

Eeyou Istchee Aboriginal Peoples Survey 2001:

A report prepared by the Cree Board of Health and Social Services of James Bay from responses given by 906 Eeyouch to Statistics Canada in the spring of 2001



Public Health Occasional Paper **Number 11**
Cree Board of Health and Social Services of James Bay

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Related documents:

Health and Social Conditions in Eeyou Istchee - What people told the Aboriginal Peoples Survey (1 page)

Information about Eeyou Istchee from Statistics Canada's 2001 Aboriginal Peoples Survey. Technical Summary (105 pages + app.)

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Thanks to the 906 Eeyouch whose information is reported here. We would also like to thank the Assembly of First Nations Health Secretariat for assistance in obtaining the tables upon which this analysis is based, as well as the people at Statistics Canada for their efficient collaboration.

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FOREWORD TO THE OCCASIONAL PAPER SERIES

The Occasional Paper Series includes public health reports produced for the Cree Board of Health and Social Services of James Bay that address a single topic and are expected to have a limited distribution. Printing such reports in a series is a way to standardise their appearance and to help keep track of them.

This document, prepared by the Cree Board of Health, reports on the major health and social findings for Eeyou Istchee obtained by the 2001 Aboriginal Peoples Survey carried out by Statistics Canada.

FOREWORD TO THE EYYOU ISTCHEE ABORIGINAL PEOPLES SURVEY 2001

The results reported here help to build our understanding of the health and social conditions in Eeyou Istchee. They will be of special interest to everyone who responded to the survey and to all people who work in the area of health, social services, and local government.

In contrast to most health-related research carried out in Eeyou Istchee, the Cree territory in northern Quebec, the Cree Board of Health had no involvement with this survey's organisation, approval process, field work and control of data. Immediately following the 2001 Census, Statistics Canada obtained approval from the local First Nations' authorities and carried out the field work. In 2003, they began to release the findings on their website.

In order to encourage Aboriginal participation with this survey, Statistics Canada had offered free analysis hours to the national Aboriginal organisations for the purpose of permitting them to order special tables of data in order to prepare regional or national level reports, such as this one. However, when the field work for the survey took place, the Assembly of First Nations and the National Aboriginal Health Organisation were in an unresolved dispute with Statistics Canada over the control of future data from this survey and proper financing for the First Nations and Inuit Regional Health Survey (FNIRHS). As a result, many First Nations refused to participate in this survey and the FNIRHS process remains seriously underfinanced.

In 2003-4, the Public Health Department of the Cree Board of Health signed a contract with Hydro Québec to compile all the existing studies and statistics on Cree health and services. Summaries of this document were prepared for Hydro Québec to use as discrete chapters in their impact statement for the Eastmain-1-A-Rupert diversion project.

In the context of this work for Hydro Québec, and with the generous assistance of some of the "free" analysis hours available to the Health Secretariat of the Assembly of First Nations, the Public Health Department, through the able work of Ellen Bobet, was able to order, purchase and analyse the complex tables of data which are the basis of this document.

This report does not summarise any of the results. Rather, each finding – such as what parents report about their children's dental care, or how adults report their smoking habits – is presented on its own, but grouped under the general categories of information related to children, adults or communities.

The information from this report is used in the summary analysis of Cree health found in the large document prepared for Hydro Québec, The evolution of health determinants in Eeyou Istchee, which will be available in late 2004. Condensed analyses from that large document appear as the discrete chapters on Cree health status, health services and the evolution of health determinants in Hydro Québec's impact statement. By the end of 2004, we hope that all of these materials will be available on a Cree Health Board website.

Jill Torrie

Director of Specialised Services

Public Health Department of the Cree Territory of James Bay



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About these tables

WHERE DO THE NUMBERS COME FROM?

The numbers in this document come from 906 Eeyouch who were interviewed by Statistics Canada in the spring of 2001 as part of the Aboriginal Peoples Survey. The survey involved face-to-face interviews in each of the Cree communities, and covered topics ranging from employment to education to chronic health problems. Statistics Canada began to release the results of the survey on-line in 2003.

In 2004, the Cree Board of Health decided to order special tables of the survey results from Statistics Canada. Specifically concerned with Eeyou Istchee, these tables cover the topics most related to health. It turned out that the Assembly of First Nations (like the other national Aboriginal organizations) had an offer of "free" tables from Statistics Canada, which they were not using. Staff at the Assembly's Health Secretariat kindly transferred the offer to the Cree Board of Health. This allowed the Board to order a large and expensive series of tables.

The tables included here are a summary of what we learned from the survey. People who want to see the original, detailed tables from Statistics Canada can consult the technical report on the same topic available in the Public Health Department offices of the Cree Board of Health.

WHO IS INCLUDED IN THE NUMBERS?

The survey interviewed 906 people altogether — 578 adults and 328 children. Parents or guardians answered on behalf of their child. "Child" was defined as age 0 to 14, while "adults" were people age 15 or older. The people who answered the survey came from all nine Cree communities.

