

Population Health Profile 2022



Sussex, Norton, Sussex Corner 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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How to cite this document

New Brunswick Health Council, "Population Health Profile 2022 - Sussex, Norton, Sussex Corner Area", 2022. [Online].

Cette publication est disponible en français

Profil de santé de la population 2022 - Région de Sussex, Norton, Sussex Corner

Published: October 2022



What is a Population Health Profile?

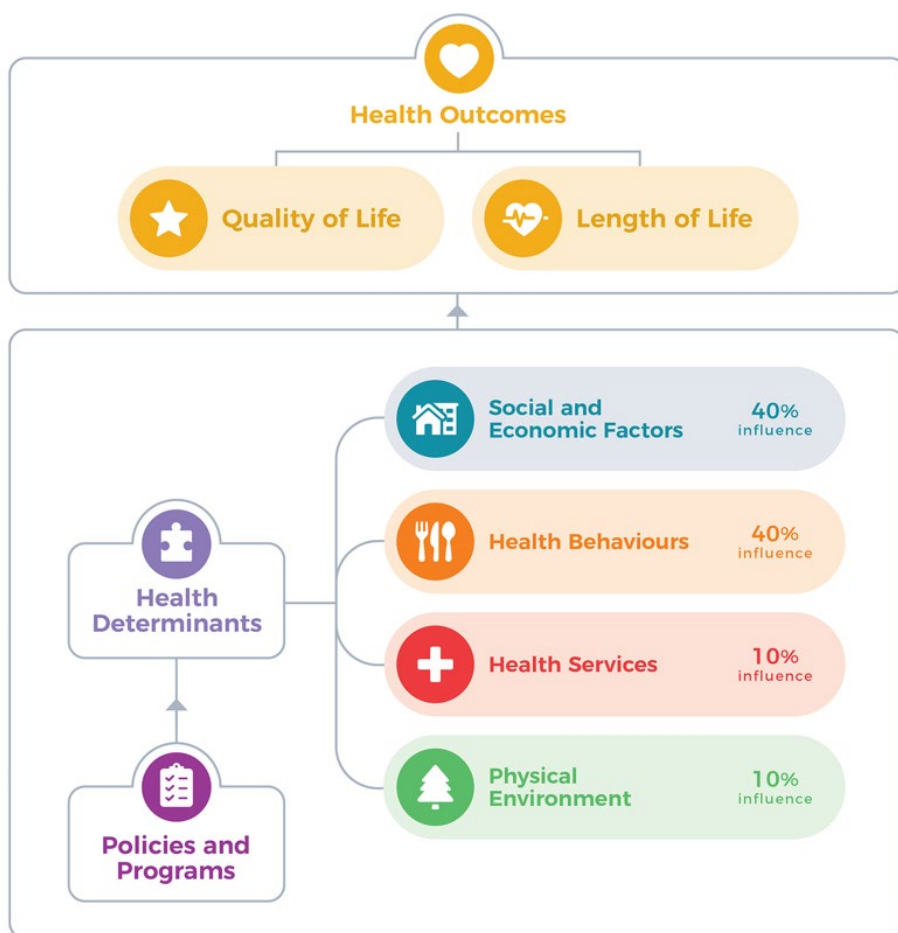
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding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

- The population in this community has experienced lower than average growth.
- The reported quality of life varied by age group.
- The rate of tobacco, cannabis and drug use among youth is one of the highest.
- Access to health services is comparable to the province as a whole.

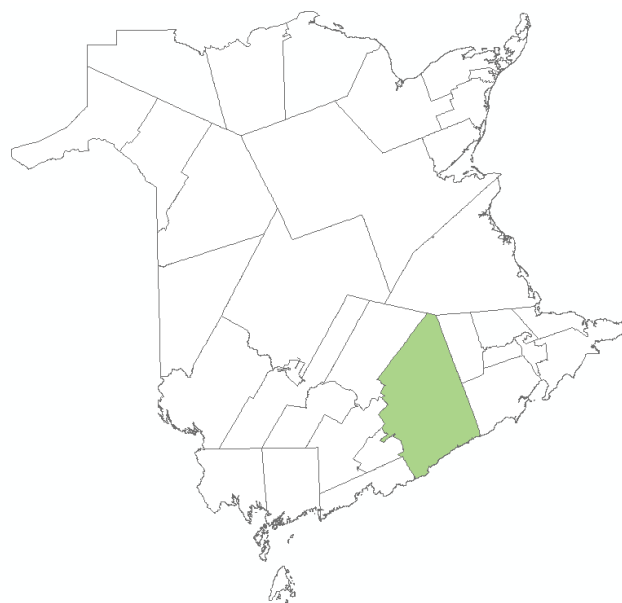


Health of the Community

Demographic Context

- Land area: 4120 km²
- Population density: 5 persons per km²

The Sussex, Norton, Sussex Corner Area covers a relatively large land area and has a lower-than-average population density. Between 2016 and 2020, the population grew by 2%, and the birth rate (9.8 per 1,000 population) and death rate are roughly the same (9.7 per 1,000 population). The average household size (2.4) is higher than average. In addition, a relatively high percentage of households consist of five or more people (7%).



