

Population Health Profile 2022



Fredericton



New Brunswick
Health Council

Conseil de la santé
du Nouveau-Brunswick



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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What is a Population Health Profile?

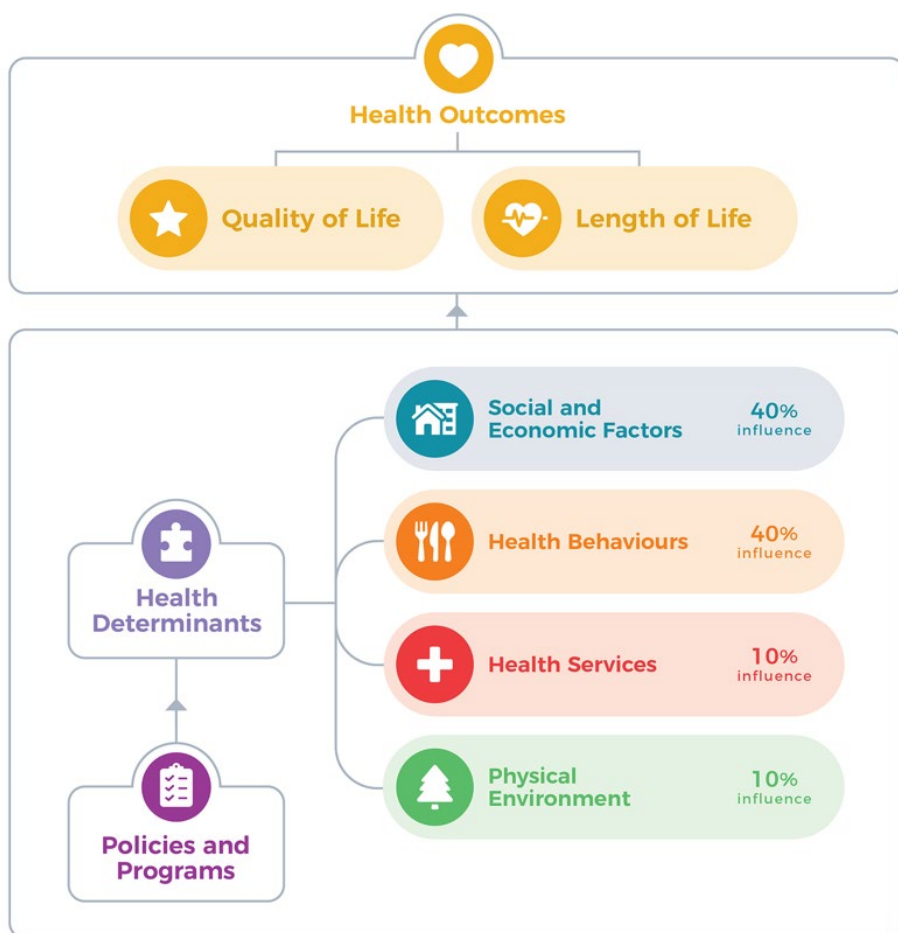
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding 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 [NBHC website](#). 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 well-being, 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 [NBHC website](#). 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 Fredericton

- This community has the highest population density in the province and one of the highest population growth rates in recent years.
- A large proportion of residents have a favourable perception of their health compared to other New Brunswickers.
- The level of education is higher than in any other New Brunswick community.
- Residents of this community reported the lowest level of satisfaction with the health services they receive.



Health of the Community

Demographic Context

- Land area: 133 km²
- Population density: 484 persons per km²



Fredericton is the smallest community in terms of land area. As a result, the community has the highest population density in the province. Fredericton experienced a 9% population increase between the years 2016 and 2020, one of the highest growth rates for that time period. The birth rate (10 per 1,000 population) is higher than the provincial average, while the death rate (9 per 1,000 population) is the same as the provincial average. The median age is 40 years, six years younger than the provincial median.

Fredericton has the highest percentage of immigrants of any New Brunswick community (11.3%). The same is true for recent immigrants (from 2011 to 2016) who make up 4.4% of the population, also the highest in the province. This community also has the highest percentage of visible minority residents (10.3%). The Indigenous population (3.2%), however, is slightly below the provincial average. About one fifth of youth (19%) identify as a sexual minority. Fredericton has one of the highest percentages of single-person households (32%).

