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First Nations Information Governance Centre
Le Centre de gouvernance de l'information des Premières Nations

QUICK FACTS

FROM

The First Nations Regional Health Survey

PHASE 3













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If you are interested in more information from the RHS Phase 3, you can download copies of the two-volume report here: fnigc.ca/rhs3report

In addition, hundreds of RHS Phase 3 charts, figures, and graphs are available on FNIGC Data Online, FNIGC's free-to-use data tool, which is available here: fnigc.ca/dataonline

ABOUT THE COVER

The cover of this publication features *Morning Star*, a 1993 mural by Dene Suline artist Alex Janvier which adorns the dome of the Haida Gwaii Salon at the Canadian Museum of History in Ottawa, Ontario, Canada. The artwork covers 418 square metres and can be seen from seven stories below. *Morning Star* illustrates the history of the land we live in from the artist's perspective and is an expression of the hope for mutual respect. Born of Dene Suline and Saulteaux descent in Le Goff Reserve, Cold Lake First Nations, Alberta, Janvier was raised in the Chipewyan tradition, speaking the Dene language until attending the Blue Quill Indian Residential School when he was eight-years-old.

As a member of the "Indian Group of Seven," Janvier is widely recognized as one of the most significant Indigenous artists in Canada, and over the course of his career he has added much to the cultural fabric of the nation. A Member of the Order of Canada, Alberta Order of Excellence, and Royal Canadian Academy of the Arts, his contribution to art in Canada is significant.

ABOUT THE BOOKLET DESIGN

The layout of this publication was done by Drawing Change, with illustrations by Carina Nilsson, and graphic design by Snow Dowd. More information about the team at Drawing Change and the work that they do can be found at www.drawingchange.com.

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INTRODUCTION

This publication features data from the *National Report of the First Nations Regional Health Survey Phase 3 (Volumes One and Two)*, which were first published by the First Nations Information Governance Centre (FNIGC) in 2018.

First piloted in 1997, the First Nations Regional Health Survey (FNRHS, or RHS) was the first—and is still the only—national health survey created, conducted, and carried out by First Nations people for First Nations people. Rooted in Traditional and western understandings of health and well-being, the RHS gathers information in more than 250 First Nations communities across Canada from First Nations children aged 0-11, youth aged 12-17 and adults aged 18 and older.

Over the past two decades First Nations leadership have come to depend on the RHS as a trusted source of data about life in First Nations communities, and many rely on it to help inform important planning, policy, and programming decisions.

In this **QUICK FACTS FROM THE FIRST NATIONS REGIONAL HEALTH SURVEY PHASE 3** you will find 100 facts taken from the two RHS Phase 3 national reports.

Flip through this booklet for up-to-date information in First Nations communities across the country on:

- Socioeconomic conditions
- Chronic health conditions
- Mental health
- Substance use
- Oral health
- Indian Residential Schools
- Health care access
- Language & culture
- Nutrition & food security
- Physical activity
- Personal & community wellness

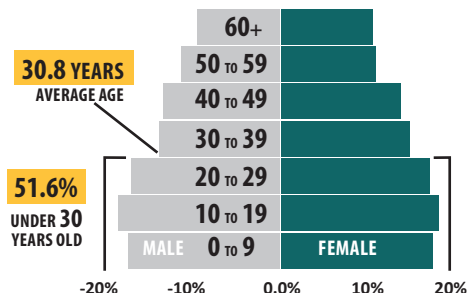


1. SOCIOECONOMIC CONDITIONS

1. SOCIOECONOMIC CONDITIONS: DEMOGRAPHICS

- 1 The average age of First Nations children, youth, and adults living on reserve and in Northern communities combined was 30.8 years; with more than half (51.6%) being under 30-years-old.

POPULATION AGE GROUP PYRAMID FOR FIRST NATIONS CHILDREN, YOUTH AND ADULTS LIVING IN FIRST NATIONS COMMUNITIES

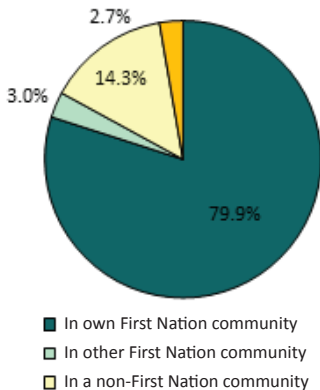


- 2 More than half (58.0%) of First Nations adults had lived outside of their community at some point in their lives. The most common reasons for leaving were for education (45.3%) and employment (44.8%), while family was the top reason for returning (67.7%), followed by connection to community (39.6%).



- 3 The majority of First Nations adults (79.9%) who are working do so in their own First Nations community, while 14.3% work in a non-First Nations community.

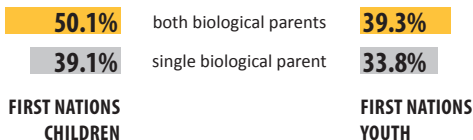
LOCATION OF WORK FOR FIRST NATIONS ADULTS WORKING FOR PAY



- 4 The average household size for First Nations youth was 5.8 and was 5.7 for First Nations children.
- 5 Nearly one-quarter (24.1%) of First Nations adults are living in crowded households (more than one person per room).