It is one of the communities with the smallest percentage of Indigenous residents (1%), and immigrants account for only 2% of the population. English is the language most frequently spoken at home and at work for 99% of residents, and about one in eight people have knowledge of both official languages.

Health Outcomes

The quality of life for children in the Sussex, Norton Area is somewhat better than average. One in four children have high levels of mental fitness, and close to three in five are at a healthy weight. In addition, three in ten children have positive social behaviours, while less than one-quarter of children have oppositional behaviours. Youth between grades 6 and 12, on the other hand, have a slightly lower-than-average quality of life in several respects. Of note is the fact that just under three quarters of them have moderate or high levels of mental fitness, and two thirds have moderate or high levels of



resilience. In addition, a large proportion of youth have symptoms of depression (43%) and anxiety (39%).

Half of adults and seniors perceive their mental health as very good or excellent. In addition, nine in ten adults have good life satisfaction. The figure for seniors is 94%. The percentage of seniors who regularly take six or more different prescription medications is relatively low, at 17%. Among the types of chronic health problems reported by adults and seniors, diabetes is overrepresented (16%). Nearly half of seniors are very confident about their ability to manage their health conditions.



Determinants of Health

Social and economic factors

Children in the Sussex, Norton Area have a better-than-average sense of connection with their school. About seven in ten children feel safe at school, and two thirds feel they are treated fairly by teachers. Nearly two thirds of children with mental fitness needs reported that their needs are highly satisfied by their school. In addition, a smaller-than-average percentage of children, about three in ten, have been bullied.

However, the situation is somewhat different in several respects for youth between grades 6 and 12. They are less likely than average to feel safe at school (81%), to feel that teachers treat them fairly (80%), and to have a sense of belonging at their school (89%). In addition, only about half of youth with mental fitness needs feel that those needs are highly satisfied by their school. There is also a relatively high percentage of youth who have experienced bullying (56%), sexual assault (11%), and dating violence (21%).



The Sussex, Norton Area has one of the highest percentages of self-employed people, accounting for 12% of those in the labour force. Just over half work full-time, year-round. The median household income is close to the average (\$56,114 per year), although it is lower than in Zone 2 (the Fundy Shore and Saint John Area) as a whole. Roughly 6% of youth reported that they are often or always hungry when they go to bed or school because there is not enough food at home.

Physical environment

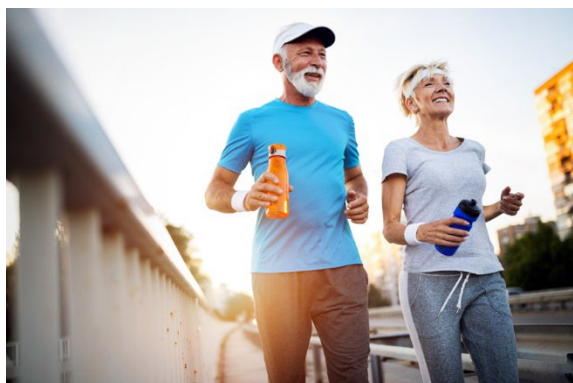
About five in six residents own their home, a higher proportion than the provincial average. About 28% of occupied dwellings were built before 1960, and 9% of occupied dwellings are in need of major repairs.



While a higher-than-average percentage of children walk, bike, or skateboard to school (13%), the percentage of youth in grades 6 to 12 who do the same is below average. Only 3% of youth use those modes of transportation to get to school, and 16% use them in combination with inactive ones.

Health Behaviours

In general, the eating habits of Sussex, Norton Area residents are close to the provincial averages. There are a few minor exceptions, including the relatively high percentage of children (56%) and the relatively low percentage of adults (36%) who eat at least five servings of fruits or vegetables daily.



The adult age group has good physical activity patterns. More specifically speaking, the Sussex Area has the highest percentage of seniors who get the recommended minimum of 150 minutes of moderate to vigorous physical activity per week. The physical activity of children and youth is closer to the provincial averages for those age groups.

The tobacco and drug use patterns of youth in this community is one of the least favourable in the province. While the percentage of youth who are at risk of becoming a future smoker is close to average, the percentage of youth who smoke regularly (18%) is one of the highest in the province. Similarly, youth in the Sussex Area use cannabis (30%) and other drugs (29%) at high rates.