The city is a predominantly English-speaking community where English is the language most often spoken at home (88%) and at work (95%). In addition, the overwhelming majority of Fredericton residents (94%) choose English when accessing services. Almost half (47%) of youth are bilingual. At home, 6% of Fredericton residents speak a language other than Indigenous languages, English or French; the highest percentage of any community in New Brunswick.



Health Outcomes

This community has the highest percentage of adults who rated their health as very good or excellent (54%). Fredericton and the Sackville area share the top provincial ranking for median age at death for all residents, at 82 years. Fredericton also has the lowest percentage of cancer prevalence (6%) for adults and seniors living with chronic health conditions.





Determinants of Health

Social and economic factors

Fredericton is the New Brunswick community with the highest percentage of residents with a post-secondary certificate, diploma or degree (72%). While this community has a higher-than-average school dropout rate (1.8%), other indicators related to the availability of services and education for children and youth are more favourable (see Table 1).

Table 1. Education Indicators for Children and Youth in the Fredericton Area

	Fredericton	NB
Approved childcare spaces - infants (1 and under) (Rate per 100 population aged 1 and under)	25	18
Approved childcare spaces - preschool (2-4 years) (Rate per 100 population aged 2 to 4)	97	60
Approved childcare spaces - school-age (5-12 years) (Rate per 100 population aged 5 to 12)	53	29
Kindergarten school readiness (%)	94	85
Youth - school marks above average or excellent (80% or more) (%)	69	63

The employment rate (59%) and labour force participation rate (65%) are higher than average in Fredericton. The median household income (\$60,436) is close to the provincial average. Median housing costs are among the highest in the province at \$1027 per month for homeowners and \$857 per month for renters and almost one quarter (24%) of Fredericton households spend at least 30% of their total income on housing, the highest percentage in New Brunswick.

Social and family support for adults and seniors in Fredericton is slightly less than average. One-third of residents in those age groups sometimes or often feel socially excluded and 36% sometimes or often feel socially isolated. More than half of adults



reported that time pressure or lack of time is a source of stress, while less than a quarter of adults (22%) stated that physical health problems or conditions are a reason for stress. In terms of internet access, 97% of adults and 92% of seniors have access to it at home; both percentages are higher than average.

Physical environment

Fredericton has the highest percentage of renters (42%) and the lowest percentage of homeowners (58%). It also has the province's highest percentage of adults and seniors who walk or bike to work (11%). In addition, 4% of residents use public transit, a higher-than-average percentage.



Fredericton youth are exposed to less-than-average environmental tobacco smoke. In fact, only one in ten youth said there is at least one person who smokes inside their home every day or almost every day and 13% of youth reported riding in a car with someone who was smoking cigarettes within the previous seven days (the provincial average is 18%).

Health Behaviours

The health behaviours of Fredericton adults are generally better than average. Specifically speaking, more than half of adults (55%) engage in moderate to vigorous physical activity at the recommended level. In addition, about two thirds of residents in this age group usually get at least seven hours of sleep per day. Fewer adults (16%) and seniors (7%) smoke daily or occasionally. With respect to drinking, the percentages of adults (25%) and seniors (9%) who drink heavily are lower than average. Youth in Fredericton are the least likely to drink heavily (9%).

