MY COMMUNITY

AT A GLANCE 2017

Sussex, Norton, Sussex Corner Area

Population: 23,139 **Land Area (km²): 4,190**

The goal of **My Community at a Glance** is to empower individuals and groups with information about our communities and stimulate interest in building healthier communities. It can help us towards becoming increasingly engaged healthier New Brunswickers.

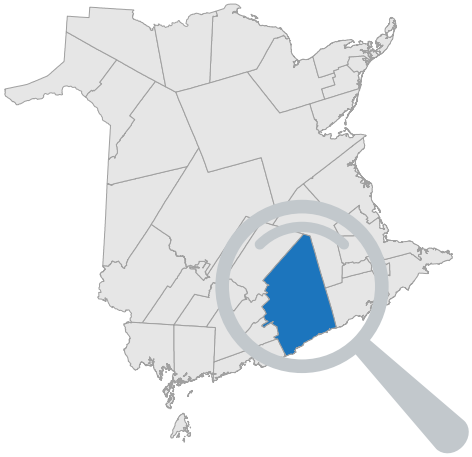
The information provided in this profile gives a comprehensive view about the people who live, learn, work, take part in activities and in community life in this area. The information included in this profile comes from a variety of provincial and federal sources, from either surveys or administrative databases.

Having the ability to access local information relating to children, youth, adults and seniors for a community is important to support planning and targeted strategies but more importantly it can build on the diversity and uniqueness of each community.

This community is 1 of 33 in New Brunswick.

It is part of:

Zone 2: Fundy Shore and Saint John Area

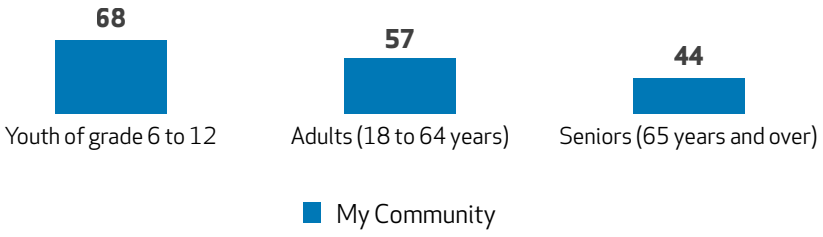


The median household income is $52,432

The main industries include:

- Retail trade
- Health care and social assistance
- Construction
- Manufacturing
- Agriculture, forestry, fishing and hunting

See their health as being very good or excellent (%)



New Brunswick Health Council | Conseil de la santé du Nouveau-Brunswick
Engage. Evaluate. Inform. Recommend.
Engager. Évaluer. Informer. Recommander.

About the New Brunswick Health Council:

New Brunswickers have a right to be aware of the decisions being made, to be part of the decision making process, and to be aware of the outcomes and cost of the health system.

The New Brunswick Health Council will foster this transparency, engagement, and accountability by engaging citizens in a meaningful dialogue, measuring, monitoring, and evaluating population health and health service quality, informing citizens on health system's performance and recommending improvements to health system partners.

New Brunswick Health Council

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The communities in this profile include:

Anagance
Apohaqui
Bains Corner
Barnesville
Belleisle Creek
Berwick
Bloomfield (Kings County)
Brunswick
Canaan Forks
Cardwell
Codys
Coles Island (Queens County)
Cornhill
Hammond
Hatfield Point
Havelock
Head of Millstream
Johnston
Kiersteadville
Lower Millstream
Midland (Kings County)
New Line
Norton
Passekeag
Penobsquis
Picadilly
Roachville
Salt Springs
Smiths Creek
Springfield (Kings County)
St. Martins
Studholm
Sussex
Sussex Corner
Titusville
Upham
Upperton
Wards Creek

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Be inspired to make a difference!

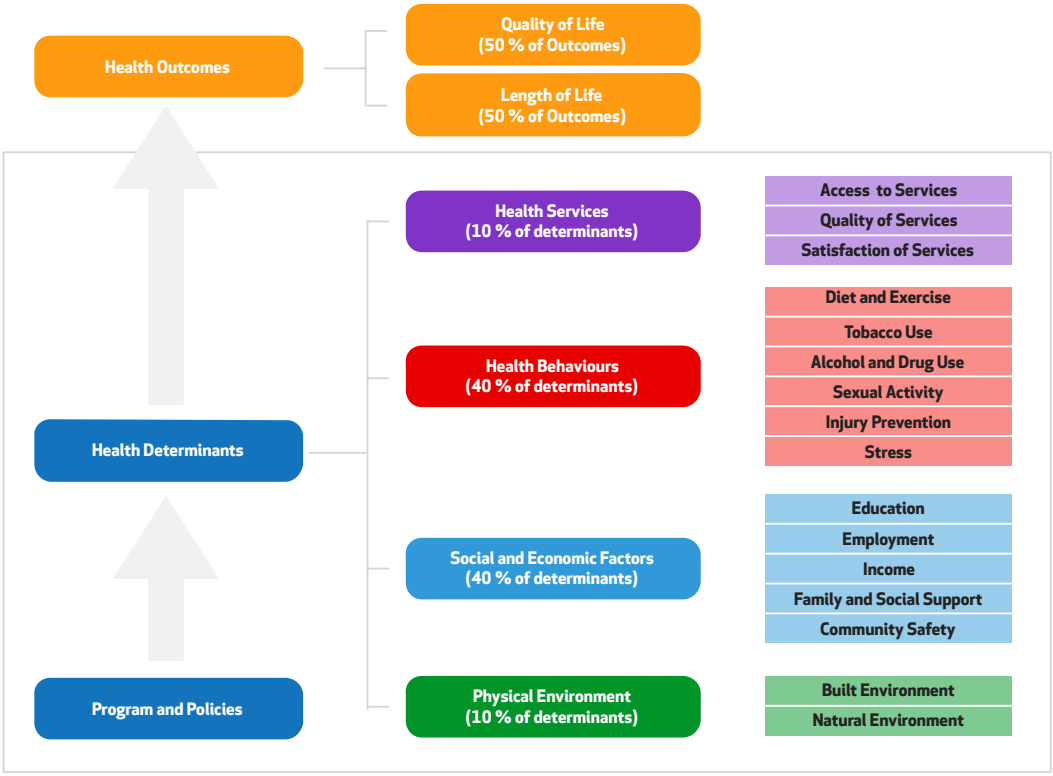
Individuals in a community have a role to play in supporting or enhancing the rights and well-being of a population.

Communities in New Brunswick need to determine for themselves what will make their community a vibrant one, in a rural or urban setting. Whether it be promoting healthy aging, healthy child development, self-sufficiency, community involvement or personal enrichment, these could be some possible areas of focus.

Many policies, programs and services are being developed at the municipal, regional and provincial levels. Do they align? Do they meet the needs of the community? Are they working? Do they need to be improved?

This tool is an opportunity for shared measurements, common language, and collaboration across numerous groups to encourage and support a common vision towards engaged healthier New Brunswickers.

The community profiles are based on a population health model that emphasizes the many factors that can make community healthier places to live, learn, work, and play.



About the data:

Each community profile regroups a variety of indicators that are collected and synthesized by the New Brunswick Health Council from a variety of sources.

These data sources are being used to represent the health of the population in each community, each with various levels of reliability and limitations.

We acknowledge that the data may not represent all individual characteristics and circumstances within the communities. The NBHC is continuously working towards improving our existing tools to be more reflective of the diversity of the population.

Together, the administrative, census and volunteer survey information help paint a clearer picture about our individual communities.

All the technical details regarding the methodology behind the profiles and the sources of each indicator is available at www.nbhc.ca

Legend

E – Use data with caution | F – Not reliable for publiication | n/a – Not available

Community Facts

Community facts are all about the people living in this community. It includes demographic information, such as marital status and language preferences, as well as general spending habits of the people in this community. Knowing who is part of the community is the first part to understanding the community dynamics.

