

Demographic and Health Profile of Greater Sudbury Youth Aged Between 12-25 Years

Public Health Sudbury & Districts
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Introduction

The work of public health is grounded in a population health approach. This means that public health develops programs and delivers services that promote health and prevent diseases as people age and as their risks and priorities change over time.

Youth are an important demographic to public health’s population health approach. Public health works to improve the health of youth in many ways, such as reducing exposure to health hazards and promoting the development of healthy built and natural environments; promoting healthy growth and development, and healthy living behaviours; reducing communicable and infectious diseases, preventable injuries, and substance use; and promoting equity, diversity, and inclusion.

Data collection and analysis of population health information is used to identify areas of current and emerging needs. This information is then used to tailor programs and services based on the findings. This report provides a summary of available evidence pertaining to youth between the ages of 12 and 25 years.



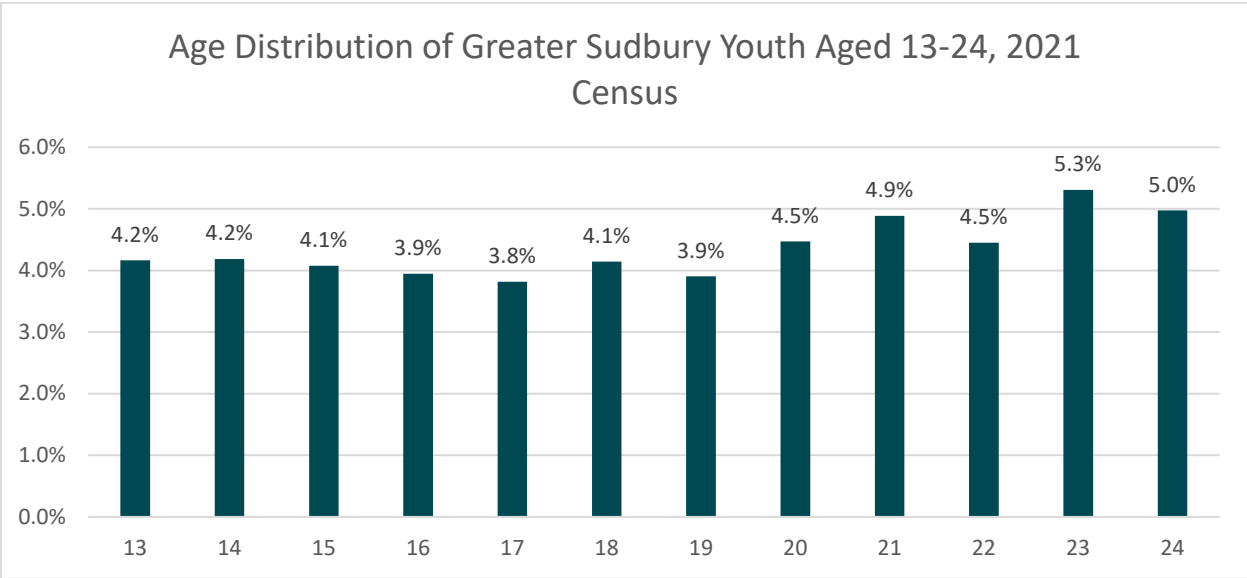
Demographic Data¹

Demographic data on youth aged 13-24 years in Greater Sudbury is from the 2021 Statistics Canada Census, unless otherwise indicated. The Greater Sudbury Census Division includes Azilda, Capreol, Chelmsford, Coniston, Copper Cliff, Garson, Hanmer, Levack, Lively, Onaping, Val Caron, Wahnapiatae, and Wahnapiatae First Nation.

Population

The Greater Sudbury Census Division had a total population of 163,155 in 2021. Youth between the ages 13-24 years comprised of 13.98% of the Greater Sudbury total population.

