Population Health Profile 2022



Perth-Andover, Plaster Rock, Tobique 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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What is a Population Health Profile?

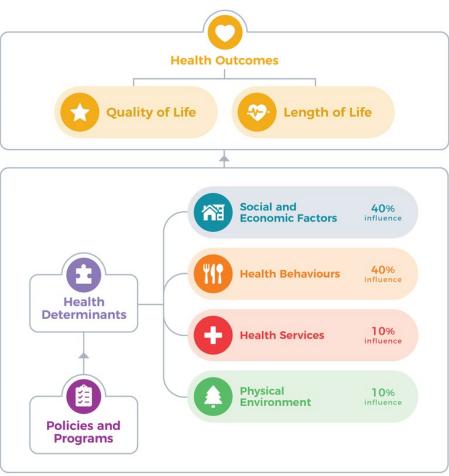
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding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

- This region has experienced a recent demographic decline and has an older than average population.
- This community has the lowest median household income in New Brunswick. And it has the highest percentage of residents who live in a low-income household.
- Health-related behaviours are generally less favourable than their respective provincial averages.
- Access to primary health care services is among the best in the province.

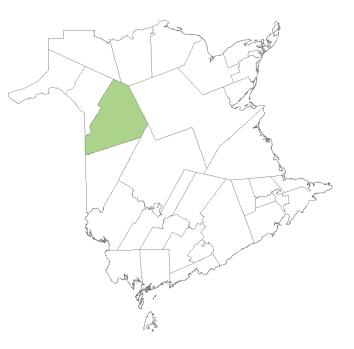


Health of the Community

Demographic Context

- Area: 4306 km²
- Population density: 2 persons per km²

Between 2016 and 2020, the population of the Perth-Andover, Plaster Rock, Tobique Area dropped by 1%. The birth (nine per 1,000 population) and death (13 per 1,000 population) rates are both higher than the provincial averages. The median age is 49 years, three years older than the median age of New Brunswickers.



The Perth-Andover area has the second-highest percentage of residents who identify as Indigenous (14.3%). Immigrants account for a slightly smaller percentage than the provincial average (4.2%) and 14.6% of youth identify as a member of a sexual minority.

Health Outcomes

In the Perth-Andover area, less than three quarters of youth (74%) exhibit positive social behaviours, the lowest percentage of any New Brunswick community. Conversely, about two in ten youth (22%) exhibit oppositional behaviours, the highest percentage in the province for that population group. Two in five youth were injured and required medical or nursing care in the previous 12 months, the highest percentage in New Brunswick for their age group.

As for seniors, only 39% of them perceive their mental health as very good or excellent. Sixty percent strongly agree that their health depends largely on how well they take care of themselves, one of the highest percentages in the province.



Determinants of Health

Social and economic factors

Youth in the Perth-Andover area have, generally speaking, a poor sense of connection to their school (Table 1) and a higher-than-average school dropout rate (2%).

Table 1. Perception of Youth in the Perth-Andover, Plaster Rock, Tobique Area Regarding Support at School and/or Work			
	Perth-Andover (%)	NB (%)	
Participate in activities or groups organized by school	55	54	
Feel teachers treat me fairly	71	83	
Feel safe at school	72	84	
Feel connected to my school	87	92	
Mental fitness needs highly satisfied by school	41	57	
Have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others)	41	41	

The sense of connection youth have with their community is also worse than the provincial average. Of note is the fact that only one third of youth feel that they are treated fairly in their community, and about one quarter of youth said they know where to go to get help. This community has the smallest number of approved childcare spaces for almost all age groups (see Table 2).

Table 2. Number of Approved Child Care Spaces in the Perth Area	n-Andover, Plaster F	Rock, Tobique
	Perth-Andover (rate)*	NB (rate)*
Infants (1 and under)	0	18
Preschool (2-4 years)	13	60
School-age (5-12 years)	6	29

^{*}Rate per 100 population



The Perth-Andover area has one of the highest percentages (40%) of residents with a high school diploma (or equivalent) as their highest level of education. In addition, 15% of adults and seniors always or usually have difficulty understanding written information about a prescription medication or their health condition.