POPULATION DEMOGRAPHICS

Male	Population (2011) Age	Female
11,400	All	11,750
605	0 – 4	560
595	5 – 9	610
745	10 – 14	710
855	15 – 19	760
665	20 – 24	570
495	25 – 29	565
535	30 – 34	575
625	35 – 39	695
750	40 – 44	780
930	45 – 49	1,020
965	50 – 54	965
905	55 – 59	935
925	60 – 64	870
605	65 – 69	625
465	70 – 74	480
325	75 – 79	365
235	80 – 84	265
190	85 and older	340

Demographics	My Community	NB
Population (2011)	23,139	751,171
Population (2006)	22,991	729,997
Population change (2006–2011) %	1	3
Population density (2011), person per km^2	5.5	10.5
Immigrant (2011) %	3.5	3.9
Recent immigrant (2006–2011) %	0.1	1.0
Aboriginal (2011) %	1.3	3.1
Lived outside Canada 1 year ago (2011) %	0.1	0.3
Lived in a different Canadian municipality 1 year ago (2011) %	4.1	4.3

Birth rate (2010–2014)

live births per 1,000 population

Death rate (2010–2014)

deaths per 1,000 population

Household (2011)	My Community	NB
Families (with or without children) in households	7,000	224,540
Total couple families with children %	87	84
Single parent families %	13	16
Persons living alone %	12	13

Marital status (2011)	My Community	NB
Married or living with a common-law partner %	64	61
Single (never legally married) %	22	25
Divorced %	5	5
Separated %	3	3
Widowed %	7	7

Youth sexual orientation (2015–2016)	My Community	NB
Heterosexual (straight) %	86.1	85.4
Gay or lesbian %	0.9	1.6
Bisexual %	4.1	5.0
Other %	1.7	2.6
Not sure %	7.2	5.4

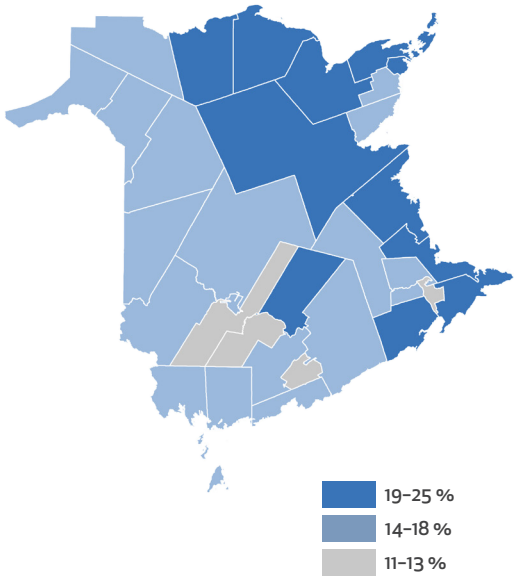
Persons with disability	My Community	NB
Children diagnosed with a learning exceptionality or special education need (2013–2014) %	14	12
Youth diagnosed with a learning exceptionality or special education need (2015–2016) %	17	19
Person with a disability (2014) %	21	22

Dependents (2015)	My Zone	NB
Dependency ratio (number of dependents for every 100 people in the working age population)	66	64
Youth, under 20 years, as a proportion of total population %	22	20
Seniors, 65 years and over, as a proportion of total population %	18	19

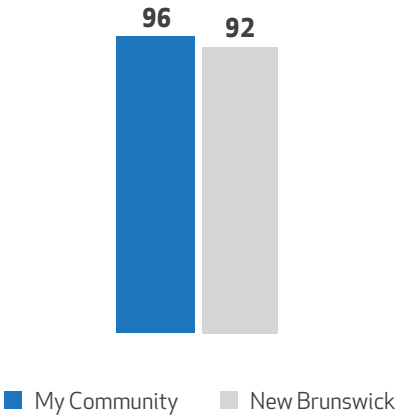
All efforts have been made to provide quality detailed information for each community.
For a variety of reasons, some data is currently only available at the health zone or provincial level.

AGING POPULATION

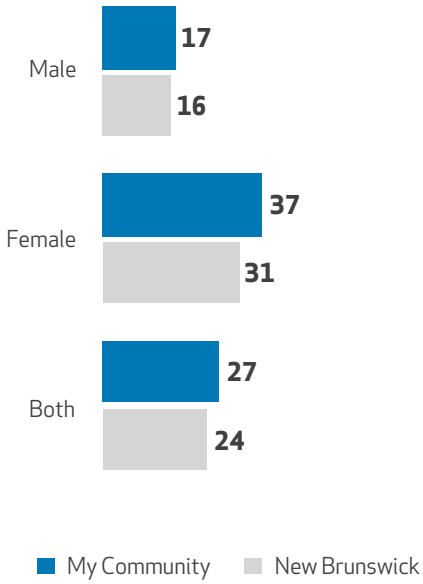
Seniors 65 years and over (2011) %



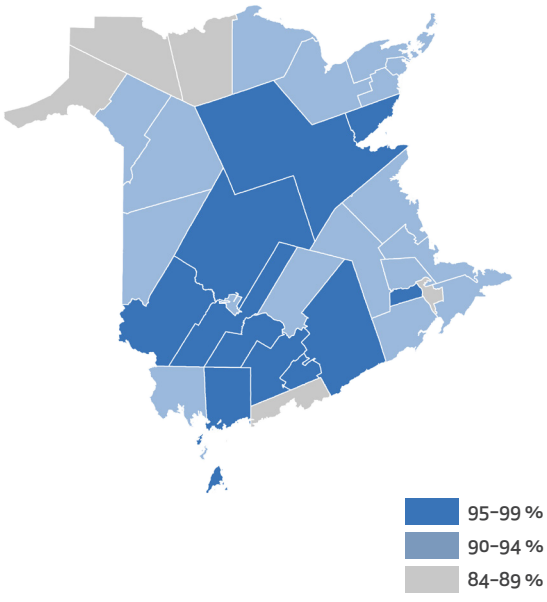
Seniors living in private households (2011) %



Seniors living alone (2011) %

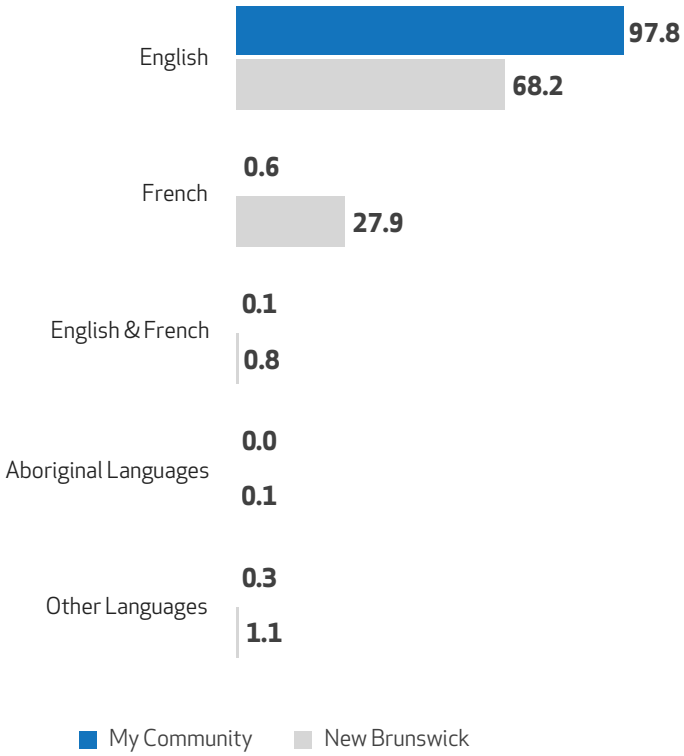


Seniors living in private households (2011) %

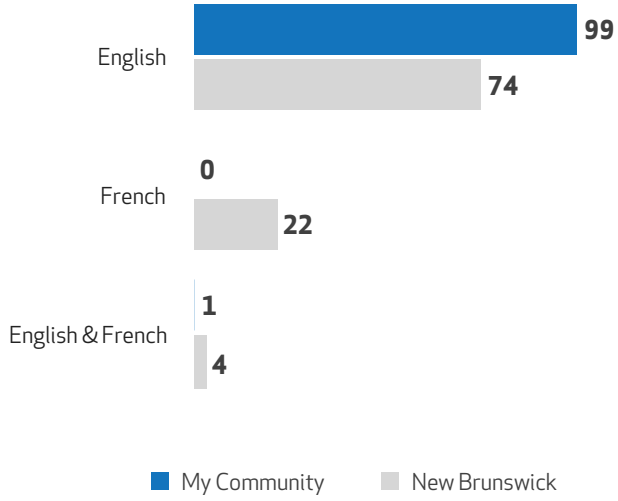


LANGUAGE

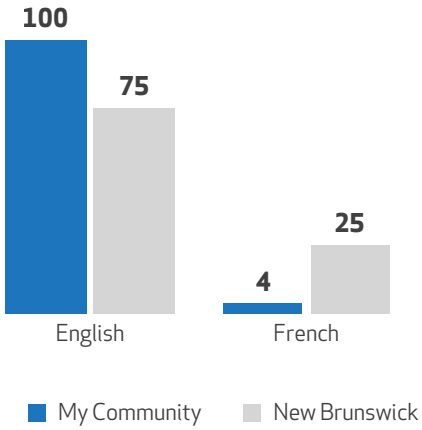
Language most spoken at home (2011) % of all population



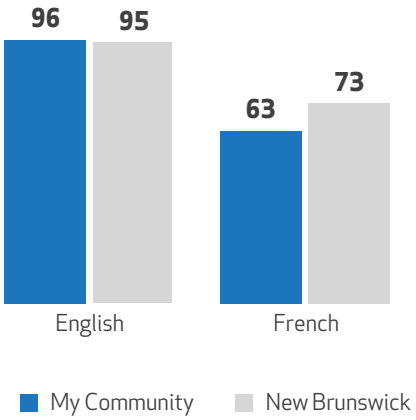
Language most spoken at work (2011) %



Choice of official language of services (2014) %



Always receive health care services in the official language of their choice (2014) %



SPENDING HABITS

Purchasing practices (2013)

	My Zone
Purchased locally grown or produced foods (always or often) %	98
Purchased environmentally friendly or "green" cleaning products (often) %	91
Used own bags or containers to carry groceries (always or often) %	93

Annual lottery sales (2014–2015) per person (19 years and over)