- 6** The most common living arrangement for First Nations children was living with both biological parents (50.1%), followed by living with a single biological parent (39.1%).
- 7** The most common living arrangements for First Nations Youth was living with both biological parents (39.3%) and living with a single biological parent (33.8%).

YOUTH/CHILDREN LIVING WITH



- 8** Among First Nations adults, less than two-thirds (61.6%) live in a residence owned by themselves or someone else in the household. More than one-quarter (28.0%) of adults live in band or community owned housing.

ADULTS LIVING IN HOUSING OWNED BY



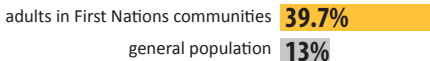
- 9 More First Nations adults living in remote or special access communities (37.9%) reported living in a home that was in need of major repairs than those in rural (27.2%) and urban (21.8%) areas.

LIVING IN HOUSING IN NEED OF MAJOR REPAIRS



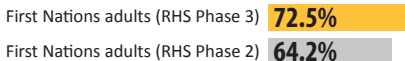
- 10 39.7% of First Nations adults reported that there was mould or mildew in their homes in the 12 months prior to the survey which is three times higher than the rate in the general population (13%), as reported in the 2015 Households and the Environment Survey (Statistics Canada, n.d.a).

REPORTING MOULD OR MILDEW IN THEIR HOMES



- 11 Nearly three-quarters (72.5%) of First Nations adults living in First Nations communities consider their main water source safe for drinking year-round. This represents an increase in confidence of drinking water since the RHS Phase 2, where only 64.2% of adults considered their main water supply to be safe for drinking year-round.

DRINKING WATER CONSIDERED SAFE YEAR-ROUND

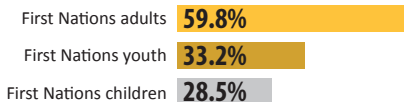




2. CHRONIC HEALTH CONDITIONS

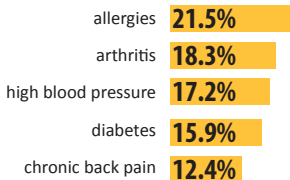
- 12** Nearly three-fifths (59.8%) of First Nations adults, one third (33.2%) of First Nations youth, and more than one-quarter (28.5%) of First Nations children reported having one or more chronic health conditions (as diagnosed by a health care professional).

REPORTED HAVING ONE OR MORE CHRONIC HEALTH CONDITIONS



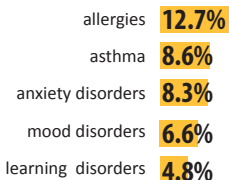
- 13** Among adults reporting a chronic health condition, allergies (21.5%), arthritis (18.3%), high blood pressure (17.2%), diabetes (15.9%) and chronic back pain (12.4%) were the most commonly reported conditions.

PREVALENCE OF DIAGNOSED CHRONIC HEALTH CONDITIONS AMONG FIRST NATIONS ADULTS



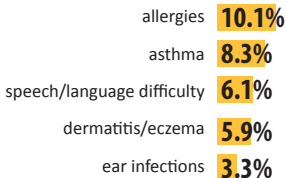
- 14** Among First Nations youth, allergies (12.7%), asthma (8.6%), anxiety disorders (8.3%), mood disorders (6.6%) and learning disorders (4.8%) were the most commonly reported chronic health conditions.

PREVALENCE OF DIAGNOSED CHRONIC HEALTH CONDITIONS AMONG FIRST NATIONS YOUTH



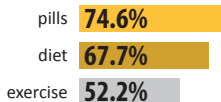
- 15** Among First Nations children, allergies (10.1%), asthma (8.3%), speech or language difficulties (6.1%), dermatitis/eczema (5.9%) and chronic ear infections (3.3%) were the most prevalent chronic health conditions.

PREVALENCE OF DIAGNOSED CHRONIC HEALTH CONDITIONS AMONG FIRST NATIONS CHILDREN



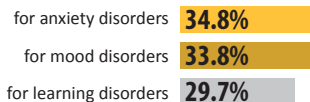
- 16** Nearly three-fifths (59.2%) of First Nations adults diagnosed with diabetes were attending a clinic or seeing someone for diabetes education. Pills (74.6%), diet (67.7%) and exercise (52.2%) were the most commonly reported treatments for those who were managing diabetes.

MOST COMMONLY REPORTED TREATMENTS FOR ADULTS MANAGING DIABETES



- 17** More than one-third (34.8%) of First Nations youth diagnosed with anxiety disorders, one third (33.8%) diagnosed with mood disorders, and nearly one-third (29.7%) diagnosed with learning disorders reported that they were receiving treatment for their conditions.

YOUTH SEEKING TREATMENT FOR CHRONIC DISORDERS



- 18** More than one-fifth (21.4%) First Nations youth with one or more chronic health conditions reported feeling depressed all or most of the time in the 12 months prior to the survey.

This was significantly higher than the percentage for those with no health condition (5.9%).

