

Population Health Profile 2022



Grand Falls, Saint-Léonard, Drummond Area



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?

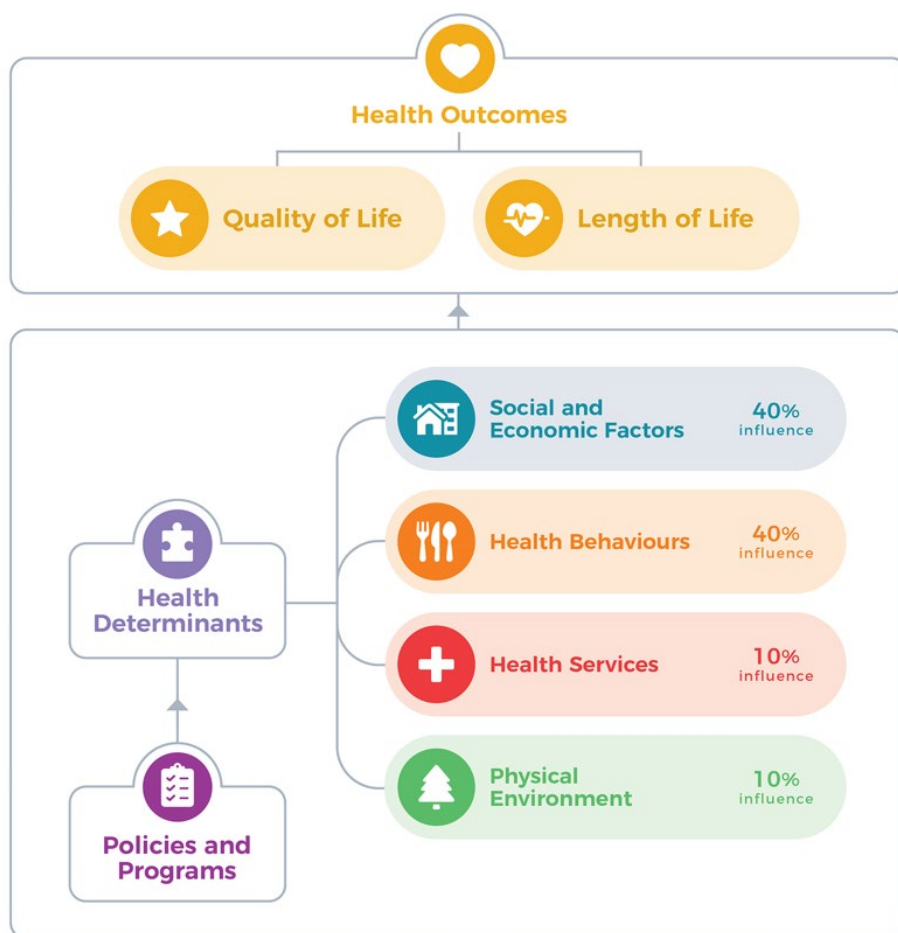
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding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

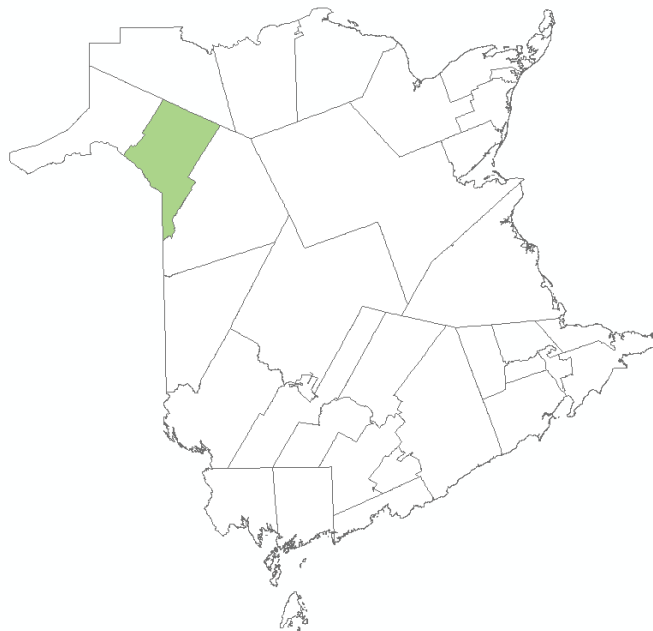
- The population has decreased slightly in recent years.
- In some respects, the quality of life for adults and seniors is below the provincial average.
- Children have good family and social supports.
- Adults in the Grand Falls area are the least confident, province wide, about their ability to manage their health.