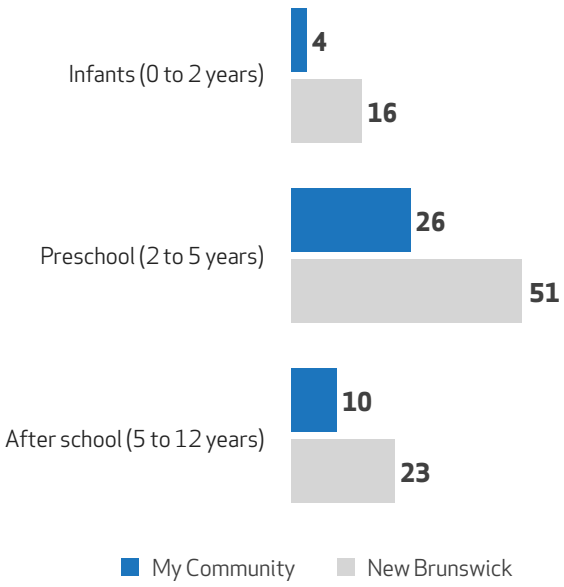
NB	Atlantic Canada
$488	$562

Annual alcohol sales (2015) per person (19 years and over)

My Community	NB
$313	$436

CHILD CARE

Approved child care spaces (2016) per 100 children



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Physical Environment

The **physical environment** in which we live, work and relax, is about the quality of both the built environment and the natural environment. The decisions we make regarding our transportation, housing, industry, water use, energy use and waste management all have a direct influence on our quality of life and length of life.

Built Environment:

The **built environment** includes land use, the design of our streets, sidewalks and pathways, the transportation system, and the shape of our communities. Factors such as the distance between home and work, the look and feel of the neighbourhood and streets, the presence or absence of stores, recreation facilities, and parks all affect choices to walk, cycle, take transit, or drive.

It can have a significant impact on our health because it can influence our levels of physical activity, access to jobs and services, and opportunities for social interaction and recreation. The transportation choices we make can also have long-term impacts on our health.

Household (2011)	My Community	NB
Population who owns a dwelling %	86	76
Population who rents a dwelling %	14	24
Population who lives in band housing %	0.0	0.6
Occupied dwellings requiring major repairs %	11	10
Private residence built before 1960 %	31	27

Transportation to and from work and school	My Community	NB
Child walking, biking or skateboarding (2013–2014) %	14	13
Youth walking, biking or skateboarding (2015–2016) %	21	23
Adults as passengers or drivers in a car, truck or van (2011) %	94	91
Adults using public transportation (2011) %	0.7	2.2
Adults walking or bicycling (2011) %	4.4	5.8
Average commuting duration (2011) minutes	16	15

Time leaving for work (2011)	My Community	NB
Between 5:00 and 6:59 a.m. %	32	22
Between 7:00 and 8:59 a.m. %	49	60
After 9:00 a.m. %	18	18

Facilities	My Community	NB
Food outlets/grocery stores (2013) rate per 10,000 population	3	4
Tobacco retailers (2016) rate per 10,000 population (19 years and older)	16	14
Recreational facilities (arenas, artificial turfs, curling clubs, golf courses, pools, provincially approved tracks, ski hills) (2015) rate per 10,000 population	3	3

Availability of parks/public green spaces close to home (2013) %

NB	Canada
72	85

Rank	8 out of 10

NB ranked with all provinces. Rank of 1 means you have access to more.

Natural Environment:

Safe water, clean air, and healthy environment all contribute to good health and are part of our **natural environment**.

The interaction between our health and the environment is constantly being studied. Environmental risks have been proven to significantly influence health. This has been shown either directly by exposing people to harmful agents, or indirectly, by disrupting our forest, oceans and the air we breathe.

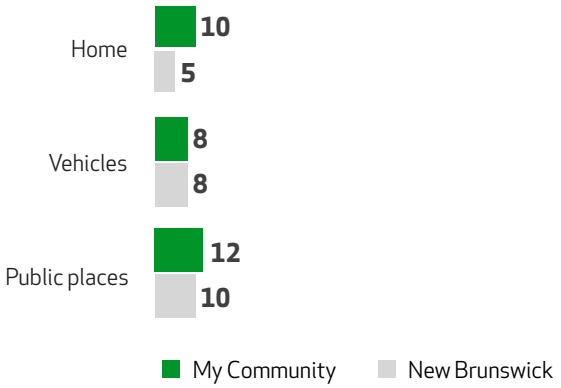
Although everyone is at risk of the negative health effects associated with air pollution, certain populations (unborn and very young children, the elderly, those with cardiovascular or respiratory disease, and those who are exposed to other toxic materials that add to or interact with air pollutants) are more susceptible.

AIR

Greenhouse gas emission (2012) tonnes of carbon dioxide per person

NB	Canada
22	20

Second-hand smoke exposure (2012–2014) %



LAND

Radon	My Zone	NB
Raw percentage of homes tested with radon concentrations above 200 Bq/m^3 (2009–2011) %	11	25
Household that had heard of radon (2013) %	71	58
Household that had not tested for radon (2013) % of those who heard of radon	89	92

All efforts have been made to provide quality detailed information for each community.
For a variety of reasons, some data is currently only available at the health zone or provincial level.

Households that had applied chemical pesticide (2013) %

NB	Canada
11	19

Rank: 7 out of 10

NB ranked with all provinces. Rank of 1 means you use the most.

Households that had applied chemical fertilizer (2013) %

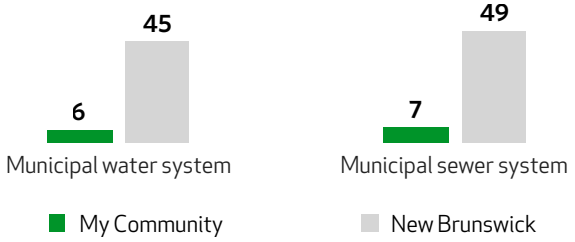
NB	Canada
17	25

Rank: 7 out of 10

NB ranked with all provinces. Rank of 1 means you use the most.

WATER

Population that is served by : (2009) %



Number of boil orders (2013-2015)

My Community	NB
0	74

ENERGY

Households with at least one type of energy-saving device (2013) %	My Zone	NB
Low-volume toilet	36	39
Low-flow shower head	56	55
Energy-saving light bulbs	92	87

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Source of energy for household heating equipment (2011) %

Wood/wood pellets

NB	Canada
49	6

Rank: 1 out of 10

NB ranked with all provinces. Rank of 1 means you use the most.

Electricity

NB	Canada
20	14

Rank: 3 out of 10

NB ranked with all provinces. Rank of 1 means you use the most.

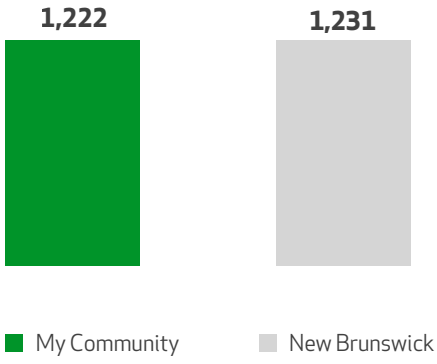
Heating oil

NB	Canada
38	10

Rank: 4 out of 10

NB ranked with all provinces. Rank of 1 means you use the most.

Energy consumption - average monthly energy usage per account per month (includes rural, urban and seasonal) (2015) KWH



Health Behaviours

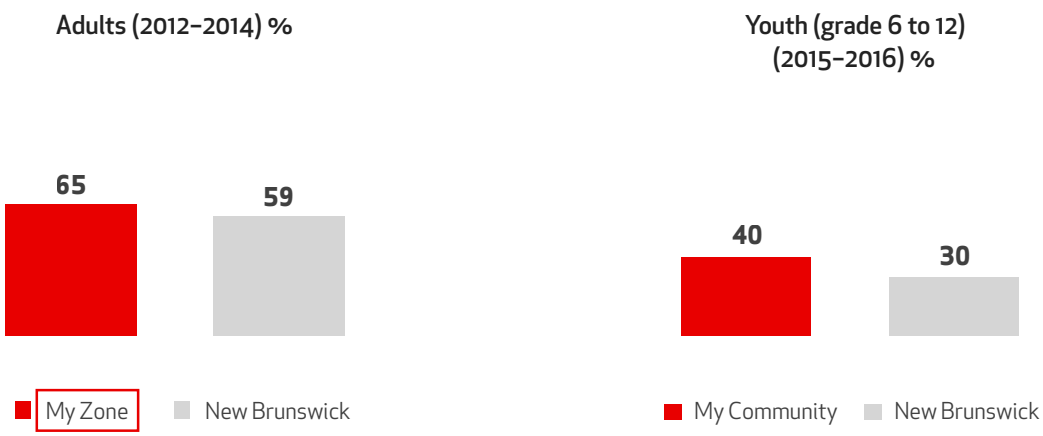
Health behaviours consist of eating, physical activity, smoking and drinking habits, and coping with life's stressors which can influence health and well-being.

Healthy behaviours are shaped by individual choices but we can't ignore the external factors (social, economic, health care services and the environment) which may also influence the behaviours. Positive behaviours help promote health and prevent disease. By monitoring health behaviours over time it is possible to develop a proactive approach to population health. This can be done by identifying gaps in the community and developing programs and policies to meet those needs and evaluating the impact over time.

