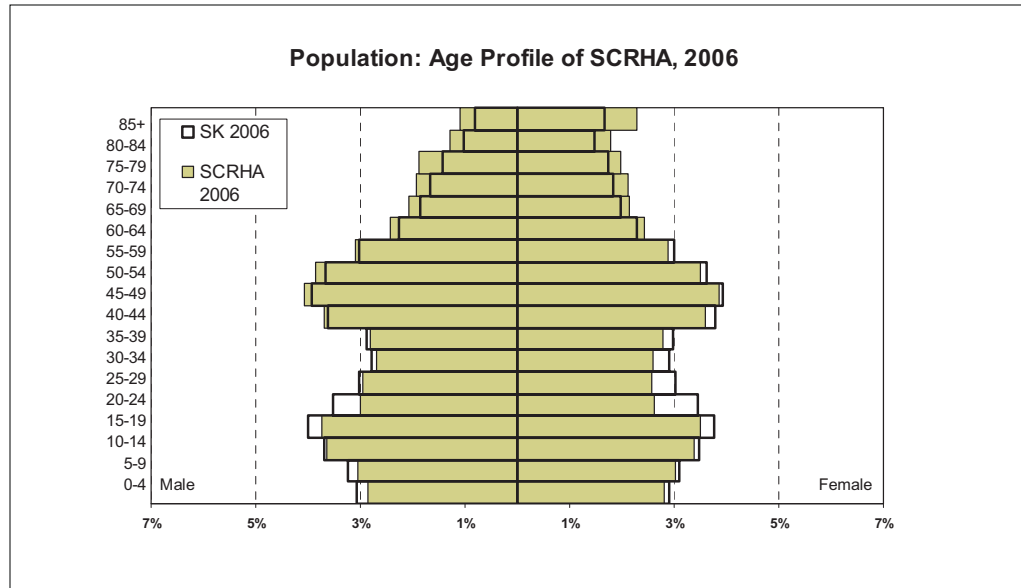
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SUMMARY OF FINDINGS:

Both Sun Country RHA (SCRHA) and Five Hills RHA (FHRHA) had older populations than that found for Saskatchewan as a whole.

For both SCRHA and FHRHA and as for Saskatchewan as a whole, a bulge was seen in the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge was found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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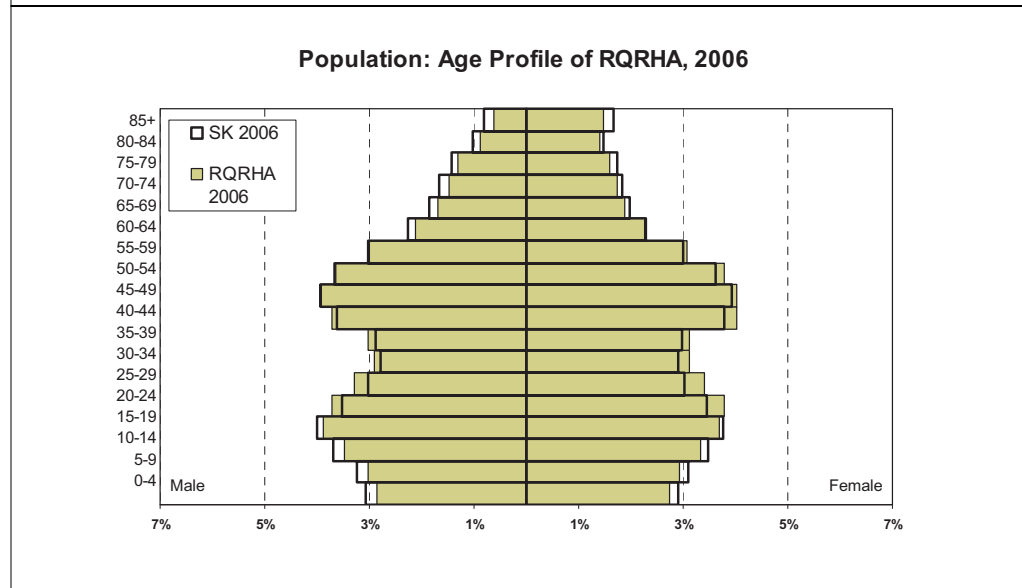
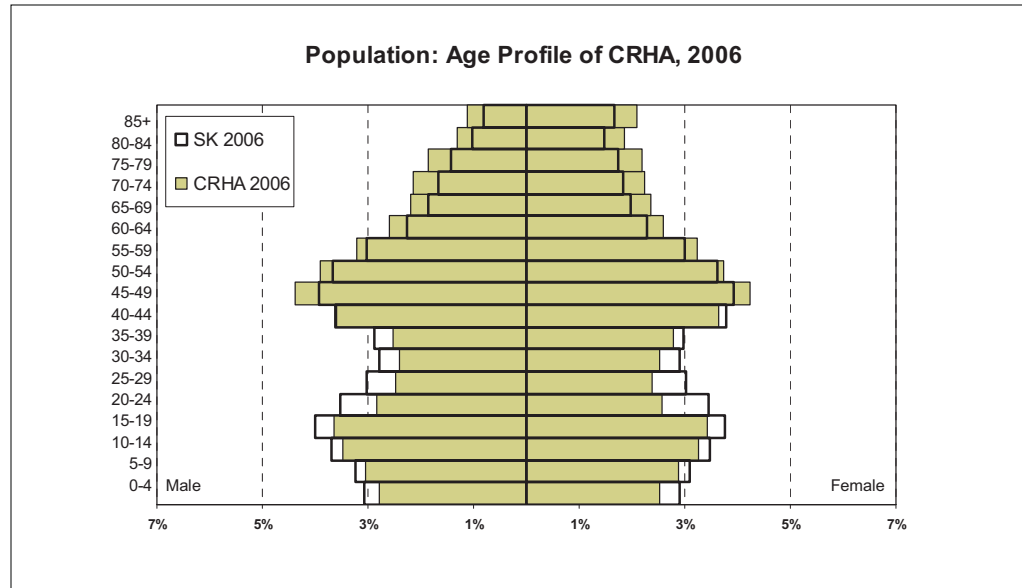
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2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Cypress RHA (CYRHA) had an older population than that found for Saskatchewan as a whole.

Regina Qu'Appelle RHA (RQRHA) had an increased population from ages 20 to 59 than that found for Saskatchewan as a whole.

For both CYRHA and RQRHA and as with Saskatchewan as a whole, a bulge was seen in the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge was found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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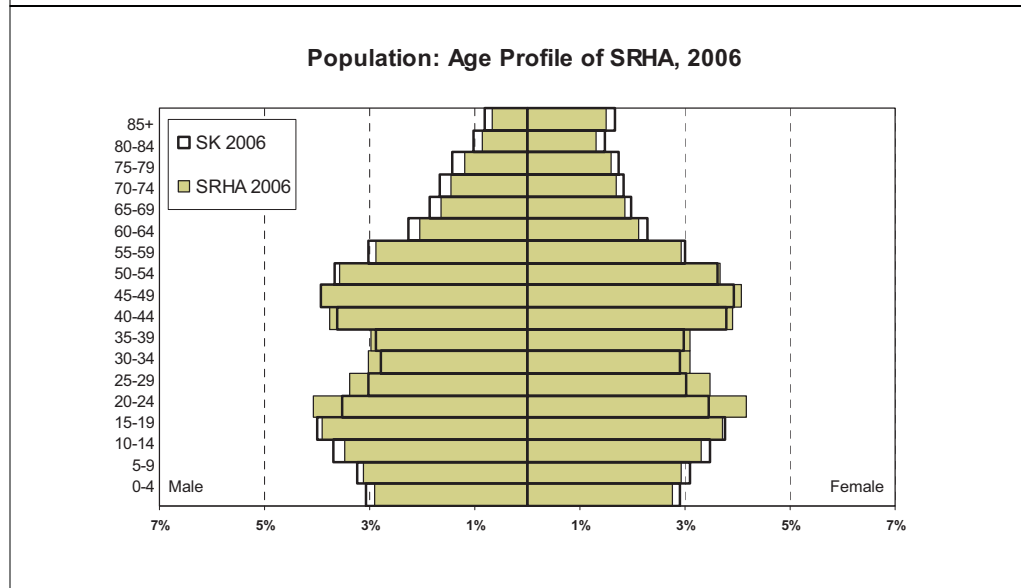
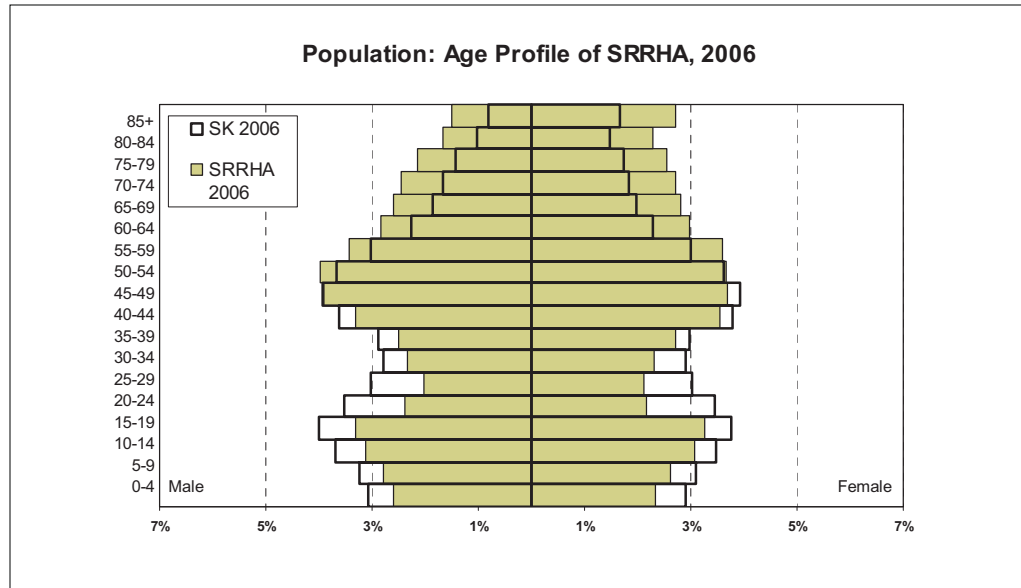
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SUMMARY OF FINDINGS:

Sunrise RHA (SRRHA) had an older population than that found for Saskatchewan as a whole.

Saskatoon RHA (SRHA) had an increased population from ages 20 to 54 than that found for Saskatchewan as a whole.

For both SRRHA and SRHA and as with Saskatchewan as a whole, a bulge was seen in the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge was found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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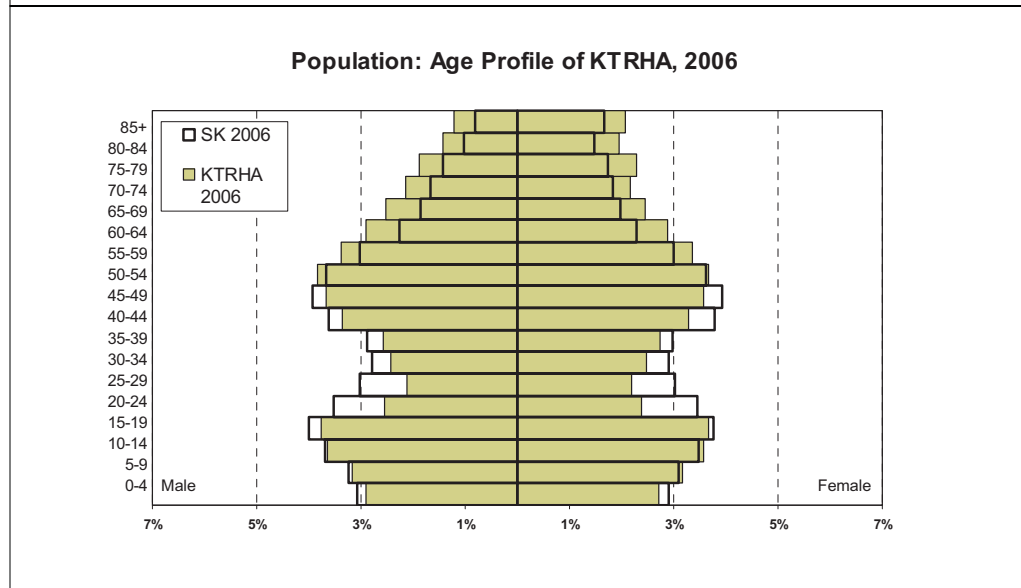
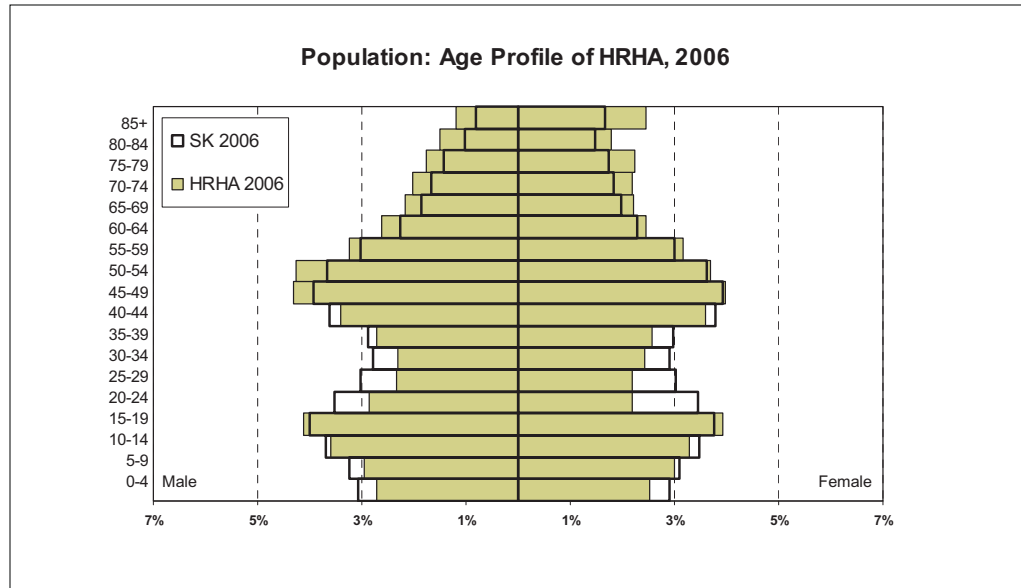
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2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Both Heartland RHA (HRHA) and Kelsey Trail RHA (KTRHA) had older populations than that found for Saskatchewan as a whole.