Health of the Community

Demographic Context

- Area: 2252 km²
- Population density: 7 persons per km²



The population of the Grand Falls, Saint-Léonard, Drummond Area dropped by 0.3% between 2016 and 2020. The birth rate (eight per 1,000 population) is identical to the provincial average, while the death rate (11 per 1,000 population) is above it. The median age in the Grand Falls area is 48 years, two years older than the median age in New Brunswick.

Residents who identify as Indigenous account for 2.7% of the population of this community; the figure is the same for immigrants, but much smaller for visible minorities (0.6%). In the Grand Falls area, 14.1% of youth identify as a member of a sexual minority. The community also has the province's lowest percentage of youth who have been diagnosed with having special education needs (14.2%).

The Grand Falls area is a primarily French-speaking community: French is the language most often spoken at home (81%) and at work (65%). In addition, the majority of Grand Falls area residents (63%) choose French when accessing services. Residents who request health services in English are served in their language of choice 25% of the time, the lowest in the province. The figure for residents who request health services in French is 74%. The percentage of residents who said they know English and French (72%) is one of the highest in the province. As regards youth specifically, 81% of them are bilingual.



Health Outcomes

The percentage of youth who are at a healthy weight is one of the lowest in the province (57%). In addition, of the communities for which this data is available, the Grand Falls area has the highest percentage of underweight children (11%).

One quarter of adults (25%) in this community feel very confident about their ability to manage their health, which is the lowest percentage in New Brunswick (provincial average = 40%) for this age group. Seniors scored slightly higher on this question (33%), but still below the provincial average (42%). Six percent of adults and seniors live with a mood disorder other than depression (such as bipolar disorder or mania, for example), the highest percentage in the province for these age groups. And eight in ten seniors (80%) reported they are satisfied or very satisfied with life, the lowest percentage in New Brunswick for their age group.

The median age of death for males (74 years) and females (81 years) are both below the provincial median.



Determinants of Health

Social and economic factors

Family and social supports for children in the Grand Falls area are generally good. More than nine in ten children (92%) feel that their mental fitness needs are highly satisfied by their friends. Two thirds of parents reported having shared an evening meal with their children every evening over the previous seven days. The sense of connection children in this community have with their school is also generally positive (see Table 1).

Table 1. Children's Perception of Support at School and/or Work in the Grand Falls, Saint-Léonard, Drummond Area

	Grand Falls (%)
Feel teachers treat me fairly	69
Feel safe at school	65
Feel connected to my school	55
Mental fitness needs highly satisfied by school	78

The Grand Falls area has more approved child care spaces than average for each of the three age groups of children. There are 31 spaces for every 100 children aged 1 and under, 89 spaces for every 100 children aged 2 to 4 and 43 spaces for every 100 children aged 5 to 12.

Youth are less affected by food insecurity than average. Only 4% of youth reported that they are often or always hungry when they go to bed or school because there is not enough food in the house. And yet, the median income of single-parent families (\$23,432 per year) is one of the lowest in the province.

Physical environment

The Grand Falls area did not experience any extreme cold days or extreme heat events during the period under consideration. In addition, there were no boil water orders and the concentration of ground-level ozone is the lowest of all the communities for which



this data is available (tied with the Bathurst, Beresford Area). However, there is a high concentration of radon in 36% of households, a higher percentage than the provincial average.

Health Behaviours

The children in this community have mixed eating and physical activity habits. On the one hand, seven in ten children eat breakfast every day and only 18% of children had eaten a meal while watching television at least three times in the previous seven days. On the other hand, more than two thirds of parents (68%) said they had eaten at a fast-food restaurant with their child at least once in the previous seven days. Only 16% of children get the recommended amount of vigorous or moderate physical activity, the lowest percentage of all the communities for which this data is available.

Youth in this community have generally good habits when it comes to tobacco, alcohol and drug use. Less than one-quarter of youth (23%) are at risk of becoming future smokers, which is one of the lowest percentages in the province. In addition, only about one in ten youth use cannabis and 13% of youth drink heavily; both figures are slightly lower than the provincial average. However, when it comes to sexual activity, just over half of youth (54%) reported they know when they are legally able to consent to sexual activity, which is well below the provincial average (71%).

