

Population Health Profile 2022



Zone 7

Miramichi 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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Profil de santé de la population 2022 – Zone 7 : Région de Miramichi

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What is a Population Health Profile?

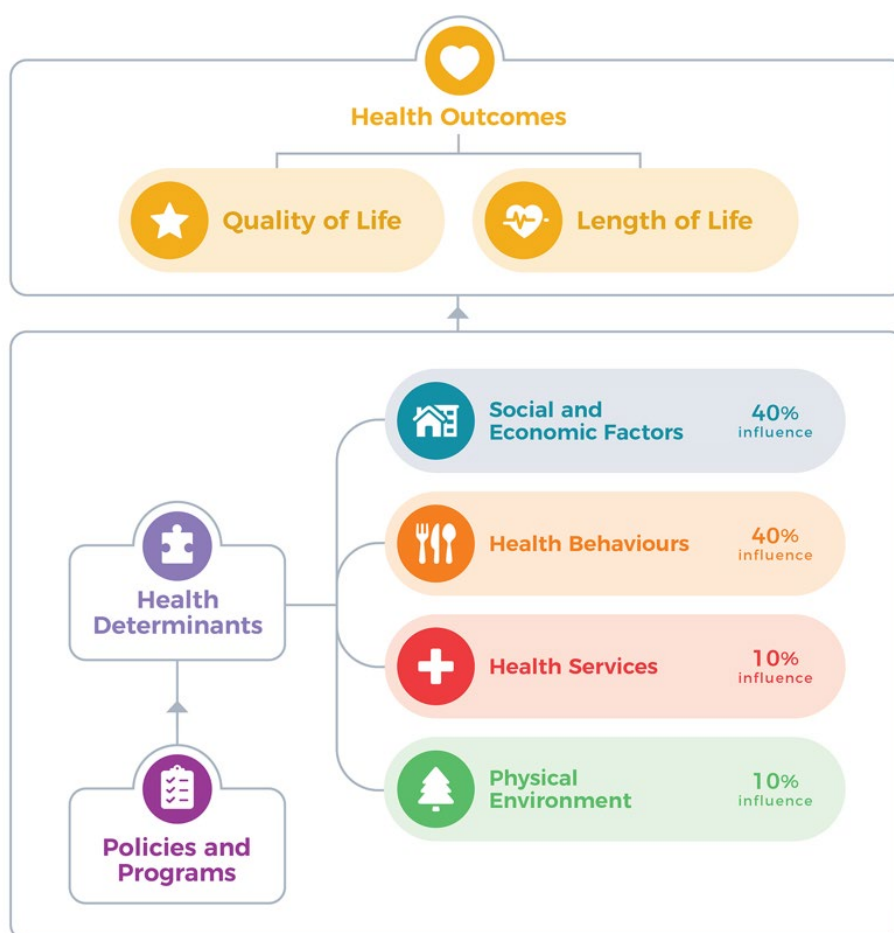
The New Brunswick Health Council's (NBHC) *Population Health Profile* provides an overview of the health and well-being of people who live, learn, work and take part in activities in each community of our province. This tool is designed to help citizens and decision-makers develop a shared understanding 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 7 - Miramichi Area