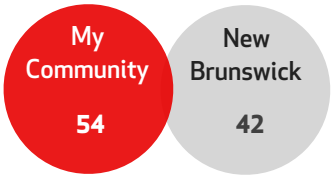
TOP 5 Physical activity participated in the last 3 months (2012–2014)

1. Walking
2. Garden and yard work
3. Home exercise
4. Swimming
5. Popular/social dance

Always wear a helmet when riding a bicycle



Use of sunscreen on their body in summer months, always or often (2012) %



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CHILDREN

KINDERGARTEN TO GRADE 5 (2013-2014) PARENT RESPONDED FOR CHILD	My Community	NB
Healthy eating		
* Eat fruits and vegetables, 5 or more daily %	50	49
Body mass index (BMI)		
Unhealthy weight - overweight or obese %	36	36
Unhealthy weight - underweight %	8	7

GRADE 4 TO 5 (2013-2014) CHILD RESPONDED	My Community	NB
Healthy eating		
Eat breakfast daily %	67	70
Eat fruits and vegetables, 5 or more daily %	48	51
Consumed sweetened non-nutritious beverages the day before the survey %	55	52
Physical activity		
* Physically active at least 60 minutes daily (moderate or vigorous physical activity) %	34	35
Sedentary activity		
Sedentary activity - more than 2 hours of screen time %	55	55
Tobacco use		
Family member that smokes %	38	35

YOUTH

GRADE 6 TO 12 (2015-2016)	My Community	NB
Healthy eating		
Eat breakfast daily %	45	46
Eat fruits and vegetables, 5 or more daily %	48	46
Consumed sweetened non-nutritious beverages the day before the survey %	63	58
Consumed high energy drinks the day before the survey %	9	8
Body mass index (BMI)		
Unhealthy weight - overweight or obese %	29	28
Unhealthy weight - underweight %	7	7
Physical activity		
* Physically active at least 60 minutes daily (moderate or vigorous physical activity) %	25	22

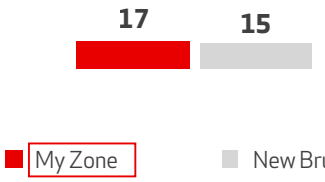
* Not comparable with 2014 My Community at a Glance

GRADE 6 TO 12 (2015-2016)	My Community	NB
Sedentary activity		
* Sedentary activity - more than 2 hours of screen time %	61	63
Sleep 8 hours or more every night %	43	39
Tobacco use		
At risk of becoming a future smoker %	23	22
* Current smoker, daily or occasional %	9	11
Family member that smokes %	38	43

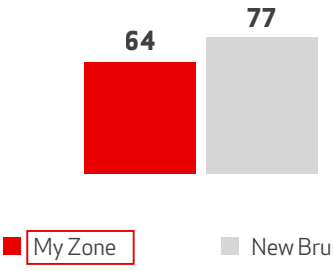
GRADE 9 TO 12 (2015-2016)	My Community	NB
Alcohol and drug use		
Driving an off-road vehicle (e.g., snowmobile, ATV, dirt bike) after drinking alcohol, using marijuana, or other illegal drugs %	12	11
Riding in an on-road vehicle (e.g., car, van, truck) driven by someone who had been drinking alcohol, using marijuana, or other illegal drugs %	20	20
* 5 or more drinks at one time, at least once a month in the past 12 months %	26	24
Marijuana use within the last 12 months %	28	26

* Not comparable with 2014 My Community at a Glance

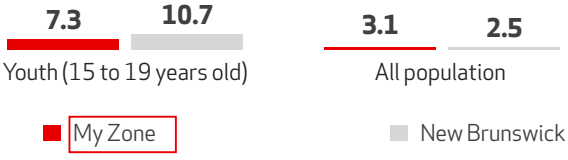
Teen birth, 15 to 19 years (2015) rate per 1,000



Breastfeeding initiation (2012–2014) %



Sexually transmitted infections - chlamydia (2015) rate per 1,000



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ADULTS

18 TO 64 YEARS	My Community	NB
Healthy eating (2014)		
Eat fruits and vegetables, 5 or more daily %	47	51
Body mass index (BMI) (2014)		
Overweight %	33	35
Obese %	37	31
Physical activity (2014)		
Physically active during free-time, moderately active or active daily %	52	50
Tobacco use (2014)		
Current smoker, daily or occasional %	19	21
Alcohol and drug use (2012–2014)		
5 or more drinks at one time, at least once a month in the past 12 months %	36	30
Stress (2012-2014)		
Seeing your stress as quite a bit or extreme %	19	23

TOP 3 Things that have contributed to stress in day-to-day life (2014)

	Adults (18 to 64 years old)	Seniors (65 years old and over)
1	Time pressures / not enough time	Health of family members
2	Your financial situation (i.e. not enough money, or debt)	Your own physical health problem or condition
3	Your own work situation (i.e. hours of work, or working conditions)	Caring for others (parents, family or friends)

SENIORS

65 YEARS AND OVER	My Community	NB
Healthy eating (2014)		
Eat fruits and vegetables, 5 or more daily %	52	46
Body mass index (BMI) (2014)		
Overweight %	41	41
Obese %	32	28
Physical activity (2014)		
Physically active during free-time, moderately active or active daily %	52	46
Tobacco use (2014)		
Current smoker, daily or occasional %	12	10
Alcohol and drug use (2012–2014)		
5 or more drinks at one time, at least once a month in the past 12 months %	7	7
Stress (2012–2014)		
Seeing your stress as quite a bit or extreme %	2	11

Social Factors

Support from families, friends and communities has been associated with better health. Social support networks can be very important in helping people solve problems, in dealing with hard times and in supporting individuals in their ability to take control over life circumstances.

In addition, **social factors** such as social connectedness, recognition of diversity, safety, good working relationships, culture - customs and traditions, and the beliefs of the family and community have often been noted as protective factors for the health and well-being of a population.

CHILDREN

KINDERGARTEN TO GRADE 5 (2013-2014) PARENT RESPONDED FOR CHILD	My Community	NB
Family and friends		
Parents who are physically active with their children %	42	40

GRADE 4 TO 5 (2013-2014) CHILD RESPONDED	My Community	NB
Personal		
Pro-social behaviours (being helpful, respectful, thoughtful, etc.) %	81	78
Oppositional behaviours (being defiant, disrespectful, rude, etc.) %	16	24
Family and friends		
Ate dinner with family, friend or guardian daily %	76	74
High level of satisfaction of family-related mental fitness needs %	73	75
High level of satisfaction of friends-related mental fitness needs %	91	90
School		
Feel connected to my school %	88	87
Feel safe at school %	72	69
Feel teachers treat me fairly %	68	62
High level of satisfaction of school-related mental fitness needs %	62	63
Community		
Has been bullied %	37	41

YOUTH

GRADE 6 TO 12 (2015-2016)	My Community	NB
Personal		
Pro-social behaviours (being helpful, respectful, thoughtful, etc.) %	84	86
Oppositional behaviours (being defiant, disrespectful, rude, etc.) %	14	15
Able to solve problems without harming myself or others (i.e. by using drugs and/or being violent) %	57	55
Family and friends		
Have people I look up to %	52	48
My parent or caregiver knows a lot about me %	59	56
Enjoy my cultural and family traditions %	56	50

GRADE 6 TO 12 (2015-2016)	My Community	NB
High level of satisfaction of family-related mental fitness needs %	80	80
High level of satisfaction of friends-related mental fitness needs %	81	82
School and work		
Feel connected to my school %	91	92
Feel safe at school %	84	86
Feel teachers treat me fairly %	79	83
School staff (teachers, custodians) show a positive attitude towards healthy living and health related issues %	35	34
* School provided access to healthy foods and snacks %	37	43
Have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others) %	46	45
High level of satisfaction of school-related mental fitness needs %	56	59
Participate in activitites or groups organised by school %	45	49
Participate in activitites or groups not organised by school %	50	51
Community		
Know where to go in my community to get help %	31	28
Youth who volunteered outside school without being paid, in the past 12 months %	72	74
Have been bullied %	51	52
Treated fairly in my community %	40	39

ADULTS AND SENIORS

ADULTS AND SENIORS	My Community	NB
Personal (2014)		
Citizens with a chronic health condition who are very confident in controlling and managing their health condition %	48	42
Family and friends (2015)		
Among those who receive home care, how many have caregivers also providing care %	63	62
School and work (2015)		
Absence rates of full-time employees - total days lost per worker in a year due to illness and disability (days)	n/a	9
Absence rates of full-time employees - total days lost per worker in a year due to personal or family responsibility (days)	n/a	2
Community (2014)		
Has internet access at home (All) %	86	88
Adults (18 to 64 years) %	92	92
Seniors (65 years and over) %	66	70

COMMUNITY SAFETY

Police reporting (2015)

	My Community	NB
Crimes against persons, rate per 1,000	22	30
Crimes against property, rate per 1,000	7	12

COMMUNITY BELONGING

Sense of community belonging to a community (somewhat strong or very strong) (2012–2014) %

