

# Population Health Profile 2022



Zone 1

Moncton and South-East Area

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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.

## For more information

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## What is a Population Health Profile?

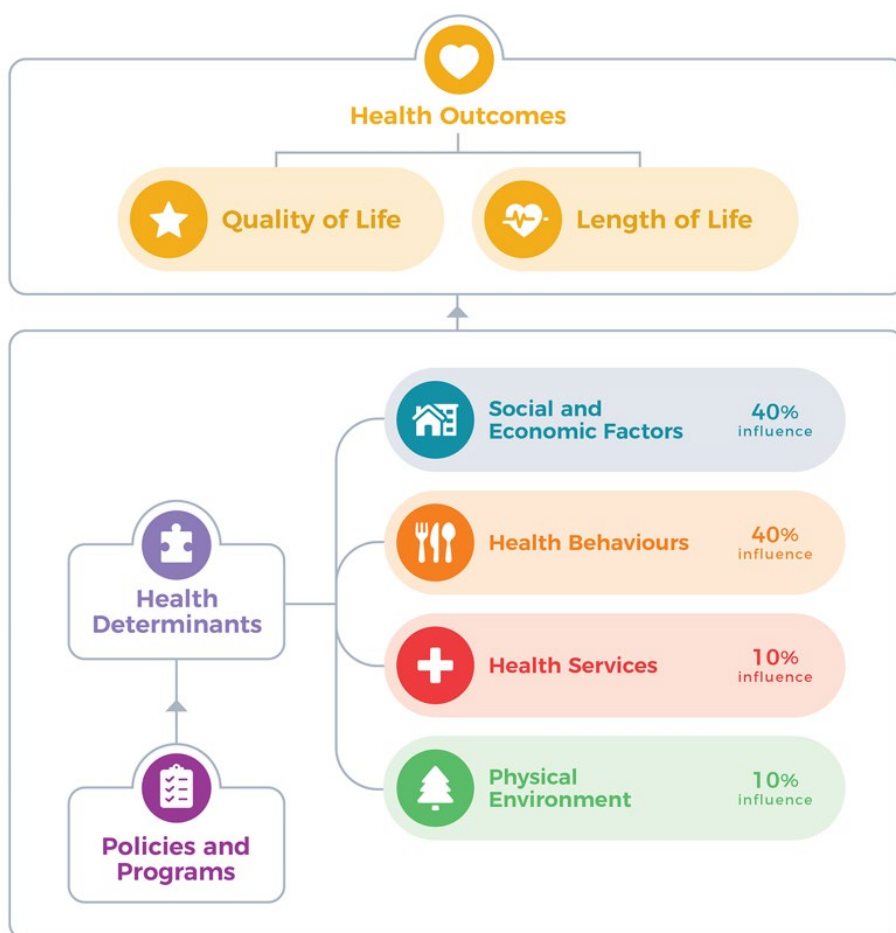
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding 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 Zone 1 - Moncton and South-East Area

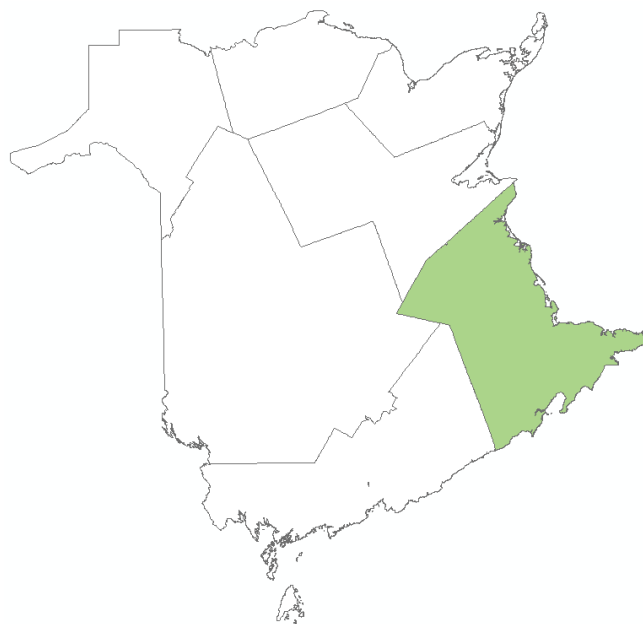
- The zone has experienced the province's biggest population increase in recent years.
- Poverty is less prevalent in Zone 1 than it is in most zones, but housing costs are high.
- Eating habits are generally very good.
- Some aspects of mental health are less favourable, and access to health services can be difficult due to wait times.