HIGHER RATES OF DEPRESSION FOR YOUTH

with one or more chronic health conditions **21.4%**

with no health condition **5.9%**

- 19** More than one-fifth (21.4%) First Nations children with one or more chronic health conditions experienced significantly higher emotional or behavioral issues than other children without a health condition (7.4%).

MORE EMOTIONAL OR BEHAVIOURAL ISSUES FOR CHILDREN

with one or more chronic health conditions **21.4%**

without a health condition **7.4%**



3. MENTAL HEALTH AND SUBSTANCE ABUSE

- 20** 50.5% of First Nations adults living on reserve and in Northern communities reported their mental health was very good or excellent.
- 21** More than half (55.5%) of First Nations youth rated their mental health as very good or excellent.

MENTAL HEALTH RATED VERY GOOD OR EXCELLENT

First Nations adults **50.5%**

First Nations youth **55.5%**

- 22** More than three-quarters (77.7%) of First Nations youth reported never using mental health services (e.g., counselling, psychological testing), compared to 15.5% who reported last having used such services within the 12 month period prior to the survey.

FIRST NATIONS YOUTH USE OF MENTAL HEALTH SERVICES

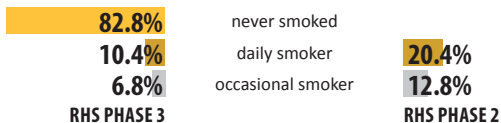
never used **77.7%**

used in 12 months prior to survey **15.5%**



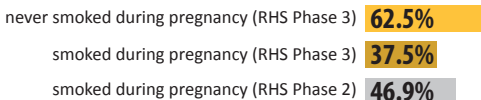
- 23** On average, First Nations adults who smoked daily reported smoking 11.6 cigarettes a day. Among the same group, there was a significant difference between men (12.8 cigarettes a day) and women (10.4 cigarettes a day).
- 24** Nearly two-thirds of First Nations adults (65.2%) said the reason they quit smoking was to choose a healthier lifestyle.
- 25** The majority (82.8%) of First Nations youth reported never having smoked cigarettes. Only 10.4% of youth reported smoking on a daily basis, and 6.8% reported smoking on an occasional basis. This marked a significant decrease from the RHS Phase 2 (2008/10) which reported that 20.4% of First Nations youth were daily smokers, and 12.8% were occasional smokers.

DECREASE IN YOUTH SMOKING



- 26** Nearly two-thirds (62.5%) of mothers reported never smoking during pregnancy, while more than one-third (37.5%) reported smoking during their pregnancy. This marked a significant decrease compared to the RHS Phase 2 (2008/10) where nearly half (46.9%) of mothers reported having smoked during pregnancy.

DECREASE IN SMOKING DURING PREGNANCY



- 27** Nearly 2 in 5 (42.6%) First Nations adults reported that they had not consumed any alcoholic beverages in the 12 months prior to the survey, while 57.4% reported that they had consumed an alcoholic beverage in the 12 months prior to the survey.

ADULT CONSUMPTION OF ALCOHOLIC BEVERAGES

no consumption
(in 12 months prior to survey) **42.6%**

some consumption
(in 12 months prior to survey) **57.4%**

- 28** A small percentage of First Nations adults (4.5%) reported drinking alcohol on a daily basis, while nearly one-quarter (23.3%) said they consumed alcohol on two or three occasions in the 12 months prior to the survey.
- 29** More than three quarters (75.3%) of First Nations youth reported that they had not consumed any alcoholic beverages in the 12 months prior to the survey.
- 30** Among youth who had consumed an alcoholic drink in the 12 months prior to the survey, 93.5% said that they had not sought treatment, while 3.0% said they wanted to access treatment but none was available.
- 31** The majority (93.0%) of First Nations children's mothers abstained from drinking alcohol while they were pregnant.

MAJORITY OF MOTHERS ABSTAINED FROM DRINKING ALCOHOL WHILE PREGNANT

First Nations children's mothers **93%**

- 32** An overwhelming majority of First Nations adults did not use illegal drugs in the 12 months prior to the survey, with abstinence rates ranging from 91.9% to 99.7%. The exceptions were prescription opioids, where three-quarters (75.1%) of adults said they had not used it in the 12 months prior to the survey, and cannabis which 69.7% of adults had not used in the same time period.

HIGH DRUG ABSTINENCE RATES FOR ADULTS

no illegal drug use (in 12 months prior to survey)	91.9% TO 99.7%
no use of prescription opioids (in 12 months prior to survey)	75.1%
no use of cannabis (in 12 months prior to survey)	69.7%

- 33** Among the small percentage of adults who reported illegal and prescription drug use in the 12 months prior to the survey, a majority (91.9%) said that they had not sought treatment for substance abuse or addiction in the same time period; only 4.4% said they had sought and completed treatment.
- 34** The overwhelming majority of First Nations youth had abstained from illegal and prescription drug use in the 12 months prior to the survey, with abstinence rates ranging from 97.7% to 99.7%. The exception here was cannabis use, where 72.8% of youth indicated that they had not used it in the 12 months prior to the survey.