Adults (18 to 64 years)

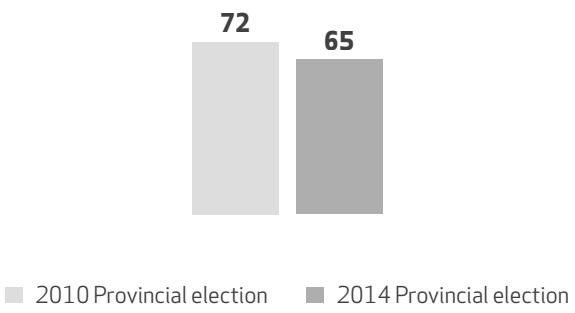
My Community	NB
71	68

Seniors (65 years and over)

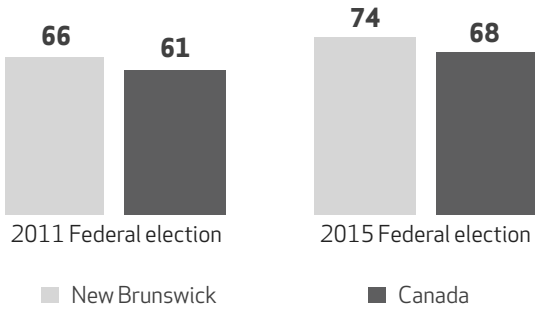
My Community	NB
79	77

Voter turnout (18 years and over) %

Provincial election



Federal election



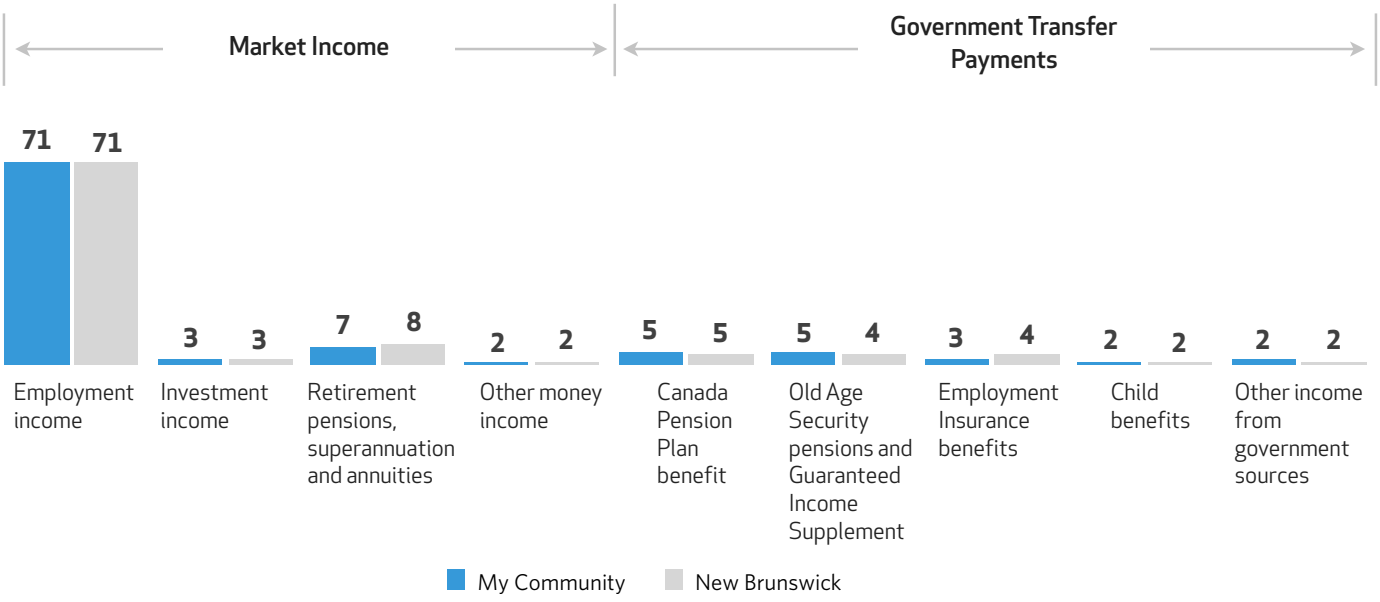
Economic Factors

Economic factors such as income, education and employment have been linked to health.

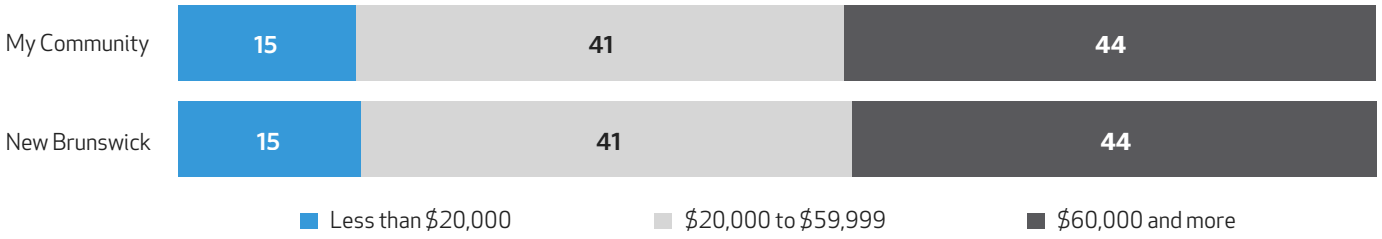
INCOME

It can determine living conditions such as safe housing and ability to buy healthy food.

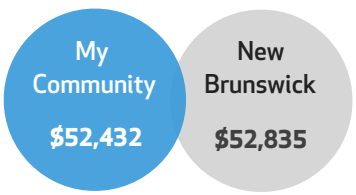
Composition of total income, 15 years and over (2011) %



Household income (2011) %



Median household income (2011) $

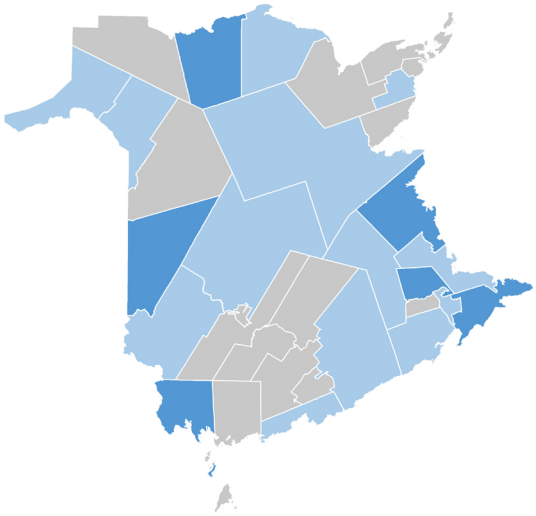


Families receiving Social Assistance or Welfare benefits	My Community	NB
Families receiving Social Assistance or Welfare benefits (2016) % out of all families with children at home	7	5
Population receiving Employment Insurance (E.I.) (2016) %	5	7

Living in low income household (2011)	My Community	NB
Living in low income household (All) %	15	17
Child under 6 years old %	26	23
Youth under 18 years old %	20	21
Adults 18 to 64 years old %	12	15
Seniors 65 years and over %	19	20

Food insecurity in homes (2012–2014)	My Community	NB
Youth - reporting going to school or to bed hungry because there is not enough food at home (often or always) (2015–2016) %	4	5
Food insecurity in homes with or without children present (moderate and severe) %	10	9

	My Zone	NB
With children 0 to 5 present (moderate and severe) %	12	12
With children less than 18 present (moderate and severe) %	13	11



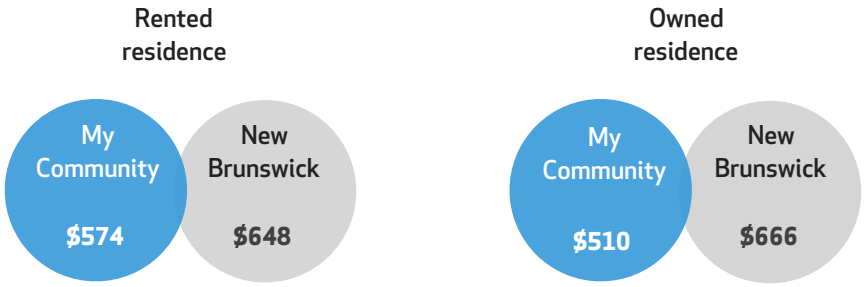
Food insecurity in homes with or without children present (moderate and severe) (2012-2014) %

12 – 17 %
9 – 11 %
2 – 8 %

All efforts have been made to provide quality detailed information for each community.
For a variety of reasons, some data is currently only available at the health zone or provincial level.

Household spending (2011)	My Community	NB
Spending 30% or more of household total income on shelter costs %	14	19
Tenants in subsidized housing %	13	16

Median monthly shelter costs (2011) $



EMPLOYMENT

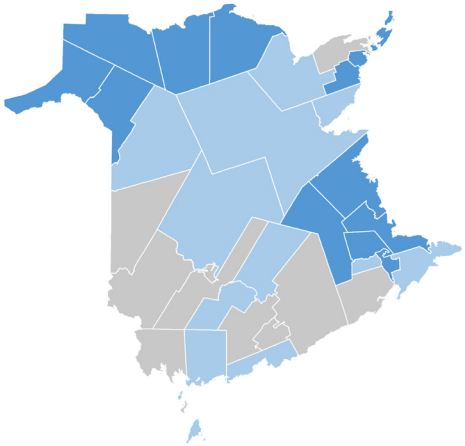
People who have more control over their work circumstances and fewer stress related demands of the job are healthier and often live longer than those in more stressful or riskier work.