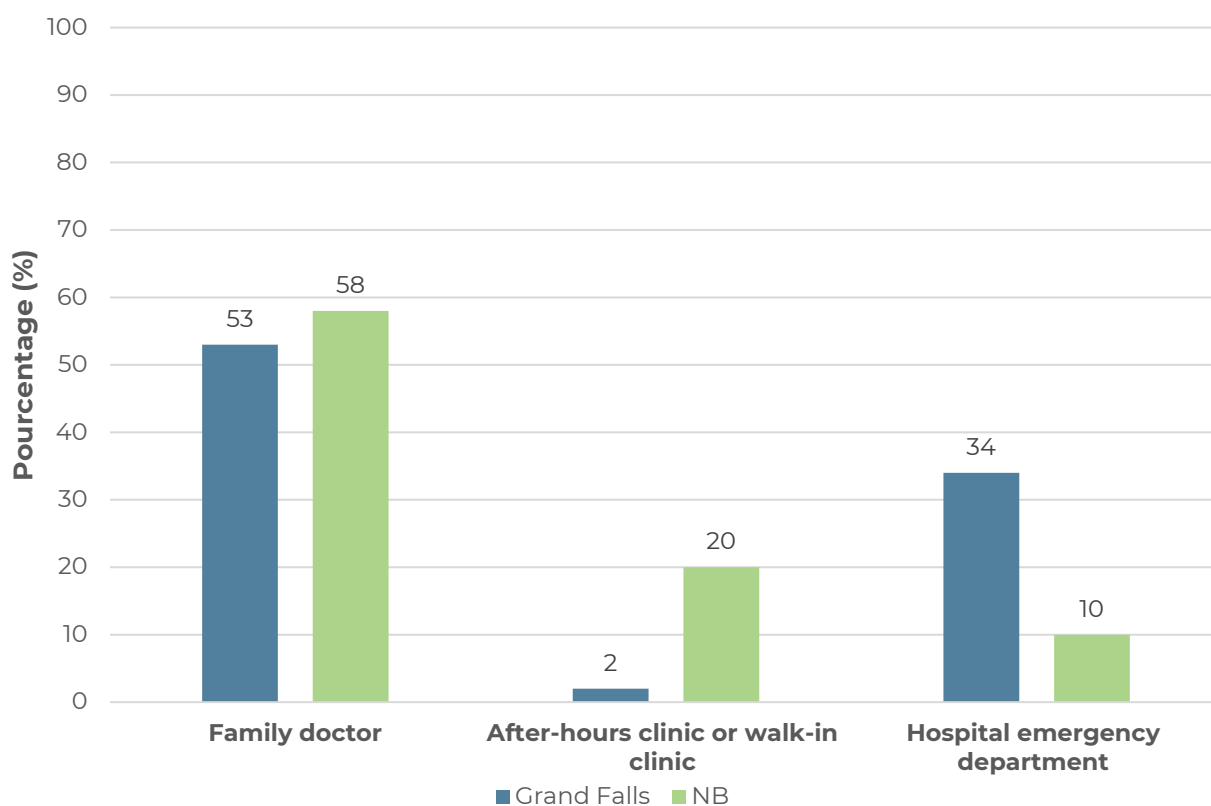


Health Services

The Grand Falls area is close to the provincial average in terms of access to primary health care services. Half of adults, but fewer seniors (47%), reported being able to get an appointment with their family doctor within five days. However, seven in ten residents reported they waited less than four hours to access emergency services.

When ill or in need of care services, Grand Falls area residents use after-hours or walk-in clinics less often than any other New Brunswick community (see Figure 1).

Figure 1. Types of Services Most Often Used When Care Services are Needed in Grand Falls, Saint-Léonard, Drummond Area



Rates of hospitalization for injuries and mental health disorders are well above the provincial averages for all age groups (see Table 2).



Table 2. Hospitalization by Grand Falls, Saint-Léonard, Drummond Area Residents

	Grand Falls (rate)*	NB (rate)*
Hospitalization following an injury	115	74
Youth	61	29
Adults	73	42
Seniors	282	208
Hospitalization for mental health disorder	119	51
Youth	99	33
Adults	146	64
Seniors	57	28

** Rate per 10 000 population*

Adults and seniors use mental health services at a level similar to the province as a whole. As for youth, one quarter of them reported having felt the need to see someone for an emotional or mental health problem, one of the lowest proportions province-wide.

Only one in four adults reported being very confident about their ability to manage their health, the lowest proportion of any New Brunswick community. In addition, just over one third of adults reported being very familiar with the effects of each of their medications (38%). Sixty-two percent of them said they feel included in the process of making decisions about their health, and 56% said that pharmacists are the most helpful in terms of helping them understand how to take their medications; both figures are lower than the percentages for the province as a whole.