# Health of the Zone

## Demographic Context

- Area: 10,027 km<sup>2</sup>
- Population density: 23 persons per km<sup>2</sup>



Zone 1 is the most densely populated of all the zones in New Brunswick, it also has the largest population across all age groups. Between 2016 and 2020 the population grew at a rate of 7%, the highest in the province, while the provincial population growth rate was 4% in that same time period. Some of the growth can be attributed to immigration: newcomers who settled in this zone between 2011 and 2016 account for 1.6% of the population, while immigrants in general accounts for about 5% of Zone 1 residents. The death rate is the lowest in the province (at eight per 1,000 population), while the birth rate is the highest (at nine per 1,000 population).

Zone 1 has the lowest proportion of dependents in the province (67 per 100 population). The number of adults and seniors who reported having a disability is close to the provincial average, but some types of disabilities occur at a higher frequency, while others occur at a lower frequency in Zone 1 (see table 1). This zone also has the highest percentage of youth who have been diagnosed with a learning disability (6%) and gifted youth (2%).



**Table 1. Types of Disabilities Reported by Adults and Seniors in the Moncton and South East Area**

	Moncton (%)	NB (%)
Seeing disability	18	19
Mobility disability	51	57
Flexibility disability	45	54
Dexterity disability	19	25
Pain-related disability	67	72
Mental health-related disability	36	30
Hearing disability	20	18
Memory disability	27	26

## Health Outcomes

Zone 1 has the longest life expectancy in New Brunswick at 81.7 years. Several chronic health conditions are less common in this zone than in all others, including heart disease (8.3%), stroke (1.4%) and diabetes (10.8%). The years of life lost due to cancer, respiratory disease, heart disease and stroke are also among the lowest in the province. And only one in twenty adults (5.7%) and one in five seniors (20.8%) take six or more prescribed medications on a regular basis.

Some aspects of the mental health of adults and seniors in Zone 1 are less favourable, while other aspects are more positive. Less than half of adults (49.5%) and seniors (46.7%) perceive their mental health as very good or excellent, the lowest percentages in the province. Zone 1 seniors, however, are the least likely to report they are lonely (15%) and have the highest life satisfaction (90% are satisfied or very satisfied). And close to three in four youth (71%) feel they have a high or moderate level of resilience.



## Determinants of Health

### Social and economic factors

The Moncton and South-East Area stands out due to its labour force. It ranks the highest of all the zones in New Brunswick (see Table 2) and encompasses three of the communities (Riverview and Coverdale, Moncton, and Dieppe and Memramcook) with the highest labour force participation and employment rates.

Table 2. Labour Force in the Moncton and South East Region		
	Moncton (%)	NB (%)
Participation rate	64.6	61.5
Employment rate	58.1	54.6

One in two households earn more than \$60,000 per year (51%) and the annual median household income is \$61,246. The Moncton and South-East Area is one of the zones where these figures are the highest. On the other hand, housing costs are the highest in the province for both renters (\$869 per month on average) and homeowners (\$777 per month on average). In addition, a larger proportion of households, nearly one in five (18%), spend at least 30% of their monthly income on housing costs.

Although the families in Zone 1 have the strongest resilience to financial shock (i.e., the debt-to-asset ratio) of all the zones, about one in twenty youths reported often or always feeling hungry when they go to bed or school because there is not enough food at home. In addition, only four in five youths (82%) reported feeling safe at school, making this one of the zones with the smallest percentage. On the other hand, Zone 1 has the lowest school dropout rate in the province (0.66%).





## Physical environment

All age groups in Zone 1 are more likely to walk, bike or skateboard to school or work. These active modes of transportation are used routinely by about 9% of youth and 6% of adults and seniors, while one quarter of youth use them in combination with inactive ways of getting around. Zone 1 also stands out because three-quarters of its residents (76%) live near a park, and because of the high percentage of residents that participate in outdoor activities near home (80%). However, Zone 1 also had the highest number of provincial beach water quality violations (18), and the highest number of boil water orders (9) in the province outside the Fredericton area.