The survey included only people who said they were North American Indian, Inuit, or Métis, or who said they were registered Indians or band members. Non-Aboriginal people were not included.

INTERPRETING THE NUMBERS

As with any set of numbers, it helps to know something about how they were collected and how the tables were produced. Readers should bear in mind two things as they look at these tables:

(1) Random rounding

To protect confidentiality, Statistics Canada randomly rounds its numbers either up or down to the nearest five (e.g., if 77 people report having a chronic condition, Statistics Canada will round this down to 75, or up to 80). Because of this, the percentages in the tables do not always add up to exactly 100% -- they may add up to, say, 98% or 101%.

(2) Sampling variability

Whenever you use a sample to draw conclusions about an entire population, you introduce some chance of error. Usually, your numbers are accurate "give or take" a certain amount. This give-or-take is called sampling variability. Some of the numbers shown in these tables have a fair bit of sampling variability around them. Further, when you focus on smaller groups within the sample — such as just the people with diabetes, or just the people age 15-24 — the amount of sampling variability increases. In short, readers should remember that individual numbers may not be 100% correct, although they are probably close.



Example: the survey found that 37% of adults in Eeyou Istchee smoke every day. Because the number is based on a sample, we're not sure that the proportion in the population as a whole is exactly 37%. However, we are confident that the real proportion is somewhere between 34% and 41%, and since 37% is in the middle of that range, it's our best estimate.

Because each number has some sampling variability around it, it can be hard to tell if some of the differences we see in the results really exist in the population. For instance, if the tables say that 40% of people smoke in the coastal communities, but only 36% smoke in the inland communities, does this really mean that smoking rates are different in the coastal and inland communities? Or does it just reflect the fact that each of those numbers has some sampling variability around it? There are statistical methods to help us figure out if a difference between two figures is large enough to be real (i.e., not just due to sampling variability). If it is, we say that the difference is "statistically significant." Many of the tables in this report have a note at the bottom that tells you if the differences you see in the table are statistically significant or not.

An "x" value in a table signifies that Statistics Canada suppressed the number because it felt it was based on too small a sample to be trustworthy.

HOW THIS REPORT IS ORGANIZED

The report is divided into three main sections: information on children, information on adults, and information on community characteristics. Within these broad sections, the material is organized by topic. The information for each topic includes:

- A few sentences that interpret the results, entitled "Findings".
- "Notes" that will help people to understand the results, when relevant. These notes describe things like what age groups were included, or how the question was worded on the original survey.
- One or more tables that show the main findings.



Breastfeeding

FINDINGS

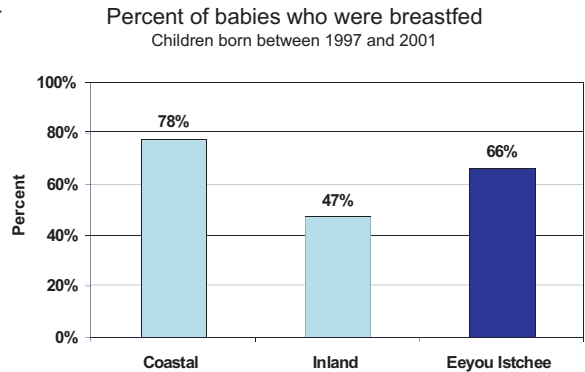
- Throughout Eeyou Istchee, 66% of the children born between 1997 and 2001 were breastfed.
- Mothers in the coastal communities are far more likely to breastfeed than those in the inland communities: 78% vs. 47%.
- The mothers who do breastfed, reported doing so for an average of 12 months.
- Women living in the coastal communities reported breastfeeding their children for longer periods. These differences do not reach statistical significance because of the small numbers involved, but they are consistent with other information suggesting large differences between the coastal and inland communities concerning breastfeeding initiation.

NOTES

Caution: the numbers on breastfeeding initiation are for children under four, while the numbers for duration of breastfeeding are based on all children 0-14.

The numbers are as reported by mothers. They should (in theory) include any child who was ever breastfed, even if the mother stopped breastfeeding after a few days. In practice, the figures on breastfeeding initiation from this survey are somewhat lower than those derived from hospital records.

The average duration reflects breastfeeding of children who were under 15 at the time the survey was carried out in 2001. That is, the question actually measured breastfeeding practices over the 1987-2001 period. Note that the question applied only to children who were breastfed at all: the average duration would be much lower if it also included all the babies who were never breastfed. Babies who were still being breastfed at the time of the survey were excluded from the average, since they would have artificially lowered it.



Proportion of children born between 1997 and 2001 who were ever breastfed

Coastal	78%*
Inland	47%
Eeyou Istchee	66%

* Difference between coastal and inland communities is statistically significant at the .05 level.

Average length of time child was breastfed
Information about children born between 1987-2001 (age 0-14 years in 2001)

	Average no. of months	Confidence interval
Coastal	13.2	11.1 to 15.4
Inland	8.6	5.0 to 12.1
Eeyou Istchee	11.9	10 to 13.7

Caution: high variability for these figures, especially the inland one.
 Coastal/Inland differences in this table are not statistically significant.