Labour force (2011)	My Community	NB
Participation rate %	63	64
Employment rate %	58	57
Unemployment rate %	8	11
Self-employed %	12	7
Students with part-time jobs outside of school (2015–2016) %	32	31
Population who worked full-time in 2010 %	82	83
Population who worked part-time in 2010 %	18	17

Employment status (2014)		
Employed %	56	55
Unemployed/seasonal workers %	6	7
Retired %	25	25

EDUCATION

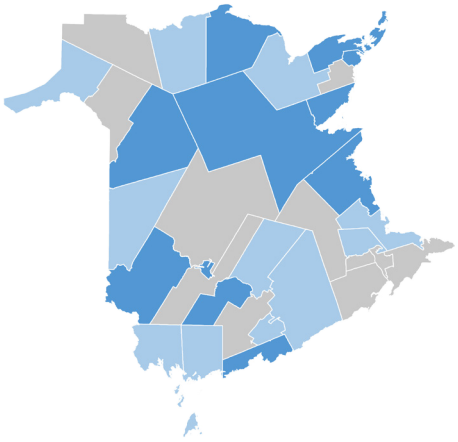
Education for children and lifelong learning for adults are contributors to health and prosperity for individuals, and for a community.



Kindergarten school readiness (Anglophone and Francophone children combined) (2014–2015) %

- 67 – 69 %
- 80 – 88 %
- 89 – 97 %

Education	My Community	NB
Kindergarten school readiness (Anglophone and Francophone children combined) (2014–2015) %	91	84
Youth - school marks above average or excellent (80% or more) (2015–2016) %	75	64
Youth - getting an education is important to me (2015–2016) %	62	65
Youth - who agree or completely agree that they are confident abouth their future (2015) %	66	79



School dropout rate (2014–2015) %

- 1.7 – 3.3 %
- 0.6 – 1.6 %
- 0.0 – 0.5 %

Highest level of education achieved (2011)	My Community	NB
Less than high school %	17	17
Graduated high school or equivalent %	31	27
Trades, College, CEGEP, or other non-university certificate or diploma %	37	35
University degree or certificate or above %	15	22

Literacy

	My Community	NB
Reading comprehension - Francophone in Grade 2 (2015-2016) %	-	79
Reading comprehension - Anglophone in Grade 2 (2015-2016) %	77	74
English reading comprehension Grade 7 - Anglophone (2013–2014) %	71	75
French provincial exam - Grade 8 - student with acceptable levels and higher Francophones (2016) %	-	68

Average debt of those who borrowed from the government student loan program

		NB	Canada
College graduate $	2005	$13,200	$12,700
	2010	$16,000	$14,000
Bachelors graduate $	2005	$28,500	$19,600
	2010	$35,200	$22,300

Borrowed from government student loan program

		NB	Canada
College graduate %	2005	57	34
	2010	49	30
Bachelors graduate %	2005	61	60
	2010	60	39

Health Services

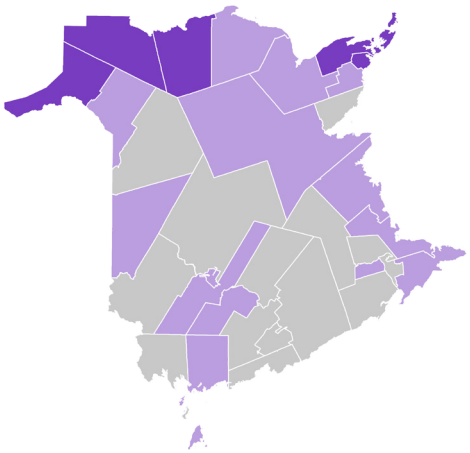
Health Services are designed to prevent and treat diseases which impact population health. Access to care or services at the right place and the right time and based on the respective needs is a key aspect of service quality that can influence the health of individuals.

ACCESSIBILITY

TOP 3

Where do you go to receive health care when you are sick or need care from a doctor, nurse or other health professional (2014) %

1. Your personal family doctor at his/her office
2. Go toA hospital emergency department
3. an alternative practitioner, like a chiropractor, homeopath, or massage therapist



How quickly appointment can be made with personal family doctor (in 5 days or less) (2014) %

- 22 - 42 %
- 43 - 63 %
- 64 - 89 %

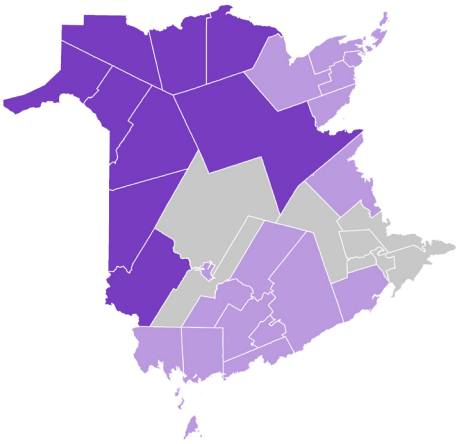
USE OF SERVICES

Use of primary health services in the last 12 months (2014)

	My Community	NB
Access to a Primary Health Team %	25	28
Visited a personal family doctor %	88	87
Visited the hospital emergency department %	44	41
Has seen a specialist %	50	56
Visited an 'after-hours' clinic or 'walk-in' clinic %	10	24
Visited a community health centre %	11	7
Has seen a nurse practitioner %	4	8
Has seen an alternative practitioner %	23	25
Used Tele-Care or other advice/info line %	7	7
Used ambulance services %	4	6
Has used the emergency room as a regular place of care %	18	12
Has been a hospital or extra-mural patient in the last 12 months %	10	14
Adults (18 to 64 years) %	9	13
Seniors (65 years and over) %	15	17

TOP 5 Reasons of admissions to hospital from people in this community (2013/14–2015/16)

1. Newborn
2. Other medical care
3. Wear and tear of knee joint
4. Heart attack
5. Viral/unspecified pneumonia

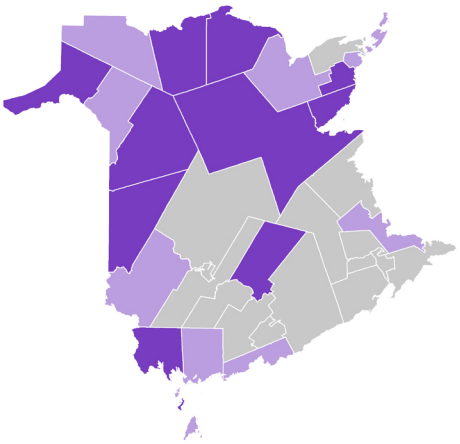


Hospitalization following an injury, for all ages (2013/14–2015/16) rate per 10,000 population

- 93 - 139
- 63 - 92
- 39 - 62

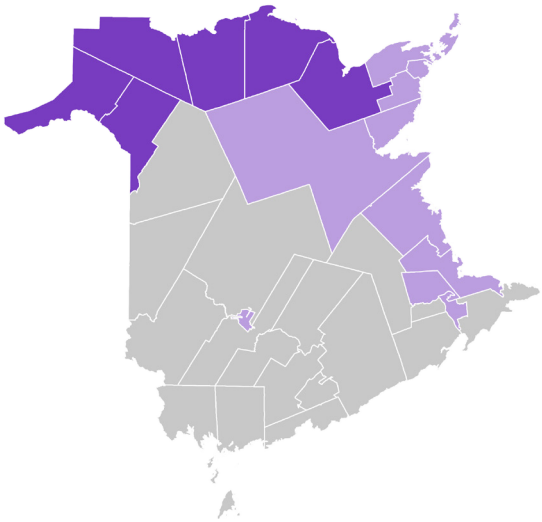
Hospitalization following an injury (2013/14–2015/16)

	My Community	NB
All years, rate per 10,000 population	68	75
0 – 17 years, rate per 10,000 population	38	33
18 to 59 years, rate per 10,000 population	39	42
60 to 79 years, rate per 10,000 population	91	107
80 years and over, rate per 10,000 population	400	497



Avoidable hospitalization (2013/14–2015/16) rate per 10,000 population

- 59 - 87
- 44 - 58
- 23 - 43



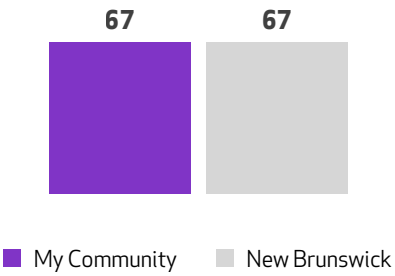
Hospitalization for mental health disorder (where patients are from) (2013/14-2015/16) rater per 10,000 population

72 - 128
38 - 71
7 - 37

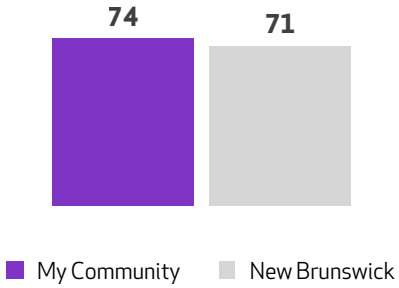
TRANSITION OF CARE

Transition of care is the movement of patients among health care practitioners, settings and home as their condition and care needs changed.