HIGH DRUG ABSTINENCE RATES FOR YOUTH

no illegal drug use (in 12 months prior to survey)	97.7% TO 99.7%
no use of cannabis (in 12 months prior to survey)	72.8%

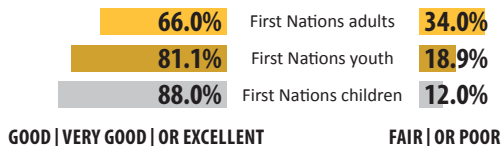


4. ORAL HEALTH

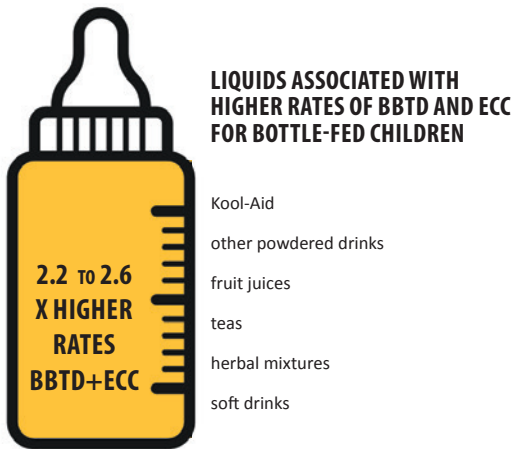
4. ORAL HEALTH: RATINGS

- 35** Nearly two-thirds (66.0%) of First Nations adults rated the health of their teeth and mouth as good, very good or excellent, while more than one-third (34.0%) rated their oral health as fair or poor.
- 36** More female First Nations adults rated their oral health as excellent (9.5%) compared to males (7.5%).
- 37** First Nations adults aged 50- to 59-years-old and 60 and older reported the highest levels of fair or poor oral health (39.2% and 37.8%, respectively) compared to all other age groups.
- 38** The majority (81.1%) of First Nations youth rated the health of their teeth and mouth as good, very good or excellent, while nearly one fifth (18.9%) rated their oral health as fair or poor.
- 39** The majority (88.0%) of parents or caregivers reported that the health of their child's teeth and mouth were excellent, very good or good, while 12.0% stated that their child's oral health was fair or poor.

REPORTED HEALTH OF TEETH AND MOUTH



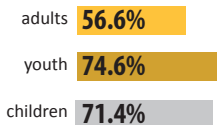
- 40** 1 in 5 (20.0%) First Nations children were reported to have, or had, baby bottle tooth decay (BBTD) or early childhood caries (ECC). The majority of these children (80.8%) had undergone dental treatment for BBTD or ECC.
- 41** First Nations children who were bottle-fed Kool-Aid, other powdered drinks, fruit juices, teas, herbal mixtures or soft drinks had reports of baby bottle tooth decay (BBTD) or early childhood caries (ECC) that were 2.2 to 2.6 times higher compared to those who were not fed these liquids.



- 42 More than half (56.6%) of First Nations adults reported having dental care in the last year.
- 43 Nearly three-quarters (74.6%) of First Nations youth reported accessing dental care in the year before the survey.
- 44 Nearly three-quarters (71.4%) of First Nations children received dental care the year prior to the RHS Phase 3 (as reported by parents and caregivers).

HAVE RECEIVED DENTAL CARE IN THE LAST YEAR

(reported for the 12 months before the survey)



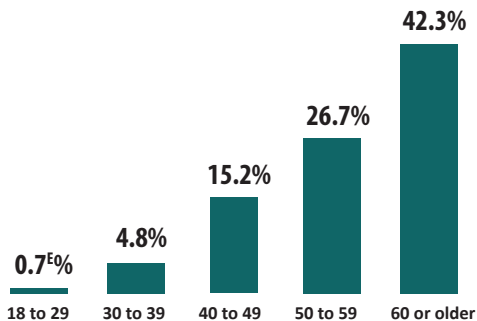
- 45 More than one-third (34.9%) of First Nations adults reported difficulties accessing dental care. The most frequently reported barrier was the lack of coverage for service under Health Canada's Non-Insured Health Benefits (NIHB) program (10.4%).
- 46 18.4% of parents and caregivers reported that the most recent oral health care their children received was provided by a dental professional located more than 90 kms from their community, and 16.8% reported that their children received dental care delivered by a dental professional visiting their community.



5. INDIAN RESIDENTIAL SCHOOLS (IRS)

- 47** More than 1 in 7 (14.9%) First Nations adults reported that they had personally attended Residential Schools. The proportion of adults who attended increased with age: of those aged 60 years and older, more than 2 in 5 (42.3%) reported having attended Residential Schools.

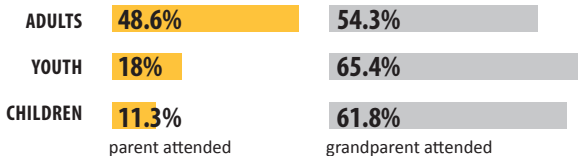
PROPORTION OF FIRST NATIONS ADULTS WHO ATTENDED RESIDENTIAL SCHOOLS, BY AGE



- 48** Of those adults who attended Residential Schools, more than half (57.7%) first attended between the age of 5 and 9, and nearly half (45.4%) reported attending for five or more years.