Childcare in the early years

FINDINGS

- The most common childcare arrangement in Eeyou Istchee is care in the child's home by a relative. Other frequent arrangements are care in someone else's home by a relative, and daycare centres. Over 85% of parents use one of these three arrangements as their main form of childcare.
- 57% of the children in Eeyou Istchee who are now of school age attended an Early Childhood Education or preschool program when they were younger. This holds true for both the coastal and inland communities.

NOTES

The fact that almost nobody said that their main arrangement was preschool does not mean that no children attend preschool, merely that these children spend more time in other arrangements.

Main childcare arrangement

Care in child's home by relative (other than sibling)	35%
Care in someone else's home by relative	27%
Daycare centre	27%
Care in someone else's home by non-relative	x
Care in child's home by non-relative	x
Siblings	x
Before and after school program	x
Nursery school, preschool	x
Other	x
Not stated/invalid	x
Total	100%

Percent of school-age children who had attended an early childhood education or preschool program

Coastal	61%
Inland	52%
Eeyou Istchee	57%

Note: differences between coastal and inland communities
 not statistically significant.



How children are doing at school

FINDINGS

- The majority of parents report that their child is doing well or very well in school. There are no significant differences between the inland and coastal communities in this respect.
- However, parents also report that 13% of school-age children in Eeyou Istchee have been suspended or expelled from school at some time.

Parents' reports of how their child is doing in school

Very well / well	72%
Average	24%
Poorly / very poorly	x

Time children spend watching TV or playing computer and video games (school-age children)

FINDINGS

- In 2001, parents reported that their children spent an average of one hour each day playing computer or video games. Figures for the coastal and inland communities were identical.
- In addition to this, parents reported that their children watched an average of 2 3/4 hours of television each day.

Average number of hours of computer/video games and television per day School-age children

	Hours per day	
	Computer/video games	Television
Coastal	1.1	2.7
Inland	1.1	2.4
Eeyou Istchee	1.1	2.8

Differences between coastal and inland communities are not statistically significant.

Children's activities (school-age children)

FINDINGS

- The most common activities in which children participate are family-related ones (having supper with family, spending time with Elders), and sports. Clubs, arts, and cultural activities are less common.
- Surprisingly, there are few large differences in the proportions of boys and girls participating in various activities, nor are there pronounced differences in activities between the coastal and inland communities. There are some exceptions to this: volunteer activities appear to be more common for boys, and also seem to be more common in the inland communities. Culturally-related activities also seem to be somewhat more common in the inland communities.
- The question applied to the child's activities outside of school hours. The proportion of children engaging in sports or arts might be higher if school-based activities were included.

**Frequency of participation in various activities
School-age children**

	Once a week or more	Less than once a week
Have supper with his/her family	96%	X
Play sports	81	18%
Spend time with Elders	68	32
Work at a job such as baby-sitting, at a store, or tutoring	32	58
Participate in culturally related activities	21	78
Take part in art or music, groups or lessons	19	81
Take part in clubs or groups such as youth groups, drum groups, etc.	19	80
Help without pay in the community or school	8	90

Children's eating habits (children age two and over)

FINDINGS

- In spring of 2001, the survey asked parents how often their children had eaten various foods during the previous week.
- The most frequently-consumed foods (regularly eaten by over 80% of children) were bread, fruit, cereal and juice.
- Some foods were less commonly eaten. In the week before the survey, fewer than half the children in Eeyou Istchee had regularly consumed vegetables, eggs, fish/seafood or green salad. As well, just under half of all children regularly ate wild meat.
- About 60% of children were said to have consumed "junk" foods such as french fries, candy, or soft drinks at least 3-4 times in the preceding week.

NOTES

"Juice" referred to 100% fruit juices. Interviewers were instructed not to count fruit drinks, kool-aid, etc.

The "fruit" category excludes fruit juice.

"Potatoes" does not include french fries or potato chips.

"Processed meat" refers to foods such as bologna, hot dogs, spam, or klik.



Frequency of consumption of various foods
Percent of children age 2+ who had eaten various foods in the week prior to the survey, and how often they had done so

	Percent	
	3-4 days per week or more	1-2 days per week or never
Bread	97	X
Fruit	90	9
Cereal	89	10
Juice	89	11
Milk	83	16
Cheese, yogurt and other milk products	78	22
Store bought meat	65	34
Processed meat	63	37
Candy, soft drinks, cakes, pies, etc.	62	37
French fries, potato chips, pretzels, etc.	61	39
Pasta	57	42
Potatoes	51	49
Rice	49	50
Wild meat	49	51
Other vegetables	42	57
Eggs	35	64
Fish and seafood	20	79
Green salad	12	87

Children's weight

FINDINGS

- Most children in Eeyou Istchee are overweight or "at risk of overweight". Less than a third of children are of healthy weight.

