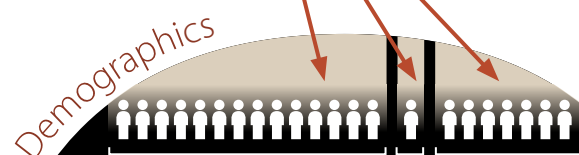


The realities of wellbeing for First Nations, Inuit and Métis in Canada



1.1 million Aboriginal people

This is the fastest growing segment of the Canadian population.

Mean age

| Group | Mean Age |
|--------------|----------|
| First Nation | 29.5 |
| Inuit | 21.5 |
| Métis | 29.5 |

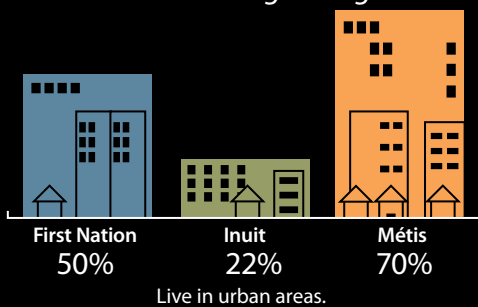
Non-Aboriginal population mean age is 39.7 years

Life expectancy



First Nation 72, Inuit 68, Métis 75, Non-Aboriginal 80

Urbanization is a growing trend.



20% change their place of residence within one year.

Young age and mobility, make it more difficult for patients to access quality care and build a sense of trust in health professionals and for health professionals to ensure continuity of care.

According to the Human Development Index: Canada = 6th in the world, First Nations = 68th

Allocation of resources by the Federal government has been capped and is therefore unable to adequately respond to the resource needs of this population.

Traditional medicines have been used for thousands of years by Aboriginal peoples in Canada, with demonstrated efficacy in treating a wide range of health issues.

Health

Social determinants of health

Culture and Language

Self-determination

Resilience

Despite systematic assimilation efforts, First Nations, Inuit and Métis communities continue to express their strength through language and culture

The benefits of eating country foods are cultural, economic, and nutritional. Access to traditional foods is increasingly affected by climate change and environmental pollutants.

Housing

Land

poor infrastructure, inadequate, insufficient, overcrowding, and unsafe housing, crowded housing, disease



In the backyards of many Aboriginal communities: Hazardous waste disposal sites, garbage landfills, incinerators and industrial plants.

What's in your backyard?



1/5 of First Nations communities are under a boil-water advisory.



Health professionals must recognize the effects of colonialization on health, sexuality, reproduction and birth, access to care, health care policies, and the ability of health professionals to deliver culturally-safe care.



Poverty

Limited choice, High price, Not enough



In 2010, 70% of Inuit preschoolers were found to live in food insecure homes.

~ 20 YEAR TREND ~
15% of Aboriginal peoples are unemployed.



39% of Aboriginal single mothers earn less than \$12,000 per year. Is this enough for your family?

Being aware of the social determinants of health enables health providers to deliver safer care.



You are pregnant. Imagine having to leave your family and community weeks before your due date. Imagine giving birth alone, without the support of those who know and love you.

The presence of family members at a birth is an important way many First Nations, Inuit and Métis are reclaiming birth and healing communities.



Most clinicians will encounter First Nations, Inuit and Métis in their practices.



Aboriginal languages such as Cree, Ojibway, Michif and the dialects of Inuktitut, are the mother tongue for almost 20% of Aboriginal peoples.

Create and protect spaces for Aboriginal mothers as givers of life.

References: Statistics Canada, 2006 Census; Life expectancy at birth, by Aboriginal identity, Canada, 2001; Statistics Canada, Demography Division, 2001; www.statcan.ca/pub/98-502-x2010001/article/11442/c/c-g003-eng.htm; Human Development Report 2007/2008; www.hdrundp.org/en/reports/global/hdr/2007-2008; Languages in Canada 2006 Census; http://publications.gc.ca/collections/collection_2011/pc-ch/C13-2-8-2010-eng.pdf; Egleland GH et al 2010. Food insecurity among Inuit preschoolers: Nunavut Inuit Child Health Survey, 2007-2008; CMAJ 182(3): 245-248; Health Canada, 2011; First Nations, Inuit and Aboriginal Peoples in Canada's Labour Market: Work and Unemployment, Today and Tomorrow. Caledon Institute of Social Policy; Ottawa, ON; Mendelson, 2004; O'HFC, Tenhouse Connections: Urban Aboriginal youth sexual health and pregnancy, 2002; Toronto, ON.