The distribution of ages for the 22,805 youth between the ages 13-24 years is as follows:

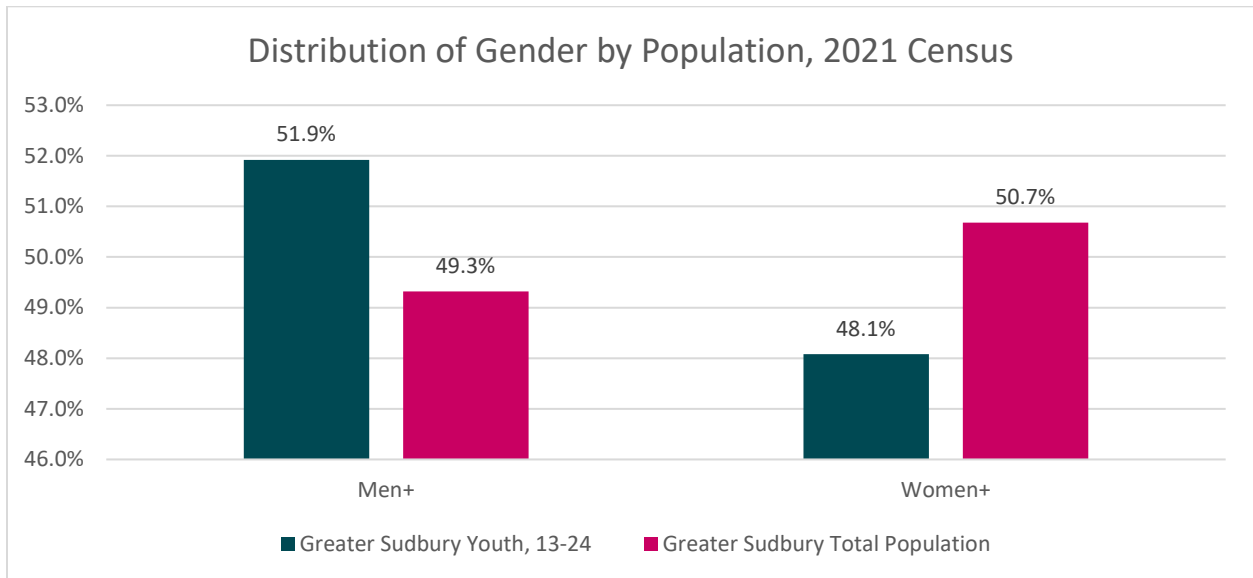


Gender

Individuals in the “non-binary persons” response category in the 2021 Census were distributed into the other two gender categories, denoted by the ‘+’ symbol due to small population counts and the need to protect the confidentiality of responses.

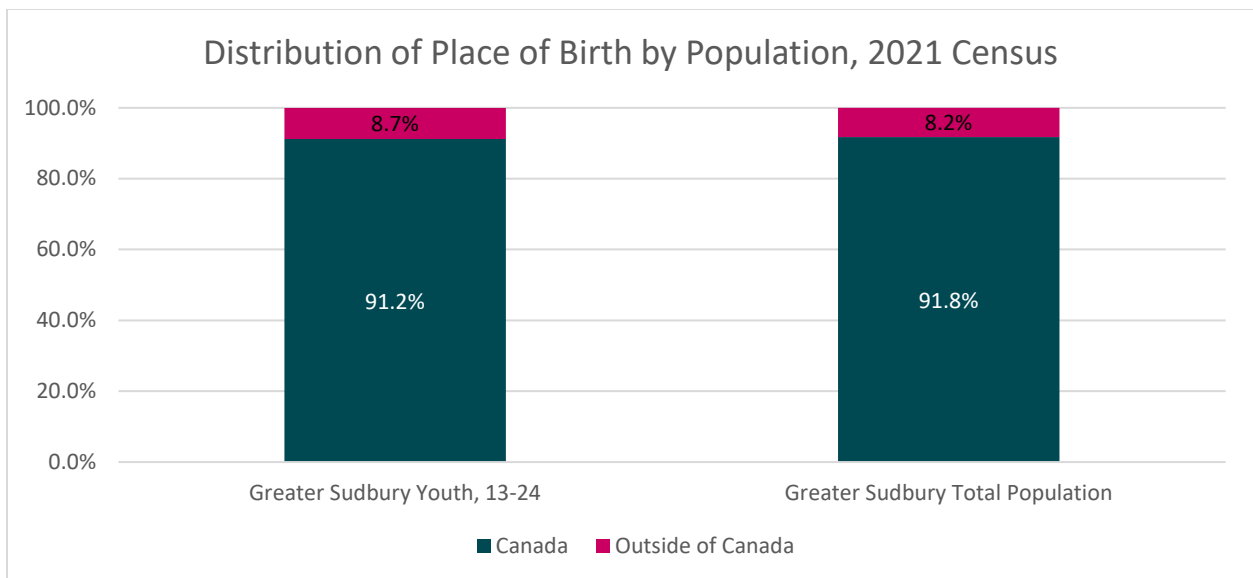
¹ All demographic data is provided by the 2021 Census, Target Group Profile, a custom dataset requested by the Community Data Portal to Statistics Canada. A suggested citation would be: Community Data Portal (2023). Target group profile of the population by age groups, Census 2021 [Data set]. Statistics Canada. <https://communitydata.ca/data/target-group-profile-population-age-groups-census-2021>