NOTES

Weight was measured using Body Mass Index (BMI), which relates a child's weight to his or her height. To determine whether or not a child is overweight, their BMI is compared to results from studies of children throughout the United States. If the child's Body Mass Index was greater than 85% of other children of the same age, he/she was considered to be "at risk of overweight". If it was greater than 95% of other children, he/she was considered "overweight".

These numbers apply to children age two to fourteen.

Children's weight as measured by Body Mass Index (Children age 2-14)

	% of children
Underweight/normal weight	28%
At risk of overweight	19%
Overweight	53%



Children's health

Findings

- 77% of parents in Eeyou Istchee describe their child's health as either "very good" or "excellent."
- According to parents' reports, ear infections are the most common chronic condition in children in Eeyou Istchee. Asthma and allergies are also frequently reported.
- Asthma rates in Cree children are similar to those seen in other children across Canada, or perhaps slightly higher (15% vs. 12% Canada-wide).
- An estimated 14% of the children with asthma have it seriously enough that it limits them in carrying out activities normal for their age. This figure is based on very small numbers, so it is a best guess. We are on safer ground just saying that the true proportion is somewhere between 7% and 26%.
- 7% of children in Eeyou Istchee are reported to use medications for asthma. The numbers of children in the sample who took other types of medications were too small to produce reliable estimates.
- In 2001, 12% of children in Eeyou Istchee were injured seriously enough to require some type of medical attention.

NOTES

The question about chronic conditions targetted conditions that had ever been diagnosed by a health professional.

"Injuries" refers to injuries serious enough to require attention from a doctor, nurse, dentist or traditional healer — such as a broken bone, a bad cut or burn, a head injury, accidental poisoning, or a sprained ankle.

Parents' ratings of their child's health, 2001

	Percent
Excellent/very good	77
Good	20
Fair/poor	x

Percent of children affected by various chronic conditions, 2001

Ear infections or ear problems	23%
Asthma	15%
Allergies	9%
Diabetes	x
Learning disability	x
One or more chronic conditions*	46%

* Note that this includes not only the conditions above, but also less-common ones such as TB or cerebral palsy.

Percent of children who were injured in the past year, as of 2001

Coast	11%
Inland	13%
Eeyou Istchee	12%

Caution: percentages based on very small numbers, so extremely variable.

Differences between coastal and inland communities not statistically significant.

Activity limitations – Children

FINDINGS

- 6% of children in Eeyou Istchee have a health problem that "sometimes" limits them in carrying out activities normal for their age. We do not know exactly what these health problems are, although we do know that a few of the children with asthma have to limit their activities.

NOTES

The table shows the number of children with any type of activity limitation – at home, at school, or in other activities such as transportation or leisure.

% of children in Eeyou Istchee who sometimes or often have to reduce their activities because of a health problem

No limitation	93%
Sometimes reduces activities	6%
Often reduces activities	x
Total	100%

Children's dental care (children age 2+)

FINDINGS

- Parents report that 3/4 of all children in Eeyou Istchee have had dental care in the past year. The coastal and inland communities do not differ significantly in this respect.
- When asked what type(s) of care was required during their child's last dental visit, most parents said simply a check-up. Roughly a third said that the child had needed cleaning or fillings, while 13% indicated that the child had had a tooth pulled. Children living in the coastal communities were somewhat more likely than those in the inland communities to have had only a check-up at their most recent visit.
- About 1/3 of children in Eeyou Istchee – an estimated 1,250 children – are currently in need of dental treatment, according to their parents. This proportion is similar in both the coastal and inland communities.
- In 68% of the cases where a child needs dental treatment, arrangements have been made to obtain it.
- The number of parents who said that their child needed dental care but that they hadn't arranged for any was very small. It seems that the most common barrier for these parents was convenience – reasons such as being too busy, not getting around to it, or being prevented by personal or family responsibilities.

NOTES

The questions on dental care applied only to children age two and older.

Last time child had dental care

In the past year	77%
Between 1 and 3 years ago	14%
Longer/ don't know/ invalid answer	~9%

Type of dental care received by children at last visit

	Coastal	Inland	Eeyou Istchee
Check-up	65%*	40%	55%
Cleaning	35%	35%	35%
Filling	25%	35%	29%
Tooth pulled	13%	×	13%
Orthodontics	×	×	×
Other	×	×	×

Percentages total over 100% because parents could provide several answers.

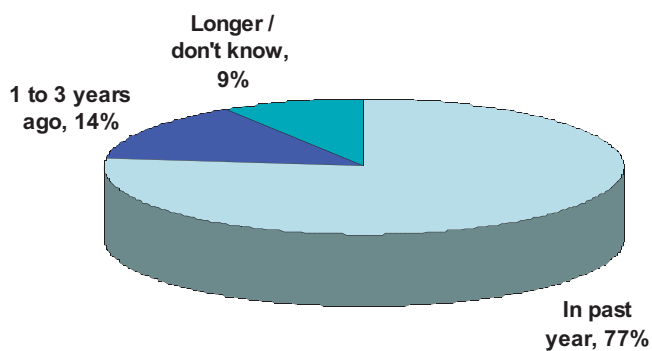
* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.

