

FACT SHEET

The Health and Wellbeing of Women in First Nations Communities

The data presented in this Fact Sheet are derived from the **First Nations Regional Longitudinal Health Survey 2002/03** (RHS Phase 1.) The RHS National Team and its Regional Partners are presently preparing to deploy **RHS Phase 2** this Fall (2007); this will be the second phase of a longitudinal design.

Which Types of Barriers are First Nations Women Facing in Accessing Health Care?

Nearly one in six First Nations women (15.9%) reported that the **cost of transportation** prevented them from accessing a health service that they needed in the past year. Another 9.2% identified barriers with **childcare costs** and almost one in five (19.4%) had at least one problem with obtaining approval for **services covered under NIHB**. First Nations women experienced these barriers at a higher rate than their male counterparts.

In terms of accessing NIHB funded services, women (compared to men) are more likely to have difficulties with accessing medication, vision care, and transportation services.

On a more positive note, women are more likely than men to undergo preventative and diagnostic screening tests such as, cholesterol, vision or eye examination, blood pressure, high blood sugar, and complete physical examinations. Moreover, First Nations women are undergoing PAP Smear Tests at about the same frequency as their Canadian counterparts: 48.2% less than 1 year ago and 27.4% 1 to 3 years ago.

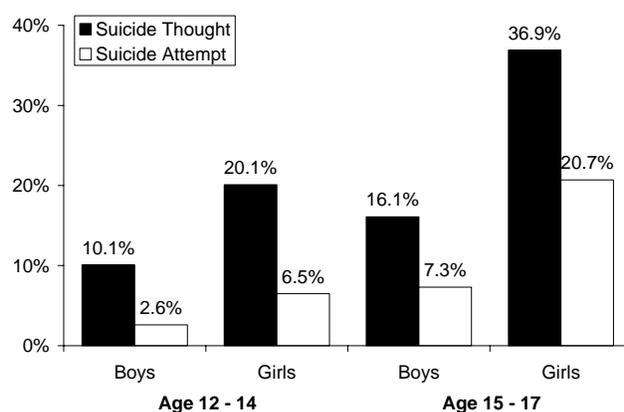
Suicide Ideation and Attempts

One in three (33.4%) First Nations women have thought about committing suicide (suicide ideation) at least once in their lifetime; this is about the same rate as men, 28.5%. However, the relative difference increases significantly when lifetime attempted suicides are considered. Nearly 1 in 5 (18.5%) First Nations women reported to have attempted to suicide at least once in their lifetime; this rate is **over 40% higher** than the reported rate for men, 13.1%.

This gender difference is apparent from the time First Nations youth are in their youth. One in five (20.7%) girls between 15 and 17 reported having attempted suicide at least once in their lifetime; this is **almost 3 times the rate** for boys aged 15 to 17 and **over 3 times higher** for girls aged 12 to 14.

This pattern is replicated for suicide ideation, where girls are more likely than boys to have thought about suicide at all age groups. For both age groups, girls are at least **twice as likely** to have thought about committing suicide at least once in their lifetime.

Figure 1. Lifetime suicide ideation and attempts among First Nations youth, by gender.



Which Medical Conditions are Affecting First Nations Women?

Table 1 presents the medical conditions afflicting First Nations women, presented in descending order. Overall, women reported **lower rates** of chronic musculoskeletal, respiratory, and cardiovascular conditions. However, women reported higher rates of vision or hearing conditions and in general, were less likely to consider themselves to be in ‘very good’ or ‘excellent’ health.

Table 1. Medical conditions affecting First Nations women.

Condition	Rate	Condition	Rate
Allergies	23.2%	Chronic bronchitis	3.8%
Arthritis	21.9%	Psychological or nervous disorders	3.2%
Diabetes	16.0%	Blindness or serious vision problems	3.0%
Chronic back pain	14.1%	Tuberculosis	3.0%
High blood pressure (excl. pregnant women)	14.0%	Cancer	2.5%
Asthma	12.2%	Effects of stroke	1.7%
Stomach and intestinal problems	10.0%	Liver disease (excl. Hepatitis)	1.7%
Thyroid problems	6.6%	Learning disability	1.4%
Hearing impairment	6.0%	Hepatitis	1.3%
Heart disease	5.0%	Glaucoma	1.2%
Osteoporosis	4.5%	Emphysema	1.0%
Cataracts	4.3%	Epilepsy	0.8%
Rheumatism	4.2%	Cognitive or mental disability	0.6%

First Nations Youth

First Nations girls (age 12 to 17) are **less likely to be overweight or obese** than their male counterparts. Even so, 1 in 4 (24.5%) felt dissatisfied with their body weight, compared to about 1 in 10 boys. Likewise, girls reported **feeling less in balance** in the mental and physical aspects of their lives.

Both boys and girls felt the same way about attending school and were equally likely to have repeated a grade. In terms of educational aspirations, girls are **more likely to want to pursue university education** while boys leaned towards vocational or technical training.

For more information about the First Nations Regional Health Survey, please contact: Jane Gray, jgray@afn.ca.

Readers may also be interested in these other RHS publications:

RHS 2002/03 – Results for Adults, Youth, and Children in First Nations Communities

RHS 2002/03 – Report on Process and Methods

RHS 2002/03 – The Peoples’ Report

RHS at a Glance