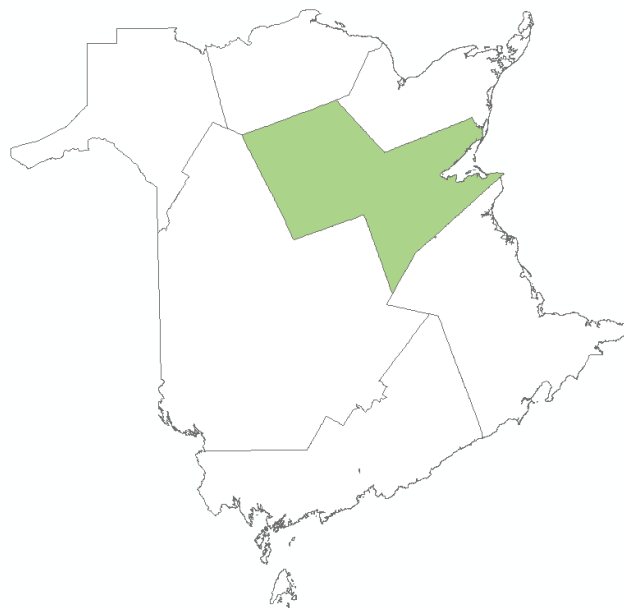
- This zone has the largest proportion of residents who identify as Indigenous and the smallest proportion of recent immigrants of any of the seven health zones.
- Quite a lot of premature deaths are due to cancer, respiratory illnesses and injuries.
- Eating habits are less favourable and smoking is common across all age groups.
- This zone has the province's highest proportion of residents who did not see or speak to a health professional about their mental health despite having the felt the need to do so.



Health of the Zone

Demographic Context

- Area: 9764 km²
- Population density: 4 persons per km²



Zone 7 has the lowest population density of any of New Brunswick's health zones. It experienced a population increase of 1.2% between 2016 and 2020; but this growth rate is well below the provincial average for the same time period. The birth rate (eight per 1,000 population) is close to the provincial average, while the death rate (12 per 1,000 population) is higher.

The Miramichi Area has the second-highest percentage of residents who identify as Indigenous (8.8%). The languages most often spoken at home are Indigenous languages for 0.4% of the population, the highest percentage in the province. The immigrant (1.9%) and visible minority populations (1%) are very small. Recently arrived immigrants (between 2011 and 2016) account for the smallest percentage (0.3%) of the population of any of the seven health zones. Youth in the Miramichi Area have one of the lowest rates of bilingualism (37%) in the province. In terms of housing, this zone has the second-highest percentage of single-parent families (19%). It also has New Brunswick's highest percentage of seniors living with a disability (42%).

Health Outcomes

The Miramichi Area is home to the lowest percentage of seniors who were injured and required medical or nursing care within the previous twelve months. Just over half of seniors (53%) perceive their mental health as very good or excellent, one of the highest percentages of all seven health zones. Ninety-one percent of adults said they are



satisfied or very satisfied with their life, which is the highest percentage in New Brunswick for this age group.

This zone has New Brunswick's highest percentage of diabetes cases (16%) and obesity (38%) in adults aged 18 and up. It is also home to the province's highest percentage of overweight or obese youth (32%) and the lowest percentage of youth who are at a healthy weight (62%). The infant death rate (8 per 1,000 live births) is the highest of all the health zones and double the provincial average. Life expectancy at birth, for men (76.1 years), is the lowest of all seven health zones.

As for premature deaths within the province as a whole, the Miramichi Area has the highest rate of number of years of life lost due to cancer, respiratory illnesses and injuries (see Table 1). Among women and girls under the age of 19, the rate of years of life lost due to cancer (31 per 10,000 population) and injuries (29 per 10,000 population) are the highest of all the New Brunswick health zones.

Table 1. Causes of Premature Death within the Population of Zone 7, years of life lost		
	Zone 7 (rate)*	NB (rate)*
Cancer	202	172
Injuries	87	62
Suicides and self-inflicted injuries	63	44
Heart and stroke	118	96
Breathing diseases	50	30

* Rate per 10,000 population



Determinants of Health

Social and economic factors

While family and social supports for youth in Zone 7 are close to the provincial average, they are less likely to share an evening meal with their loved ones every day (39%) than youth in all the other health zones in the province. However, the percentage of youth who said there are people they greatly admire is higher than the provincial average (47%).

The zone 7 has the province's highest school dropout rate (1.9%).

It also has the smallest number of approved childcare spaces for pre-school children (44 spaces for every 100 children aged 2 to 4) and school-aged children (17 spaces for every 100 children aged 5 to 12), when compared with the other health zones.

In addition, this zone has the province's largest percentage of children who live in a low-income household (32%). It also has the highest percentage of youth who reported that they are often or always hungry when they go to bed or school because there is not enough food at home (5%). And 5% of seniors are experiencing moderate or severe food insecurity at home.