For both HRHA and KTRHA and as for Saskatchewan as a whole, a bulge was seen in the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge was found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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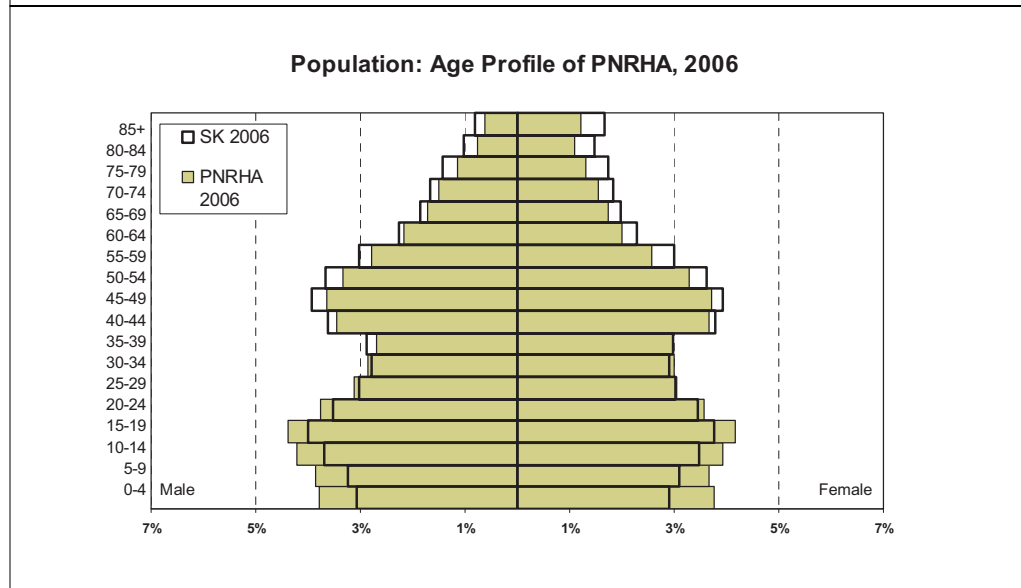
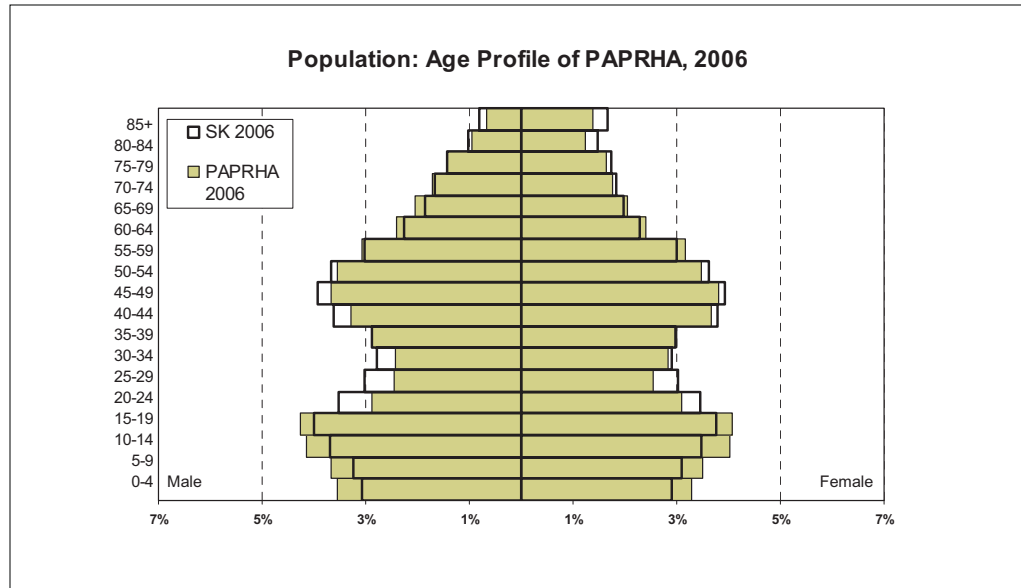
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2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Both Prince Albert Parkland RHA (PAPRHA) and Prairie North RHA (PNRHA) had younger populations than that found for Saskatchewan as a whole.

For both PAPRHA and PNRHA and as for Saskatchewan as a whole, a bulge was seen in the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge was found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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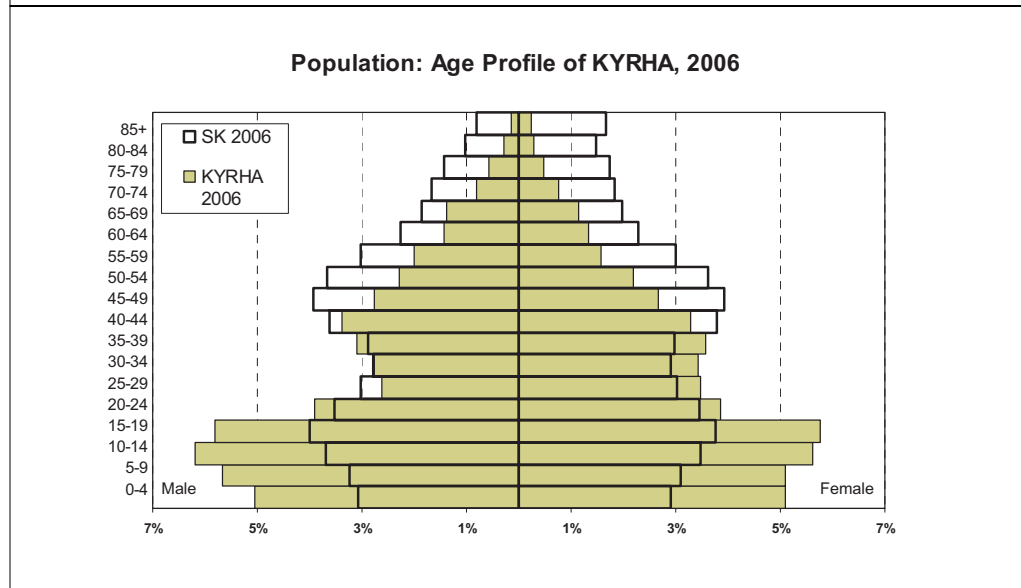
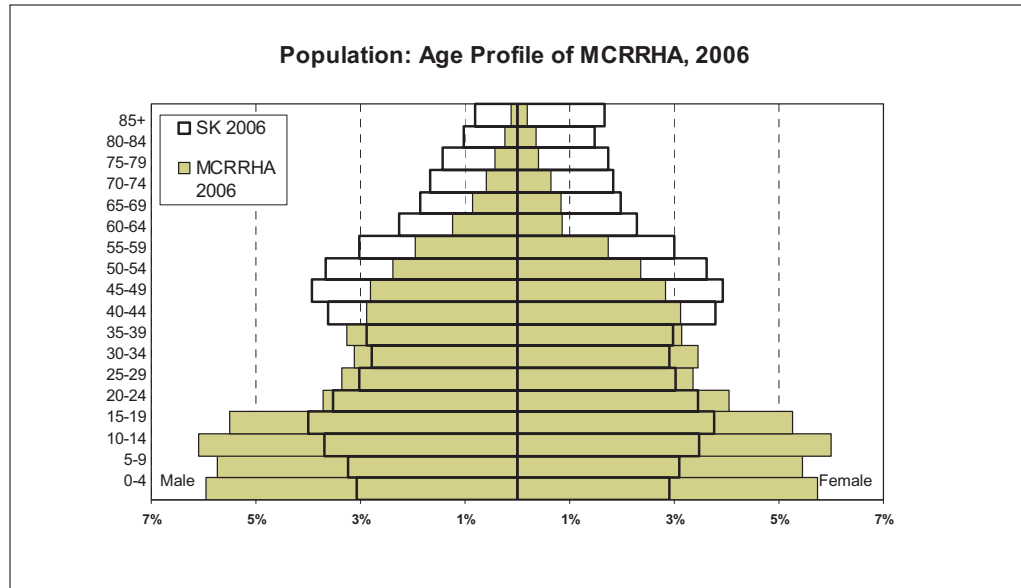
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D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Both Mamawetan Churchill River RHA (MCCRHA) and Keewatin Yatthe (KYRHA) had much younger populations than that found for Saskatchewan as a whole.

For both MCCRHA and KYRHA, a very slight bulge was seen at the 40 to 44 year males and females, and a second bulge was found in the 10 to 19 year males and females. This pattern was quite different from that for Saskatchewan as a whole that has a bulge at the 40 to 59 year males and females, the tail end of the baby boomers, and a second bulge found in the 10 to 19 year males and females representing the echo boom children of the 40 to 59 years population.

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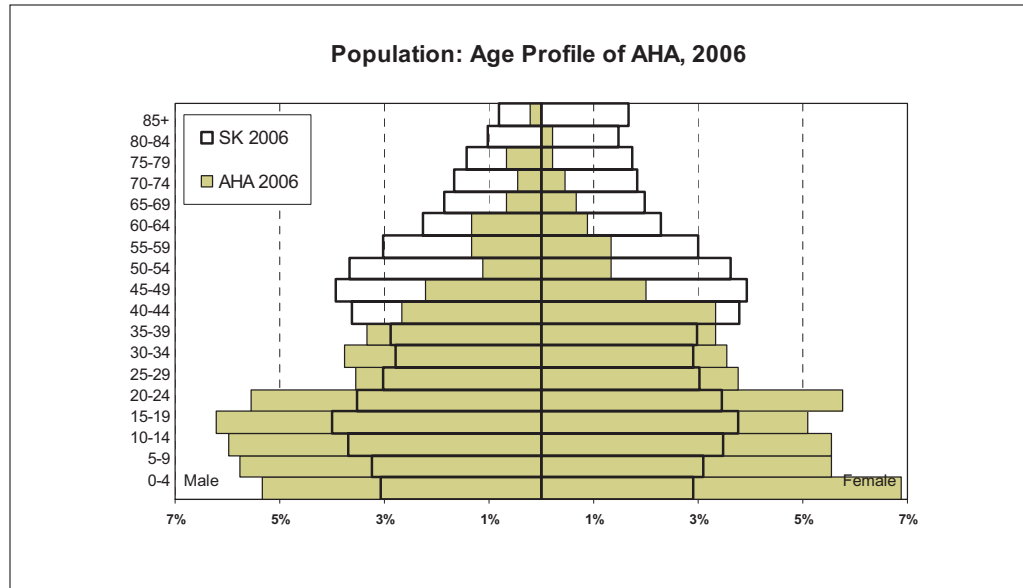
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D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

The Athabasca HA (AHA) had a much younger populations than that found for Saskatchewan as a whole.

For AHA, an almost pyramid shape was seen with a broad base, indicating a high proportion of children, a rapid rate of population growth, and a low proportion of older people. This type of pyramid indicates a population in which there is a high birth rate, a high death rate and a short life expectancy.

A. Definitions:

Child dependency ratio – number of children aged 0-19 years relative to the total number of people aged 20-64 years. Aged dependency ratio – number of people aged 65 years and older relative to the total number of people aged 20-64 years. Total dependency ratio – number of children 0-19 years and people aged 65 years and older relative to the total number of people aged 20-64 years.

B. Significance/Use:

Useful to identify economically stressed sub-populations to determine required services in planning preventive and promotional interventions.

C. Limitations:

These ratios assumes that all persons 65 years and older are economically dependent upon the population aged 20-64 years and also assumes that all persons aged 20-64 years are not economically dependent. The aged and total dependency ratios may increase as the proportion of the population aged 65 years and older increases.

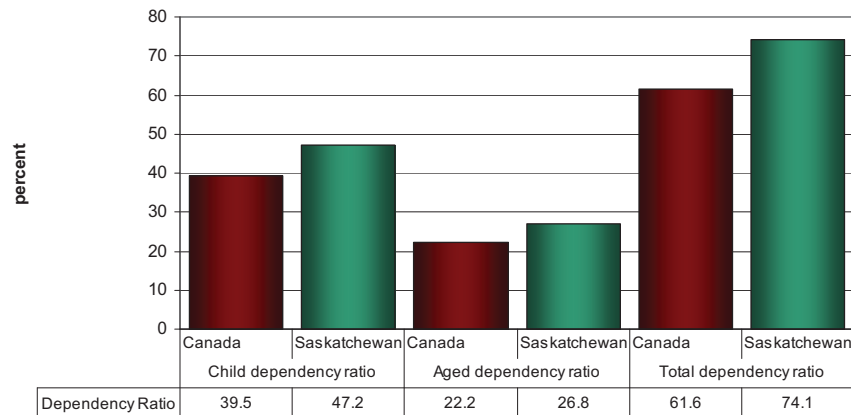
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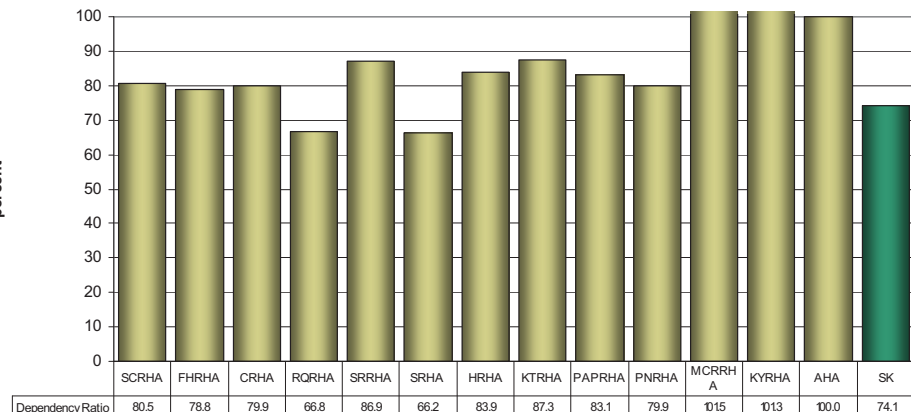
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Dependency ratios for Saskatchewan and Canada, 2006



Population: Total dependency ratio, RHA, 2006



SUMMARY OF FINDINGS:

Saskatchewan’s three dependency ratios, child dependency, aged dependency and total dependency are higher than that found for Canada and were among the highest across the provinces and territories.

The total dependency ratio varied considerably across the RHAs from a low of 66.2 in the Saskatoon RHA (SRHA) to a high of 100 in the north.

The lowest total dependency ratios were found in the urban RHAs of Saskatoon RHA (SRHA) and Regina Qu’Appelle RHA (RQRHA), 66.2 and 66.8, respectively.

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C. Limitations:

These ratios assumes that all persons 65 years and older are economically dependent upon the population aged 20-64 years and also assumes that all persons aged 20-64 years are not economically dependent. The aged and total dependency ratios may increase as the proportion of the population aged 65 years and older increases.

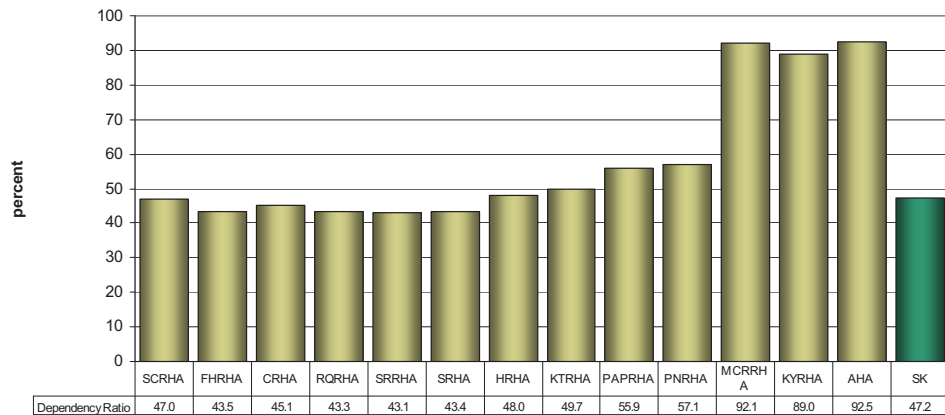
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

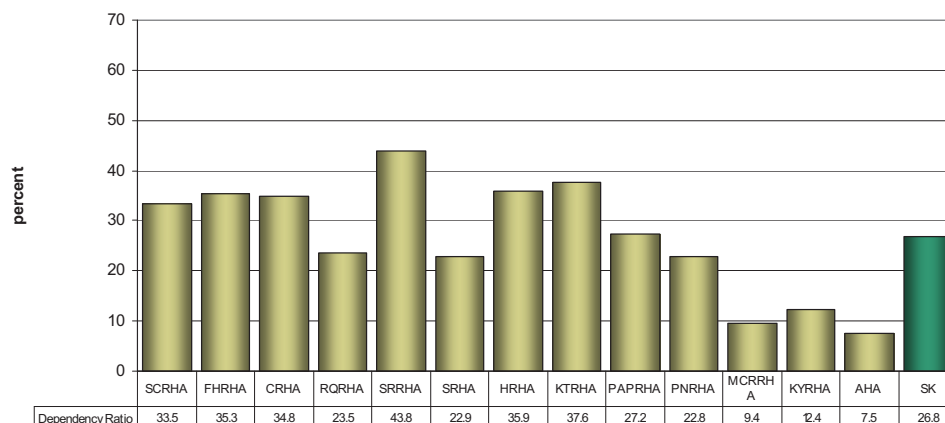
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Child dependency ratio, RHAs, 2006



Population: Aged dependency ratio, RHAs, 2006



SUMMARY OF FINDINGS:

The child dependency ratio varied considerably across the RHAs from a low of 43.1 in the Sunrise RHA (SRRHA) to a high of 92.1 in the Mamawetan Churchill RHA (MCCRHA).