Youth between the ages 13-24 years had a higher percentage of respondents in the Men+ category than in the Greater Sudbury total population.



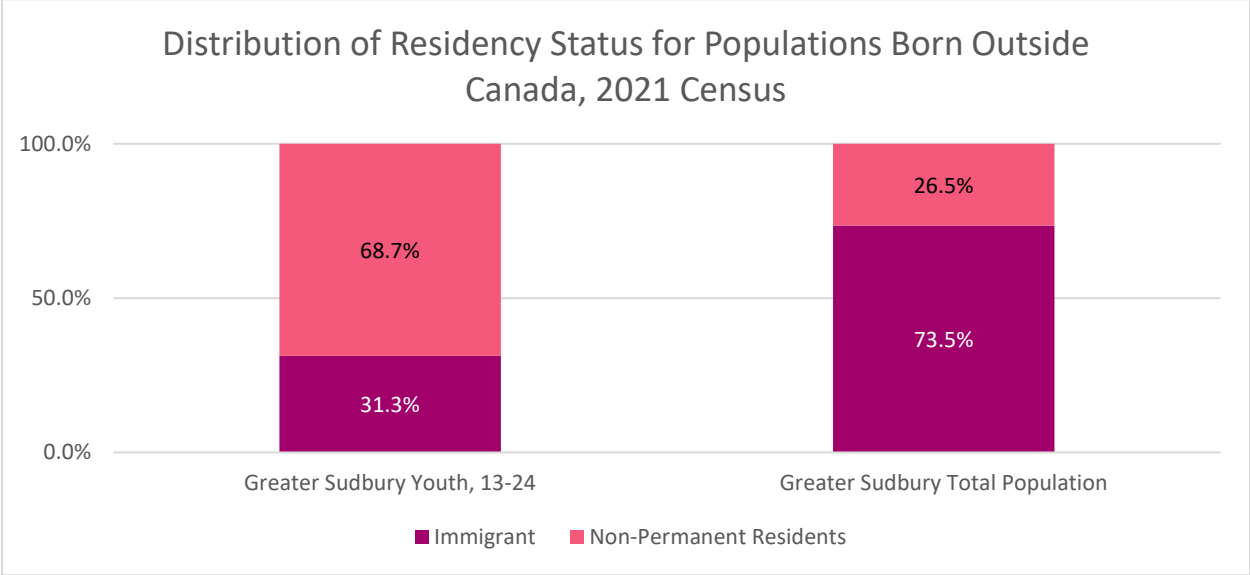
Place of Birth and Immigration

There were minimal differences between the place of birth for youth between the ages 13-24 years and the Greater Sudbury total population, with approximately 91% of both populations born in Canada.



However, when evaluating the distribution of residency status for respondents born outside of Canada, the youth population had a higher proportion of respondents identifying as non-

permanent residents than immigrants. Non-permanent residents include those who are on a work or study permit or are claiming refugee status.

