



Behaviours that Affect Health

Information from the national and regional reports of the 1997 *First Nations and Inuit Regional Health*

What Questions Did The Regional Health Surveys Ask About People's Lifestyles?

The 1997 Regional Health Surveys (RHS) included some questions about lifestyle habits that were the same across the whole country and some questions that were only asked in particular regions. For adults, the national questions asked only about smoking. The surveys in some regions asked about other habits that could affect health, such as:

- Nutrition, weight and exercise
- Sexual health
- Drinking habits



Nutrition, Weight and Exercise

Three regions asked people about their eating habits, weight and exercise. The answers suggest adults are eating more healthy food than youth with more than half saying they would choose a sandwich at lunch rather than a burger. Younger adults seem to be more likely to eat junk food. People say they eat

junk food because they are easy to prepare, they look good and children love them.

Wild meat is an important source of several key nutrients and may play a role in preventing heart disease and cancer as well as protecting the body from the harmful effects of some contaminants. Several regions asked people about how often they ate traditional food. The results suggest most First Nations Peoples and Inuit consume wild food. However, the proportions of those who do so regularly vary enormously by region. The highest proportions reported were in Labrador where 76 per cent of adults obtained half or more of their meat/fish/birds from hunting and fishing. Quebec's survey found the more isolated the community, the more likely people were to eat wild meat and the less likely they were to eat fruit and vegetables. This probably reflects issues of supply and price.

Consistent with past research, results from two regions suggested that 25 to 50 per cent of adults are obese.

The questions on exercise habits suggest that although most people exercise, a significant proportion – up to 25 per cent in Saskatchewan – never do. The most



common forms of exercise were walking, dancing, jogging, hunting, or fishing. These choices are understandable given what people said about the lack of facilities like swimming pools, rinks, gyms, or playgrounds in their communities.



Sexual Health

Some regional surveys asked about screening practices such as Pap smears for women, safe sex and HIV/AIDS.

The proportion of women who have had a Pap smear at any time in their lives varied considerably from 59 to 94 per cent. Depending on the region, anywhere from one-third to three-quarters of women said they had had a Pap smear in the year or two prior to the survey.

Three regions also asked people about safe sex and HIV. The results show 30 to 60 per cent of adults do not practice safe sex. Many adults believe they personally are not at risk for HIV. Most people are getting their information about HIV from television, newspapers or magazines. Health professionals are a less common source of information.



Drinking Habits

Large proportions of adults say alcohol is a problem in their community and few think the problem has improved in recent years. Some idea of the size of the problem can be gleaned from the results of various regional surveys. Depending on the region,

- 47 per cent say alcohol is a problem in their household
- 33 per cent say a family member has a drinking problem
- 19 to 27 per cent say they have a drinking problem themselves, or imply it by saying they need to cut down on their drinking

These figures suggest alcohol abuse remains a serious problem. A closer look suggests the problem is not that people drink routinely as First Nations People and Inuit report drinking less frequently than other Canadians. The problem is with binge drinking – meaning that when people do drink, they are apt to have more than 10 drinks at a sitting.

Some regions asked people if they had ever cut down on their drinking and why. From 70 to 90 per cent of adults had cut down on their drinking at some time in their lives, usually because it was interfering with their family relationships or because the person recognized he/she had a drinking problem. People also cut back on drinking because it was affecting their health or (for women) because they became pregnant.





Smoking

The national portion of the RHS asked about daily smoking and other non-traditional uses of tobacco. As a result, information on smoking habits is available across the entire country. Smoking rates were high among First Nations Peoples and Inuit (62 per cent), double the national average, and they had not decreased since the last national survey in 1991. Rates were even higher among young adults. Almost three-quarters of people in their early 20s smoked regularly.

Most smokers had begun around age 16, while a few had begun as early as eight years of age. Almost no one had started smoking after age 19. In this, First Nations Peoples and Inuit resemble other Canadians. If they have not taken up smoking by age 20, they are unlikely ever to begin.

Smokers rated their health lower than other people of comparable age. Those who were heavy or long-time smokers were the most likely to report poor health. Smokers were also more likely than other people of the same age to report having a chronic condition such as diabetes, hypertension or heart disease.

Exposure to second-hand smoke was also an issue since more than half the RHS respondents said someone smoked in their household. Three-quarters of non-smokers and more than a third of smokers reported they sometimes felt unpleasant effects from other people's tobacco smoke. Despite this, only a third

said their communities had rules limiting where people could smoke.



About the Regional Health Surveys

The statistics in this Fact Sheet are drawn from the 1997 *First Nations and Inuit Regional Health Surveys*.

The surveys covered people living in 186 First Nations communities spread across most of southern Canada and in the Inuit communities of Labrador. The surveys did not include people living off-reserve, in the North or in the James Bay area of Quebec. All told, the survey included 9,870 adults.

Sampling methods varied from one region to another. Also, the definition of adult varied. British Columbia considered anyone older than 16 years to be an adult while other regions counted anyone 18 and older to be an adult.