



Backgrounder: Improving the Health of Canada's Aboriginal People

Toward a Healthy Future: Second Report on the Health of Canadians summarizes the most current information we have on the health of Canadians and the factors that influence or “determine” health. It suggests several priority areas for action in the new millennium. One of these priorities is to take action to improve the health of Canada's Aboriginal people.

Taking Action

When developing strategies to address this priority we need to keep the following points in mind:

- ◆ **Aboriginal people have the lead role in finding ways to enable their people to take control of and improve their health.** However, meeting this goal will require the support of all Canadians. Policy-makers and practitioners who are non-Aboriginal need to work with Aboriginal leaders and communities to find culturally-appropriate ways to improve their health and well-being.
- ◆ **Priorities for action include increasing opportunities** for employment and advanced education and training, ensuring access to safe and affordable housing and food, providing support to young, low-income families and their children, reducing risk-taking behaviour and suicide among young people, and preventing chronic diseases such as diabetes and heart disease.
- ◆ **The sub-populations within the Aboriginal population are diverse.** Conditions vary greatly from settlement to settlement and between Aboriginal people who live on and off reserve. It is important to recognize this diversity and to involve specific communities in developing ways to address the health challenges they identify.
- ◆ **The creation of the new territory of Nunavut offers an exciting opportunity to better understand the health of Inuit people,** who make up the majority of residents in that jurisdiction. Existing surveys and databases need to be analyzed, to separate information on Nunavut from that on the Northwest Territories. Different research protocols may be needed to overcome the challenges of information collection and dissemination in this large, diverse territory.
- ◆ **The recent Royal Commission Report on Aboriginal Peoples identified numerous strategies to address this priority,** including increased support for self-government, improvements in the basic prerequisites for health (such as access to safe, high-quality and affordable housing) and the elimination of racial prejudice in mainstream society. The recommendations from this report should be used to develop a collaborative strategy to improve health in Aboriginal communities.

- ◆ **Efforts to improve the health of Aboriginal people in Canada's North are likely to benefit all people who live in the area.** Compromised health among Aboriginal people is often compounded by isolation and the high costs of living in areas that are remote from food production, schools and health facilities — factors that many Aboriginal Canadians share with non-Aboriginal residents of the North.

High Risk for Poor Health

Many Aboriginal communities and groups have made impressive improvements in education levels and equally impressive reductions in infant mortality rates and substance use. Despite these successes, Aboriginal people remain at higher risk for illness, and earlier death than the Canadian population as a whole. They suffer from more chronic diseases such as diabetes and heart disease than the general population, and there is evidence that these conditions are increasing among Aboriginal groups.

Aboriginal people face a number of disadvantages in the underlying factors or “determinants” of health.

Compared to Canadian families as a whole, a greater proportion of Aboriginal families are experiencing problems with housing and food affordability. These problems are likely linked to high levels of unemployment and pervasive low incomes. Aboriginal leaders have identified low income levels as a critical factor in their health status and have called for a better understanding of the links between income, social factors and the health of their people.

- ◆ In 1995, at least 44% of the Aboriginal population and a full 60% of Aboriginal children under the age of 6 lived below Statistics Canada's low-income cut-off rates.
- ◆ In 1996, the unemployment rate among First Nations people on reserve was 29%; off reserve it was 26%. Unemployed people have a reduced life expectancy and suffer more health problems than people who have a job.

Inadequate housing and crowded living conditions are factors in the higher rates of respiratory problems and other infectious diseases among Aboriginal children, compared with non-Aboriginal children. Children in Aboriginal families also have high rates of unintentional injuries and early deaths from drowning and other causes. Young men (particularly in Inuit communities) are far more likely to commit suicide than their peers in Canada as a whole. Aboriginal children in some communities are more likely than children in the general population to begin adult behaviours such as smoking, drinking and drug use at a young age.

For More Information

Toward a Healthy Future: Second Report on the Health of Canadians was developed by the Federal, Provincial and Territorial Advisory Committee on Population Health in collaboration with Health Canada, Statistics Canada, the Canadian Institute for Health Information and the Centre for Health Promotion, University of Toronto. The full text can be found on the Health Canada Web site: <http://www.hc-sc.gc.ca>. Printed copies of the *Report* are available from Provincial and Territorial Ministries of Health or from:

Publications
Health Canada
Tunney's Pasture (AL 0900C2)
Ottawa, ON K1A 0K9
Telephone: (613) 954-5995
Fax: (613) 941-5366
E-mail: Info@www.hc-sc.gc.ca