Adults and seniors differ in terms of how they rated the health services they received. More than three in four seniors (78%) gave the health services they received a positive rating, while only 56% of adults did the same; the latter is one of the smallest percentages in the province.



Conclusion

In summary, the Grand Falls, Saint-Léonard, Drummond Area has experienced a slight decrease in population in recent years. The majority of its residents speak French and are among the most bilingual in the province.

Children in the Grand Falls area have good family and social supports. Youth in grades 6 to 12 have generally good substance use habits. Adults and seniors in this community have a lower quality of life than the provincial average, especially in terms of life satisfaction and confidence in their ability to manage their health.

Access to emergency services and to a family doctor in this community is close to the New Brunswick average. Residents have a relatively high rate of hospitalization due to injuries or mental health issues. In addition, adults in the Grand Falls area are the least confident about their ability to manage their health, and they gave the health services received one of the lowest ratings in the province.



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 NBHC website.

[Grand Falls, Saint-Léonard, Drummond Area | New Brunswick Health Council \(nbhc.ca\)](https://nbhc.ca)

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
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
Language most spoken at home - French	STATC-SCCEN-012	2016
Language most spoken at work - French	STATC-SCCEN-020	2016
Knowledge of official language - French and English	STATC-SCCEN-018	2016
Youth bilingualism - English and French	STATC-SCCEN-001	2016
Language chosen when accessing services - English	PH_LOS02_1	2020
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 diagnosed with special education needs	SH_SENAL_1	2018-2019
Youth - sexual minority	SH_SEO02_7	2018-2019
Health outcomes		
Children - Underweight	SP_BMI02_2	2019-2020
Youth - Healthy weight	SH_BMI02_1	2018-2019
Seniors - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Adults and seniors - Mood disorder (other than depression)	PH_CHCMD_1	2020
Adults - very confident in managing their health condition	PH_MGT01_1	2020
Seniors - very confident in managing their health condition	PH_MGT01_1	2020



Median age at death - Male	SNB-VITST-006	2014 to 2018
Median age at death - Female	SNB-VITST-006	2014 to 2018
Social and economic factors		
Parents - report eating dinner (evening meal) with their children	SP_EAT09_1	2019-2020
Children - with mental fitness needs highly satisfied by friends	SE_MEFFR_1	2019-2020
Children - feel teachers treat me fairly	SE_SCC04_1	2019-2020
Children - feel safe at school	SE_SCC05_1	2019-2020
Children - feel connected to my school	SE_SCCHI_1	2019-2020
Children - with mental fitness needs highly satisfied by school	SE_MEFSC_1	2019-2020
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
Median lone-parent family income	STATC-SCCEN-055	2016
Youth - report going to school or to bed hungry because there is not enough food at home, often or always	SH_FIN01_1	2018-2019
Physical environment		
Extreme heat events	CCCS-DCLIM-001	2020
Extreme cold days	CCCS-DCLIM-002	2020
Ground-level ozone	GNB-DELG-002	2018
Radon - household with high radon concentration	HCRAD-CCSRCH-001	2007
Number of boil orders	GNB-OCMOH-001	2020
Health behaviours		
Children - Eat breakfast daily	SE_EAT04_1	2019-2020
Children - Eat meals while watching television 3 times or more in the last 7 days - parents' point of view	SP_EAT03_1	2019-2020
Parents - ate at a fast food place at least once with their child in the last 7 days	SP_EAT07_1	2019-2020
Children - Moderate or vigorous physical activity	SE_PHY01_1	2019-2020
Youth - At risk of becoming a future smoker	SH_SMOSU_1	2018-2019
Youth - Heavy drinking	SH_ALC04_1	2018-2019
Youth - Cannabis use	SH_MAR02_2	2018-2019
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
Hospitalization following an injury	CIHI-DAD-014	2017-2018 to 2019-2020
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



Seniors - hospitalization following an injury	CIHI-DAD-017	2017-2018 to 2019-2020
Hospitalization for mental health disorder	CIHI-DAD-018	2017-2018 to 2019-2020
Youth - hospitalization for mental health disorder	CIHI-DAD-019	2017-2018 to 2019-2020
Adults - hospitalization for mental health disorder	CIHI-DAD-020	2017-2018 to 2019-2020
Seniors - hospitalization for mental health disorder	CIHI-DAD-021	2017-2018 to 2019-2020
Youth - needed to see or talk to someone for a mental or emotional problem	SH_MHI01_1	2018-2019
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
Know what their prescribed medications do, strongly agree	PH_MED02_1	2020
Pharmacists - help the most in understanding how to take their medications	PH_MED03_2	2020