% of children age two and over who are currently in need of dental treatment

	%
Coastal	36
Inland	33
Eeyou Istchee	34

Note: differences between coastal and inland communities not statistically significant..

When child last had dental care, 2001



Adults

Sources of income

FINDINGS

- The most frequently-declared source of income in Eeyou Istchee in 2000 was income from wages or from self-employment. 38% of adults declared income from "other" sources (such as child support payments or education allowances), while 26% had received income from Employment Insurance or Social Assistance. Consistent with the low proportion of elderly people in Eeyou Istchee's population, few people reported any pension income.

Adults receiving income from various sources in 2000

Wages or self-employment	70%
Other sources	38%
Employment Insurance (E.I.)	16%
Social Assistance	10%
Old Age Security/GIS pension	7%
Canada/Quebec pension	3%

Reasons for not currently working

FINDINGS

- The most common reasons that people give for not seeking or having a job are the perception that no jobs are available in the area, family responsibilities, and school. The coastal and inland communities are not significantly different in this respect.
- Fewer people say that health problems prevent them from working, or that they are not qualified for the available jobs.

NOTES

The question was asked of anyone who was not employed at the time of the survey, even if they were not seeking employment (e.g., they were homemakers or retired).

Reasons for not working

	Percent
No full-time jobs available in the area where I live	20.1
Family responsibilities	17.9
Going to school	17.6
Retired	13.2
Health problems	5.7
Not qualified for available jobs	X



Adults who attended a residential school

FINDINGS

- Throughout Eeyou Istchee, 30% of adults report that they attended a residential school at some time.
- This is true of 84% of people currently age 45-64, and 29% of those age 25-44. Few or no people age 15-24 attended residential schools, and the number of people over age 65 included in the sample was too small to permit reliable conclusions.

% of adults in each age group who attended residential schools

15-24 years	x
25-44 years	29%
45-64 years	83%
65 + years	x
All adults	30%

% of adults spending one month or more away from home, by reason

FINDINGS

- Over all, 28% of adults in Eeyou Istchee said that they had spent more than a month away from home in the past year because they were on the land. Much smaller proportions of adults spent extended periods away from home because of work or school.
- The inland communities apparently have larger proportions of adults who spend time away because of work than the coastal ones.

NOTES

People could answer "yes" to more than one category. For instance, they might have been away to attend school, and also been away for an extended period to spend time on the land.

% of adults away from home one month or more, for various reasons

	Coastal	Inland	Eeyou Istchee
Work	3.4*	10.5	6.4
School	5.2	9	6.8
On the land	26.4	30.3	28.1
Other	11.3	15.3	13

* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.

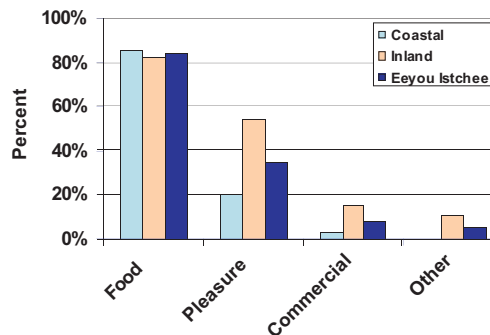


Reasons for engaging in traditional activities

FINDINGS

- People who had engaged in any traditional activities in the past year were asked about their reason for doing so. The most common reason for engaging in traditional activities was for food. About a third of people also said that they did so for pleasure. Few people reported any commercial use, or use for ceremonial or medicinal purposes.
- Although "food" was a common reason throughout the territory, there were significant differences between the coastal and inland communities in some of the other reasons for engaging in traditional activities. People in the inland communities were more likely to say that they engaged in traditional activities for pleasure or for commercial use.

Reasons why people engage in traditional activities
Coastal, Inland, and Eeyou Istchee as a whole



Reasons why people engage in traditional activities

	Coastal	Inland	Eeyou Istchee
For food	86	82	84
For pleasure	20*	54	35
For commercial use	3*	15	8
Other use e.g. ceremonial, medicinal	X	11	5

* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.

Use of computers and the internet

FINDINGS

- 51% of adults in Eeyou Istchee report having used a computer in the previous year.
- Of those who use a computer, 79% have been on the internet. These figures translate to about 40% of all adults in Eeyou Istchee using the internet at least occasionally.
- There are no statistically significant differences between the coastal and inland communities in terms of computer use or internet use.

Adults who used a computer in the past year

Coastal	49%
Inland	52%
Eeyou Istchee	51%

Note: differences between coastal and inland communities not statistically significant.



Computer users who used the internet in the past year

	%
Coastal	73
Inland	86
Eeyou Istchee	79

Social support

FINDINGS

- From 2/3 to 3/4 of Cree adults declare that they "always" or "most of the time" have various forms of social support.

% of adults who "always" or "most of the time" have someone they can...