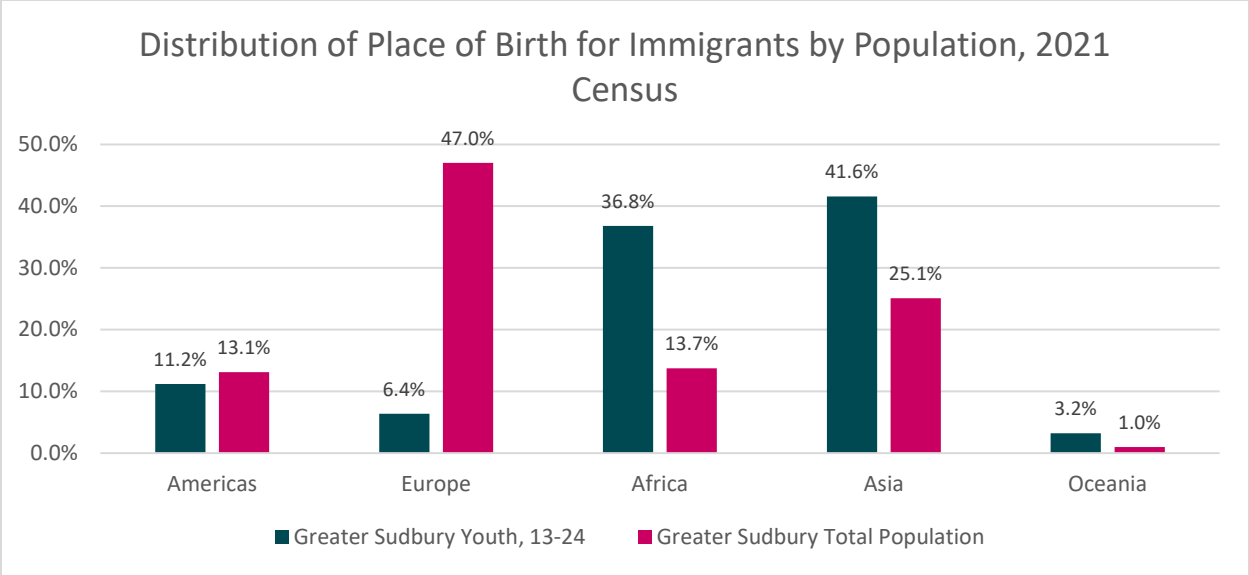


Cultural Identity

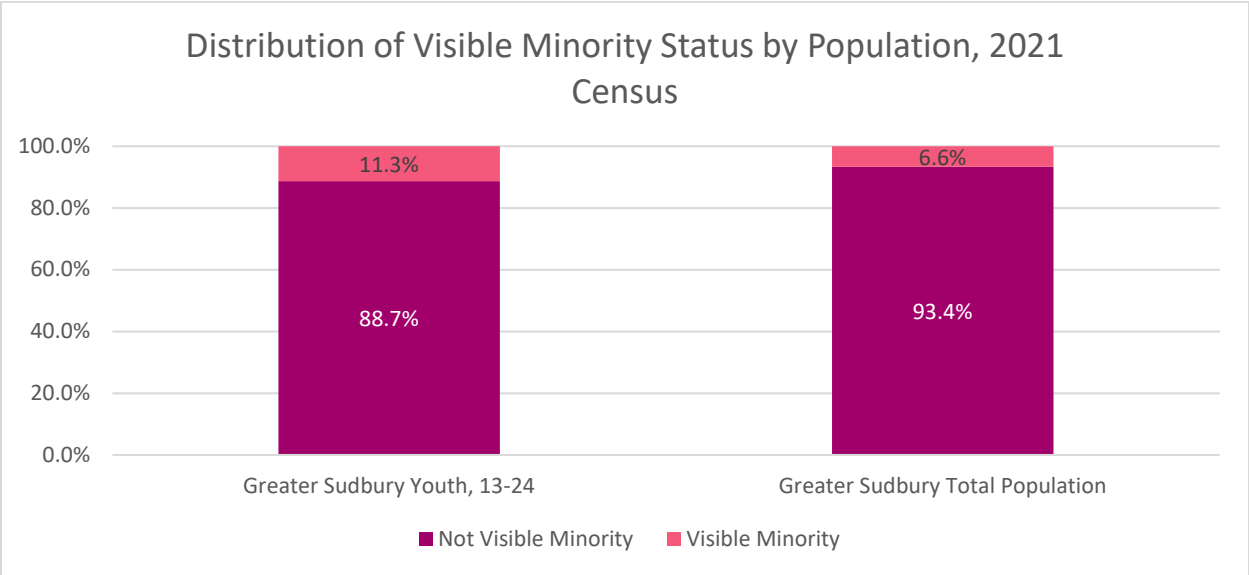
In analyzing the distribution of place of birth for respondents who are immigrants (excluding non-permanent residents), there are notable differences. Greater Sudbury had a higher proportion of respondents who were born in Europe. In comparison, youth between the ages of 13-24 years were more likely born in Africa or Asia. This reflects established trends across Canada which have seen immigrants from Europe decline over the last 50 years, with increased immigration from Asia, the Middle East, and Africa².



