Population Health Profile 2022



Caraquet, Paquetville, Bertrand Area





About the New Brunswick Health Council

The New Brunswick Health Council (NBHC) has a two-part mandate: engaging citizens in ongoing dialogue about the improvement of health service quality in the province, and measuring, monitoring and publicly reporting on health service quality and population health. Together, these two streams of activity contribute to greater accountability, improved health system performance, population health outcomes and promotion of a more citizen-centered health care system.

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How to cite this document

New Brunswick Health Council, "Population Health Profile 2022 - Caraquet, Paquetville, Bertrand Area", 2022. [Online].

Cette publication est disponible en français

Profil de santé de la population 2022 - Région de Caraquet, Paquetville, Bertrand

Published: October 2022



What is a Population Health Profile?

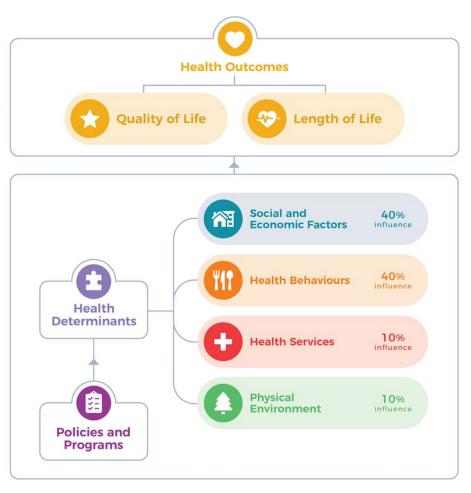
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding of the unique realities lived in each community and can be used to foster collaboration toward a common vision of informed, engaged, and healthier New Brunswickers.

Each profile was created by analyzing information from more than 400 population health indicators, available in the *Population Health Data Tables* on the <u>NBHC website</u>. The information included helps us understand how healthy the citizens in our communities are today (health outcomes) and what factors influences their health and well-being (health determinants).

The Population Health Model

The Population Health Profile is based on a Population Health Model. This model groups the determinants of health into four categories: health behaviours, health services, social and economic factors, and the physical environment. Each category can be influenced by our individual decisions about our health and wellbeing, external factors that influence the health of the population, and government programs and policies.

Together, these determinants impact New Brunswickers' health outcomes: our quality and length of life.





About the Data and Geography

Indicators from a variety of sources are collected, organized, and analyzed by the NBHC. Each has various levels of reliability and limitations as detailed in the specific indicator web page on the <u>NBHC website</u>. The complete list of indicators used in this profile can be found at the end of the document.

Population Health Profiles are available for each of the 7 Health Zones and 33 NBHC Communities. The boundaries of the seven health zones were established by provincial legislation, while the 33 communities were created by the NBHC in 2009 (by further dividing up the seven established health zones). The community boundaries were determined on the basis of the catchment areas of health care centres, community health centres and hospitals. No community has fewer than 5,000 people to ensure data availability, stability, and anonymity.

To learn more about the 33 NBHC Communities, click here.



Key observations for the Caraquet, Paquetville, Bertrand Area

- The population is older than the provincial average and has decreased slightly in recent years.
- Seniors generally have a very good quality of life.
- Employment is predominantly part-year or part-time, and household incomes are below the provincial average.
- Caraquet Area residents gave the health services they receive one of the highest ratings.

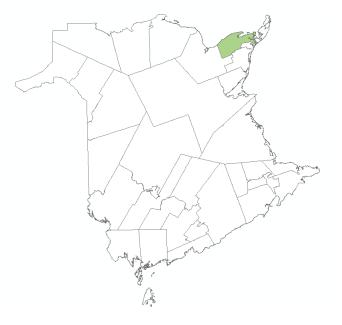


Health of the Community

Demographic Context

- Land area: 913 km²
- Population density: 16 persons per km²

The community of Caraquet experienced a 1.1% decline in population between 2016 and 2020. The birth rate (five per 1,000 population) is significantly lower than the provincial average, while the death rate (ten per 1,000 population) is slightly higher than the New Brunswick average. The median age is 52.7 years, seven years above the provincial median.



A small percentage (2.7%) of the population of the Caraquet community is Indigenous. Immigrants (0.9% of the population) and visible minorities (0.4% of the population) are also poorly represented in the community. About one in ten youth identifies as a sexual minority. In terms of housing, the community of Caraquet has one of the lowest percentages of households made up of five or more people of any community in the province.

Caraquet is one of the New Brunswick communities where French is the main language, as evidenced by the percentage of residents who speak French most often at home (93.5%) and at work (85.5%). In addition, about nine out of ten people (92.2%) choose French when accessing services, one of the highest percentages in the province. As for access to health services in the official language of choice, residents who request health services in French receive them only 74% of the time, a percentage that is only slightly higher than the provincial average (70%).