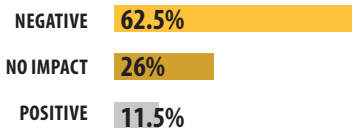
- 49 Nearly half (48.6%) of First Nations adults had at least one parent who attended Residential Schools, and more than half (54.3%) reported that at least one grandparent attended.
- 50 Among First Nations youth, nearly 1 in 5 (18.0%) had a parent who attended Residential Schools, and nearly 2 in 3 (65.4%) had at least one grandparent who attended.
- 51 Among First Nations children, more than 1 in 10 (11.3%) had a parent who attended Residential Schools, and nearly 2 in 3 (61.8%) had at least one grandparent who attended.

PARENT OR GRANDPARENT WHO ATTENDED INDIAN RESIDENTIAL SCHOOLS



- 52 Nearly two-thirds (62.5%) of First Nations adults who attended Residential School reported that their attendance had a negative impact on their overall health and well-being; more than one quarter (26.0%) reported that they did not perceive any impacts, and 11.5% reported a positive impact.

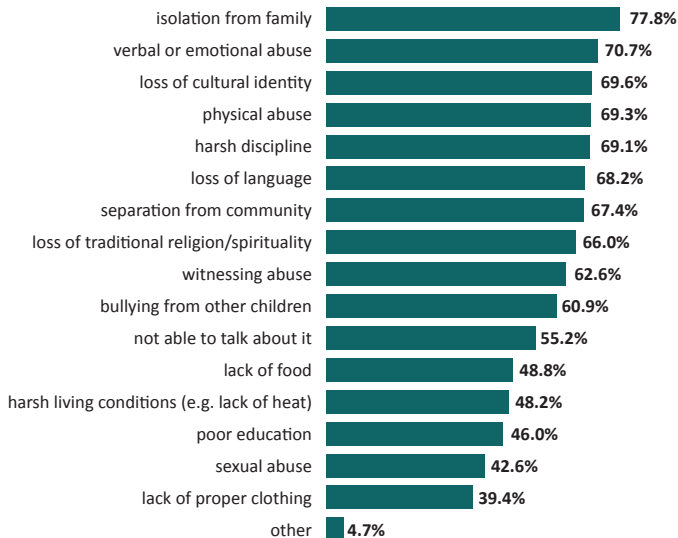
IMPACT ON HEALTH AND WELL-BEING



for First Nations adults who attended IRS

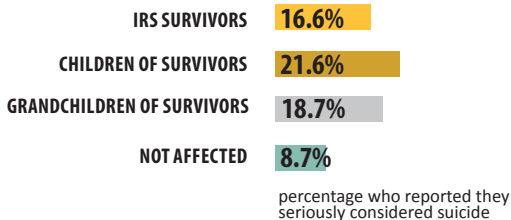
- 53** Among First Nations adults who reported being negatively impacted by attending Residential Schools, the five most commonly reported factors contributing to the negative impacts included: isolation from family (77.8%), verbal or emotional abuse (70.7%), loss of cultural identity (69.6%), physical abuse (69.3%), and harsh discipline (69.1%).

PROPORTION OF IRS SURVIVORS THAT PERCEIVED THE FOLLOWING NEGATIVE IMPACTS AS A RESULT OF ATTENDING



- 54** Residential School Survivors (16.6%), children of Survivors (21.6%) and grandchildren of Survivors (18.7%) had significantly higher proportions who reported they seriously considered suicide compared with those who were not directly or intergenerationally affected (8.7%).

INTERGENERATIONAL IMPACT: SUICIDAL THOUGHTS

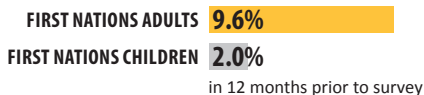




6. HEALTH CARE ACCESS

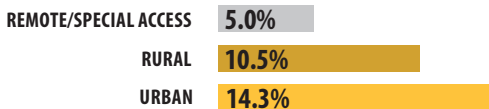
- 55** In the 12 months prior to the survey, nearly 1 in 10 (9.6%) First Nations adults that required health care did not receive all the care they needed.
- 56** In the 12 months prior to the survey, 2.0% First Nations children required health care, but did not receive all the care they needed.

FIRST NATIONS NOT RECEIVING ALL THE CARE THEY NEEDED



- 57** Fewer First Nations adults living in remote and special-access communities (5.0%) considered the quality of health care available in their community to be excellent compared to 10.5% of adults living in rural communities and 14.3% of First Nations adults living in urban communities.

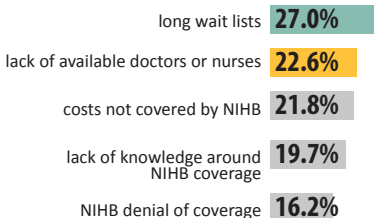
EXCELLENT QUALITY OF CARE



First Nations adults who consider quality of care in their community to be excellent

- 58** In the 12 months prior to the survey First Nations adults identified the following barriers to receiving health care: long wait lists (27.0%), lack of available doctors or nurses (22.6%), costs not covered under Non-Insured Health Benefits (NIHB) (21.8%), lack of knowledge around NIHB coverage (19.7%), and NIHB denial of coverage (16.2%).