² Department of Justice Canada. (2022, August 26). *Cultural Diversity in Canada: The Social Construction of Racial Difference*. https://www.justice.gc.ca/eng/rp-pr/csi-sic/jsp-sjp/rp02_8-dr02_8/p3.html

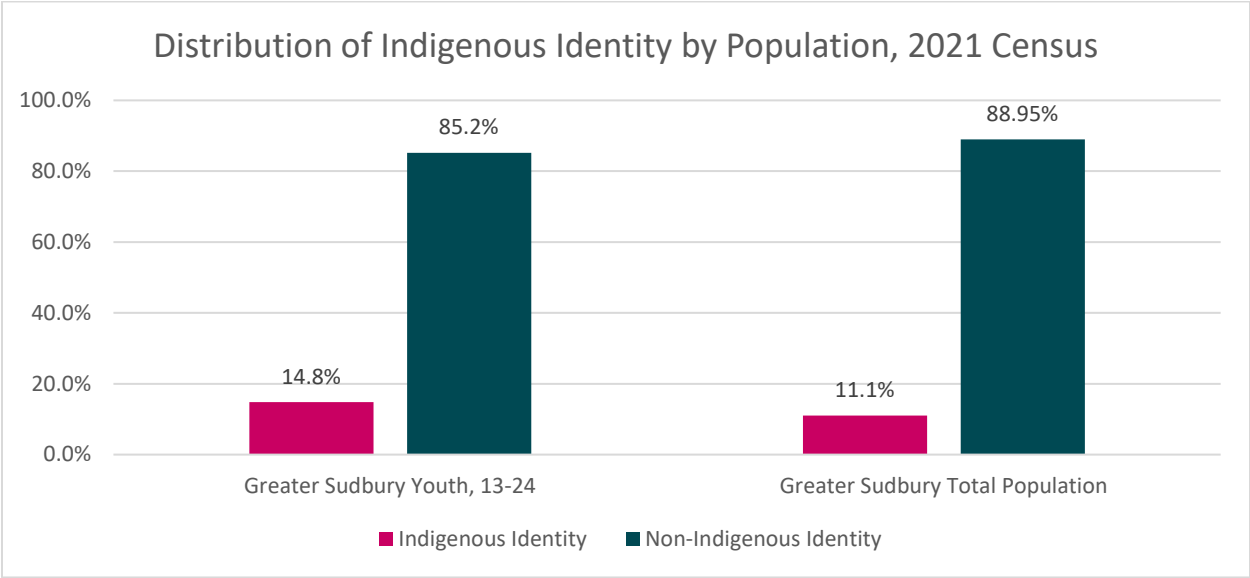


The statistics of visible minority populations demonstrate that youth between the ages of 13-24 years were almost twice as likely not to be a visible minority. Of note, those who identified as First Nations, Metis, and/or Inuit, and “Not a visible minority” for Census purposes, were excluded from this indicator³.