Health Outcomes

Seven out of ten youths in the community of Caraquet in perceive their health as very good or excellent, however this percentage is much lower among seniors (34%). But seniors have a better perception of their mental health, as about six out of ten in this age group (64%) say their mental health is very good or excellent, the highest percentage of any community in the province. The overwhelming majority of seniors reported being satisfied or very satisfied with life (95%), one of the highest percentages in the province. Loneliness among seniors is less prevalent in Caraquet than elsewhere. In fact, only one in eight seniors (12%) reported feeling lonely in this community, one of the lowest percentages in the province.



Chronic health conditions are less common in the community of Caraquet. Among adults and seniors, the percentage living with three or more chronic conditions (17%) is lower than the provincial average (23%). Only one in seven seniors regularly takes six or more prescription medications, the lowest percentage in New Brunswick for this age group.



Determinants of Health

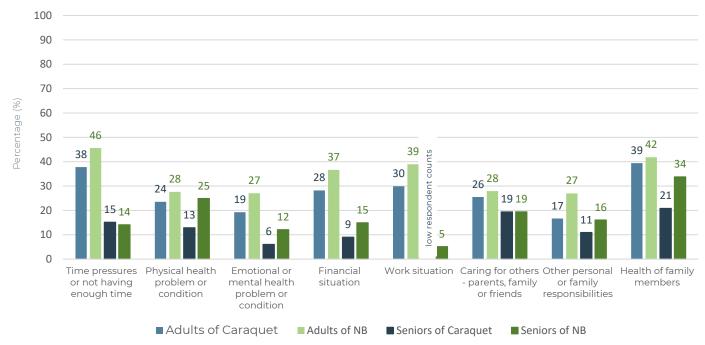
Social and economic factors

Family and social support among youth in the Caraquet region is relatively low. Of note is the fact that only 41% of youth said they like their family and cultural traditions, one of the lowest percentages in the province. In addition, lower-than-average percentages of youth said that their family supports them in difficult times (50%) and that there are people they greatly admire (41%). On the other hand, youth in this community have a good sense of connection with their school. About nine in ten youth feel safe at school and that they are treated fairly by teachers. In addition, 95% of youth have a sense of belonging at their school and 70% feel their mental fitness needs are highly satisfied by the school. However, the school dropout rate (1.5%) is higher than the province-wide average.

In general, adults and seniors in the Caraquet Area have good social supports. Fewer than three in ten residents in these age groups sometimes or often feel a lack of companionship (28%) or social isolation (26%). In addition, only 17% feel socially excluded sometimes or often, the second lowest percentage in the province; the neighbouring Tracadie Area has the lowest. Several reasons for stress among seniors and adults were reported less frequently than in the rest of the province (see Figure 1).



Figure 1. Reasons for Feeling Stressed as Reported by Adults and Seniors in the Caraquet, Paquetville, Bertrand Area



The median household income in the Caraquet Area is below average at \$48,959 per year. In addition, the percentages of households earning less than \$25,000 per year (15%) and between \$25,000 and \$59,999 per year (40%) are higher than average, unlike the figure for households with an annual income of at least \$60,000 (40%), which is lower than the average. As for employment, the Caraquet Area has one of the highest percentages of residents who work part-year or part-time (70%).

Physical environment

Close to one in two households (48%) in the Caraquet Area have a high concentration of radon, the highest percentage in the province. On the other hand, young people are exposed to secondhand smoke in their environment more then the provincial average. Only 7% of youth reported that there is at least one smoker living in the home. There were no episodes of extreme heat or cold, and no boil water orders were in effect during the period under consideration.



Health Behaviours

The health behaviours of Caraquet Area residents are generally favourable. Less than half of youth drink non-nutritious sugary drinks and only 81% of them eat non-nutritious foods, one of the lowest percentages in the province. Youth in this community overwhelmingly reported knowing when they are legally able to consent to sexual activity (85%).

Seniors in the Caraquet Area also have relatively good health behaviours. More specifically speaking, slightly more than half of them get at least 150 minutes of moderate or vigorous physical activity per week, and two-thirds usually sleep for seven or more hours each night. There is, however, a higher-than-average percentage of adults who drink heavily (37%).



Health Services

Access to primary care services in the Caraquet Area is mixed. Just over two in five adults (42%) reported being able to get an appointment with their family doctor within five days, one of the lowest percentages in the province. Fifty-seven percent of seniors, on the other hand, reported the same, which is equal to the provincial average. The figure for access to emergency services is also very similar to the figure for the province as a whole. Two-thirds of people surveyed said they waited less than four hours to access to emergency services.

When ill or in need of care services, Bathurst Area residents use primary care services at frequencies that are roughly similar to the provincial averages (see Figure 2).