The highest child dependency ratios were found in the north, MCCRHA, Keewatin Yatthé RHA (KYRHA) and Athabasca HA (AHA) at 92.1, 89.0 and 92.5, respectively.

The aged dependency ratio varied considerably across the RHAs from a low of 7.5 in the AHA to a high of 43.8 in the SRRHA.

The lowest aged dependency ratios were found in the north, MCCRHA, KYRHA and AHA at 9.4, 12.4 and 7.5, respectively.

A. Definitions:

The percent of population who identify with at least one Aboriginal group, First Nations, Métis or Inuit.

B. Significance/Use:

A population's composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

Is a self-reported question

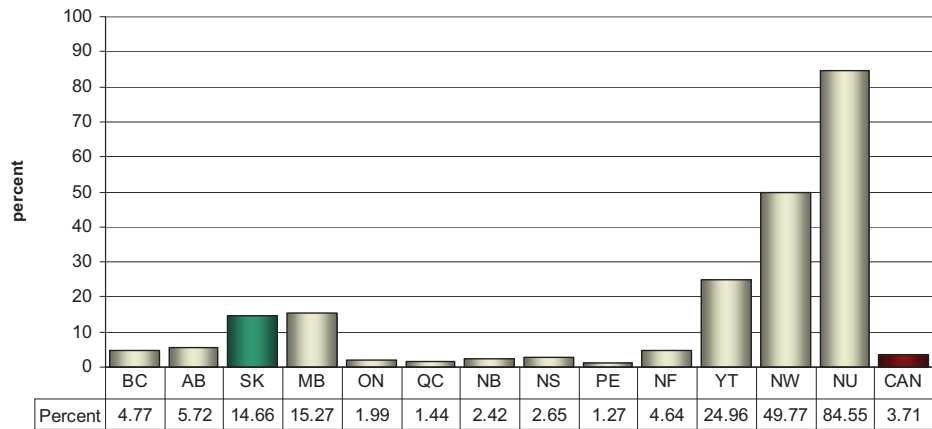
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

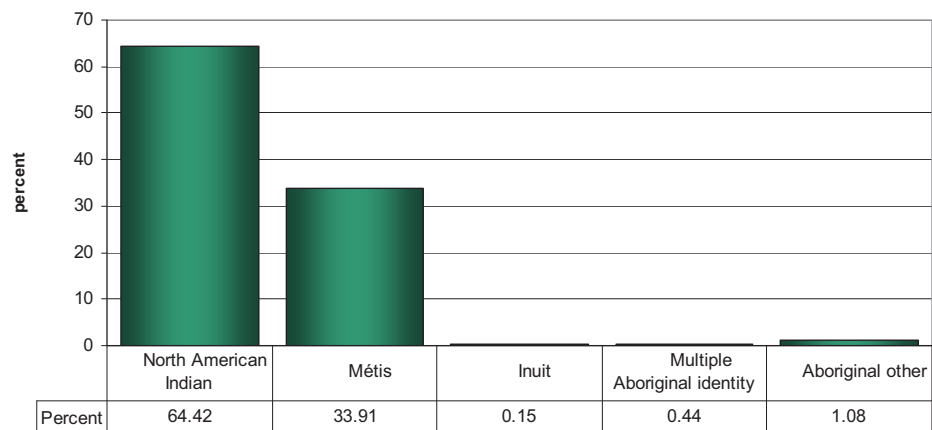
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Percent of province/territory population self-identifying as Aboriginal, 2006



Population: Percent of Saskatchewan Aboriginal population by group, 2006



SUMMARY OF FINDINGS:

Saskatchewan had the fifth highest Aboriginal self-identifying population of the Canadian provinces and of the three prairie provinces, Saskatchewan had the middle highest Aboriginal self-identifying populations. Approximately 15 percent of Saskatchewan residents self-identified as Aboriginal

The majority of the self-identifying Aboriginal Saskatchewan population identified as North American Indian, followed by Métis, then Aboriginal other, multiple Aboriginal identity and Inuit.

A. Definitions:

The percent of population who identify with at least one Aboriginal group, First Nations, Métis or Inuit.

B. Significance/Use:

A population's composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

Is a self-reported question

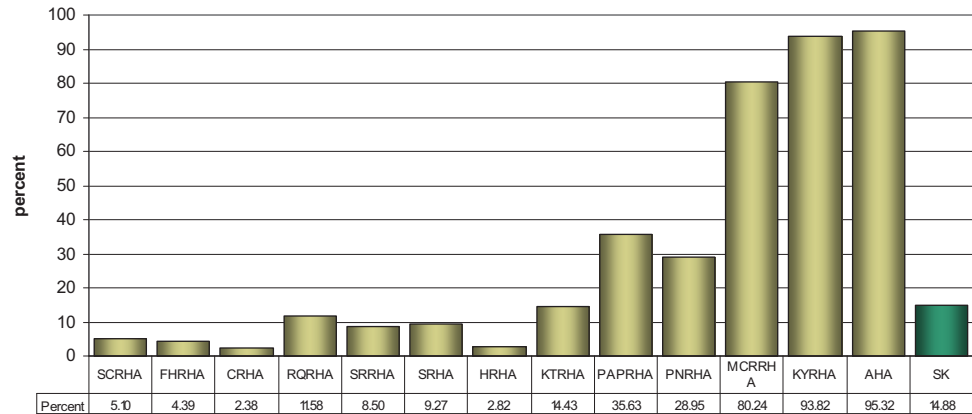
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

D. Source:

2006 Canadian Census, Statistics Canada.

Population: Percent of population self-identifying as Aboriginal, RHAs, 2006



SUMMARY OF FINDINGS:

Of the 13 health regions, the three northern regions, Mamawetan Churchill RHA (MCRRHA), Keewatin Yatthé RHA (KYRHA) and Athabasca HA (AHA) had over 80 percent of their populations self-identifying as Aboriginal, 80.2, 93.8 and 95.3 percent, respectively.

A. Definitions:

The percent of landed immigrants relative to the total non-institutional population.

B. Significance/Use:

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

Studies have shown that immigrants, particularly non-European immigrants, generally have a longer life expectancy and lower risk of certain chronic conditions than the native-born population.

C. Limitations:

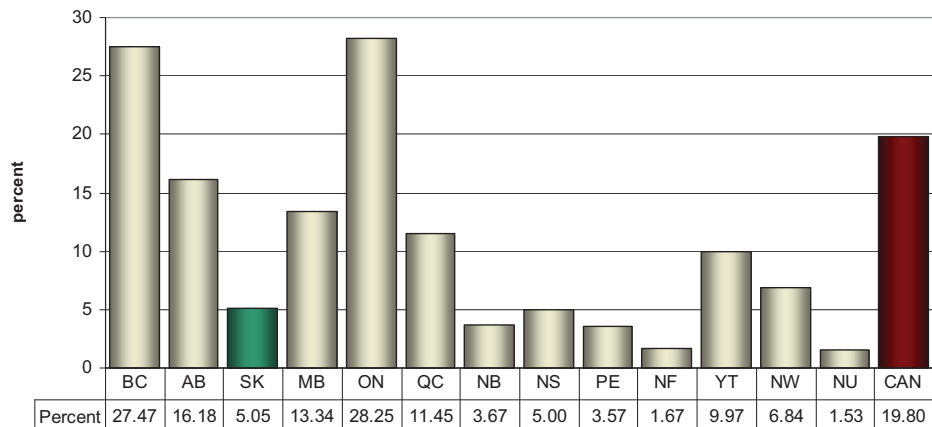
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

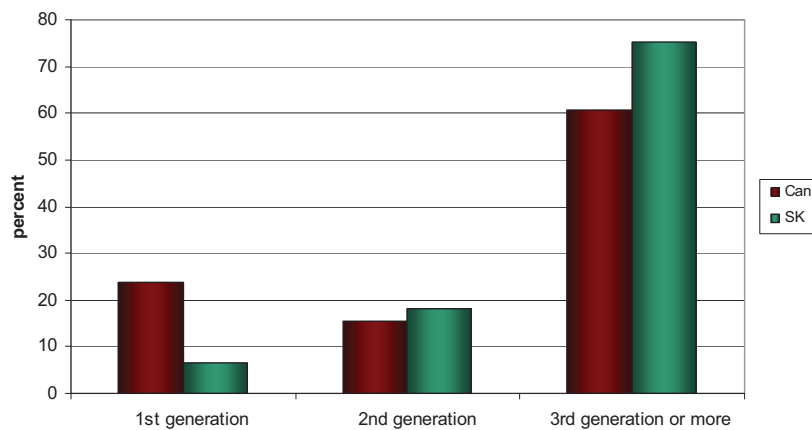
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Percent of Immigrant population, province/territory, 2006



Population: Percent of immigrant population by generation status, Canada and Saskatchewan, 2006



SUMMARY OF FINDINGS:

Saskatchewan had the eighth highest percentage of immigrant population among the provinces and territories for Canada.

Of the three western prairie provinces, Saskatchewan had the lowest population percentage for immigrants. Alberta had the highest immigrant population percent followed by Manitoba.

When the immigrant population was examined by generation status, it was apparent that the vast majority of the immigrant population were third generation of more. Unlike the overall Canadian immigrant population, a very small proportion of the immigrant population identified as being first generation.

A. Definitions:

The percent of landed immigrants relative to the total non-institutional population.

B. Significance/Use:

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

Studies have shown that immigrants, particularly non-European immigrants, generally have a longer life expectancy and lower risk of certain chronic conditions than the native-born population.

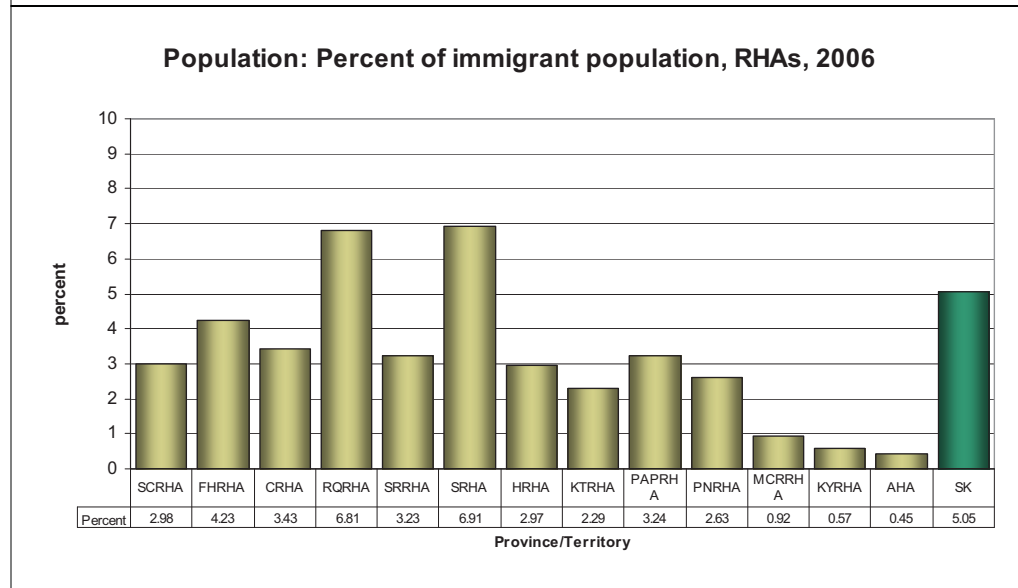
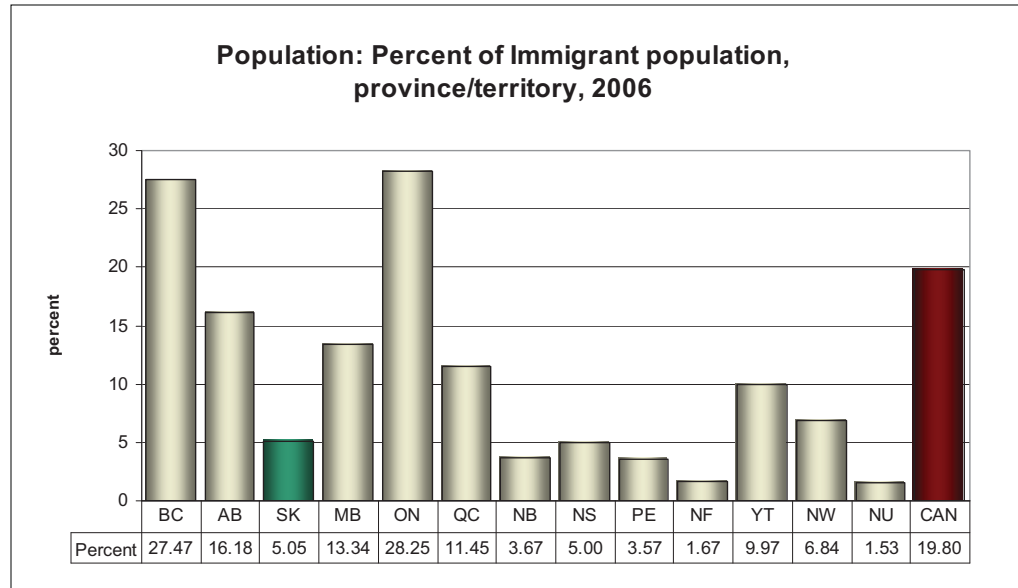
C. Limitations:

Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Just under 75 percent of Saskatchewan’s immigrant population was found in the Regina Qu’Appelle RHA (RQRHA) (32.9%) and the Saskatoon RHA (SRHA) (39.7%).

The proportion of immigrant population within the health authorities varied from a high of 6.9 and 6.8 in SRHA and RQRHA, respectively to a low of 0.57 and 0.45 percent in Keewatin Yatthé RHA (KYRHA) and Athabasca HA (AHA), respectively. The remaining RHAs had proportions of immigrant populations that are less than five percent.

A. Definitions:

The percentage of a population that reports belonging to a given ethnic or cultural group.