BARRIERS TO RECEIVING CARE FOR ADULTS



- 59** For First Nations children, a lack of doctors or nurses was a barrier to receiving health care for 14.7% of those who required it in the 12 months prior to the survey.

FOR 14.7% OF FIRST NATIONS CHILDREN REQUIRING CARE

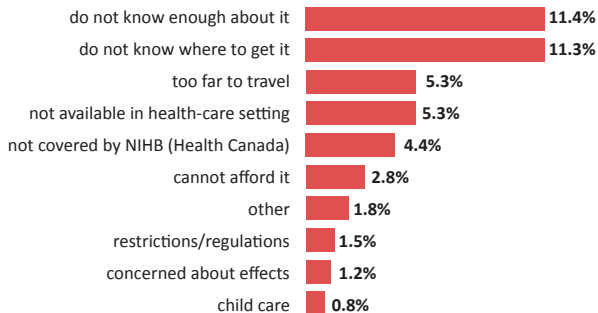
A LACK OF DOCTORS OR NURSES

**WAS A BARRIER TO
RECEIVING HEALTH CARE**

in 12 months prior to the survey

- 60** More than one-third (34.9%) of First Nations adults reported having used traditional medicine in the 12 months prior to the survey.
- 61** The most common barriers to accessing traditional medicine for First Nations adults were not knowing enough about traditional medicine (11.4%) and not knowing where to get it (11.3%).

BARRIERS TO ACCESSING TRADITIONAL MEDICINE AMONG FIRST NATIONS ADULTS

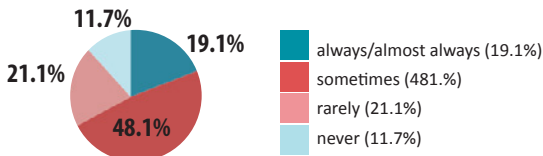




7. LANGUAGE AND CULTURE

- 62** 1 in 5 (19.1%) First Nations adults always or almost always participated in their community's cultural events and nearly half (48.1%) sometimes participated.

FREQUENCY OF PARTICIPATION IN COMMUNITY CULTURAL EVENTS AMONG FIRST NATIONS ADULTS

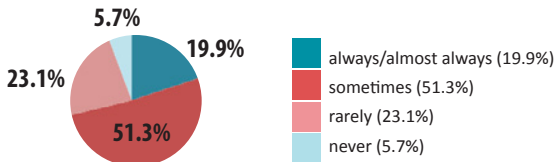


- 63** More than one third of adults (36.6%) reported that cultural or traditional activities made them healthy.

- 64** Nearly three-quarters of First Nations adults (71.0%) agree or strongly agree that traditional spirituality is important to them.

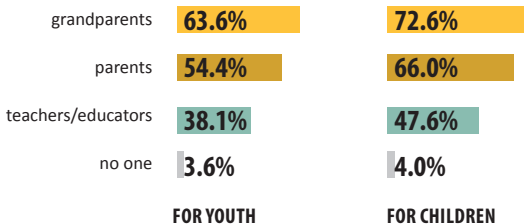
- 65** 1 in 5 (19.9%) First Nations youth always or almost always participated in their community's cultural events and more than half (51.3%) sometimes participated.

FREQUENCY OF PARTICIPATION IN COMMUNITY CULTURAL EVENTS AMONG FIRST NATIONS YOUTH



- 66** One quarter of youth (24.7%) reported that cultural or traditional activities made them healthy.
- 67** More than one quarter (26.2%) of First Nations children's caregivers reported that their child always or almost always participated in their community's cultural events and nearly half (45.2%) sometimes participated.
- 68** First Nations youth most often reported that nearly two thirds of grandparents (63.6%), more than half of parents (54.4%) and more than one third of school teachers (38.1%) helped them understand their culture. A very small proportion (3.6%) of First Nations youth had no one to help them understand their culture.
- 69** Three-quarters of First Nations grandparents (72.6%), two-thirds of parents (66.0%), and nearly half (47.6%) of teachers/daycare providers/early childhood educators helped First Nations children understand their culture. Only 4.0% of First Nations children had no one to help them understand their culture.

HELPERS FOR UNDERSTANDING CULTURE



- 70** The majority of First Nations adults (87.9%) reported having some knowledge of a First Nations language. Of those who had knowledge of a First Nations language, nearly one-third (30.1%) could speak it fluently.

KNOWLEDGE & USE OF FIRST NATIONS LANGUAGE

some knowledge of First Nations language **87.9%***

ADULTS

* of the adults with some knowledge, **30.1%** are fluent

- 71** Three-quarters of First Nations youth (75.8%) had knowledge of a First Nations language; however, the majority (88.9%) reported using English most often in their daily lives. A small proportion (6.0%) reported using a First Nations language most often in their daily lives.

- 72** More than two-thirds of First Nations children (68.1%) have some knowledge of a First Nations language; however, the majority (88.4%) reported using English most often in their daily lives. A small proportion (6.3%) reported using a First Nations language most often in their daily lives.