Paquetville, Bertrand Area 100 90 80 70 62 Pourcentage (%) 58 60 50 40 30 20 20 12 10 10 0 **Family doctor** After-hours clinic or walk-in **Hospital emergency** clinic department ■Caraquet ■NB

Figure 2. Types of Services Most Often Used When Care Services are Needed in Caraquet,
Paguetville. Bertrand Area



Hospitalization rates for injuries are lower than the provincial average for all age groups, but especially low for youth (13 per 10,000 residents) and adults (31 per 10,000 residents). The rate of preventable hospitalizations is also lower than the provincial average, which puts the Caraquet Area in 4th place among New Brunswick communities.

Residents of the Caraquet Area use mental health services less frequently. Only one in ten adults reported feeling the need to consult a health professional about their mental health, their emotional health, or their alcohol or drug use. The percentage of youth who reported a similar need is higher (27%), but still below the provincial average (30%). Only 8% of residents over the age of 18 have consulted a health professional for the abovementioned concerns, which is half the provincial average (16%).

Among those who sought health services in general, the rate of occurrence of some reported barriers were very low, as compared to the rest of the province (see Table 1).

Table 1. Barriers to Receiving Health Services Reported by Caraquet, Paquetville, Bertrand Area Residents				
	Caraquet (%)	NB (%)		
Did not fill a prescription for medicine, or skipped doses because of the cost	2	6		
Transportation problems in getting health care	2	6		
Unable to leave the house due to a health problem	6	11		
Trouble getting medical or rehabilitation equipment or supplies	3	4		
Trouble navigating the health system	3	8		

Just over one-third of adults reported being very knowledgeable about the effects of each of their medications (37%) and very confident in their ability to manage their condition (34%). Percentages were also below the provincial average for other health services indicators: seventy percent of residents reported that their family doctor provides clear explanations, 63% said they feel included in the decision-making process



related to their health, and 62% reported always receiving help from their family doctor in coordinating the care of other health professionals.

Despite this, Caraquet Area residents have one of the highest levels of satisfaction with the health services they receive. In fact, 73% of adults and 88% of seniors rated the health services they received positively; the latter percentage being the highest in the province.



Conclusion

The Caraquet, Paquetville, Bertrand Area has an older than average population, which has experienced a slight decrease in numbers in recent years. The vast majority of residents speak French at home and at work and the community has relatively few newcomers.

Seniors in this community generally have a very good quality of life, both in terms of their perceived mental health and the relatively low percentage of residents with multiple chronic health conditions. Youth, however, have lower-than-average levels of social and family support in some respects, although their sense of connection to their school is quite favourable.

Residents of the Caraquet Area work mostly part-time or part-year, and household incomes are lower than the provincial average. In addition, this community has the highest percentage of households with a high concentration of radon.

Access to primary health care in the Caraquet Area is mixed. Wait times for emergency services are about average for the province, but less than half of adults are able to make an appointment with their doctor within a short time frame. Caraquet Area residents gave the health services they receive one of the most favourable ratings.



Source

Detailed information for each indicator used for these observations is available on the New Brunswick Health Council website. The list of indicators, their unique code and the year of dissemination are available (Table 3) to facilitate this research.

It is important to note that the indicators are continuously updated on the NBHC website.

<u>Caraquet, Paquetville, Bertrand Area | New Brunswick Health Council (nbhc.ca)</u>

Indicator	Unique Code	Year
Demographic context		
Land area	STATC-CENCU-001	2016
Population density	STATC-CENCU-002	2016
Population change from 2016 to 2020	STATC-SCCEN-024	2016 to 202
Indigenous	STATC-SCCEN-023	2016
Immigrant	STATC-SCCEN-009	2016
Median age of population	STATC-SCCEN-002	2016
Birth rate	SNB-VITST-002	2014 to 2018
Death rate	SNB-VITST-001	2014 to 2018
Private household with 5 or more people	STATC-SCCEN-007	2016
Language most spoken at home - French	STATC-SCCEN-012	2016
Language most spoken at work - French	STATC-SCCEN-020	2016
Language chosen when accessing services - French	PH_LOS02_2	2020
Always receive health care services in the official language of their choice - French	PH_LOS03_3	2020
Youth - sexual minority	SH_SEO02_7	2018-2019
1. 101		
Health outcomes	SH_HEP01_1	2018-2019
Youth - See their health as being very good or excellent		2018-2019
Seniors - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Seniors - Perceived health, very good or excellent	PH_HEP01_1	
Seniors - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Seniors - Lonely (based on loneliness score) Seniors - Take 6 or more different prescription medications on	PH_SIL04_1	2020
a regular basis	PH_MED01_1	2020
3 or more chronic health conditions	PH_CHC12_2	2020