B. Significance/Use:

A population's characteristics impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

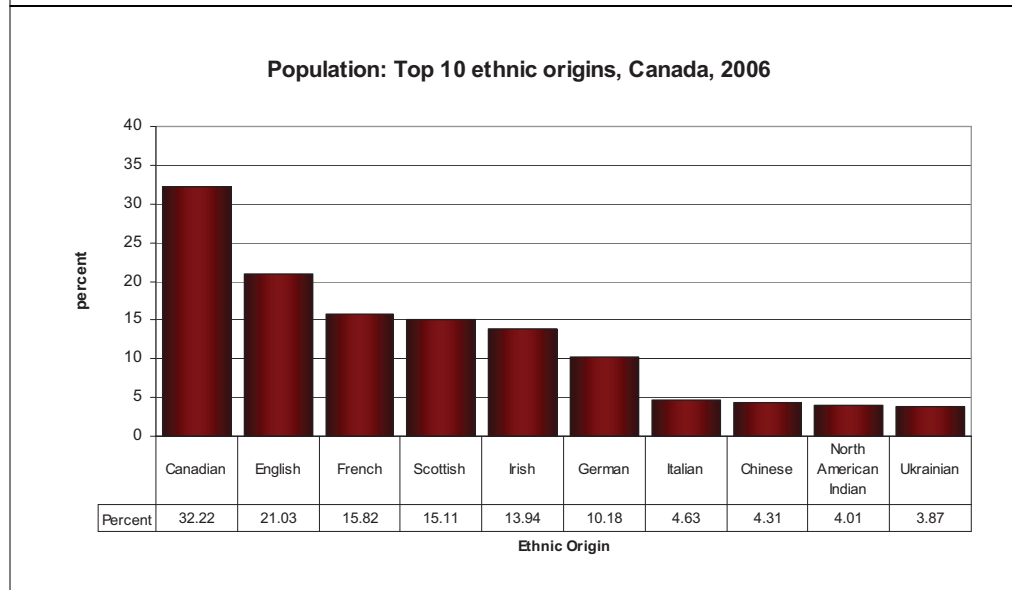
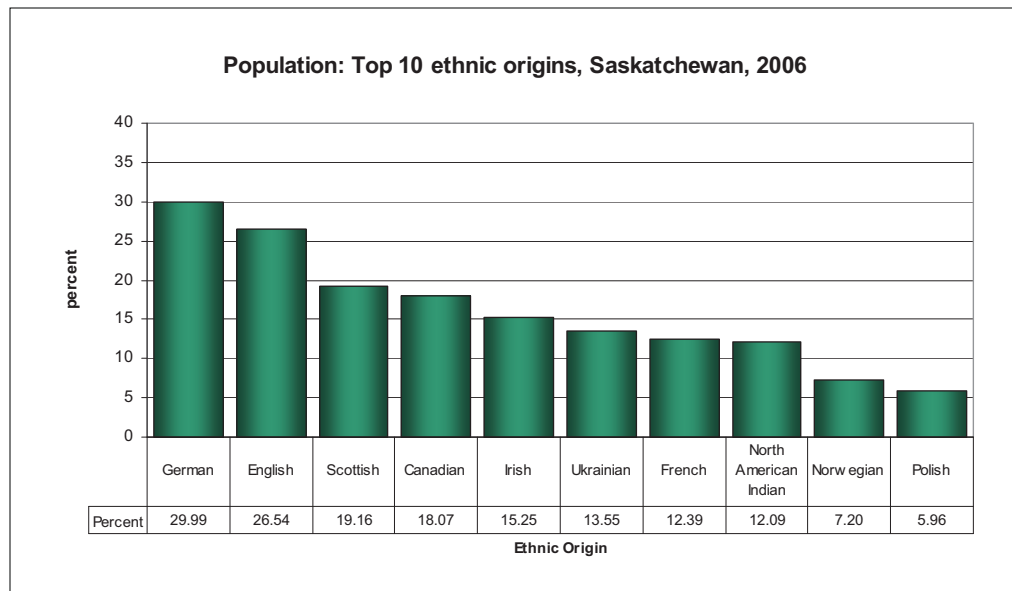
C. Limitations:

Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

The top ten reported ethnic origins for Saskatchewan residents in order of responses were German, English, Scottish, Canadian, Irish, Ukraine, French and North American Indian, Norwegian and Polish.

The top ten reported ethnic origins for Canadian residents in order of responses were Canadian, English, French, Scottish, Irish, German, Italian, Chinese, North American Indian and Ukrainian.

A. Definitions:

The percentage of a population that reports their knowledge of English only.

B. Significance/Use:

A population's characteristics impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

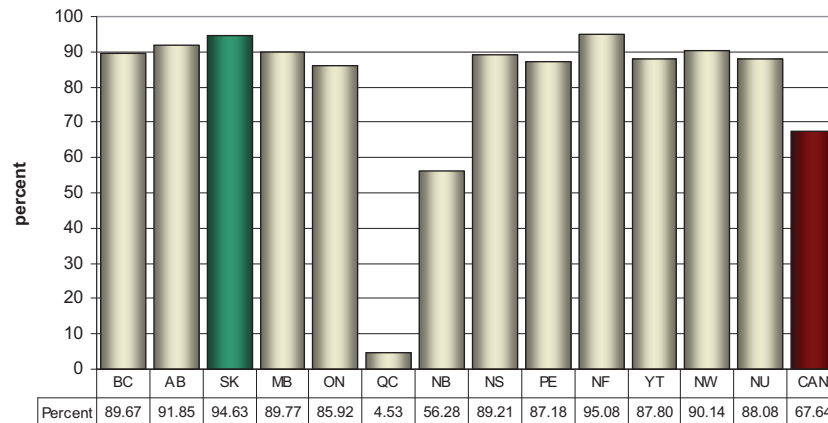
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

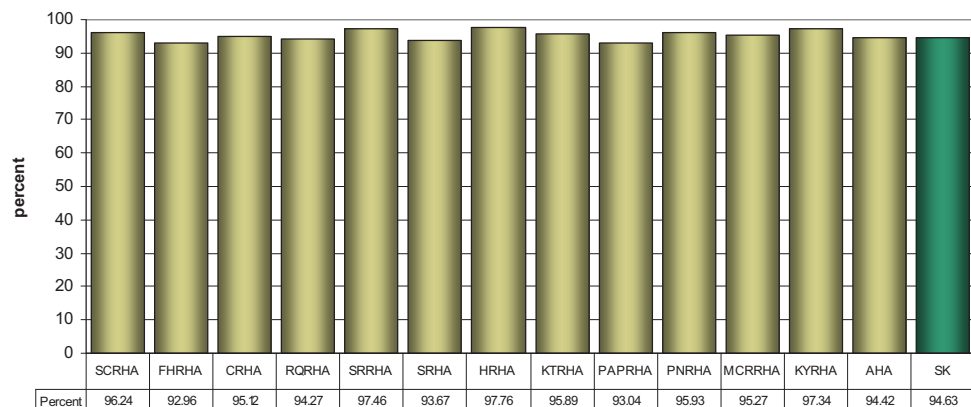
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Knowledge of official languages - English only, province/territory, 2006



Population: Knowledge of official languages - English only, RHAs, 2006



SUMMARY OF FINDINGS:

Saskatchewan had one of the highest percentages of population reporting to know English only. Only Newfoundland and Labrador reported a higher percentage than Saskatchewan.

All three western prairie provinces reported high percentages of their populations reporting to know English only. After Saskatchewan, Alberta reported the next highest percentage followed by Manitoba.

The percentage of the population that reported knowledge of English only is fairly similar across the health authorities varying from a high of 97.8 percent in Heartland RHA (HRHA) to a low of 93 percent in Five Hills RHA (FHRHA).

A. Definitions:

The percentage of a population that reports their mother tongue and language spoken at home.

B. Significance/Use:

A population's characteristics impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

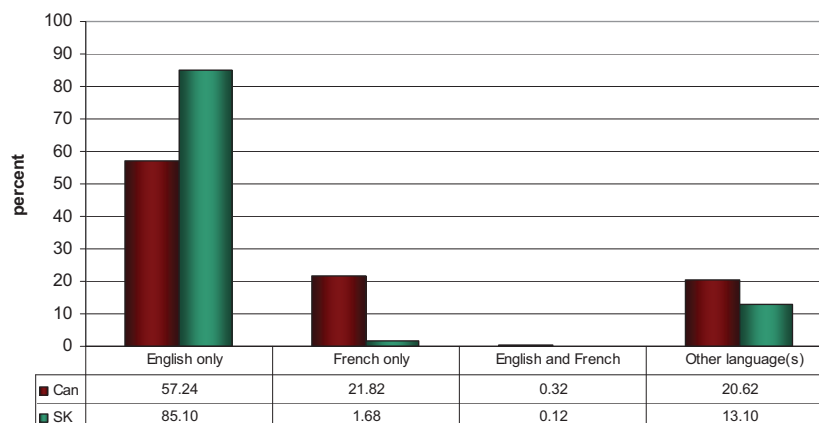
Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

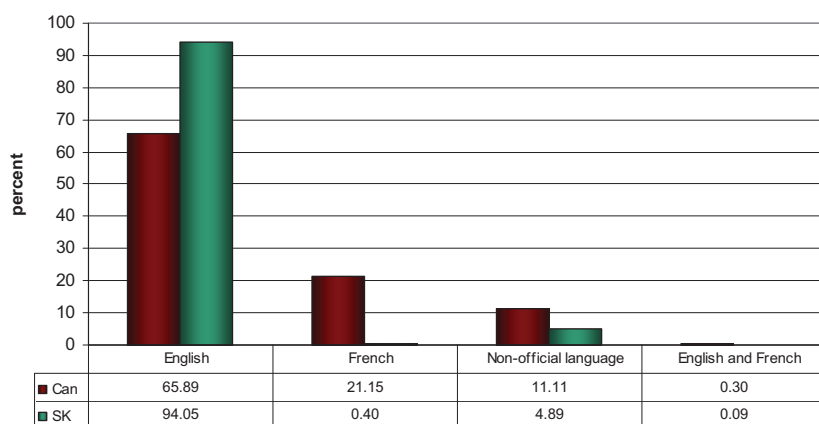
D. Source:

2006 Canadian Census, Statistics Canada.

Population: Mother tongue, Canada and Saskatchewan, 2006



Population: Language spoken at home, Canada and Saskatchewan, 2006



SUMMARY OF FINDINGS:

The vast majority of Saskatchewan's population reported that their mother tongue was English only, followed by the category "language other than English or French". This differed from Canada as a whole in which a lower percentage reported that their mother tongue is English only, followed by almost equivalent percentages of "French only" and the category "language other than English or French".

The vast majority of Saskatchewan's population reported that their language spoken at home is English, followed by the category "Non-official language". This differed from Canada as a whole in which a lower percentage reported that their language spoken at home was English, followed by French only.

A. Definitions:

The percentage of a population that reports their mother tongue to be English only.

B. Significance/Use:

A population's characteristics impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

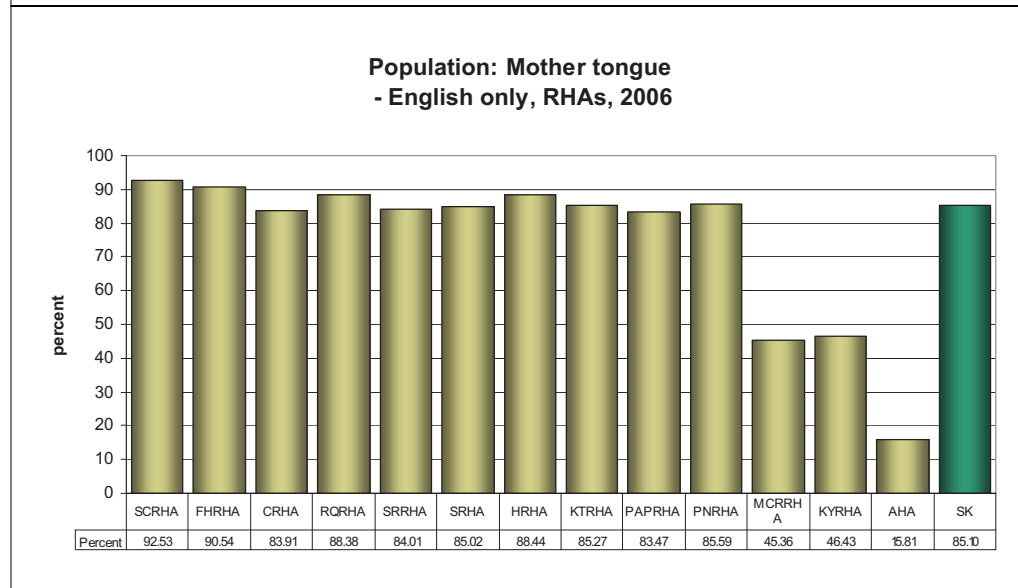
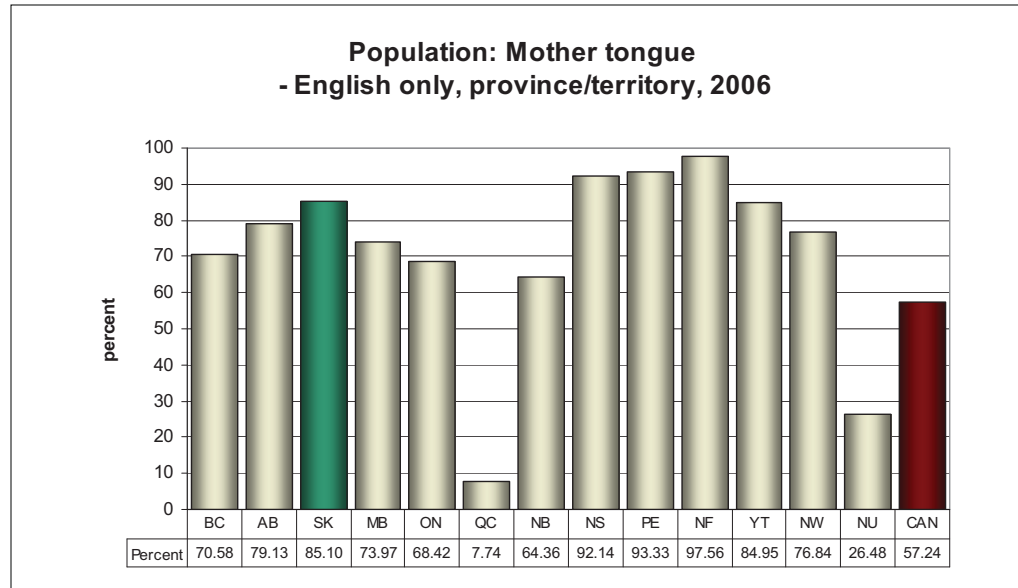
C. Limitations:

Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years).

Does not include homeless people, or people living on Reserves that have chosen not to participate in the Census.

D. Source:

2006 Canadian Census, Statistics Canada.



SUMMARY OF FINDINGS:

Saskatchewan had the fourth highest percentages of population that reported their mother tongue was English only. All three western prairie provinces reported high percentages of their populations reporting to know English only. After Saskatchewan, Alberta reported the next highest percentage followed by Manitoba.

The percentage of the population that reported knowledge of English only was fairly similar across the non-northern health authorities varying from a high of 93 percent in Five Hills RHA (FHRHA) to a low of 83.5 percent in Prince Albert Parkland RHA (PAPRHA). The population in the three northern health regions reported considerably lower percentages, varying from a high of 46.4 percent in Mamawetan Churchill RHA (MCRRHA) to a low of 15.8 in Athabasca HA (AHA).