The median household income in the Perth-Andover area (\$43,206 per year) is the lowest in the province. Only one third of households have an annual income of \$60,000 or more. It also has the highest proportions of residents across all age groups (except seniors) living in a low-income household (Table 3).

Table 3. Percentage of Perth-Andover, Plaster Rock, Tobique	e Residents Living i	n a Low-Income
	Perth-Andover (%)	NB (%)
All ages	29	19
Seniors	30	23
Adults	25	16
Youth (0-17 years)	42	23
Children (0-5 years)	54	25

The rates of crimes against the person (29 cases per 1,000 population) and property crimes (43 cases per 1,000 population) are higher than average. This community also has the lowest dollar value in alcohol sales (\$120 per person 19 years and older). And it has the highest dollar value in cannabis sales (\$208 per person 19 years and older) in the province.

Physical environment

The Perth-Andover area has New Brunswick's highest proportion of occupied dwellings in need of major repairs, at 16%. In addition, 3% of residents live in band housing, a higher-than-average percentage and one-third of households have a high concentration of radon. The community experienced a relatively high number of extreme heat events (3) and extreme cold days (5) during the period under consideration.



Residents of this community are less likely than the provincial average to use active ways of getting around. More specifically speaking, only 3% of youth walk, bike or skateboard to school, while 12% do so in combination with inactive modes of transportation. Three percent of adults and seniors walk or bike to work, which is lower than the provincial average.

Youth in the community are exposed to relatively high levels of environmental tobacco smoke. Thirty percent reported having been a passenger in a car with someone who was smoking cigarettes in the previous seven days and 24 percent said that at least one person smokes inside their home every day or almost every day.

Health Behaviours

Some aspects of the health habits of Perth-Andover area residents are less favourable than average. Only one quarter of youth eat breakfast every day and less than one-third of youth (30%) eat at least five servings of fruit or vegetables daily. Two thirds of youth drink non-nutritious sugary beverages. More than half of youth had eaten a meal while watching television at least three times in the previous seven days, which is the highest proportion in the province. As for adults and seniors, their eating habits are also worse than the respective provincial averages. average: 38% reported they eating at least five servings of fruits or vegetables each day.

In terms of sleep patterns, only one third of youth get at least eight hours of sleep per night and 54% of adults and seniors usually get at least seven hours; both figures are below the provincial average. As for physical activity habits, only 17% of youth and 47% of adults and seniors get the recommended amount of moderate or vigorous exercise for their age group.

Smoking habits among youth in the Perth-Andover area are generally worse than average. About one third have tried electronic cigarettes (33%) and are at risk of becoming future smokers (35%). In addition, about one in five youth smoke every day or occasionally, the highest proportion in the province. With respect to seniors, a relatively



high percentage of residents in this age group drink heavily (17%). But on the other hand, this community has the smallest percentage of adults (under 65) who drink heavily (23%). Fourteen percent of adults and seniors use cannabis, a higher percentage than the New Brunswick average.

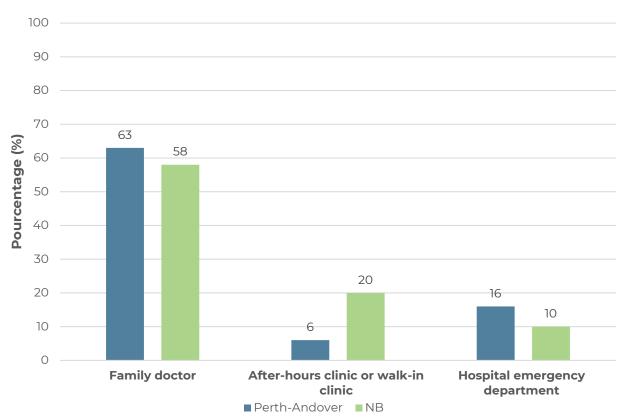


Health Services

The Perth-Andover area ranks highest in New Brunswick in terms of the accessibility of primary health care services. About two thirds of adults (65%) and three quarters of seniors (76%) reported being able to get an appointment with their family doctor within five days. Similarly, roughly nine in ten residents (88%) reported waiting less than four hours to access emergency services. These figures are higher than any other community in New Brunswick for their respective categories.