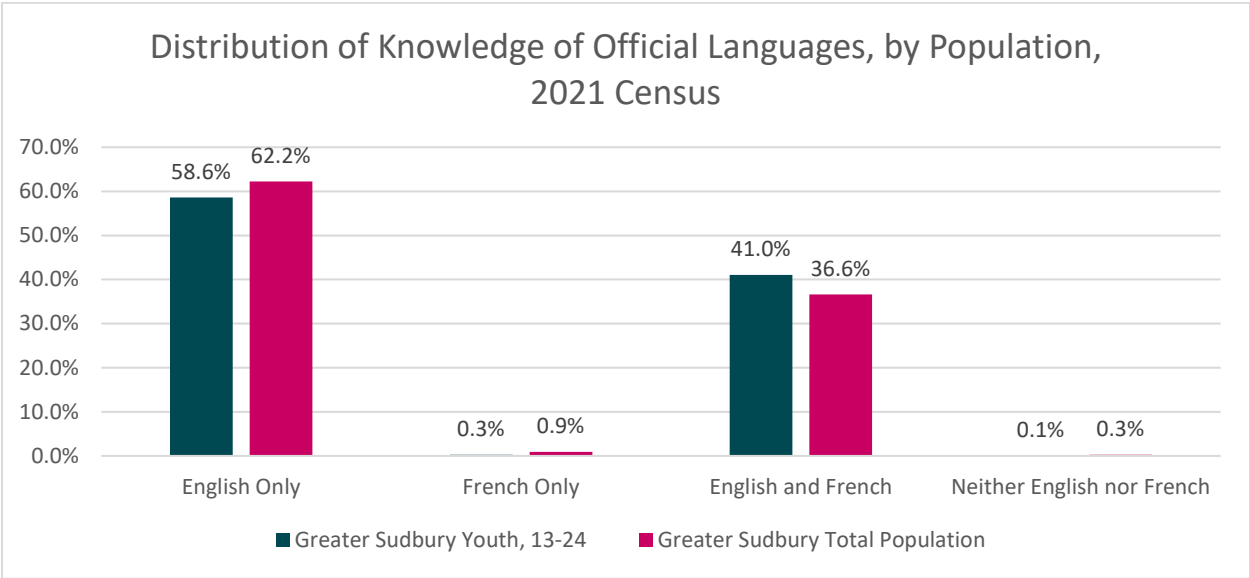
³ Statistics Canada. (2023, February 7). *Visible Minority and Population Group Reference Guide, Census of Population, 2021*. <https://www12.statcan.gc.ca/census-recensement/2021/ref/98-500/006/98-500-x2021006-eng.cfm>

Youth between the ages of 13-24 years were also more likely to identify as Indigenous than the total population for Greater Sudbury. Indigenous identity includes First Nations, Metis, and/or Inuit identity.



Knowledge of Official Languages

Youth between the ages of 13-24 were more likely to report knowledge of both official languages than the total population of Greater Sudbury.



Health and Behaviour Data

Data presented in this section are from various sources, including the Ministry of Health, the Integrated Public Health Information System (iPHIS), the Canadian Community Health Survey, and Acute Care Enhancement Surveillance (ACES). Health and behaviour data is primarily available for the Public Health Sudbury & Districts service area, which includes: Chapleau, Greater Sudbury, Lacloche Foothills, Manitoulin Island, and Sudbury East.



Teen Pregnancy and Therapeutic Abortion (TA) Rates⁴

Teen pregnancy and therapeutic abortion (TA) rates within the Public Health Sudbury & Districts service area have been declining since 2017; however, rates for both have remained consistently higher than provincial averages for the same age demographic.

⁴ IntelliHealth. Ministry of Health.

Public Health Sudbury & Districts, ages 15-19

Year	TA	Births	TA + Births	Population	Pregnancy Rate per 1000	TA rate per 1000
2017	56	83	139	5540	25.09	10.11
2018	43	58	101	5550	18.20	7.75
2019	40	53	93	5476	16.98	7.30
2020	34	49	83	5349	15.52	6.36
2021	21	40	61	5277	11.56	3.98
5-year average					17.47	7.10

Ontario, ages 15-19

Year	TA	Births	TA + Births	Population	Pregnancy Rate per 1000	TA rate per 1000
2017	2941	2387	5328	411017	12.96	7.16
2018	2295	2016	4311	416186	10.36	5.51
2019	2130	1856	3986	418530	9.52	5.09
2020	1558	1611	3169	416203	7.61	3.74
2021	577	1366	1943	403261	4.82	1.43
5-year average					9.06	4.59

Sexually Transmitted Infections⁵

Rates of sexually transmitted infections have been variable over the last decade in the Public Health Sudbury & Districts service area; the highest case counts for chlamydia, gonorrhea, and syphilis were in 2019 for youth aged 18 to 24 years.

Disease	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	Total
Chlamydia											
17 and under	66	54	47	53	58	60	81	41	45	28	535
18 to 24	350	359	353	391	406	420	500	445	290	262	3782
Gonorrhea											
17 and under	<5	<5	5	5	6	<5	<5	<5	<5		28
18 to 24	15	19	33	23	24	36	52	25	15	10	252
Syphilis											
17 and under										<5	<5
18 to 24	<5	<5		<5		<5	11	7	6	5	37

⁵ Integrated Public Health Information System (iPHIS). Public Health Sudbury & Districts.