Physical environment

The Miramichi Area has New Brunswick's highest proportion of occupied dwellings in need of major repairs, at 11%. This zone also has the highest percentage in the province of residents who live in band housing (2.6%). Despite the fact that almost three in ten households have high radon levels, the Miramichi Area is home to New Brunswick's smallest percentage of residents who say they have heard of radon (49%), and the largest percentage who have not tested for it in their household (98%).

Only 52% of Zone 7 residents have a park near their home, the lowest percentage in the province. In addition, a lower-than-average percentage of residents participate in



outdoor activities close to home (68%). The Miramichi Area is one of the zones with the smallest number of residents who use active ways of getting to school or work. Only 4% of youth, adults and seniors walk or bike to school or work, while 15% of youth walk, bike or skateboard to work in combination with inactive ways of getting around.

Health Behaviours

The eating habits of Zone 7 residents are, in some respects, the least favourable (see Tables 2 and 3).

Table 2. Zone 7 Residents who Reported They Eat 5 or More Servings of Fruits or Vegetables Each Day		
	Zone 7 (%)	NB (%)
Youth	35	42
Adults	40	43
Seniors	34	39

Table 3. Eating Habits of Zone 7 Youth		
	Zone 7 (%)	NB (%)
Eat breakfast daily	35	41
Ate meals while watching television 3 times or more in the last 7 days	43	40
Eat non-nutritious foods	87	84
Drink non-nutritious sugary beverages	59	54
Ate at a fast-food place or restaurant 3 times or more in the last 7 days	16	14



The sleep habits of youth in this region are also among the least favourable. Only one third of youth get eight or more hours of sleep each night. In addition, one third of youth have tried e-cigarettes and 23% of youth drink heavily. These figures are the highest in the province. This zone is also home to higher-than-average percentages of youth who smoke every day or occasionally (17%) and who use cannabis (23%). One quarter of adults smoke tobacco daily or occasionally, the highest proportion in New Brunswick. In addition, youth in Zone 7 are less likely to wear a bicycle helmet (17%) than youth in any other zone (tied with youth in the Madawaska and North-West Area).



Health Services

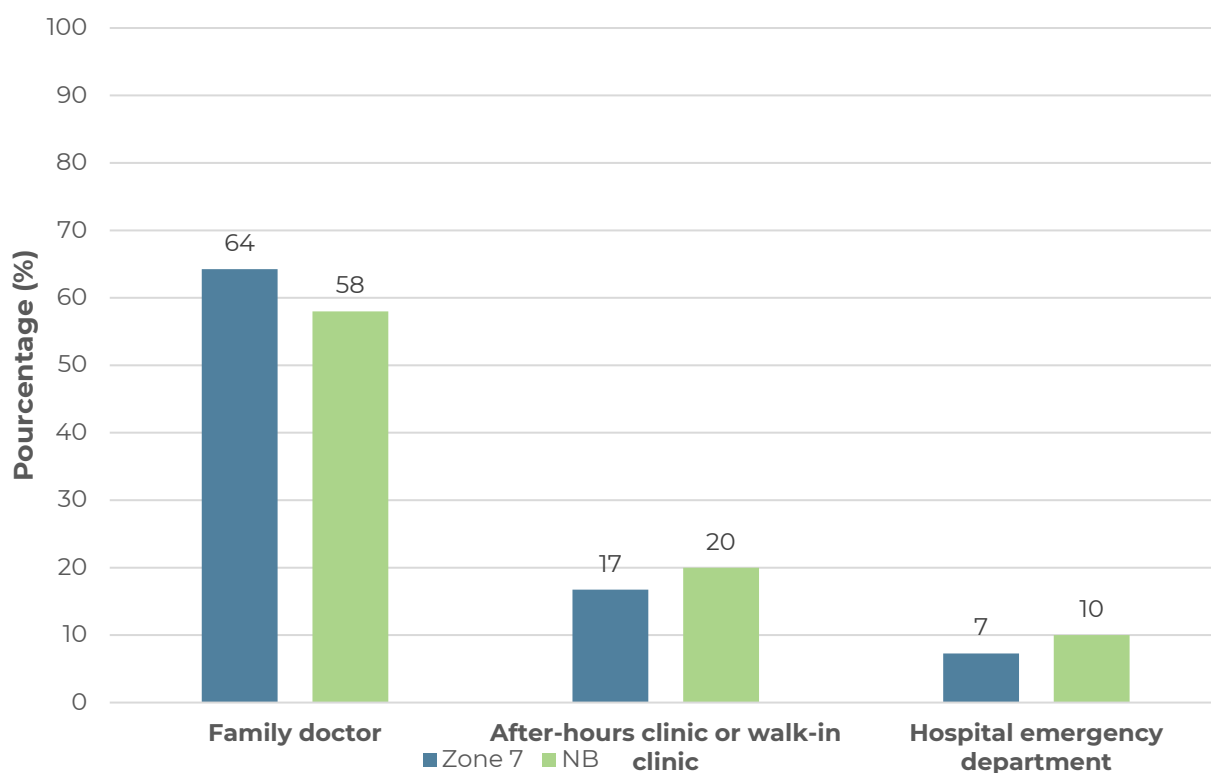
The Miramichi Area stands out in terms of the accessibility of primary care services. Fifty-seven percent of adults and 71% of seniors reported being able to get an appointment with their family doctor within five days. These percentages are well above the provincial averages of 50% and 58% respectively and are the highest of all the New Brunswick health zones. Access to emergency services is comparable to the province as a whole, with close to seven in ten residents (68%) having reported waiting less than four hours to access emergency services.