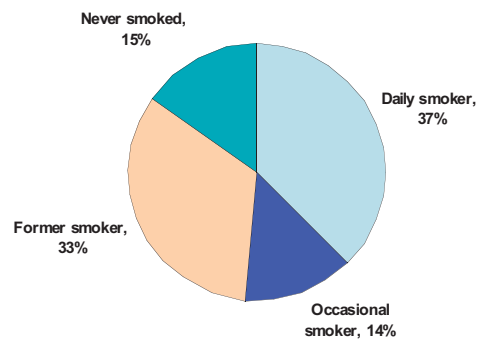
Have a good time with	77%
Do something enjoyable with	74%
Receive love and affection from	74%
Get together with for relaxation	69%
Talk to about their problems	65%
Count on to listen	63%
Take them to the doctor	62%
Count on for advice	61%

Smoking habits of adults

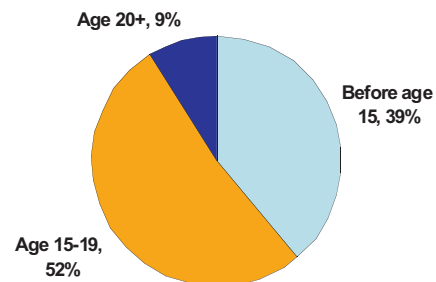
FINDINGS

- 37% of adults in Eeyou Istchee smoke regularly, and another 14% smoke occasionally. Only 15% of Eeyouch have never smoked in their lives.
- Smoking rates are highest in younger adults, and decrease with age. This is partly because in the past, people were less likely to take up smoking – as suggested by the fact that 35% of people over 65 never smoked, while this is true for only 9% of the people currently aged 25-44. The other reason why smoking rates are lower in older age groups is that some smokers manage to quit.
- 91% of the people in Eeyou Istchee who ever smoked started before age 20. In fact, almost 40% of them had started smoking by age 15.
- Most of the smokers who manage to quit do so between the ages of 25 and 40, while almost 1/3 do so before age 25. Fewer smokers quit after the age of 40. There are no statistically significant differences between the coastal and inland communities in terms of the age at which smokers give up the habit.

Smoking habits of adults, 2001



Age at which smokers took up the habit



- The people who were daily smokers reported smoking an average of 9.6 cigarettes per day, i.e. just under half a pack.

NOTES

The question about the age at which smoking started was asked of anyone who had ever smoked in their life, whether or not they were still smoking at the time of the survey.

The question about age at quitting applied to people who had been daily smokers at some time in their lives, but who were no longer regularly smoking at the time of the survey.

Smoking habits of adults in Eeyou Istchee, 2001 by age group

	Daily	Occasional	Former	Never	Total
15-24	53%	22%	10%	15%	100%
25-44	41%	14%	35%	9%	100%
45-64	15%	X	55%	24%	100%
65 and over	X	X	61%	35%	100%
All ages 15+	37%	14%	33%	15%	100%

Caution: rates based on small numbers, and therefore extremely variable.

Age at which smokers took up the habit as reported in 2001

Before age 15	39%
Age 15-19	52%
Age 20+	9%
Total	100%

Age at which ex-smokers quit smoking

Before age 25	32%
Age 25 to 40	50%
After age 40	18%
Total	100%

Alcohol

FINDINGS

- The survey estimated that 4,260 adults in Eeyou Istchee had had a drink of alcohol in the past year, and that there were 7,760 adults in the territory. This works out to 55% of adults who ever drink (As a point of comparison, in 2000/01, roughly 77% of adults throughout Canada drank).
- Among the people who drink at all, 49% report that they do so once a month or less. Only 8% report that they drink many times per week or every day. There are no statistically significant differences between the coastal and inland communities about this aspect.



- Many drinkers in Eeyou Istchee "binge" – that is, consume 5 or more drinks at one sitting. Over 90% of the adults who drink at all "binge" at least occasionally, and this holds true for both the inland and coastal communities. 39% of drinkers "binge" at least 2-3 times per month.

Frequency of drinking among adults who drink at all

Once a month or less	49%
From 2-3 times per month to once a week	39%
From 2-6 times per week to every day	8%
Don't know	4%
	100%

Frequency of "binge" drinking by people who drank at all in the past year

	Coastal	Inland	E.I.
Never binge	7%	9%†	8%
Once a month or less	58%	45%	53%
2-3 times/month or once a week	27%	39%	31%
More than once a week	8%	8%	8%
Proportion of drinkers who ever binge	93%	91%	92%

† Caution: high sampling variability for this number.
 Most coastal/inland differences in this table not statistically significant.

Percent of adults ever tested for HIV/AIDS

FINDINGS

- 15% of adults in Eeyou Istchee report that they have been tested for HIV/AIDS at some point. People in the inland communities are significantly more likely than those in the coastal communities to report that they have been tested.