## Health Behaviours

Generally speaking, the eating habits of youth in Zone 1 are among the healthiest in the province. Almost half eat breakfast every day (46%) and have at least five servings of fruits or vegetables on a daily basis (44%). Only one in two youth reported drinking non-nutritious sweetened beverages and about one in ten (13%) reported having eaten at a fastfood restaurant at least three times in the previous seven days. Zone 1 has the largest proportion of youth at a healthy weight, namely two out of three; while just over one quarter (27%) of youth reported being overweight.



In terms of sleep habits, two in five youth (38%) sleep at least eight hours a night. As for adults and seniors, more than half (58%) said they usually sleep seven hours or more per night.

Smoking is generally less common in Zone 1 than in New Brunswick as a whole. About one-quarter of youth (26%) have tried electronic cigarettes (vaping), while one in eight (12%) smoke daily or occasionally. Similarly, less than one in six adults and seniors are



regular or occasional smokers (15%). Zone 1, however, has the highest percentage of seniors who drink heavily (16%).

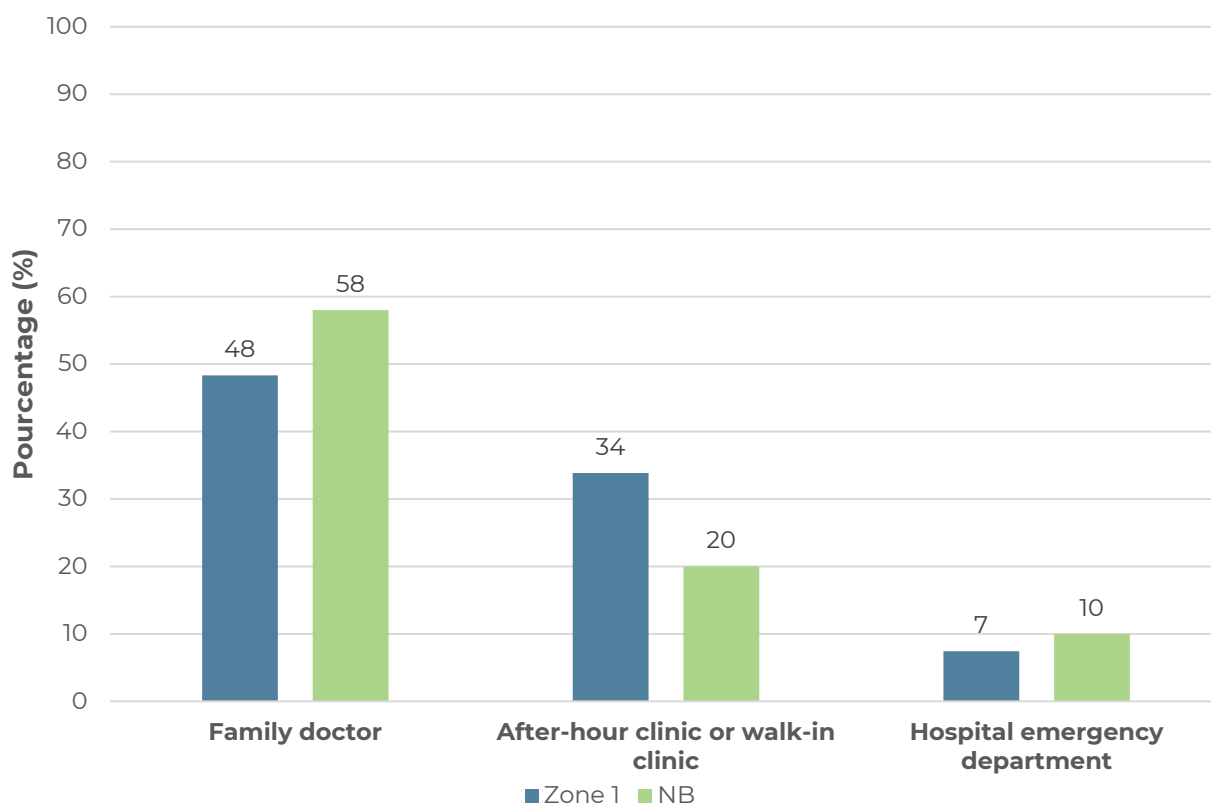
Zone 1 has the highest prevalence of chlamydia. In fact, this sexually transmitted infection affects about 39 people per 10,000 in the general population of Zone 1. The figure for young people is roughly 176 cases per 10,000 population.