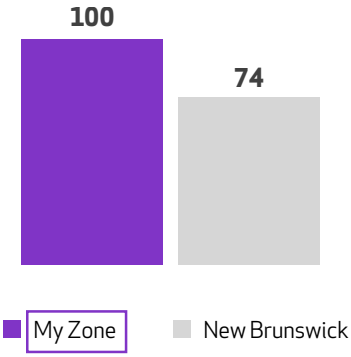
Continuity of care across services (2015) %



Your personal family doctor helps you coordinate the care from other healthcare providers and places when you needed it (2014) %



Average number of days to long term care home placement (2015–2016) days



SCREENING AND PREVENTION

Children	My Zone	NB
Universal newborn and infant hearing screening (2014–2015) %	100	92
Children who receive the healthy toddler assessment (children born in 2013) %	48	49
Kindergarten children meeting immunization requirements (2014–2015) %	63	69

Adults (18 to 64 years) %	My Community	NB
Visited a personal family doctor in the last 12 months (among those with a family doctor) %	88	86
Has seen a health professional about mental or emotional health in the last 12 months %	15	20
Talked to a health professional about things you could do to improve your health or prevent illness like stop smoking, drink less alcohol, etc. (always, usually) %	22	24

Seniors (65 years and over) %	My Community	NB
Visited a personal family doctor in the last 12 months (among those with a family doctor) %	93	91
Has seen a health professional about mental or emotional health in the last 12 months %	7	10
Talked to a health professional about things you could do to improve your health or prevent illness like stop smoking, drink less alcohol, etc. (always, usually) %	24	30
Has received influenza immunization in the last 12 months (2012–2014) %	75	71

	My Zone	NB
Breast cancer screening participation rate for women aged 50 to 69 in the last 2 years (2013–2014) %	48	56

	My Community	NB
Dental professional visit in the last 12 months (2012–2014) %	56	60
Eye specialist visit in the last 12 months (2012–2014) %	32	40
Pharmacist is the person who helps me understand my meds the most often (2014) %	76	70
Colorectal screening (fecal occult blood test in the last 2 years or, colonoscopy or sigmoidoscopy in last 5 years) (50 years and over) (2012–2014) %	36	45
Females (18 to 69 years old) who had a Pap test within the last 3 years (2012–2014) %	66	73

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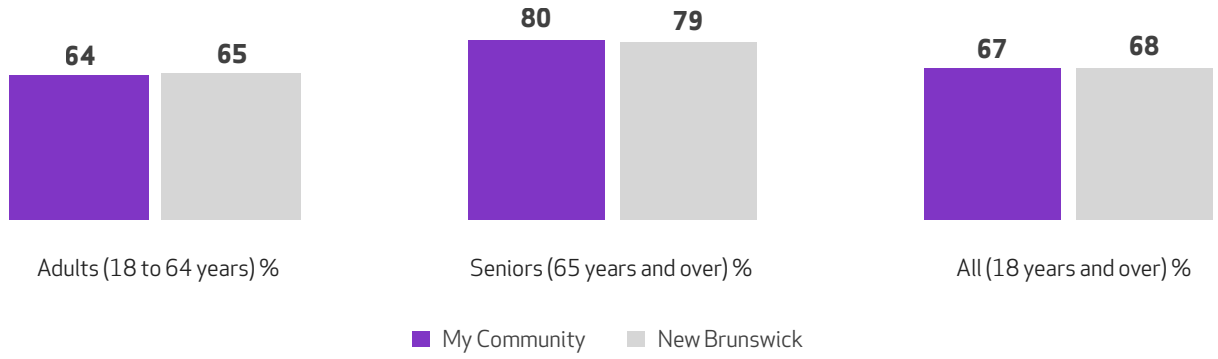
SATISFACTION OF SERVICES

Satisfaction with overall health care service (2014) %



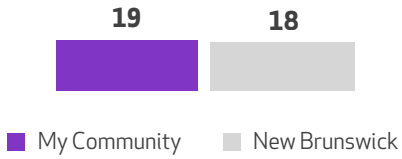
BARRIERS TO HEALTH SERVICES

* When learning about a medical condition or a prescription, how often was it verbally explained to you in a way that you could understand (rarely or never) (2014)	My Community	NB
Adults (18 to 64 years) %	3	3
Seniors (65 years and over) %	2	4

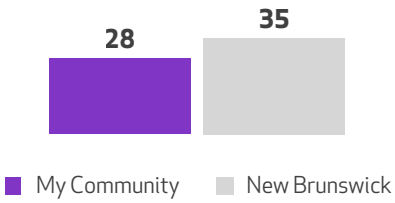
* Difficulty understanding written information about a medical condition or prescription (always or usually) (2014)	My Community	NB
Adults (18 to 64 years) %	11	8.5
Seniors (65 years and over) %	11	13

* Not comparable with 2014 My Community at a Glance

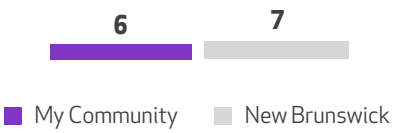
Has no insurance coverage (2014) %



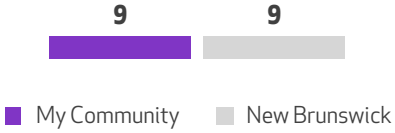
Found the cost for medication too high (2014) %



Had transportation problems in getting health care when needed (2014) %



Had trouble finding your way around the health care system (2014) %



Quality of Life

How healthy people feel or their **quality of Life** is actually a blend of a person's physical, mental, emotional and social functioning. It goes beyond measuring the life expectancy and causes of death.

	My Zone	NB
Infants (newborn)		
Infant with less than average birth weight (< 2,500 grams) (2012–2014) %	5.3	5.8

	My Community	NB
Children (grade 4 to 5)		
Moderate to high level of mental fitness (having a positive sense of how they feel, think and act) (2013–2014) %	82	84
Youth (grade 6 to 12)		
Moderate to high level of mental fitness (having a positive sense of how they feel, think and act) (2015–2016) %	78	79
See their health as being very good or excellent (2015–2016) %	68	66
Resilience (high or moderate level) (2015–2016) %	74	73
Life satisfaction (2015–2016) %	86	85
Symptoms of depression (2015–2016) %	30	31
Symptoms of anxiety (2015–2016) %	29	33
Youth (12 to 17 years)		
See their mental health as being very good or excellent (2012–2014) %	F	75
Adults (18 to 64 years)		
See their mental health as being very good or excellent (2014) %	69	67
See their health as being very good or excellent (2014) %	57	54
Pain or soreness that prevents activities (physical or emotional) (2012–2014) %	10	10
Life satisfaction, very satisfied or satisfied (2012–2014) %	92	93
Seniors (65 years and over)		
See their mental health as being very good or excellent (2014) %	61	60
See their health as being very good or excellent (2014) %	44	36
Pain or soreness that prevents activities (physical or emotional) (2012–2014) %	4	12
Life satisfaction, very satisfied or satisfied (2012–2014) %	93	89

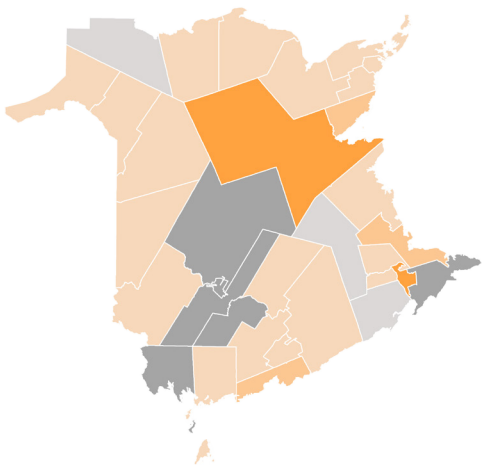
All efforts have been made to provide quality detailed information for each community.
For a variety of reasons, some data is currently only available at the health zone or provincial level.