Physical and Mental Health of Youth

Statistics Canada’s Canadian Health Survey of Children and Youth (CHSCY)⁶ focusses on the physical and mental health of children and youth. The table below identifies no significant differences between local and provincial results, except for overweight/obese, whereby the Public Health Sudbury & Districts service area is significantly higher than the province (40% vs 29.4%).

Indicator	% Public Health Sudbury & Districts	% Ontario	Statistically significantly different from Ontario
Stressful (12-17yr)	17.5	21.4	No
Difficulty accessing General Practitioner (1-17yr)	10.3	6.9	No
Concussion (1-17yr)	6.1	4.4	No
No physical activity (3-17yr)	25.8	25.6	No
Overweight/Obese (2-17yr)	40.0	29.4	Yes
Food Insecure (1-17yr)	11.2	10.1	No

The Canadian Community Health Survey⁷ gathers information about health status, health care utilization and health determinants. The table below provides a summary of results for youth between the ages of 12-17 years. It is notable that 100% of the sample in this age category reported life satisfaction as “satisfied or very satisfied”.

Indicator	% in Public Health Sudbury & Districts
Perceived health, very good or excellent	80.7
Perceived mental health, very good or excellent	43.6 ^E
Sense of belonging to local community, somewhat strong or very strong	94.4
Life satisfaction, satisfied or very satisfied	100.0
Has a regular healthcare provider	94.2

^E use estimate with caution due to high sampling variability as a result of small sample size

Annual Emergency Department Visits⁸

The following is a summary of Health Sciences North emergency department visits for youth aged 12 to 25 years from January 2022 to December 2022. These results may include visits from persons outside of Greater Sudbury.

⁶ 2019 CHSCY. Health Analytics and Insights Branch (HAIB). Ministry of Health via Visual Analytics Hub.

⁷ Statistics Canada. (2022, April 19). *Health characteristics, two-year period estimates*. <https://doi.org/10.25318/1310011301-eng>

⁸ Acute Care Enhancement Surveillance (ACES). KFL&A Public Health. Retrieved April 26, 2023.

- 14 to 56 visits per day
- 0 to 10 visits per day for injuries
- 0 to 3 visits per day for toxicology
- 0 to 5 visits per day for suicidal ideation, attempt, or overdose
- 0 to 9 visits per day for mental health
- 0 to 6 visits per day for respiratory

Emergency Department Visits for Intentional Self-Harm⁹

There were 146 emergency department visits by youth aged 12-25 years in 2022 for intentional self-harm in the Public Health Sudbury & Districts service area. This information is for residents of Public Health Sudbury & Districts service area and may include visits to emergency departments outside of the health unit service area.

⁹ IntelliHealth. Ministry of Health. Retrieved April 26, 2023.

Summary

The data in this report is fundamental for developing programs and services that promote health and prevent diseases. A review of the 2021 Census demographic data for youth aged 13-24 years in Greater Sudbury found that youth comprise of more than 10% of the population; there is a relatively equal gender distribution, including non-binary persons, with slightly more men+ than women+; the vast majority of youth were born in Canada; youth not born in Canada were predominately non-permanent residents; immigrant youth tended to originate from Africa or Asia; most youth did not identify as a visible minority; almost 15% of youth identified as Indigenous; and over one-third of youth had knowledge of both official languages.

In terms of health and behaviours, most data was only available at the Public Health Sudbury & Districts service area level and not specifically for the City of Greater Sudbury. The findings in this report highlight that teen pregnancy and therapeutic abortions have been declining; sexually transmitted infections have remained variable with the highest rates reported in 2019; rates of overweight/obesity for children and youth were significantly higher in the Public Health service area than in the province; youth aged 12-17 years reported being satisfied or very satisfied with life satisfaction; daily emergency room visits for mental health in Greater Sudbury were in the single digits in 2022; however, emergency room visits in the Public Health service area for intentional self-harm totaled to over 140 in 2022 for youth aged 12-25 years. The valuable insight from both demographic and health and behaviour data depict the current status of youth in both Greater Sudbury and the Public Health Sudbury & Districts service area to guide program development and service delivery.