When ill or in need of health care services, Miramichi Area residents turn to their family physicians more frequently than the residents of any other health zone, with the exception of Zone 2 (Fundy Shore and Saint John Area). Conversely, they use emergency departments (7%) less frequently than the residents of any other zone (see Figure 1).



Figure 1. Types of Services Most Often Used When Care Services are Needed in Zone 7: Miramichi Area



While the rates of hospitalization for injury and mental health conditions are similar to provincial averages, the rate of preventable hospitalization is the highest in the province (79 per 10,000 residents).

Zone 7 has the largest proportion residents who did not see or speak to a health professional about their mental health despite having the felt the need to do so. In addition, both communities that make up this zone differ with respect to the uptake of mental health services: usage by residents of the community of Miramichi is close to the provincial averages, while the people who live in the community of Neguac use these services less frequently.

Some interactions with family physicians are less favourable in Zone 7. For example, 73% of residents reported that their family doctor provides explanations they can understand, and 62% said their family doctor always provides enough time for discussion, both percentages are among the lowest in the province. However, seven in ten residents said



they feel consulted in the decision-making related to their health, a proportion that is closer to the provincial average.

When it comes to rating the health services received, the Miramichi Area is just behind Zone 6 (Bathurst and Acadian Peninsula Area) as the most satisfied zone. More specifically speaking, 72% of adults and 85% of seniors gave the health services they received a positive rating.



Conclusion

Briefly put, the Miramichi Area has the lowest population density in the province and has experienced below-average growth in recent years. This zone has the highest proportion residents that identify as Indigenous; it also has the smallest population of recent immigrants. Single-parent families make up a relatively high percentage of households.

Seniors in the Miramichi Area have the best perception of their mental health and adults have the best life satisfaction of any of the seven health zones. However, diabetes and obesity affect the largest proportion of these age groups in New Brunswick. In addition, life expectancy at birth for men is the lowest in the province, and there are relatively high rates of premature death due to cancer, respiratory disease and injury.

Zone 7 has the highest school dropout rate and the smallest number of approved childcare spaces for two of the three age groups. In addition, a relatively high proportion of children live in a low-income household. Youth have some health habits that are less favourable than average, including diet, sleep, smoking and drinking. Zone 7 also has the province's highest proportion of adults who smoke tobacco.