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

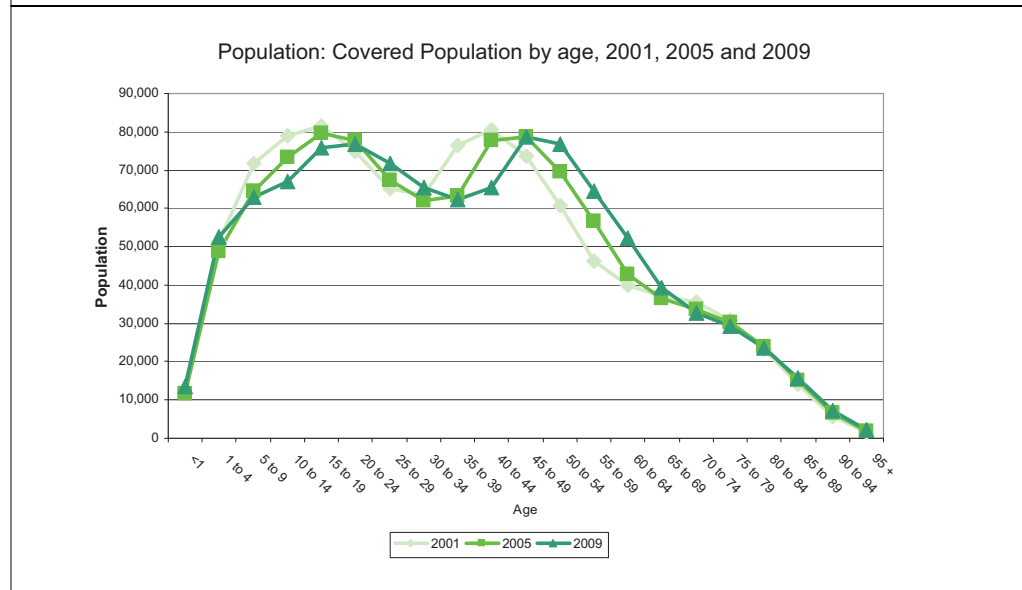
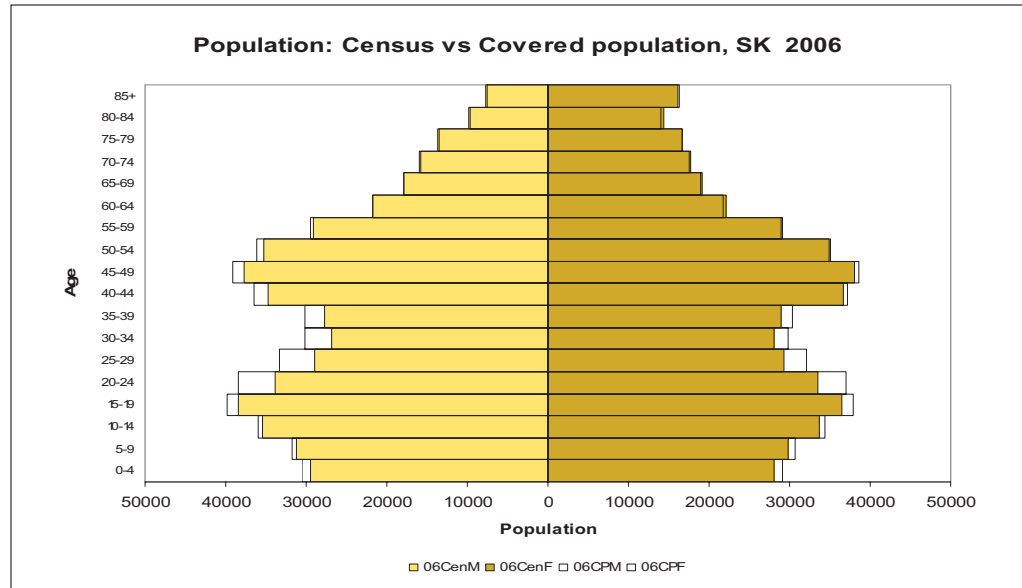
A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline. A population's size and age/sex composition impact the health status of a region and its need for health services. Population data also provide the "denominators" used to calculate rates for most health and social indicators. Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

The Saskatchewan Ministry of Health's Covered Population was higher in total number than found by the 2006 census of Saskatchewan residents, especially among the younger age groups.

Considerable increases were seen in the Covered Population's 20-24 year and 45-49 age categories compared to the 2006 census.

When the 2001, 2005, and 2009 Covered Populations were compared, it was seen that the two bulges in Saskatchewan population, are moving into older age categories showing that the population is aging. The peak of the younger age bulge moved from 15 to 20 years to 20 to 24 years during the nine year span. The older age bulge peak moved from 40 to 44 years to 45 to 49 years in the same time span.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

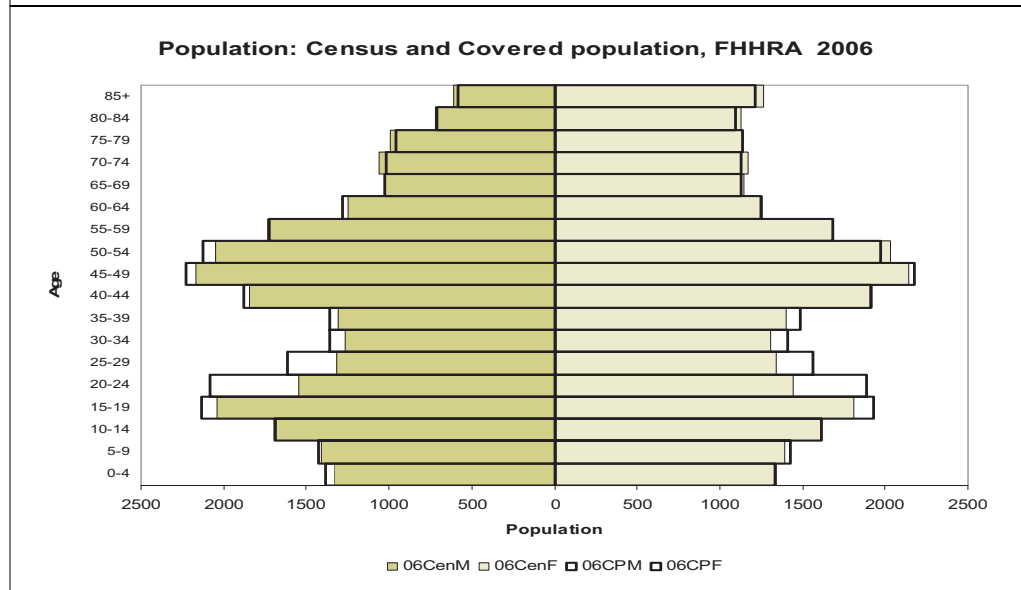
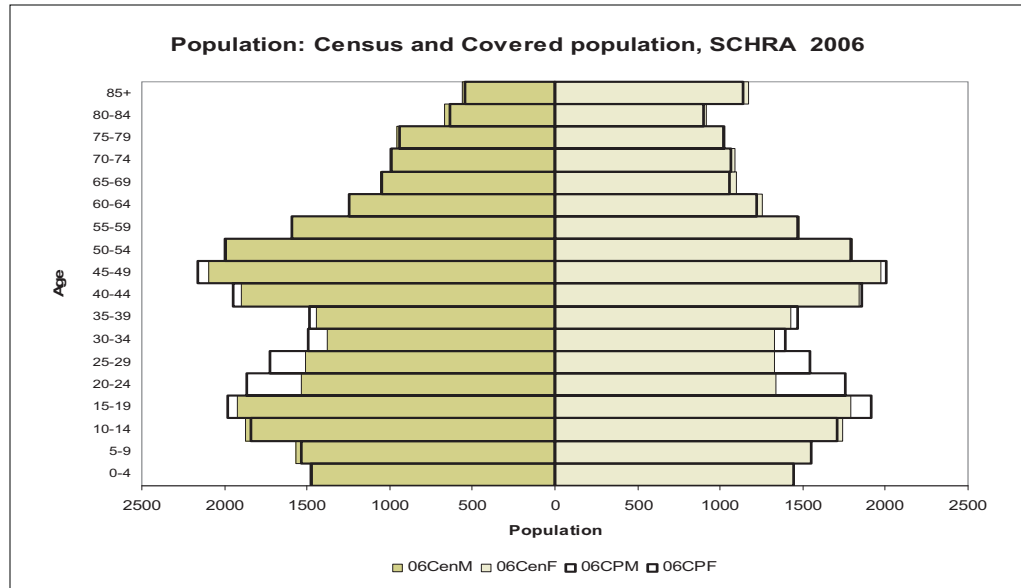
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C. Limitations:

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D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Both Sun Country RHA (SCRHA) and Five Hills RHA (FHRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages, 15-39 years for females than found by the 2006 census of Saskatchewan residents.

SCRHA showed an increase in the 15-49 year ages for males and females.

FHRHA showed the increase in the 15-54 year ages for males and 15-39 year ages for females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

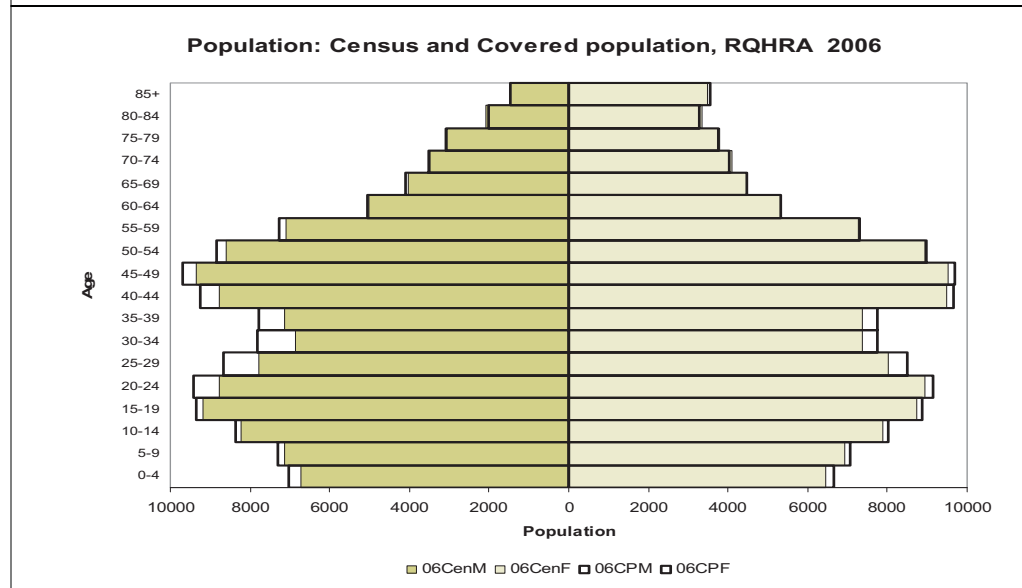
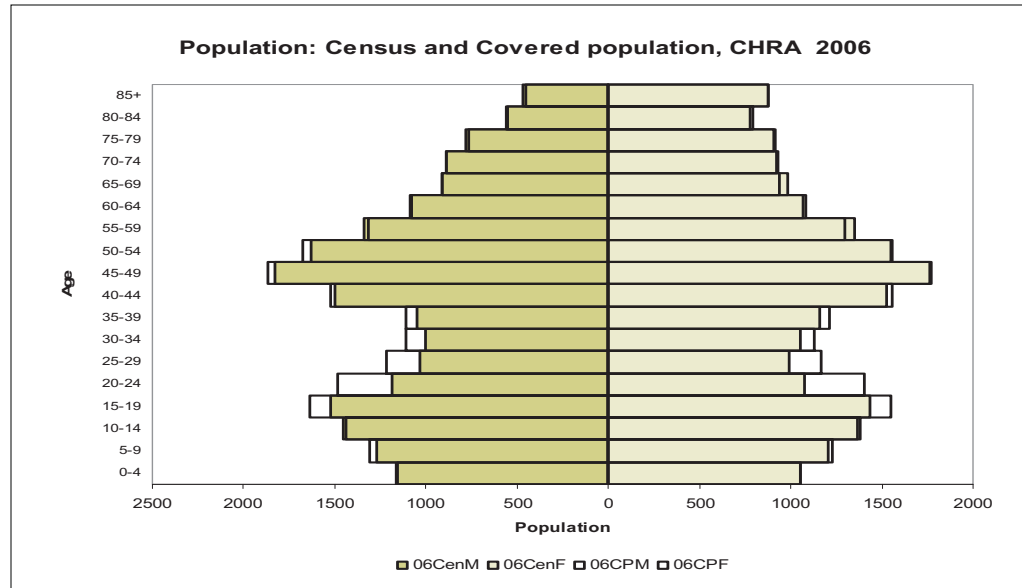
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C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Both Cypress RHA (CRHA) and Regina-Qu'Appelle RHA (RQRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages than that found with the 2006 census.

CRHA showed an increase in the 5-54 year ages for males and the 5-49 year ages in females.

RQRHA showed an increase in the 0-54 year ages for males and the 0-49 year ages in females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

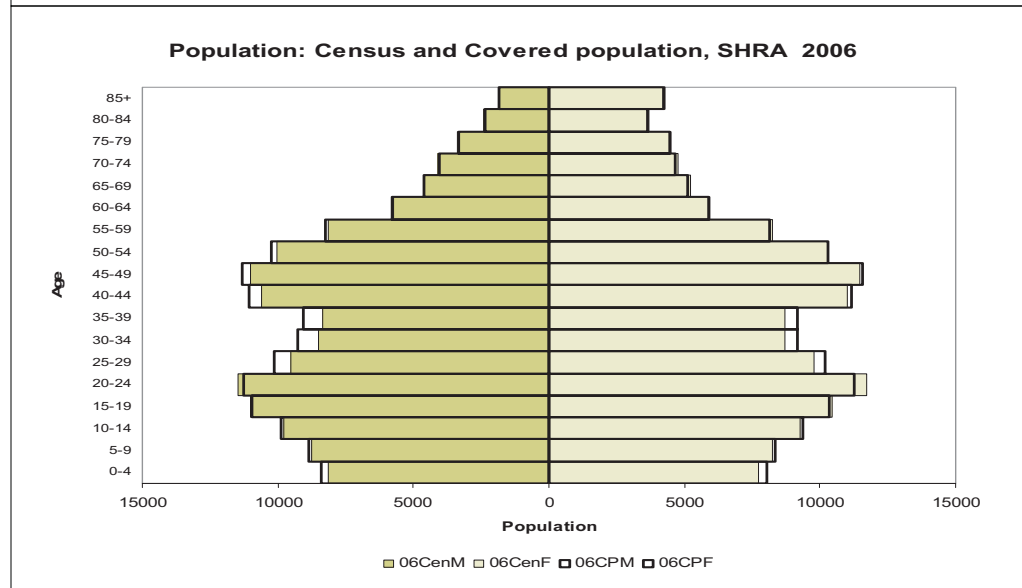
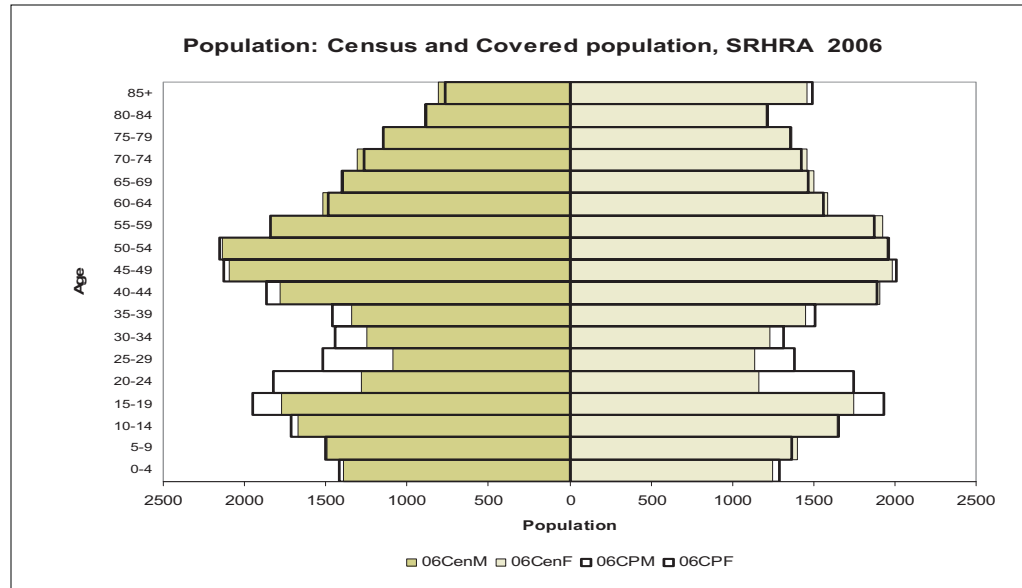
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C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Both Sunrise RHA (SRRHA) and Saskatoon RHA (SRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages than that found with the 2006 census.

SRRHA showed an increase in the 10-54 year ages for males and 15-39 year ages in females.