KNOWLEDGE & USE OF FIRST NATIONS LANGUAGE

some knowledge of
First Nations language

75.8%

68.1%

use English most often

88.9%

88.4%

use First Nations language
most often in daily lives

6.0%

6.3%

YOUTH

CHILDREN



8. NUTRITION AND FOOD SECURITY

- 73** Nearly all (96.8%) First Nations adults had eaten traditional food often or a few times in the 12 months prior to the survey.
- 74** A significantly higher percentage of First Nations adults living in remote communities (76.5%) reported often eating traditional foods compared to those living in rural (65.3%) or urban (63.4%) communities.
- 75** The majority of First Nations youth (92.6%) and children (90.6%) had eaten traditional food often or a few times in the 12 months prior to the survey.
- 76** In the 3 months prior to the survey, First Nations adults reported fishing (22.5%), hunting or trapping (18.3%), and berry picking or other food gathering (16.8%).

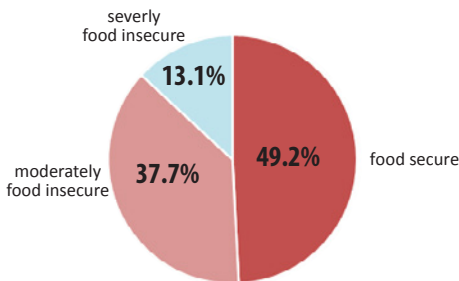
SOURCING TRADITIONAL FOODS



- 77** Nine out of ten (90.0%) First Nations adults had traditional food shared with their household in the 12 months prior to the survey.
- 78** More than half (59.1%) of First Nations adults who had traditional food shared with their household often reported that they always/ almost always ate nutritious, balanced meals.

- 79** More than one quarter (27.5%) of First Nations adults did not consider the main water supply in their homes safe for drinking year-round.
- 80** In the 12 months prior to the survey, nearly 1 in 10 (11.3%) First Nations adults reported often struggling (i.e., having to borrow money) once a month or more to meet the basic living requirements for food.
- 81** Nearly half (49.2%) of all First Nations adults (47.3% for females and 52.7% for males) were classified as food secure, nearly two fifths were moderately food insecure (37.7%) and 13.1% were considered severely food insecure.

FOOD SECURITY STATUS AMONG FIRST NATIONS ADULTS



- 82** Among households with children, more than half (56.8%) were classified as food secure.



9. PHYSICAL ACTIVITY

- 83** Walking is a popular activity among First Nations adults (57.3%), followed by outdoor gardening (28.4%), fishing (22.5%), weights or exercise equipment (22.1%) and swimming (18.2%).
- 84** The top 5 physical activities cited by First Nations youth included competitive or team sports (46.0%), walking (41.1%), running or jogging (36.4%), swimming (30.3%) and bicycling or mountain biking (25.5%).
- 85** The top 5 cited physical activities among First Nations children in the three months prior to the survey were swimming (39.2%), walking (38.7%), bicycling or mountain biking (34.1%), running or jogging (30.0%) and participating in competitive or team sports (21.5%).

TOP 5 PHYSICAL ACTIVITIES

FOR ADULTS

1. Walking (57.3%)
2. Outdoor gardening (28.4%)
3. Fishing (22.5%)
4. Weights or exercise equipment (22.1%)
5. Swimming (18.2%)

FOR YOUTH

1. Competitive or team sports (46.0%)
2. Walking (41.1%)
3. Running or jogging (36.4%)
4. Swimming (30.3%)
5. Cycling or mountain biking (25.5%)

FOR CHILDREN

1. Swimming (39.2%)
2. Walking (38.7%)
3. Cycling or mountain biking (34.1%)
4. Running or jogging (30.0%)
5. Competitive or team sports (21.5%)

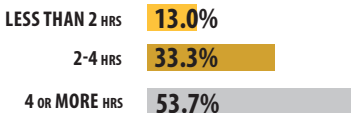
- 86** More than two fifths (43.4%) of adults were considered active to some extent in leisure time whereas 56.6% were considered inactive.

DURING LEISURE TIME ADULTS WERE CONSIDERED



- 87** More than 1 in 10 (13.0%) adults spent less than 2 hours in sedentary time (e.g., watching television, reading or playing video games) per day, while one third (33.3%) spent between 2 and 4 hours, and more than half (53.7%) spent 4 hours or more in sedentary time per day.

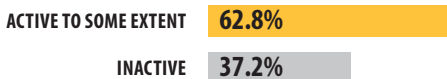
SEDENTARY TIME PER DAY FOR ADULTS



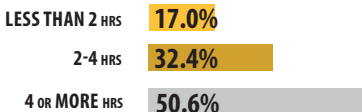
(e.g., watching television, reading or playing video games)

- 88** Nearly half (48.4%) of First Nations youth indicated adequate levels of activity to meet physical activity guidelines of 60 minutes of moderate-to-vigorous daily activity.
- 89** More than three fifths (62.8%) of First Nations youth were active to some extent in leisure time while 37.2% of youth were considered inactive.
- 90** Less than one fifth (17.0%) of First Nations youth spent less than 2 hours being sedentary, nearly a third (32.4%) spent between 2 and 4 hours and half (50.6%) spent 4 hours or more in sedentary time.