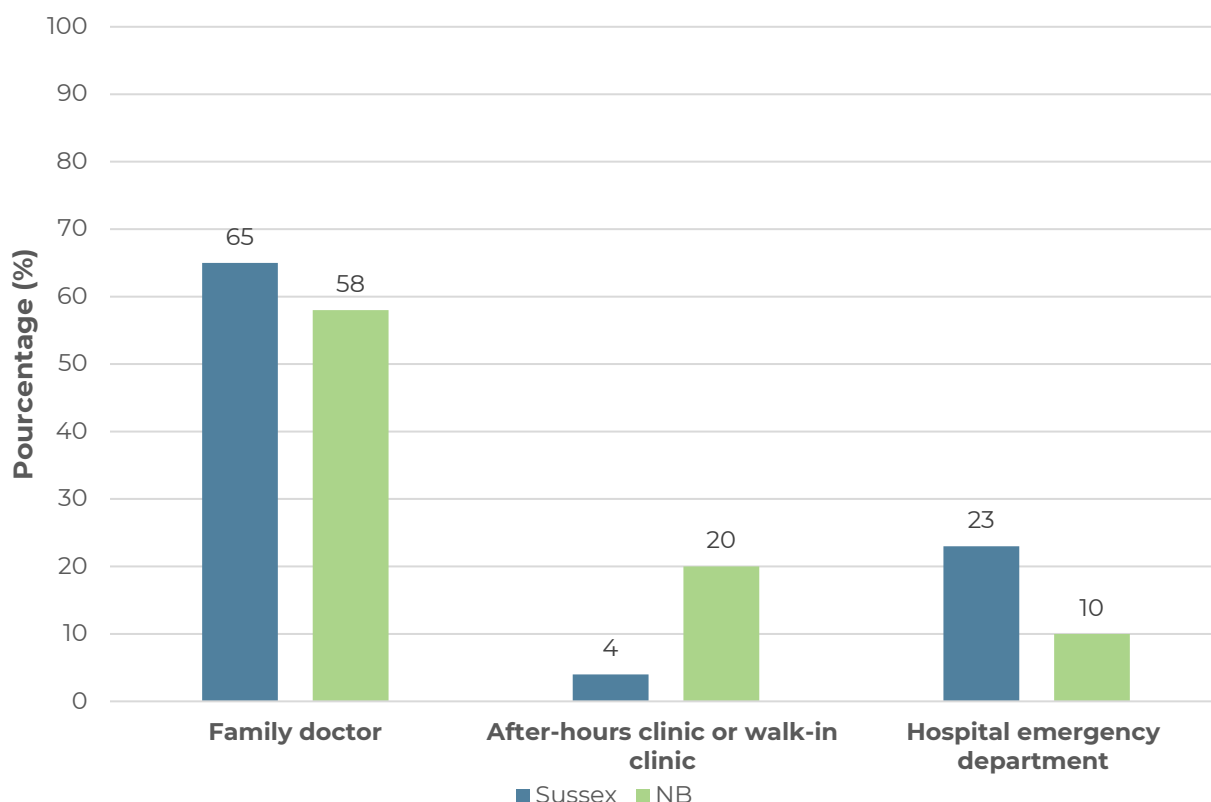


Health Services

The Sussex Area ranks close to the average in terms of access to primary care services. A little over half of adults (52%) and seniors (57%) reported they can get an appointment with their family doctor within five days. But access to emergency services is slightly more difficult than in most New Brunswick communities. Only 61% of those surveyed reported waiting less than four hours to access emergency services.

When ill or in need of care services, Sussex Area residents rarely use after-hours or walk-in clinics (see Figure 1).

Figure 1. Types of Services Most Often Used When Care Services are Needed in Sussex, Norton, Sussex Corner Area



A relatively small percentage of adults and seniors (13%) reported having felt the need to consult a health professional about their mental health, emotional health or substance use, of which 12% did indeed consult a health professional. The figures for youth are closer to the provincial average. Close to one-third of this age group reported having felt



the need to consult someone about an emotional or mental health problem. However, a high percentage of youth (12%) reported that they did not consult a health professional despite having felt the need to do so. The rate of hospitalization for mental health problems is one of the lowest in the province for all age groups.

When it comes to rating the health services received, the Sussex Area is in line with the provincial average. Sixty-three percent of adults and 80% of seniors rated the health services they received positively.



Conclusion

The Sussex, Norton, Sussex Corner Area has a relatively small population (23,039) that has experienced lower-than-average growth in the recent past (2%). Although the median household income is close to the provincial average (\$56,114), it is lower than in the rest of the Fundy Zone (\$61,609).