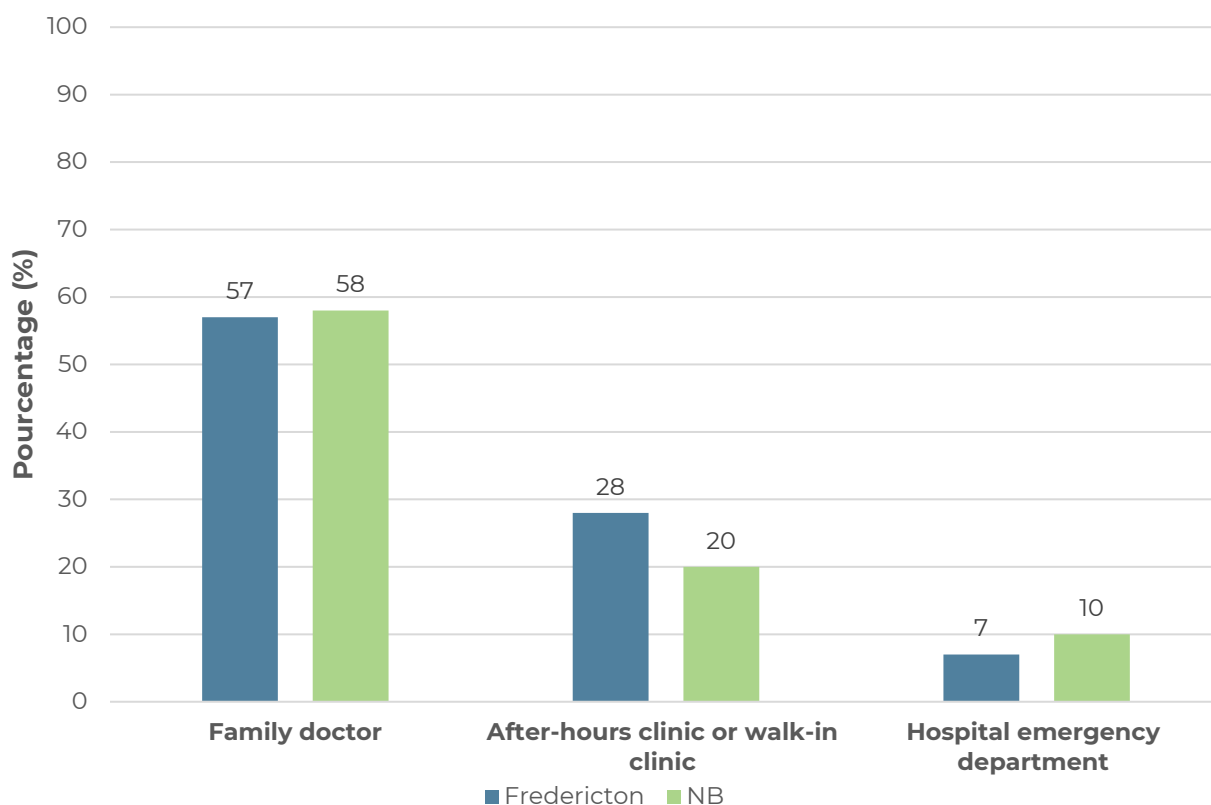


Health Services

The percentage of Fredericton residents who have a doctor (77%) is one of the lowest. However, access to family doctors within a reasonable time frame is close to the provincial average for this community. More than half of adults (51%) and seniors (58%) reported being able to get an appointment with their family doctor within five days. But access to emergency services is less favourable than in most New Brunswick communities. Less than two thirds of residents reported waiting less than four hours to access emergency services (64%).

Fredericton residents often use after-hours or walk-in clinics when they are ill or need care services (see Figure 1).

Figure 1. Types of Services Most Often Used When Care Services are Needed in Fredericton





The percentage of Fredericton area residents of all ages that reported feeling the need to talk to a professional about their mental health is similar to the provincial average. In addition, the percentage of adults in this community who have consulted a health care professional about their mental health is similar to the figures for the province as a whole.

Fredericton stands out in terms of people who said they know how their prescribed medication works (57%). The community is also among the best in terms of adults who are very confident about their ability to manage their health (45%). The vast majority of seniors said that verbal information related to their health condition or prescriptions is easy to understand (96%).

However, when asked to rate the health services they received Fredericton was the community with the lowest rate of satisfaction. Only 60% of residents rated the health services they received positively.



Conclusion

In summary, Fredericton has the highest population density in the province and has experienced some of the highest population growth in recent years. It has a relatively young and diverse population, including immigrants, visible minorities, and youth who identify as sexual minorities.

A large percentage of residents in this community have a favourable perception of their health and the median age at death is one of the highest. Social and family support for adults and seniors, however, is somewhat lower than average. The health behaviours of Fredericton residents are generally positive.

Residents of this community have the highest level of education in the province. Fredericton's median housing costs are relatively high; it has the highest percentage of households that spend 30% or more of their income on housing.