DURING LEISURE TIME YOUTH WERE CONSIDERED



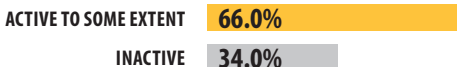
SEDENTARY TIME PER DAY FOR YOUTH



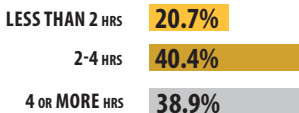
(e.g., watching television, reading or playing video games)

- 91 Nearly two thirds (66.0%) of First Nations children were active to some extent in leisure time, while the remaining 34.0% were inactive.
- 92 Among First Nations children, 20.7% spent less than 2 hours in sedentary time, 40.4% spent between 2 and 4 hours, and 38.9% spent 4 hours or more in sedentary time per day.

DURING LEISURE TIME CHILDREN WERE CONSIDERED



SEDENTARY TIME PER DAY FOR CHILDREN

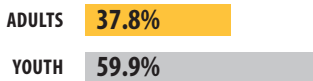




10. PERSONAL AND COMMUNITY WELLNESS

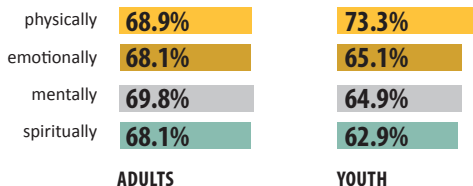
- 93** More than one-third (37.8%) of First Nations adults perceived their general health as very good or excellent.
- 94** Nearly 3 in 5 (59.9%) First Nations youth rated their general health as very good or excellent.

GENERAL HEALTH PERCEIVED AS VERY GOOD OR EXCELLENT



- 95** First Nations adults reported feeling in balance physically (68.9%), emotionally (68.1%), mentally (69.8%) and spiritually (68.1%) most or all of the time.
- 96** First Nations youth reported feeling in balance physically (73.3%), emotionally (65.1%), mentally (64.9%) and spiritually (62.0%) most or all of the time.

FEELING IN BALANCE (MOST OR ALL OF THE TIME)



- 97** The majority (80.6%) of First Nations adults reported having a very or somewhat strong sense of belonging to their local community and even more (81.5%) reported feeling very or reasonably safe in their community.
- 98** More than three-quarters (76.6%) of First Nations youth reported having a very or somewhat strong sense of belonging to their local community and the majority of youth (83.2%) reported feeling very or reasonably safe in their community.

FEELINGS OF BELONGING AND SAFETY



* very or somewhat strong sense of belonging to their local community

** feeling very or reasonably safe in their community



- 99** Female youth reported significantly higher percentages of lifetime suicidal thoughts (23.1%) compared with male youth (9.3%). Also, significantly more females reported suicide attempts in their lifetime (15.6%) compared with males (5.2%).

HIGHER SUICIDE RISK FOR FEMALE YOUTH

	SUICIDAL THOUGHTS	SUICIDE ATTEMPTS
FEMALE	23.1%	15.6%
MALE	9.3%	5.2%

- 100** Alcohol and drug abuse (77.3%), housing (45.3%) and employment/number of jobs (42.5%) were the most commonly reported community challenges by First Nations youth.

COMMUNITY CHALLENGES

most commonly reported by First Nations youth

alcohol and drug abuse	77.3%
housing	45.3%
employment/number of jobs	42.5%

ABOUT THE FIRST NATIONS INFORMATION GOVERNANCE CENTRE

The First Nations Information Governance Centre (FNIGC) envisions that every First Nation will achieve data sovereignty in alignment with its world view.

A non-profit organization, federally incorporated under the Canada Incorporations Act in April 2010 and operating on a mandate from the Assembly of First Nations' (AFN) Special Chiefs in Assembly (Resolution #48/2009), FNIGC is governed by a Board of Directors drawn from 10 regional First Nations organizations across Canada (representing 10 provinces and two territories).

FNIGC has a mandate to oversee data collection on First Nations reserves and in Northern communities. FNIGC is responsible for the implementation of its survey processes in collaboration with its regional member organizations following established protocols, policies and procedures and a holistic cultural framework.

With First Nations, FNIGC asserts data sovereignty and supports the development of information governance and management at the community level through regional and national partnerships. We adhere to free, prior and informed consent, respect nation-to-nation relationships, and recognize the distinct customs of nations.

ABOUT THE REGIONAL HEALTH SURVEY

RHS Phase 3 was funded by the First Nations and Inuit Health Branch (FNIHB) of Health Canada.

RHS Phase 3, the latest phase of the survey, began data collection in March 2015 and wrapped up in December 2016 finishing with 23,167 surveys completed in 253 First Nations communities.

The RHS is the first national survey implemented explicitly in keeping with the First Nations principles of OCAP®. As the only national health survey under complete First Nations control, the RHS has given new meaning to First Nations self-determination in research and has provided the research community with a demonstration on how the principles of OCAP® can be successfully executed.

**For more information about the RHS or FNIGC,
go to www.FNIGC.ca**



FNIGC | CGIPN

First Nations Information Governance Centre
Le Centre de gouvernance de l'information des Premières Nations

www.FNIGC.ca

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