SRHA showed an increase in the 25-54 year ages for males and 25-39 year ages in females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

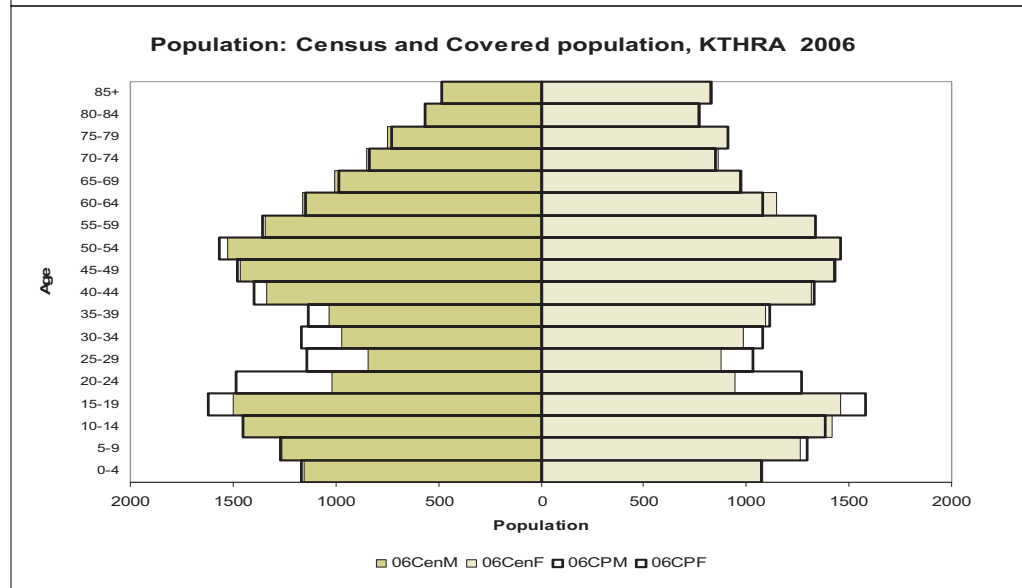
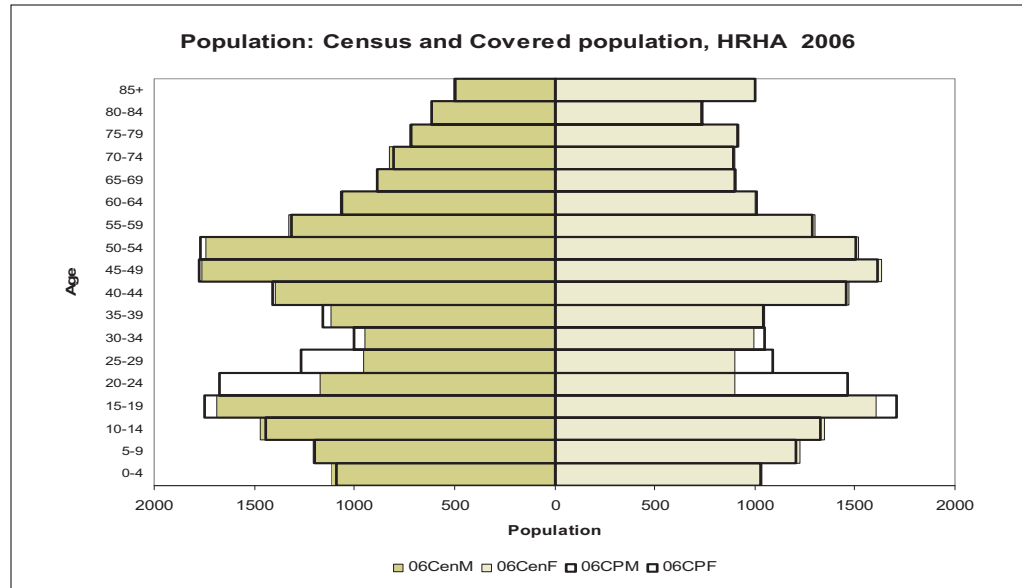
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C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Both Heartland RHA (HRHA) and Kelsey Trail RHA (KTRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages than that found with the 2006 census.

HRHA showed an increase in the 15- 54 year ages for males and 15-34 year ages for females.

KTRHA showed an increase in the 15- 54 year ages for males and 15-39 year ages for females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

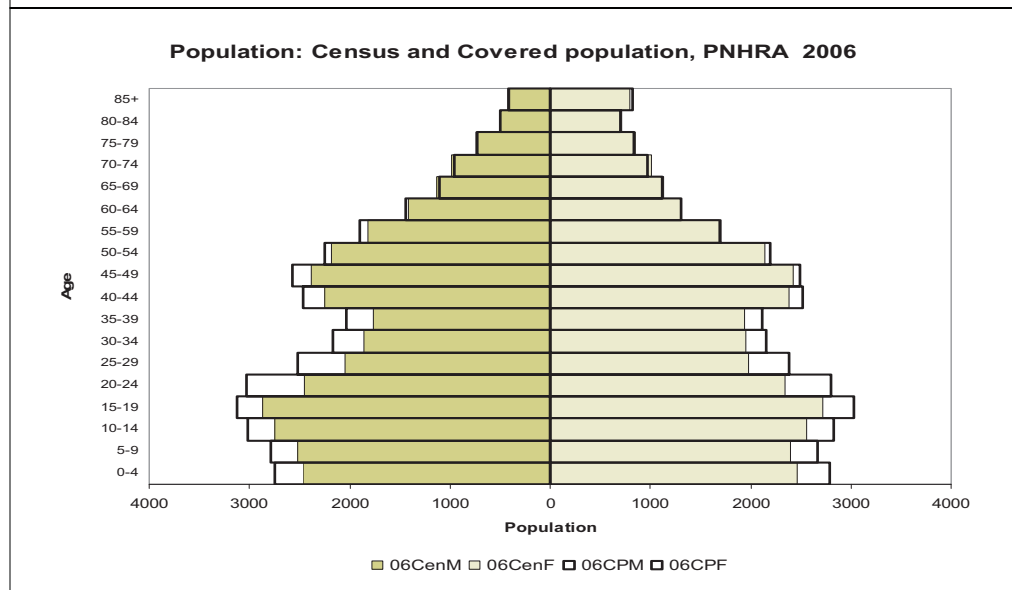
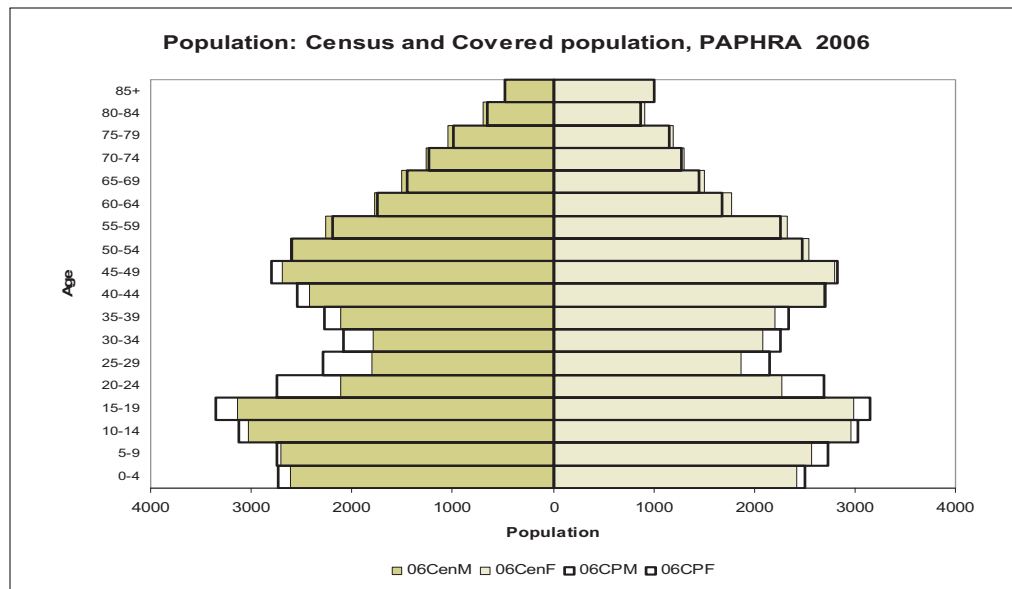
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C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Both Prince Albert Parkland RHA (PAPRHA) and Prairie North RHA (PNRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages than that found with the 2006 census.

PAPRHA showed an increase in the 0-49 year ages for males and 0-39 year ages in females.

PNRHA showed an increase in the 0-59 year ages for males and 0-54 year ages in females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

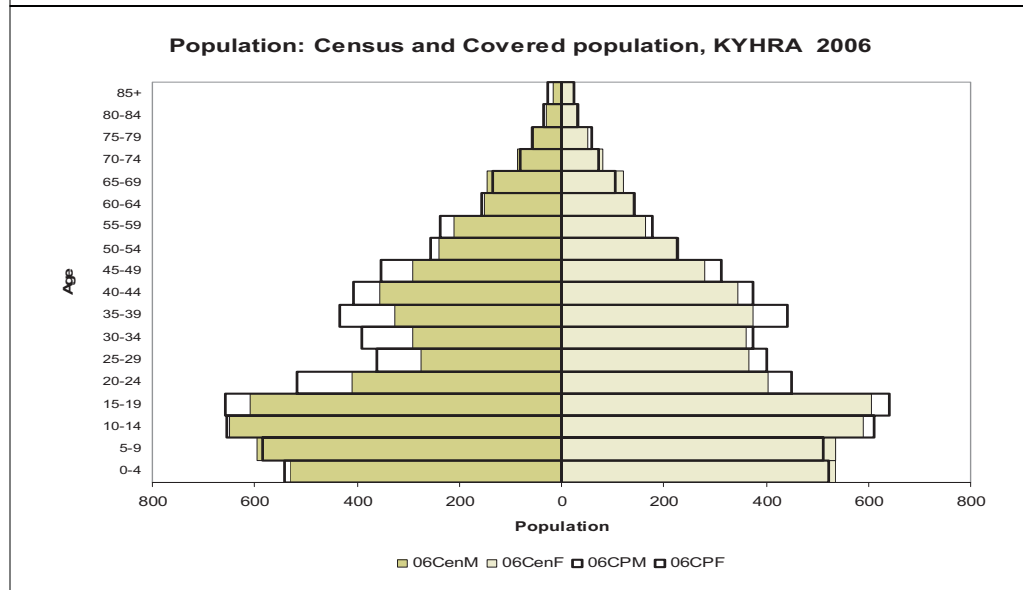
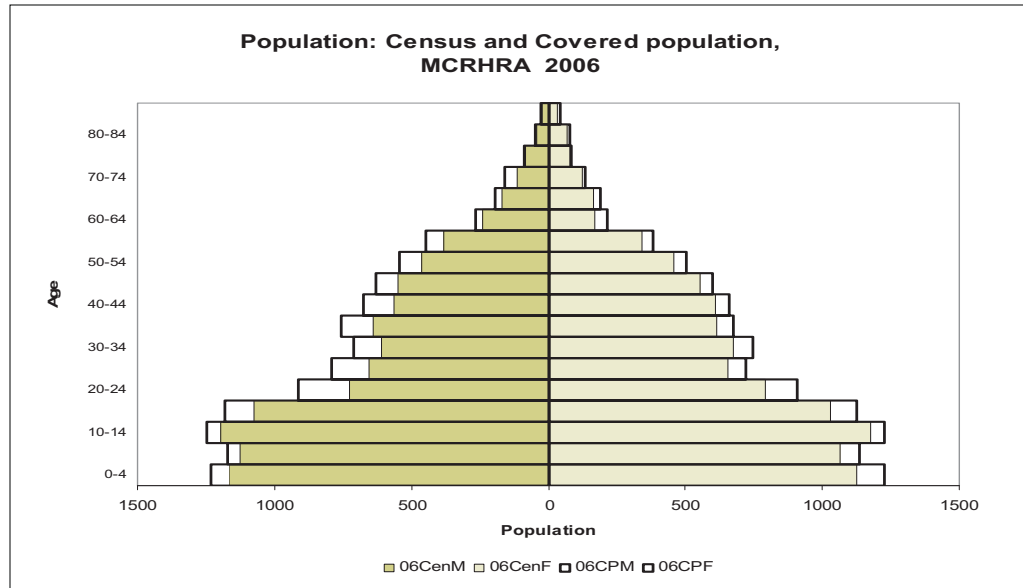
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C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

Compared to the 2006 Census, both Mamawetan Churchill River RHA (MCRHRA) and Keewatin Yatthé (KYRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at almost all age categories for both males and females.

The increases were more pronounced for the MCRHRA population.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

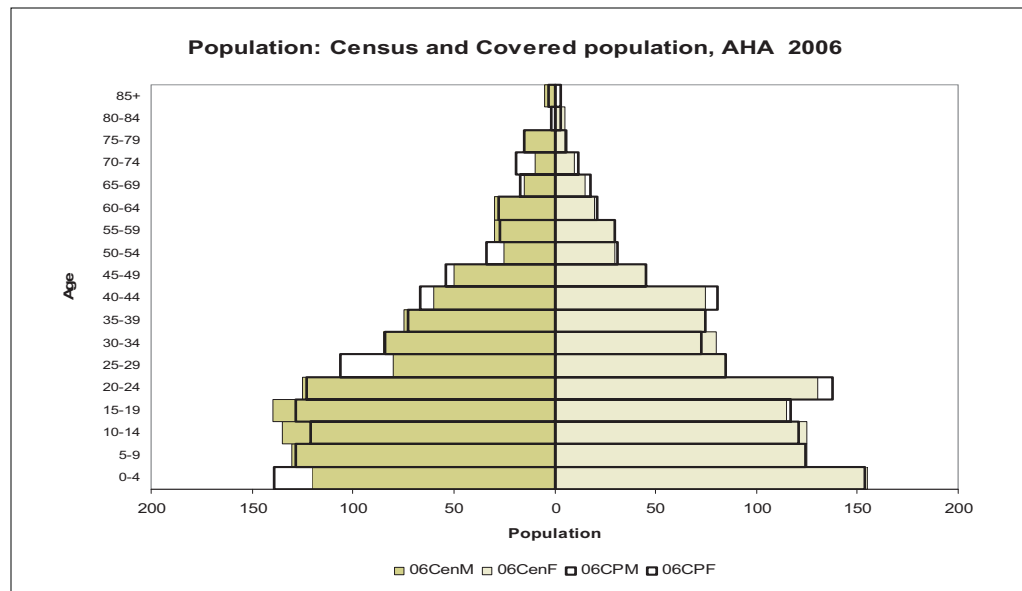
A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline. A population's size and age/sex composition impact the health status of a region and its need for health services. Population data also provide the "denominators" used to calculate rates for most health and social indicators. Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

C. Limitations:

Considered more as a descriptor than an indicator. Census: Certain subgroups are less well counted than others, e.g., young adults (18 to under 35 years). Does not include homeless people, or people living on Reserves that have chosen not to participate. Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

2006 Canadian Census, Statistics Canada. Saskatchewan Ministry of Health 2006 Covered Population.



SUMMARY OF FINDINGS:

The Athabasca HA (AHA) showed no distinct pattern in increases or decreases in the Saskatchewan Ministry of Health's Covered Population numbers than that found with the 2006 census.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