Relatively few Fredericton residents have a family doctor. For those that do, the time frames for getting an appointment with these health professionals are similar to the provincial average. The wait times for emergency services are less favourable than the average for New Brunswick. Residents of this community reported the lowest level of satisfaction with the health services received.



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 2) to facilitate this research.

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

[Fredericton | New Brunswick Health Council \(nbhc.ca\)](https://nbhc.ca)

Table 2. Indicator, unique code and year of dissemination		
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 2020
Indigenous	STATC-SCCEN-023	2016
Immigrant	STATC-SCCEN-009	2016
Recent immigrant from 2011 to 2016	STATC-SCCEN-010	2016
Visible minority	STATC-SCCEN-022	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
Person living alone	STATC-SCCEN-008	2016
Language most spoken at home - English	STATC-SCCEN-011	2016
Language most spoken at home - other languages	STATC-SCCEN-015	2016
Language most spoken at work - English	STATC-SCCEN-019	2016
Language chosen when accessing services - English	PH_LOS02_1	2020
Youth - sexual minority	SH_SEO02_7	2018-2019
Health outcomes		
Adults - Perceived health, very good or excellent	PH_HEP01_1	2020
Cancer (prevalence)	PH_CHCCA_1	2020
Median age at death	SNB-VITST-006	2014 to 2018
Social and economic factors		
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 - Have internet access at home	PH_INT02_1	2020
Seniors - Have internet access at home	PH_INT02_1	2020
Time pressures or not having enough time	PH_STRTP_1	2020
Physical health problem or condition	PH_STRPH_1	2020
Approved child care spaces - infants (1 and under)	GNB-EESC-001	2019
Approved child care spaces - preschool (2-4 years)	GNB-EESC-002	2019
Approved child care spaces - school-age (5-12 years)	GNB-EESC-003	2019
Kindergarten school readiness	GNB-EESC-004	2018-2019
Youth - school marks above average or excellent (80% or more)	SH_ACA01_1	2018-2019
School dropout rate	GNB-EESC-005	2018-2019
Highest level completed of education - postsecondary certificate, diploma or degree	STATC-SCCEN-039	2016
Participation rate	STATC-SCCEN-040	2016
Employment rate	STATC-SCCEN-041	2016
Median household income	STATC-SCCEN-053	2016
Median monthly shelter costs - rented residence	STATC-SCCEN-061	2016
Median monthly shelter costs - owned residence	STATC-SCCEN-060	2016
Spending 30% or more of household total income on shelter costs	STATC-SCCEN-059	2016
Physical environment		
Own a dwelling	STATC-SCCEN-025	2016
Rent a dwelling	STATC-SCCEN-026	2016
Adults and seniors - walk or bike to get to work	STATC-SCCEN-033	2016
Use public transport	STATC-SCCEN-034	2016
Youth - have at least one person who smokes inside their home	SH_SMO13_1	2018-2019
Youth - report riding in a car with someone who was smoking cigarettes	SH_SMO14_1	2018-2019
Health behaviours		
Adults - Moderate or vigorous physical activity	PH_PHY01_1	2020
Adults - Usually sleeps for 7 hours or more each night	PH_SLE01_1	2020
Youth - Heavy drinking	SH_ALC04_1	2018-2019
Adults - Daily or occasional smoker	PH_SMO01_1	2020
Seniors - Daily or occasional smoker	PH_SMO01_1	2020
Adults - Heavy drinking	PH_ALC01_3	2020
Seniors - Heavy drinking	PH_ALC01_3	2020
Health Services		
Have a family doctor	PH_ACCFA_1	2020
Family doctor	PH_USEPB_1	2020
After-hours clinic or walk-in clinic	PH_USEPB_3	2020
Hospital emergency department	PH_USEPB_5	2020
Adults - Saw or talked to a health professional about their mental or emotional health, or their use of alcohol or drugs	PH_MHI05_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
Seniors - Verbal information about condition/prescription is easy to understand, always or usually	PH_COMOA_1	2020
Know what their prescribed medications do, strongly agree	PH_MED02_1	2020
Citizens - provide a favourable rating for overall health care services received	PH_SATOA_1	2020