Diagnosed with a learning exceptionality or special education need

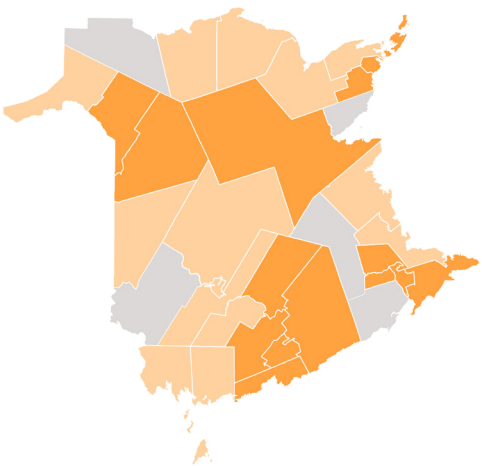
Parent answered for child in kindergarten to grade 5 (2013-2014)			Youth of grade 6 to 12 (2015-2016)	
My Community	NB		My Community	NB
0.0	0.4	Autism/Asperger syndrome %	1.7	1.6
0.8	1.0	Behaviour %	1.6	1.6
0.5	0.3	Blind and low vision %	1.2	1.0
3.3	2.4	Deaf and hard-of-hearing %	0.7	0.9
4.8	4.7	Attention deficit hyperactivity disorder (ADHD) or attention deficit disorder (ADD) %	6.0	7.2
0.7	0.2	Intellectual disability %	0.2	0.4
2.9	2.3	Language/speech impairment %	1.0	1.3
2.7	2.9	Learning disability %	2.6	4.6
0.5	0.2	Physical disability %	0.7	0.6
0.2	0.2	Mental health disability %	2.3	2.3
0.2	0.6	Gifted %	1.6	1.7
1.9	2.3	Other %	1.7	2.1

Age-standardized incidence rates for all cancers combined (2009–2013)

Male



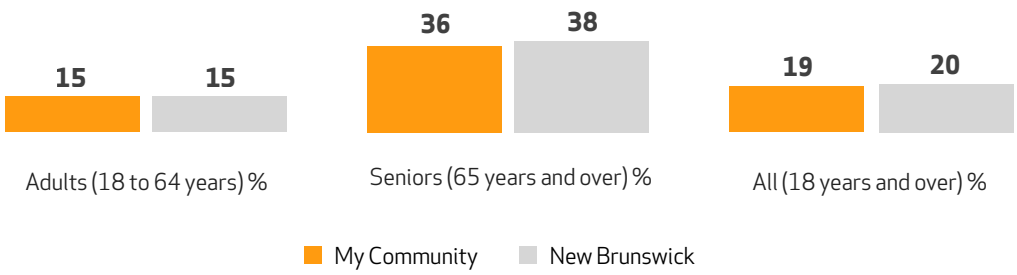
Female



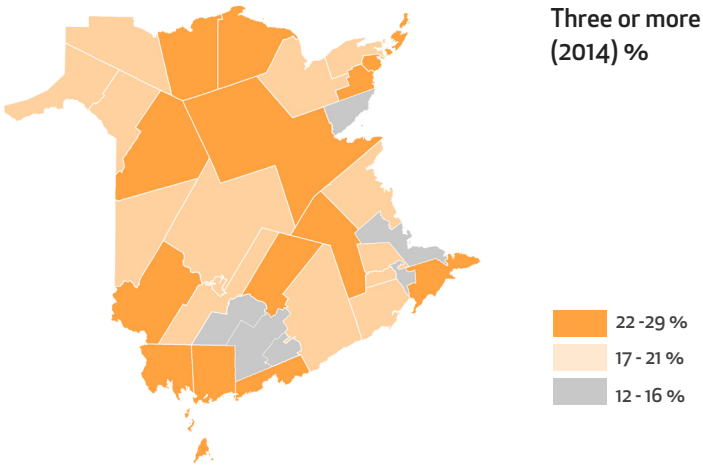
- Category 1 - highest incidence rate
- Category 2
- Category 3
- Category 4 - Lowest incidence rate
- Data too unreliable to be published

Chronic health conditions (2014)	My Community	NB
Emphysema or COPD %	3	3
High blood pressure or hypertension %	28	27
Arthritis %	21	17
Cancer %	9	8
Chronic pain %	15	14
Depression %	13	15
Gastric reflux (GERD) %	15	15
Heart disease %	8	8
Mood disorder other than depression %	1	3
Stroke %	2	3
Someone in the household has a memory problem %	10	10

Three or more chronic health conditions (2014) %



Three or more chronic health conditions (2014) %

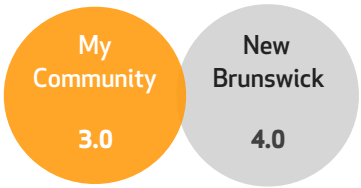


Length of life

Length of life and mortality can be shown in different ways such as life expectancy, median age at death, premature death, potentially avoidable death from preventable causes, potentially avoidable death from treatable causes.

The **infant death rate** is a good indicator of the overall health status of a population. It is a major determinant of life expectancy at birth. It is also sensitive to levels and changes in socio-economic conditions of a population.

Infant death (2012–2014) rate per 1,000 live birth

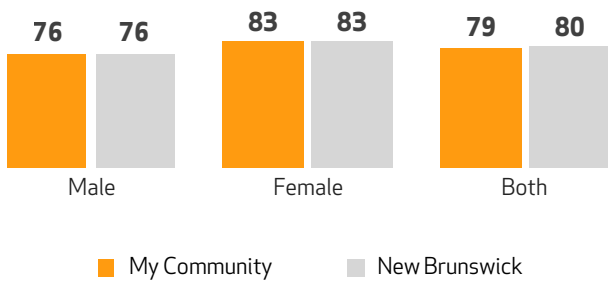


Life expectancy is a projection of the average number of years a person has before death, calculated from the time of birth.

Life expectancy at birth (2007–2009) age	My Zone	NB
Male	76.8	77.5
Female	82.1	82.8
Both	79.5	80.2

Median age at death is the age at which exactly half the deaths registered in a given time period were deaths of people above that age and half were deaths below that age. Having this information available at the community level permits the comparison with the life expectancy at the zone level. It can help to demonstrate the impact of the determinants of health on premature mortality at the community level.

Median age of death (2010–2014) age



All efforts have been made to provide quality detailed information for each community.
For a variety of reasons, some data is currently only available at the health zone or provincial level.

Premature death: Death is inevitable, but a large proportion of individuals die before their time because of illness or injury. Premature deaths are deaths that occur before a person reaches an expected age, for instance, age 75. Many of these deaths are considered to be preventable.

Premature deaths (0 to 19 years) (2010–2014)	My Zone	NB
Cancer, years of life lost, rate per 10,000 population	15	12
Injuries, years of life lost, rate per 10,000 population	33	51
Suicides / self-inflicted injuries, years of life lost, rate per 10,000 population	15	15

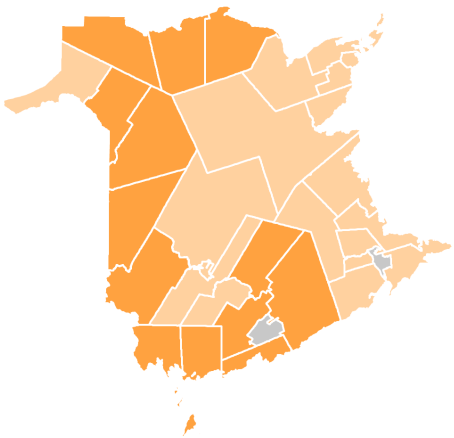
Premature deaths (before age 75) (2010–2014)	My Zone	NB
Cancer, years of life lost, rate per 10,000 population	180	166
Injuries, years of life lost, rate per 10,000 population	57	65
Suicides / self-inflicted injuries, years of life lost, rate per 10,000 population	36	41
Heart and stroke, years of life lost, rate per 10,000 population	98	88
Breathing diseases, years of life lost, rate per 10,000 population	30	23

Potentially avoidable death is premature deaths that could've been prevented or avoided is timely and effective healthcare and disease prevention had occurred.

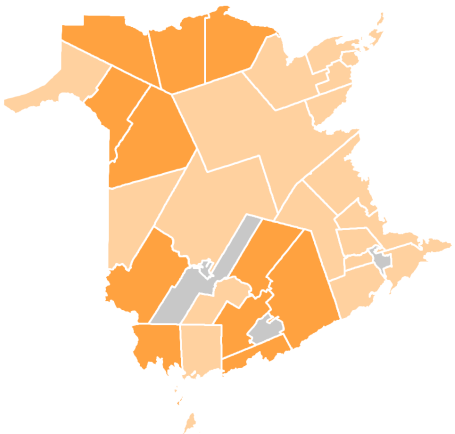
Potentially avoidable deaths from preventable causes are premature deaths that for most part are avoidable through preventing disease or harm from occurring.

Potentially avoidable deaths from treatable causes are premature deaths that could potentially have been avoided through finding and treating the diseases earlier and better.

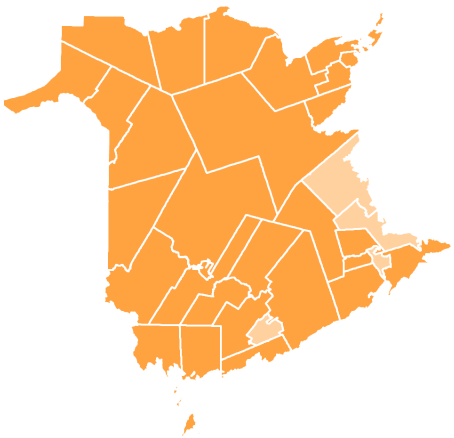
Potentially Avoidable Mortality
2008-2012



Mortality from Preventable Causes
2008-2012



Mortality from Treatable Causes
2008-2012



Category 1 - highest mortality rate
Category 2
Category 3 - lowest mortality rate

All efforts have been made to provide quality detailed information for each community. For a variety of reasons, some data is currently only available at the health zone or provincial level.