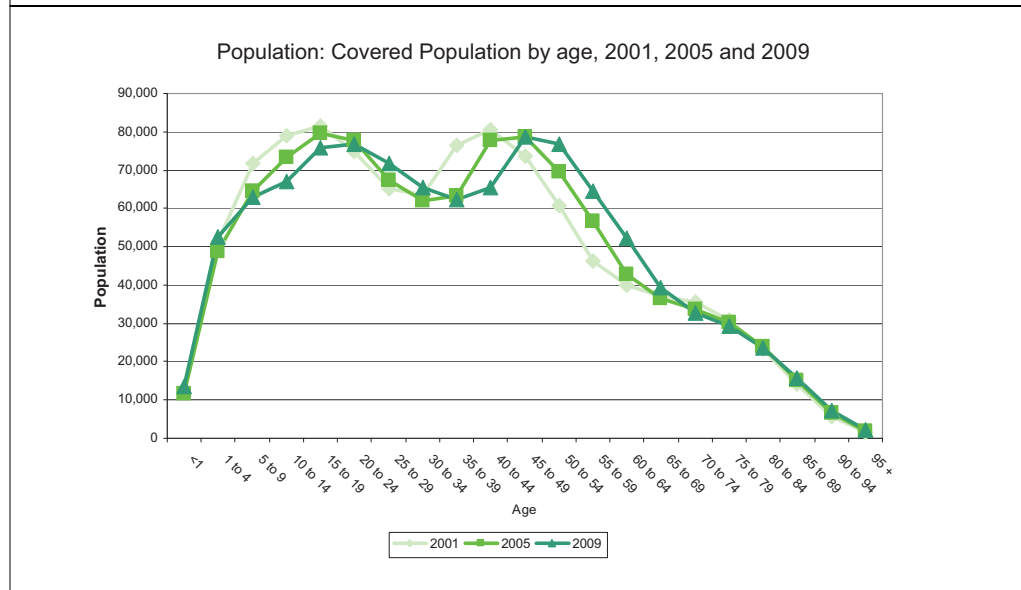
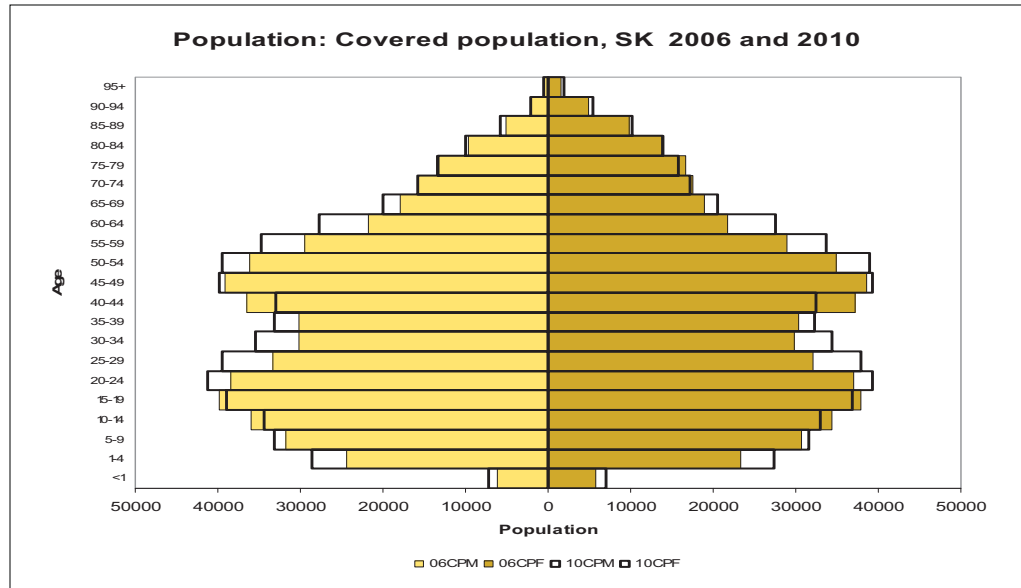
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

The Saskatchewan Ministry of Health's Covered Population in 2009 was higher than found for 2006.

Considerable increases were found in the Covered Population's 20 to 39 year and 45 to 69 age categories compared to the 2006 numbers.

When the 2001, 2005, and 2009 Covered Populations are compared, it was seen that the Saskatchewan population is aging. The peak of the younger age bulge moved from 15 to 20 years to 20 to 24 years during the nine year span. The older age bulge peak moved from 40 to 44 years to 45 to 49 years in the same time span.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

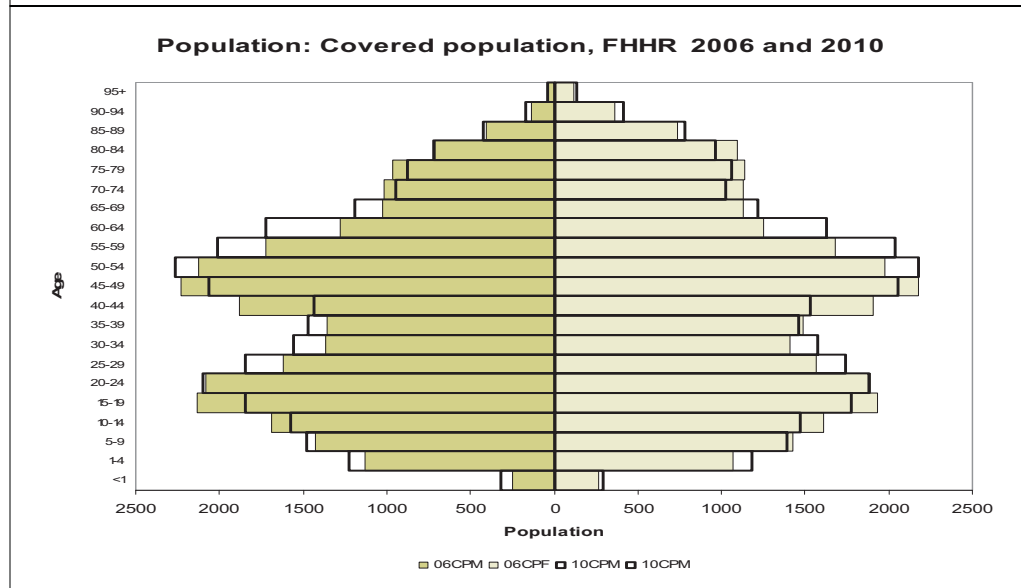
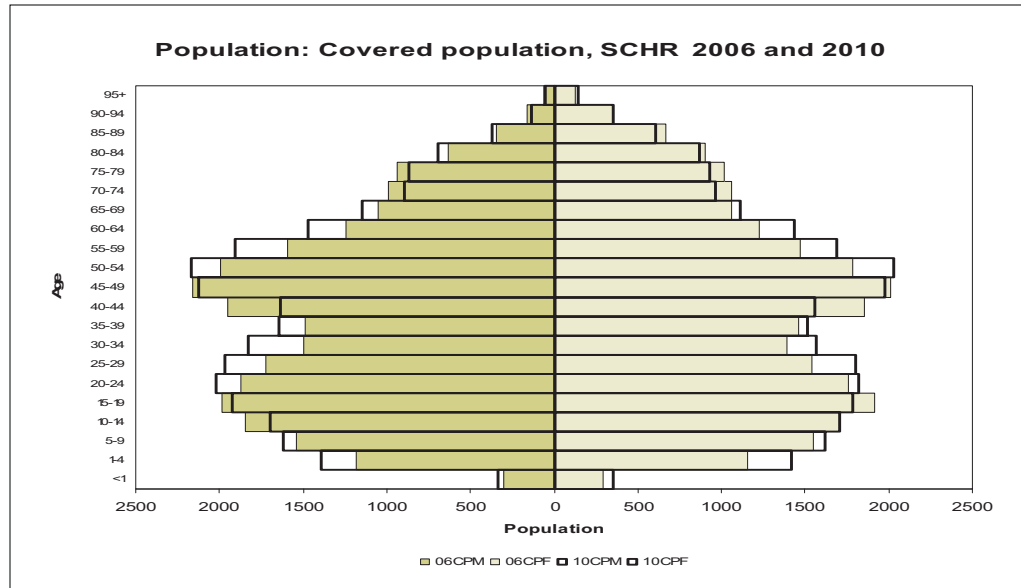
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Both Sun Country RHA (SCRHA) and Five Hills RHA (FHRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages when the 2006 and 2010 numbers were compared.

SCRHA showed increases in the 0-9 years, 20-39 years and 50-69 years age groups for both males and females

FHRHA showed increases in the male 0-9 years, 20-39 years and 50-69 years age groups, as well as, the female 0-5 year, 20-34 years and 50-69 years age groups.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

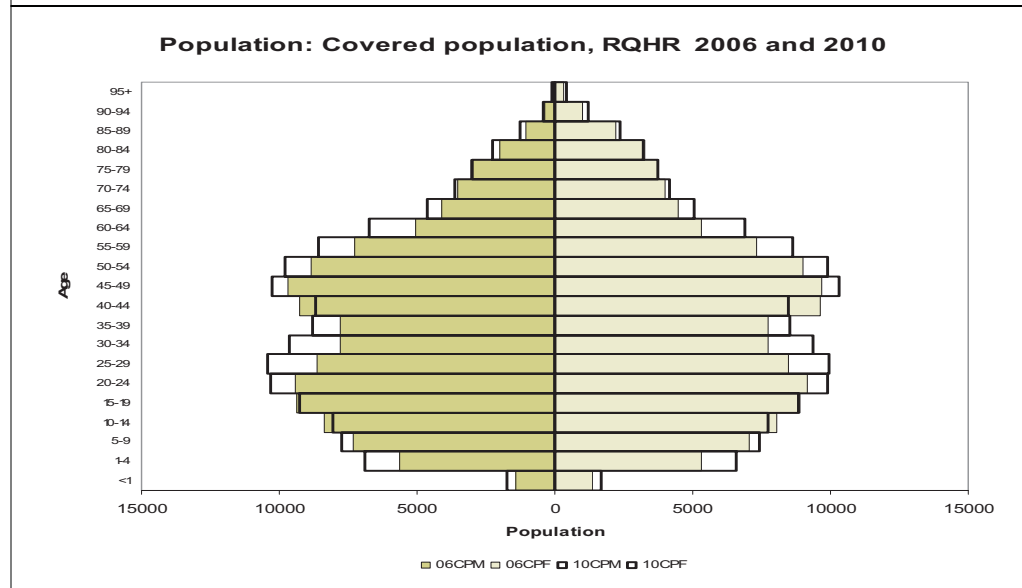
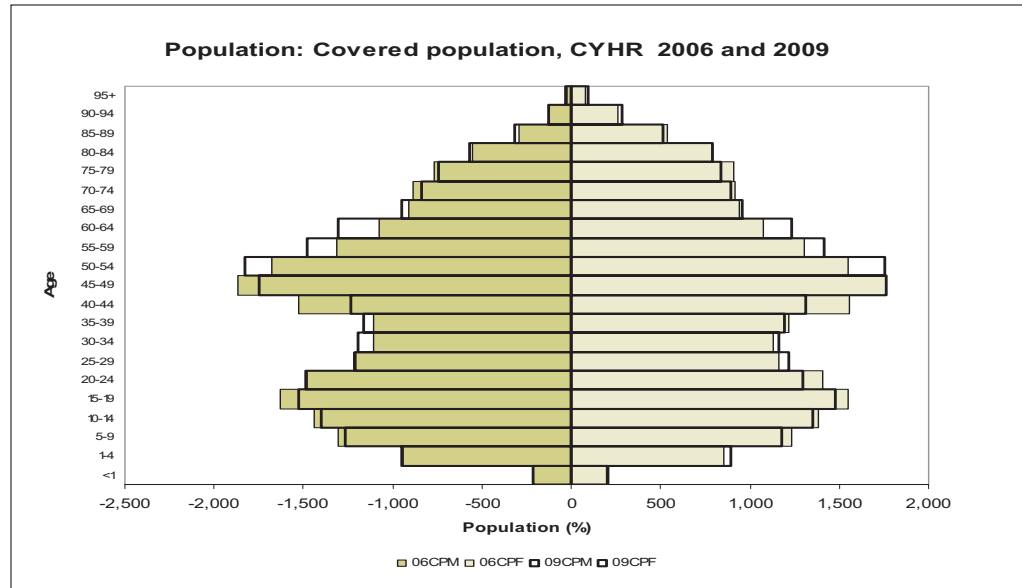
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Cypress RHA (CRHA) showed decreases in almost all age categories when the Saskatchewan Ministry of Health's Covered Population numbers for 2006 and 2010 were compared.

Regina-Qu'Appelle RHA (RQRHA) shows increases in almost all age categories when the Saskatchewan Ministry of Health's Covered Population numbers for 2006 and 2010 were compared.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

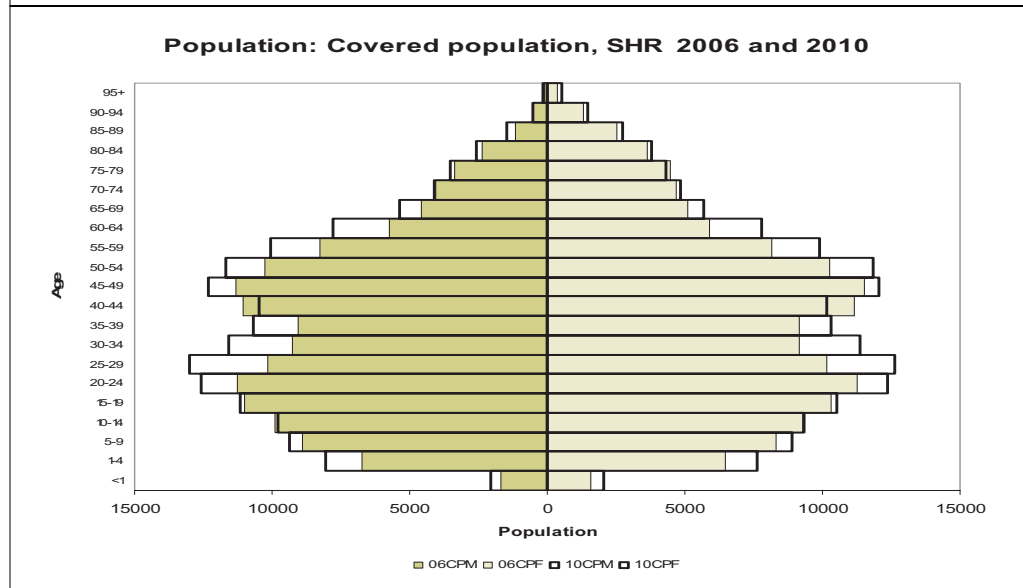
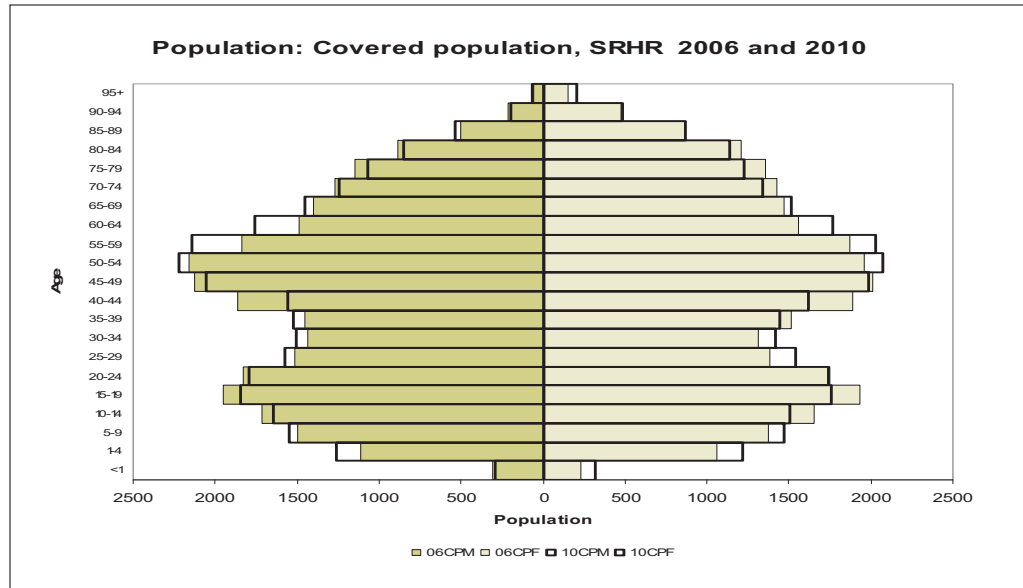
C. Limitations:

Considered more as a descriptor than an indicator.

Covered Population: Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Both Sunrise RHA (SRRHA) and Saskatoon RHA (SRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages 0-9 years and 50-69 years for both males and females when the numbers for 2006 and 2010 were compared.