When sick or in need of health care services, residents in this community make very little use of after-hours or walk-in clinics; they turn more frequently to their family physician and emergency department (see Figure 1).

Figure 1. Types of Services Most Often Used When Care Services are Needed in Perth-Andover,
Plaster Rock, Tobique Area





Hospitalization rates for injuries are higher than the provincial average across all age groups (see Table 4). The rate of preventable hospitalizations in this community (63 per 10,000 population) is also higher than the provincial average.

Table 4. Hospitalization of Perth-Andover, Plaster Rock, Tobique Area Residents due to Injuries Perth-Andover NB (rate)* (rate)* Hospitalization following an injury 104 74 All ages Youth 48 29 Adults 59 42 Seniors 252 208

The proportion of adults in this community who reported having felt the need to, and subsequently did, consult a health professional about their mental health, emotional health or substance use is similar to the figure for the province as a whole. The figure for youth, on the other hand, is well below the provincial average: fewer than one in four youth reported having felt the need to seek help for an emotional or mental health problem (23%).

The Perth-Andover area has the lowest proportion of residents who feel that pharmacists were most helpful in terms of helping them understand how to take their medications (57%). However, residents reported they have very good experiences with their family physician. The majority of people in this community are satisfied with the explanations provided by their family doctor (78%) and reported they have enough time to talk with him or her (74%). They also reported feeling included in the decision-making process related to their health (88%). In addition, a large majority of adults (96%) said that verbal information about their conditions or prescriptions is easy to understand.

^{*} Rate per 10,000 population



However, in terms of rating the health services received, the Perth-Andover area is one of the least satisfied communities in New Brunswick. Only 61% of residents gave the health services they received a positive rating.



Conclusion

Briefly put, the Perth-Andover, Plaster Rock, Tobique Area has experienced a recent population decline and its population is older than the New Brunswick average. This community has one of the highest proportions of residents who identify as Indigenous.

Young people in this community are the most likely to exhibit oppositional behaviours; they are also the most likely to have required treatment by a health care professional as a result of an injury. A relatively high proportion of seniors do not have a positive perception of mental health.

The sense of connection youth in the Perth-Andover area have to their school and community is generally not as good as average. This community has the lowest median household income and the highest percentage of residents who live in a low-income household.

The health behaviours of residents in this community are less favourable than average in terms of eating, physical activity and sleep habits. This community has the highest percentage of youth who smoke tobacco, but the lowest percentage of adults who drink heavily.

Residents of the Perth-Andover area have the best access to primary health care services in terms of wait times for an appointment with a family doctor or to access emergency services. In addition, they reported excellent experiences in terms of communicating with their family physician. However, they are less satisfied with the health services received than the residents of most other New Brunswick communities.



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 5) to facilitate this research.

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

Perth-Andover, Plaster Rock, Tobique Area | New Brunswick Health Council (nbhc.ca)

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dicator, unique code and year of dissemination		
Indicator	Unique Code	Year
Demographic context		
	STATE SENSULOD	2016
Land area	STATC-CENCU-001	2016
Population density	STATC-CENCU-002	2016
Population change from 2016 to 2020	STATC-SCCEN-024	2016 to 20
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 20
Death rate	SNB-VITST-001	2014 to 20
Youth - sexual minority	SH_SEO02_7	2018-2019
Health outcomes		
Youth - Pro-social behaviours (being helpful, respectful, thoughtful, etc.)	SH_PROTS_1	2018-2019
Youth - Oppositional behaviours (being defiant, disrespectful, rude, etc.)	SH_OPPTS_1	2018-2019
Youth - Have been injured and had to be treated by a doctor or nurse	SH_INJ01_1	2018-2019
Seniors - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Seniors - strongly agree that their health largely depends on how well they take care of themselves	PH_BELDM_1	2020
Social and economic factors		
Youth - participate in activities or groups organized by school	SH_INSAL_1	2018-2019
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
Youth - with mental fitness needs highly satisfied by school	SH_MEFSC_1	2018-2019