Percent of adults ever tested for HIV/AIDS

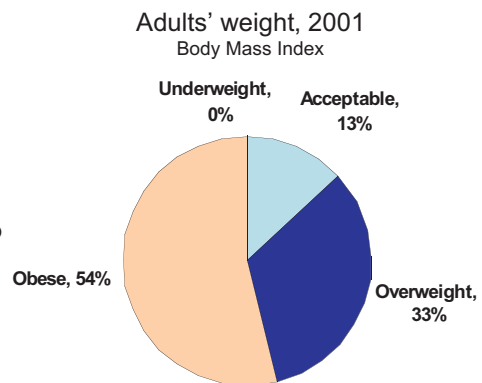
	%	95% confidence interval
Coastal	9*	(6 to 13)
Inland	22	(17 to 28)
Eeyou Istchee	15	(12 to 18)

* Difference between coastal and inland communities is statistically significant at the .05 level.

Weight (adults)

FINDINGS

- Only 13% of adults in Eeyou Istchee have a Body Mass Index in the "acceptable" range. A third fall into the overweight category, while another 54% are obese. There are no significant differences between the coastal and inland communities in the proportions of adults who are overweight or obese.



NOTES

Body Mass Index is a measure that looks at a person's weight as compared to their height. It is calculated as weight (kg) divided by height in meters squared. The cut-off points used here are those currently recommended by the World Health Organization, and differ slightly from the Canadian standard in past years.

BMI was calculated based on the respondent's self-reported height and weight.

Body Mass Index of adults in Eeyou Istchee, 2001

	Eeyou Istchee
Underweight (BMI <18.5)	0%
Acceptable weight (BMI 18.5 - 24.9)	13%
Overweight (BMI 25 - 29.9)	33%
Obese (BMI 30+)	54%
Total	100%

Self-rated health of adults

FINDINGS

- Peoples' ratings of their own health have been shown to correlate with more objective measures of health status. As a result, surveys frequently ask respondents to provide an overall assessment of their own health.
- About half of adults in Eeyou Istchee rate their health as either "excellent" or "very good". For purposes of comparison, in Quebec and in Canada as a whole, 61% of adults say that their health is excellent or very good.
- There are no statistically significant differences between the coastal and inland communities in terms of self-rated health.

Self-rated health of adults in Eeyou Istchee

Excellent/very good	51%
Good	37%
Fair/poor	12%
Total	100%

Chronic conditions and activity limitations

FINDINGS

- 39% of adults are affected by one or more chronic conditions.
- The most commonly-reported chronic conditions in Eeyou Istchee are diseases of the circulatory system (high blood pressure, heart problems, effects of stroke). This is followed by diabetes, then by respiratory problems such as asthma, chronic bronchitis, emphysema, or shortness of breath.
- 24% of adults in Eeyou Istchee report that a physical or mental health problem places at least occasional limits on the activities they can do at work, school, home, or in their leisure time. 8% report that this condition "often" causes them to reduce their activities.



NOTES

The chronic conditions are as reported by the respondent, in answer to the question "Have you been told by a doctor, nurse or other health professional that you have...?"

The numbers for activity limitation refer to adults with a physical or mental health problem that reduces the amount or kind of activity they can do at home, at work, at school, or in other activities involving travelling or leisure. Because of the broad scope of the question, the numbers could include anything from a bad knee that limits the amount of skiing a person can do, to cerebral palsy. Logically, the question should also capture some of the limitations that result from chronic conditions such as arthritis or diabetes.

Adults with chronic conditions, 2001

	Percent
Hypertension, heart problems, effects of stroke	19%
Diabetes *	11.7%
Respiratory problems	10%
Arthritis, rheumatism	8%
Cancer	x
Communicable diseases (hepatitis, TB, HIV/AIDS)	x
One or more chronic conditions †	39%

* Note that these diabetes numbers are based on self-report. Numbers derived from the Cree Diabetes Information System may differ slightly.

† Includes the conditions shown above plus others such as hepatitis or ulcers.

% of adults with some form of activity limitation, 2001

Activity reduction – sometimes	16%
Activity reduction – often	8%

Diabetes

FINDINGS

- In 2001, 11.7 percent of adults in Eeyou Istchee reported having been diagnosed with diabetes. This is very similar to the figure of 11.8% derived from the Cree Diabetes Information System for that year.
- The inland communities appear to have higher diabetes rates, although small numbers mean that the differences do not reach statistical significance.
- The majority of adults with diabetes (60%) reported that they were diagnosed between the ages of 30 and 65. Another 20% were diagnosed before age 30, and it can be deduced that the remaining 20% were over 65.
- People in Eeyou Istchee most commonly reported controlling their diabetes with drugs. 50% of diabetics reported using drugs, while 22% said that they used insulin. The number of people in the sample who controlled their diabetes through diet, exercise, or traditional remedies was too small to produce reliable estimates.
- 4% of women in Eeyou Istchee reported that they had had gestational diabetes. The numbers in the sample are too small to tell if there are differences between the coastal and



inland communities in rates of gestational diabetes. Note that the proportion would be higher if we based it on the number of women who had ever been pregnant, rather than on all the women in the territory.