Zone 7 also has the best access to primary health care services in terms of family doctor appointments, when compared with the other health zones. However, wait times for emergency services are less favourable, although close to the provincial average. This zone also has the province's highest proportion of residents who did not see or speak to a mental health professional, despite having reported feeling the need to do so. However, the Miramichi Area is one of the zones whose residents are most satisfied with the health services they receive.



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 4) to facilitate this research.

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

[Health Zone 7 | New Brunswick Health Council \(nbhc.ca\)](https://www.nbhc.ca)

Tableau 4. 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
Birth rate	SNB-VITST-002	2014 to 2018
Death rate	SNB-VITST-001	2014 to 2018
Single parent families	STATC-SCCEN-006	2016
Language most spoken at home - indigenous languages	STATC-SCCEN-014	2016
Youth bilingualism - English and French	STATC-SCCEN-001	2016
Adults and seniors - with a disability	PH_PWD01_1	2020
Land area	STATC-SCCEN-022	2016
Health outcomes		
Youth - Healthy weight	SH_BMI02_1	2018-2019
Youth - Overweight or obese	SH_BMI02_3	2018-2019
Adults - Life satisfaction, very satisfied or satisfied	PH_LIF01_1	2020
Seniors - Perceived mental health, very good or excellent	PH_HEP02_1	2020
Seniors - Have been injured and had to be treated by a doctor or nurse	PH_INJ01_1	2020
Diabetes	PH_CHCDL_1	2020
Obesity	PH_BMI01_2	2020
Infant death	SNB-VITST-005	2016 to 2018
Life expectancy at birth - Female	STATC-CVITS-001	2015 to 2017



0 to 19 years old - Cancer, years of life lost - Female	SNB-VITST-012	2014 to 2018
0 to 19 years old - Injuries, years of life lost - Female	SNB-VITST-013	2014 to 2018
Cancer, years of life lost	SNB-VITST-007	2014 to 2018
Injuries, years of life lost	SNB-VITST-008	2014 to 2018
Suicides and self-inflicted injuries, years of life lost	SNB-VITST-009	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 - eat an evening meal together with family, friends or guardians	SH_EAT11_1	2018-2019
Youth - have people I look up to	SH_RES05_1	2018-2019
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
School dropout rate	GNB-EESC-005	2018-2019
Children - live in low-income household (0-5 years)	STATC-SCCEN-046	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
Seniors - Food insecurity - moderate to severe	STATC-CCHS-002	2015 to 2019

Physical environment

Live in band housing	STATC-SCCEN-027	2016
Occupied dwellings requiring major repairs	STATC-SCCEN-029	2016
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
Have a park close to home	STATC-HENVS-005	2017
Participate in outdoor activities close to home	STATC-HENVS-008	2017
Radon - household with high radon concentration	HCRAD-CCSRCH-001	2007
Radon - household who has heard of radon	STATC-HENVS-006	2017
Radon - household who has not tested for radon	STATC-HENVS-007	2017

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_EAT14_2	2018-2019
Youth - Eat non-nutritious foods	SH_EATNN_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
Adults - Eat 5 or more servings of vegetables or fruit daily	PH_EAT03_1	2020
Seniors - Eat 5 or more servings of vegetables or fruit daily	PH_EAT03_1	2020
Youth - Sleep 8 hours or more every night	SH_SLE01_1	2018-2019
Youth - Tried e-cigarettes (vaping)	SH_SMOEC_1	2018-2019
Youth - Daily or occasional smoker	SH_SMO09_1	2018-2019



Youth - Cannabis use	SH_MAR02_2	2018-2019
Adults - Daily or occasional smoker	PH_SMO01_1	2020
Youth - Wear a helmet when riding a bicycle	SH_SAF03_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
Hospitalization for mental health disorder	CIHI-DAD-018	2017-2018 to 2019-2020
Avoidable hospitalization	CIHI-DAD-003	2016-2017 to 2019-2020
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
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
Citizens - provide a favourable rating for overall health care services received	PH_SATOA_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