Quality of life in this community varies, depending on the age group. While children have a relatively good quality of life, it is below average for older youth. The quality of life of adults and seniors is close to the provincial norm. The sense of connection children have to their school is better than that of youth in the community.

In general, eating and physical activity habits are close to the provincial average, with some variation in the different age groups. However, the rates of tobacco (18%), cannabis (30%) and drug (29%) use among youth are some of the highest in the province.

Access to health services in this community is comparable to the province as a whole. And Sussex Area residents rated the services they received positively, which is about average.



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.

[Sussex, Norton, Sussex Corner Area | New Brunswick Health Council \(nbhc.ca\)](https://nbhc.ca)

Table 1. 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	STATC-CDCD-001	2020
Population change from 2016 to 2020	STATC-SCCEN-024	2016 to 2020
Indigenous	STATC-SCCEN-023	2016
Immigrant	STATC-SCCEN-009	2016
Birth rate	SNB-VITST-002	2014 to 2018
Death rate	SNB-VITST-001	2014 to 2018
Average household size	STATC-SCCEN-004	2016
Private household with 5 or more people	STATC-SCCEN-007	2016
Language most spoken at home - English	STATC-SCCEN-011	2016
Health outcomes		
Children - High level of mental fitness (having a positive sense of how they feel, think and act)	SE_MEFHI_1	2019-2020
Children - Pro-social behaviours (being helpful, respectful, thoughtful, etc.)	SE_PROHI_1	2019-2020
Children - Oppositional behaviours (being defiant, disrespectful, rude, etc.)	SE_OPPI_1	2019-2020
Youth - Moderate to high level of mental fitness (having a positive sense of how they feel, think and act)	SH_MEFHM_1	2018-2019
Youth - Symptoms of depression	SH_DEP01_1	2018-2019
Youth - Symptoms of anxiety	SH_ANX01_1	2018-2019
Adults - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Adults - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Seniors - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Seniors - Take 6 or more different prescription medications on a regular basis	PH_MED01_1	2020



Diabetes	PH_CHCDL1	2020
Seniors - very confident in managing their health condition	PH_MGT01_1	2020
Social and economic factors		
Children - feel teachers treat me fairly	SE_SCC04_1	2019-2020
Children - feel safe at school	SE_SCC05_1	2019-2020
Children - with mental fitness needs highly satisfied by school	SE_MEFSC_1	2019-2020
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
Youth - with mental fitness needs highly satisfied by school	SH_MEFSC_1	2018-2019
Victim of bullying	SE_BUV01_1	2019-2020
Victim of bullying	SH_BUVAO_1	2018-2019
Victim of dating violence	SH_SEV02_1	2018-2019
Sexually violated	SH_SEV01_1	2018-2019
Self-employed	STATC-SCCEN-043	2016
Work a full year, full time	STATC-SCCEN-051	2016
Median household income	STATC-SCCEN-053	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		
Own a dwelling	STATC-SCCEN-025	2016
Occupied dwellings requiring major repairs	STATC-SCCEN-029	2016
Occupied dwellings built before 1960	STATC-SCCEN-030	2016
Children - walk, bike or skateboard to get to school	SE_PHY02_1	2019-2020
Youth - walk, bike or skateboard to get to school	SH_PHY02_1	2018-2019
Youth - walk, bike or skateboard in combination with inactive transportation to get to school	SH_PHY02_4	2018-2019
Health behaviours		
Children - Eat 5 or more servings of vegetables or fruit daily	SE_EATFV_1	2019-2020
Adults and seniors - Eat 5 or more servings of vegetables or fruit daily	PH_EAT03_1	2020
Children - Moderate or vigorous physical activity	SE_PHY01_1	2019-2020
Youth - Moderate or vigorous physical activity	SH_PHY01_1	2018-2019
Adults and seniors - Moderate or vigorous physical activity	PH_PHY01_1	2020
Adults - Moderate or vigorous physical activity	PH_PHY01_1	2020
Seniors - Moderate or vigorous physical activity	PH_PHY01_1	2020
Youth - At risk of becoming a future smoker	SH_SMOSU_1	2018-2019
Youth - Daily or occasional smoker	SH_SMO09_1	2018-2019
Youth - Cannabis use	SH_MAR02_2	2018-2019
Youth - Drug use	SH_DROAL_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 for mental health disorder	CIHI-DAD-019	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 and seniors - Saw or talked to a health professional about their mental or emotional health, or their use of alcohol or drugs	PH_MHI05_1	2020
Youth - who needed to see or talk to someone about their mental or emotional problem but didn't	SH_MHI02_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 - 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