NOTES

The numbers in the tables that follow exclude women with gestational diabetes, and refer only to people with Type 1 or 2 diabetes.

Note that the numbers for insulin and the other types of treatment are not mutually exclusive – that is, people could report using both insulin and some other form of treatment to control their diabetes.

Percent of adults with diabetes (self-report), 2001

	Percent
Coastal	8.8
Inland	15.5
Eeyou Istchee	11.7

Differences between coastal and inland communities shown do not reach statistical significance at the .05 level.

Age at which people with diabetes were diagnosed, as reported in 2001

Age	%
Under 30 years	20
30-64 years	61
65+	×
Invalid age	×
All ages	100%

Means of controlling diabetes

Insulin	22%
Drugs	50%
Diet	×
Exercise/physiotherapy	×
Traditional remedies	×
Other	×



Community characteristics

Types of facilities/equipment in the home

FINDINGS

- According to the Aboriginal Peoples Survey, 96% of homes in Eeyou Istchee have running water, flush toilets, electricity and stoves. Over 90% also have working smoke detectors.
- The proportion with a telephone is somewhat lower, especially in the inland communities.
- Very few homes have carbon monoxide detectors.

Percent of homes in Eeyou Istchee that have...

Cold running water	96.1
Hot running water	96.4
Septic tank or sewage system	84.9
Flush toilet	96.1
Electricity	96.3
Generator	7.2
Stove for cooking	96.3
Telephone	87.6
Smoke detector	92.7
Carbon monoxide detector	3.7

Perceptions of social problems in the community

FINDINGS

- The most frequently-reported social problems are alcohol abuse, drug abuse, and unemployment.
- The proportion of people who think that alcohol abuse and unemployment are problems is significantly higher in the coastal communities than in the inland ones.

NOTES

The question wording was "Are any of the following a problem for Aboriginal people in the community or neighbourhood where you are living now?" The numbers shown represent the people who answered "yes" to each of the items.



Perceptions of social problems in the community

% of people who agree that ... is a problem in their community

	Coastal	Inland	Eeyou Istchee
Alcohol abuse	87*	71	80
Drug abuse	77	68	73
Unemployment	78*	65	72
Family violence	70	59	65
Sexual abuse	52	51	52
Suicide	39	48	43
Other social problems	27	20	24

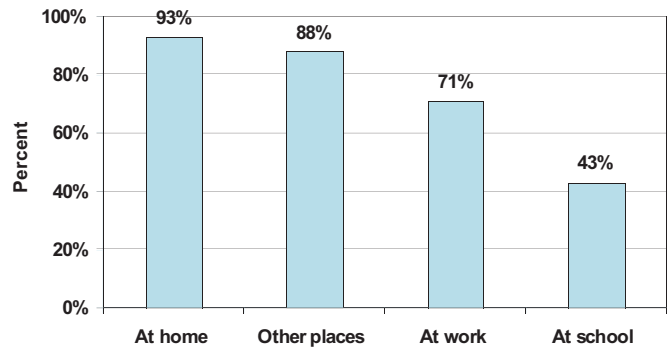
* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.

Use of the Cree language

FINDINGS

- The vast majority of Eeyouch speak Cree at home "most of the time" or "all of the time". Large proportions also speak Cree in the workplace and in other locations. But less than half of the adults attending school report speaking an Aboriginal language at school.
- Over 85% of adults indicate that community services are available in Cree. Social services such as housing and social assistance top the list, with 96% of adults reporting that these services are available in Cree in their community.
- There are noticeable differences between the coastal and inland communities concerning these aspects. People living in the coastal communities are significantly more likely than those in the inland communities to report that they usually speak an Aboriginal language at work. Consistent with this, coastal residents are also significantly more likely to say that their justice, employment and financial services are available in Cree.

Adults who usually speak Cree in various settings



Percent of adults who usually speak an Aboriginal language...

	Coastal	Inland	Eeyou Istchee
In the household	95%	90%	93%
Other places	92%	84%	88%
At work	79% *	63%	71%
At school	45%	39%	43%

* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.



Adults who say that various community services are available in Cree

	Coast	Inland	Eeyou Istchee
Social services (housing, social assistance)	97.5%	93.6%	95.8%
Education	95.7	90.9	93.5
Other community services	93.2	90.9	92.2
Health services	94.3	89.4	92.1
Justice, legal, policing	95*	87.2	91.5
Employment & career	93.2*	83.9	89.2
Financial (e.g. banking)	94.3*	76	86.3

* Indicates that the difference between the coastal and inland communities is statistically significant at the .05 level.

Availability of traditional healing in the community

FINDINGS

- Roughly half of adults in Eeyou Istchee report that traditional healing is available in their community. This holds true in both the coastal and inland communities.

Percent of adults who report that traditional healing is available in their community, 2001

Coastal	47%
Inland	50%
Eeyou Istchee	48%

Note: differences between coastal and inland communities are not statistically significant.