## Health Services

The Moncton and South-East Area is one of the zones with the highest percentage of residents who reported they have a family doctor (close to 90%). However, only two in five adults (43%) and just over half of seniors (55%) reported they can get an appointment with their family doctor in five days or less. This part of the province also has the longest wait times for emergency services: just over half (54%) of people waited less than four hours to access them. Compared to the provincial average, Zone 1 residents tend to visit after-hours or walk-in clinics more frequently than their family doctor or an emergency department when they need care (see Figure 2).

**Figure 1. Types of Services Most Often Used When Care Services are Needed in Zone 1: Moncton and South-East Area**



More than one in five adults (21%) reported having consulted a health care professional about their mental health, emotional health or substance use in the past 12 months. Close to one third of youth (30%) reported having felt the need to consult someone



about an emotional or mental health problem, but almost one in ten (8%) said they did not speak with anyone despite having felt the need to do so.

Of those who sought but did not receive mental health services, about one quarter said they could not afford the cost, or that wait times were too long. As for those who did not receive the general health services they wanted, barriers related to service availability in the area and proximity to a service were reported less frequently than elsewhere in the province.

When it comes to the rating for health services received, the Moncton and South-East Area is close to the provincial average. Two out of three people (65%) rated the health services they received positively. And more than two thirds (69%) said their family doctor always helps them coordinate care that involves other health care professionals.



## Conclusion

Zone 1 is a dynamic region that features a high life expectancy and relatively low rates of many chronic diseases, among other things. Its population has experienced the greatest rate of growth in the province in recent years, and it now has one of the highest proportions of newcomers in New Brunswick.

Generally speaking, eating habits here are among the best in the province, and youth are more likely to be at a healthy weight. Smoking is also not very popular in this area. However, Zone 1 has the highest prevalence of chlamydia in the province, in both youth and adults.

Poverty is less common in Zone 1 than in most of the others. However, housing costs are the highest in the province and many households in the area spend a high proportion of their income on housing.

Despite the advantages of the Moncton and South-East Area, some aspects of mental health are less favourable and access to health services can be difficult, particularly due to long wait times.





## 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.

[Health Zone 1 | New Brunswick Health Council \(nbhc.ca\)](https://nbhc.ca)

Indicator	Unique Code	Year
<b>Demographic context</b>		
Land area	STATC-CENCU-001	2016
Population density	STATC-CENCU-002	2016
Population	STATC-CDCD-001	2020
Population - 0-4	STATC-CDCD-002	2020
Population - 5-9	STATC-CDCD-003	2020
Population - 10-14	STATC-CDCD-004	2020
Population - 15-19	STATC-CDCD-005	2020
Population - 20-24	STATC-CDCD-006	2020
Population - 25-29	STATC-CDCD-007	2020
Population - 30-34	STATC-CDCD-008	2020
Population - 35-39	STATC-CDCD-009	2020
Population - 40-44	STATC-CDCD-010	2020
Population - 45-49	STATC-CDCD-011	2020
Population - 50-54	STATC-CDCD-012	2020
Population - 55-59	STATC-CDCD-013	2020
Population - 60-64	STATC-CDCD-014	2020
Population - 65-69	STATC-CDCD-015	2020
Population - 70-74	STATC-CDCD-016	2020
Population - 75-79	STATC-CDCD-017	2020
Population - 80-84	STATC-CDCD-018	2020
Population - 85 and over	STATC-CDCD-019	2020
Population changes from 2016 to 2020	STATC-SCCEN-024	2016 to 2020
Recent immigrant from 2011 to 2016	STATC-SCCEN-010	2016
Birth rate	SNB-VITST-002	2014 to 2018



Death rate	SNB-VITST-001	2014 to 2018
Dependency ratio	STATC-ADECP-001	2019
Youth diagnosed with special education needs	SH_SENAL_1	2018-2019
Youth diagnosed with special education needs - Learning disability	SH_SENLE_1	2018-2019
Youth diagnosed with special education needs - Gifted	SH_SENGI_1	2018-2019
Adults and seniors - with a disability	PH_PWD01_1	2020
Seeing disability	PH_PWDSE_1	2020
Hearing disability	PH_PWDHE_1	2020
Mobility disability	PH_PWDMO_1	2020
Flexibility disability	PH_PWDFL_1	2020
Dexterity disability	PH_PWDDE_1	2020
Pain-related disability	PH_PWDPA_1	2020
Mental health-related disability	PH_PWDMH_1	2020
Memory disability	PH_PWDME_1	2020