Social and economic factors		
Youth - enjoy my cultural and family traditions	SH_RES12_1	2018-2019
Youth - my family stands by me during difficult times	SH_RES07_1	2018-2019
Youth - have people I look up to	SH_RES05_1	2018-2019
Adults and seniors - lack companionship some of the time or often	PH_SIL01_1	2020
Adults and seniors - feel left out some of the time or often	PH_SIL02_1	2020
Adults and seniors - feel isolated some of the time or often	PH_SIL03_1	2020
Youth - feel teachers treat me fairly	SH_SCC04_1	2018-2019
Youth - feel safe at school	SH_SCC05_1	2018-2019
Youth - feel connected to my school	SH_SCCTS_1	2018-2019
Adults - Time pressures or not having enough time	PH_STRTP_1	2020
Adults - Physical health problem or condition	PH_STRPH_1	2020
Adults - Emotional or mental health problem or condition	PH_STREH_1	2020
Adults - Financial situation	PH_STRFS_1	2020
Adults - Work situation	PH_STRWS_1	2020
Adults - Caring for others - parents, family or friends	PH_STRCO_1	2020
Adults - Other personal or family responsibilities	PH_STROP_1	2020
Adults - Health of family members	PH_STRHF_1	2020
Seniors - Time pressures or not having enough time	PH_STRTP_1	2020
Seniors - Physical health problem or condition	PH_STRPH_1	2020
Seniors - Emotional or mental health problem or condition	PH_STREH_1	2020
Seniors - Financial situation	PH_STRFS_1	2020
Seniors - Work situation	PH_STRWS_1	2020
Seniors - Caring for others - parents, family or friends	PH_STRCO_1	2020
Seniors - Other personal or family responsibilities	PH_STROP_1	2020
Seniors - Health of family members	PH_STRHF_1	2020
School dropout rate	GNB-EESC-005	2018-2019
Work part of the year and/or part time	STATC-SCCEN-052	2016
Household income - less than \$25,000	STATC-SCCEN-056	2016
Household income - \$25,000 to \$59,999	STATC-SCCEN-057	2016
Household income - \$60,000 and more	STATC-SCCEN-058	2016
Median household income	STATC-SCCEN-053	2016
Physical environment Youth - have at least one person who smokes inside their		
home	SH_SMO13_1	2018-2019
Extreme heat events	CCCS-DCLIM-001	2020
Extreme cold days	CCCS-DCLIM-002	2020
Greenhouse gas emission	STATC-NRCEN-001	2019
Radon - household with high radon concentration	HCRAD-CCSRCH-001	2007
Number of boil orders	GNB-OCMOH-001	2020



Health behaviours		
Youth - Eat non-nutritious foods	SH_EATNN_1	2018-2019
Youth - Drink non-nutritious sugary beverages	SH_DRINN_1	2018-2019
Seniors - Moderate or vigorous physical activity	PH_PHY01_1	2020
Adults - Heavy drinking	PH_ALC01_3	2020
Youth - report they know when they are legally able to consent to sexual activity	SH_SEV03_1	2018-2019
Health Services		
Family doctor	PH_USEPB_1	2020
After-hours clinic or walk-in clinic	PH_USEPB_3	2020
Hospital emergency department	PH_USEPB_5	2020
Youth - hospitalization following an injury	CIHI-DAD-015	2017-2018 to 2019-2020
Adults - hospitalization following an injury	CIHI-DAD-016	2017-2018 to 2019-2020
Avoidable hospitalization	CIHI-DAD-003	2016-2017 to 2019-2020
Youth - needed to see or talk to someone for a mental or emotional problem	SH_MHI01_1	2018-2019
Saw or talked to a health professional about their mental or emotional health, or their use of alcohol or drugs	PH_MHI05_1	2020
Did not fill a prescription for medicine, or skipped doses because of the cost	PH_BARFN_1	2020
Transportation problems in getting health care	PH_BARTP_1	2020
Unable to leave the house due to a health problem	PH_BARLH_1	2020
Trouble getting medical or rehabilitation equipment or supplies	PH_BARME_1	2020
Trouble navigating the health system	PH_BARWH_1	2020
Adults - Family doctor - waited 5 days or less to have an appointment	PH_ACCFD_2	2020
Seniors - Family doctor - waited 5 days or less to have an appointment	PH_ACCFD_2	2020
Hospital emergency department - waited less than 4 hours	PH_ACCEA_1	2020
Adults - very confident in managing their health condition	PH_MGT01_1	2020
Family doctor - always explains things in a way that they can understand	PH_COMFA_1	2020
Family doctor - always involves them in decisions about their health care	PH_APPFA_1	2020
Know what their prescribed medications do, strongly agree	PH_MED02_1	2020
Family doctor - always helps them coordinate the care from other providers	PH_CRDFB_1	2020
Adults - Citizens - provide a favourable rating for overall health care services received	PH_SATOA_1	2020
Seniors - Citizens - provide a favourable rating for overall health care services received	PH_SATOA_1	2020