Youth - have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others)	SH_RES09_1	2018-2019
Youth - treated fairly in my community	SH_RES10_1	2018-2019
Youth - know where to go in my community to get help	SH_RES02_1	2018-2019
Crimes against persons	STATC-UCR-001	2019
Crimes against property	STATC-UCR-002	2019
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
Difficulty understanding written information about a medical condition or prescription, always or usually	PH_LIT01_1	2020
Highest level completed of education - high school or equivalent	STATC-SCCEN-038	2016
Household income - \$60,000 and more	STATC-SCCEN-058	2016
Median household income	STATC-SCCEN-053	2016
Youth - live in low-income household (0-17 years)	STATC-SCCEN-045	2016
Children - live in low-income household (0-5 years)	STATC-SCCEN-046	2016
Adults - live in low-income household	STATC-SCCEN-047	2016
Seniors - live in low-income household	STATC-SCCEN-048	2016
Purchasing practices - alcohol sales	ANBL-AR-001	2019-2020
Purchasing practices - cannabis sales	CANNB-AR-001	2019-2020
Discribed and income and		
Physical environment	STATC-SCCEN-027	2016
Live in band housing		2016
Occupied dwellings requiring major repairs	STATC-SCCEN-029	2018-2019
Youth - walk, bike or skateboard to get to school Youth - walk, bike or skateboard in combination with inactive	SH_PHY02_1	
transportation to get to school	SH_PHY02_4	2018-2019
Adults and seniors - walk or bike to get to work	STATC-SCCEN-033	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
Extreme heat events	CCCS-DCLIM-001	2020
Extreme cold days	CCCS-DCLIM-002	2020
Radon - household with high radon concentration	HCRAD-CCSRCH-001	2007
Health behaviours		
Youth - Eat breakfast daily	SH_EAT12_1	2018-2019
Youth - Eat 5 or more servings of vegetables or fruit daily	SH_EATFV_1	2018-2019
Youth - Ate meals while watching television 3 times or more in the last 7 days	SH_EATI4_2	2018-2019
Youth - Drink non-nutritious sugary beverages	SH_DRINN_1	2018-2019
Adults and seniors - Eat 5 or more servings of vegetables or fruit daily	PH_EAT03_1	2020
Youth - Moderate or vigorous physical activity	SH_PHY01_1	2018-2019
Youth - Sleep 8 hours or more every night	SH_SLE01_1	2018-2019
Adults and seniors - Moderate or vigorous physical activity	PH_PHY01_1	2020



Adults and seniors - Usually sleeps for 7 hours or more each night	PH_SLE01_1	2020
Youth - At risk of becoming a future smoker	SH_SMOSU_1	2018-2019
Youth - Tried e-cigarettes (vaping)	SH_SMOEC_1	2018-2019
Youth - Daily or occasional smoker	SH_SMO09_1	2018-2019
Adults - Heavy drinking	PH_ALC01_3	2020
Seniors - Heavy drinking	PH_ALC01_3	2020
Adults and seniors - Cannabis use	PH_MAR01_2	2020
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
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
Family doctor - waited 5 days or less to have an appointment - Adults	PH_ACCFD_2	2020
Family doctor - waited 5 days or less to have an appointment - Seniors	PH_ACCFD_2	2020
Hospital emergency department - waited less than 4 hours	PH_ACCEA_1	2020
Family doctor - always explains things in a way that they can understand	PH_COMFA_1	2020
Family doctor - always gives them enough time to discuss	PH_APPFB_1	2020
Family doctor - always involves them in decisions about their health care	PH_APPFA_1	2020
Adults - Verbal information about condition/prescription is easy to understand, always or usually	PH_COMOA_1	2020
Pharmacists - help the most in understanding how to take their medications	PH_MED03_2	2020
Citizens - provide a favourable rating for overall health care services received	PH_SATOA_1	2020