### Health outcomes

Youth - Resilience, high or moderate level	SH_RESTS_1	2018-2019
Youth - Healthy weight	SH_BMI02_1	2018-2019
Youth - Overweight or obese	SH_BMI02_3	2018-2019
Adults - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Adults - Take 6 or more different prescription medications on a regular basis	PH_MED01_1	2020
Seniors - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Seniors - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Seniors - Lonely (based on loneliness score)	PH_SIL04_1	2020
Seniors - Take 6 or more different prescription medications on a regular basis	PH_MED01_1	2020
Adults and seniors - Heart disease	PH_CHCHD_1	2020
Adults and seniors - Stroke	PH_CHCST_1	2020
Adults and seniors - Diabetes	PH_CHCDI_1	2020
Life expectancy at birth	STATC-CVITS-001	2015 to 2017
0 to 19 years old - Cancer, years of life lost	SNB-VITST-012	2014 to 2018
Heart and stroke, years of life lost	SNB-VITST-010	2014 to 2018
Breathing diseases, years of life lost	SNB-VITST-011	2014 to 2018

### Social and economic factors

Youth - feel safe at school	SH_SCC05_1	2018-2019
Children and youth - School dropout rate	GNB-EESC-005	2018-2019
Participation rate	STATC-SCCEN-040	2016
Employment rate	STATC-SCCEN-041	2016
Household income - \$60,000 and more	STATC-SCCEN-058	2016
Median household income	STATC-SCCEN-053	2016
Family resilience to financial shock - debt to asset ratio	STATC-SFINSE-001	2019



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
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
<b>Physical environment</b>		
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
Adults and seniors - walk or bike to get to work	STATC-SCCEN-033	2016
Have a park close to home	STATC-HENVS-005	2017
Participate in outdoor activities close to home	STATC-HENVS-008	2017
Number of boil orders	GNB-OCMOH-001	2020
Recreational water - provincial beach water quality violations	NBDOH-PPBI-001	2020
<b>Health behaviours</b>		
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 - Drink non-nutritious sugary beverages	SH_DRINN_1	2018-2019
Youth - Ate at a fast food place or restaurant 3 times or more in the last 7 days	SH_EAT13_2	2018-2019
Youth - Sleep 8 hours or more every night	SH_SLE01_1	2018-2019
Adults and seniors - Usually sleeps for 7 hours or more each night	PH_SLE01_1	2020
Adults - Usually sleeps for 7 hours or more each night	PH_SLE01_1	2020
Seniors - Usually sleeps for 7 hours or more each night	PH_SLE01_1	2020
Youth - Tried e-cigarettes (vaping)	SH_SMOEC_1	2018-2019
Youth - Daily or occasional smoker	SH_SMO09_1	2018-2019
Adults and seniors - Daily or occasional smoker	PH_SMO01_1	2020
Adults - Daily or occasional smoker	PH_SMO01_1	2020
Seniors - Daily or occasional smoker	PH_SMO01_1	2020
Seniors - Heavy drinking	PH_ALC01_3	2020
Youth - Sexually transmitted infections - chlamydia	GNB-OCMOHR-001	2019
All population - Sexually transmitted infections - chlamydia	GNB-OCMOHR-002	2019
<b>Health Services</b>		
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
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 - Adults	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
Health care services not available in their area	PH_BARNA_1	2020
Travel over 100 kms to use a health service	PH_BARHT_1	2020
Services not available in their area	PH_MHI06_1	2020
Wait time for the services was too long	PH_MHI06_2	2020
Could not afford the cost, or insurance did not cover enough	PH_MHI06_5	2020
Were concerned about what others would think	PH_MHI06_7	2020
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
Wait time to long term care home placement	GNB-SOCDEV-002	2019-2020
Citizens - provide a favourable rating for overall health care services received	PH_SATOA_1	2020
Family doctor - always helps them coordinate the care from other providers	PH_CRDFB_1	2020