SRRHA showed an increase in the 25-39 year ages for males and 25-34 year ages in females.

SRHA showed an increase almost all age categories for both males and females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

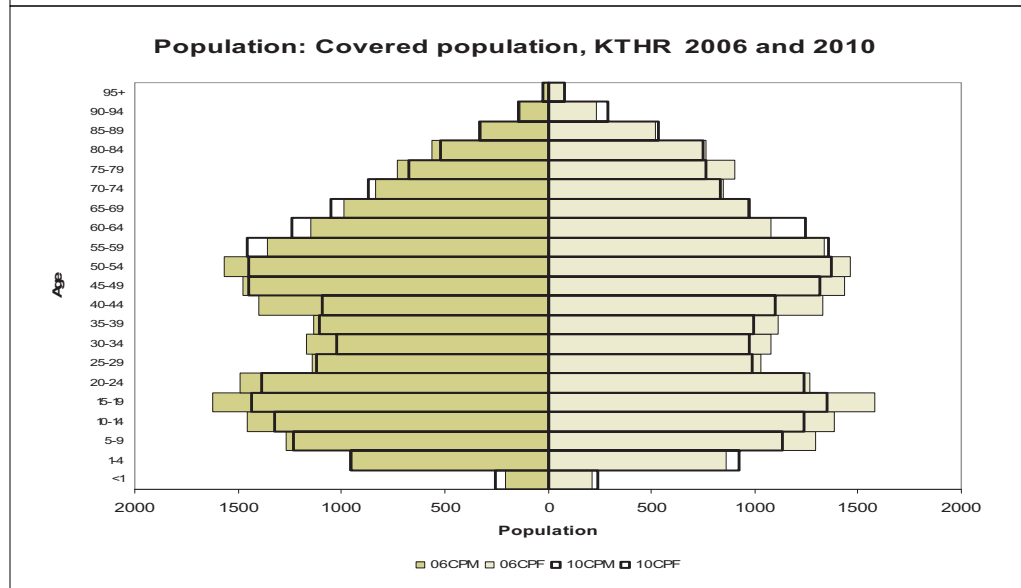
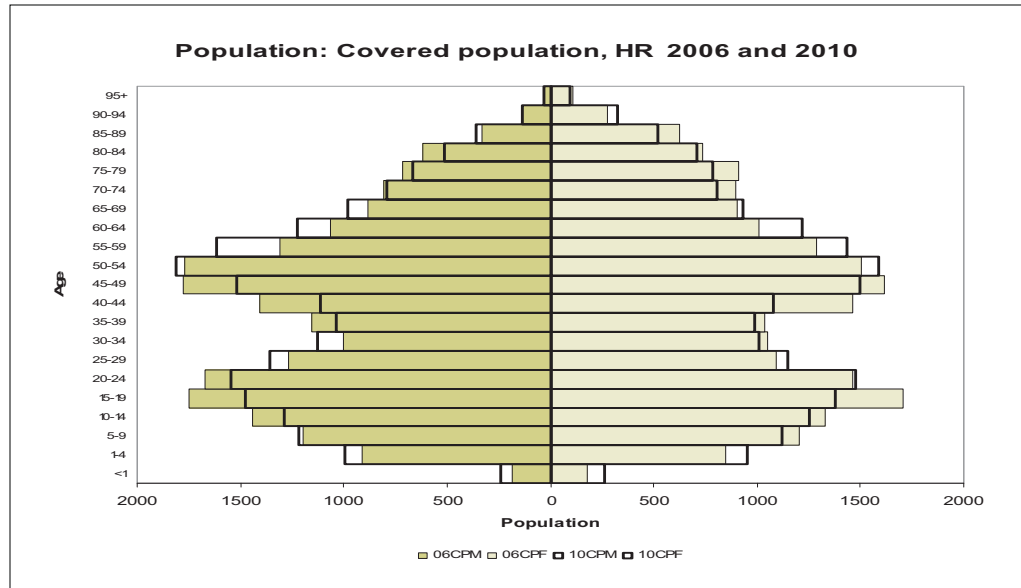
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Both Heartland (HRHA) and Kelsey Trail RHA (KTRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages, under 1 year for males and 0-4 years for females when the numbers for 2006 and 2010 were compared.

HRHA showed an increase in the 50-69 year age category for males and females.

KYRHA showed a decreases in most age categories except 55-74 year age category for males and the 55-64 year age category for females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

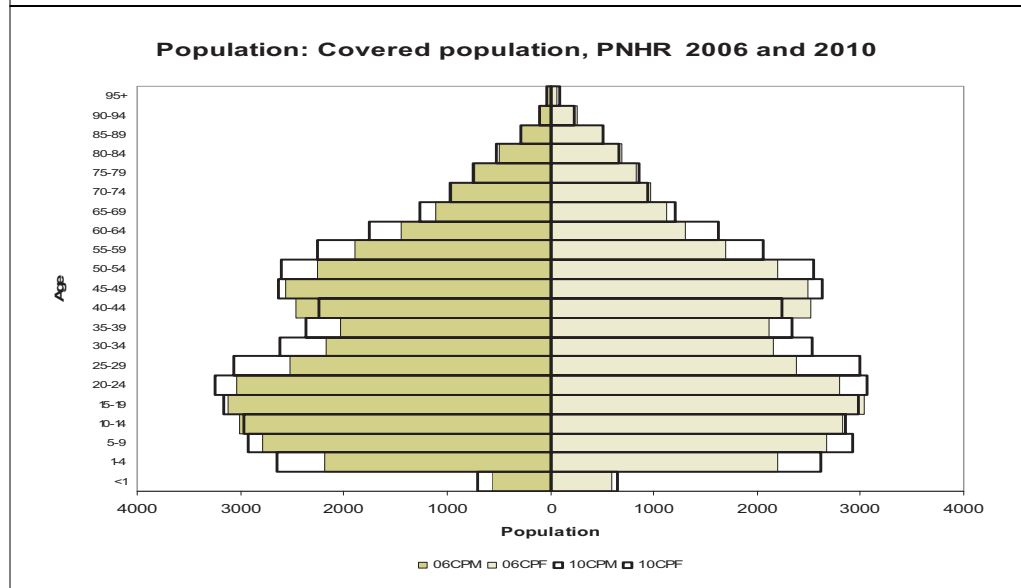
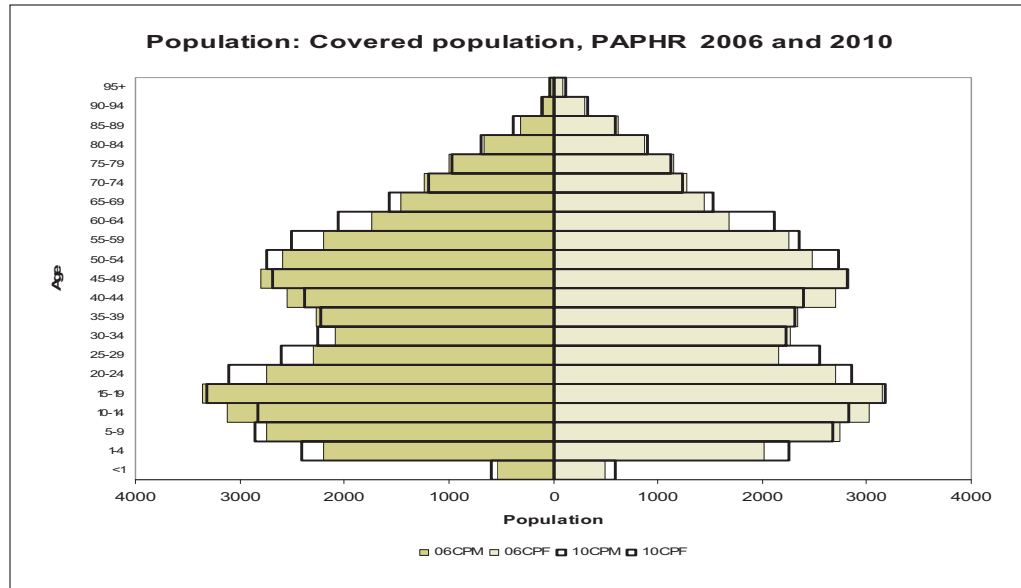
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Both Prince Albert Parkland RHA (PAPRHA) and Prairie North RHA (PNRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers at the younger ages, 0-9 years when the numbers for 2006 and 2010 were compared.

PAPRHA showed an increase in the 20-34 and 50-69 year ages for both males and females.

PNRHA showed an increase in almost all age categories for both males and females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

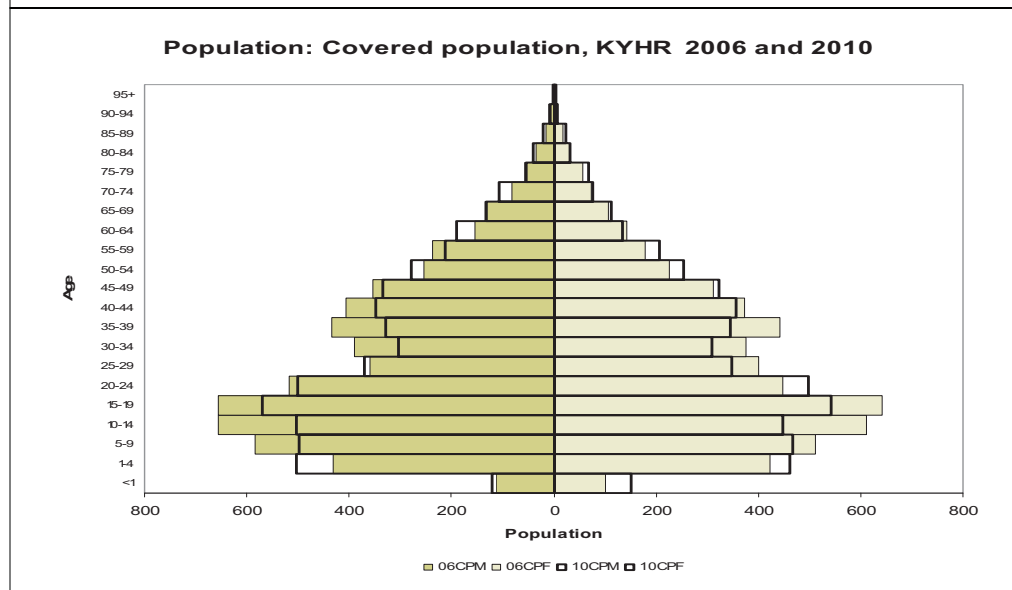
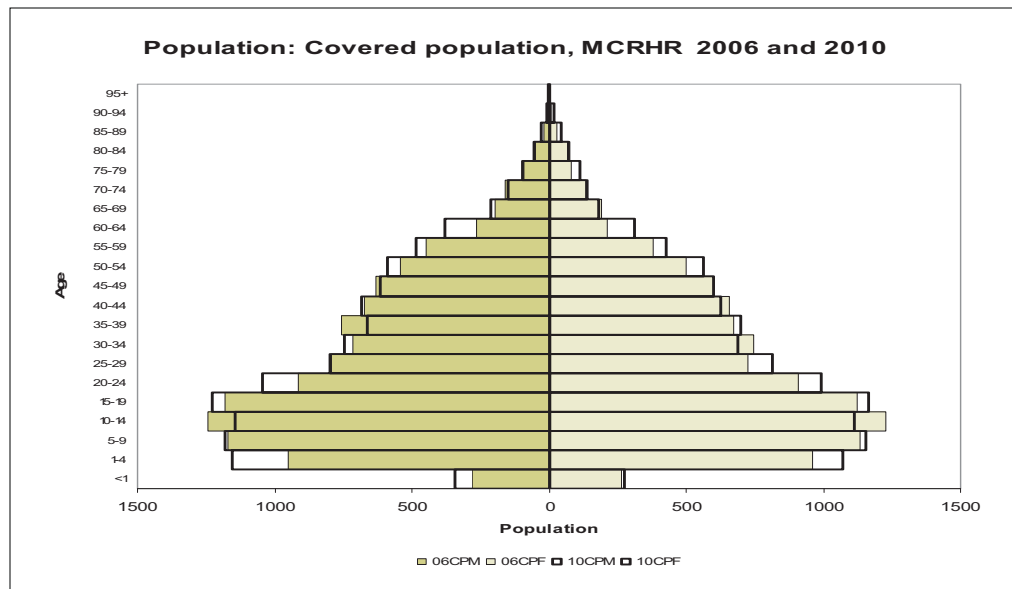
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

Both Mamawetan Churchill River RHA (MCRRHA) and Keewatin Yatthé (KYRHA) showed increases in the Saskatchewan Ministry of Health's Covered Population numbers for the 0-4 years age category for both males and females when the 2006 and 2010 numbers were compared.

MCRRHA showed increases in the 50-69 year age category for males and the 50-64 year age category for females.

KYRHA showed pronounced decreases in the 5-24 year age group for males and the 5 to 19 year age category for females. Large decreases were also seen in the 30 to 49 year age category for males and the 25-44 year age category for females.

A. Definitions:

The total population size of a province or other defined area.

B. Significance/Use:

A population pyramid illustrates the distribution of different age groups in a population. The shape relates to the rate of its population's growth or decline.

A population's size and age/sex composition impact the health status of a region and its need for health services.

Population data also provide the "denominators" used to calculate rates for most health and social indicators.

Useful to target sub-populations and to determine required services in planning preventive and promotional interventions.

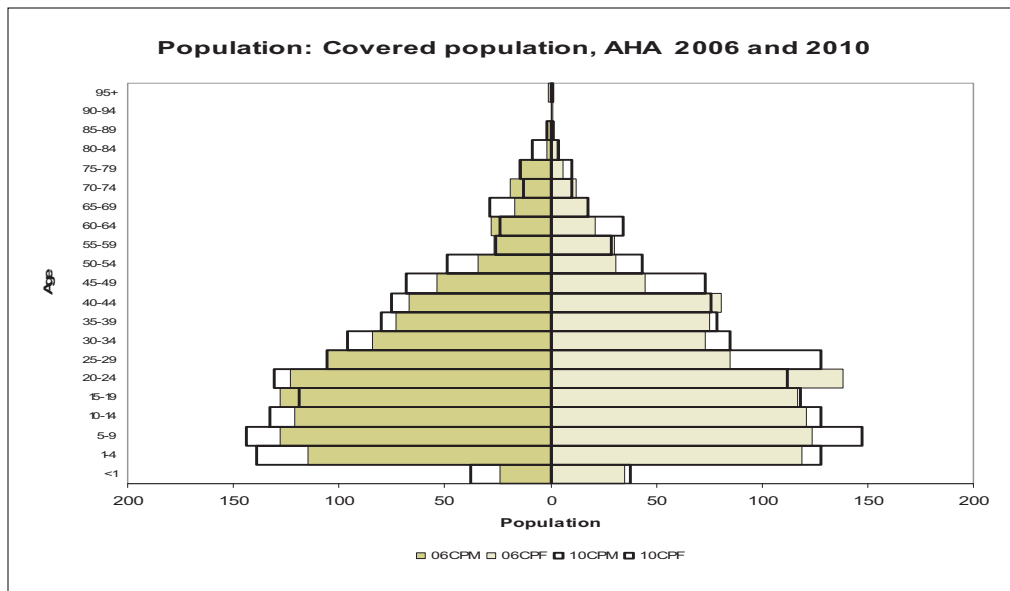
C. Limitations:

Considered more as a descriptor than an indicator.

Not a census. Only counts persons who are registered for provincial health coverage and not every person who may have been a resident in Saskatchewan on June 30th.

D. Source:

Saskatchewan Ministry of Health Covered Population, 2006 and 2010.



SUMMARY OF FINDINGS:

The Athabasca HA (AHA) showed increases in almost all age categories when the Saskatchewan Ministry of Health's Covered Population numbers for 2006 and 2010 were compared.