

Max Rady College of Medicine
Manitoba Centre for Health Policy
Community Health Sciences
408-727 McDermot Avenue
Winnipeg, Manitoba
Canada, R3E 3P5
Phone: 204-789-3819
Fax: 204-789-3910
info@cpe.umanitoba.ca



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Health Sciences

Health gap between First Nations and other Manitobans widening, study finds

Sept. 17, 2019 – The health gap between First Nation people and all other Manitobans is growing.

That’s a key finding of a joint study by the First Nations Health and Social Secretariat of Manitoba (FNHSSM) and the Manitoba Centre for Health Policy (MCHP) in the Rady Faculty of Health Sciences at the University of Manitoba.

The study, *The Health Status of and Access to Healthcare by Registered First Nation Peoples in Manitoba*, compares health data collected in 2015-2017 with the results of a study the MCHP published in 2002.

“When we look at health status and health-care access, the inequities between First Nation people and all other Manitobans have gotten worse, according to many indicators,” said Leona Star, a Cree woman who is director of research at FNHSSM and co-led the study.

In the 2002 report, for example, a First Nation person’s life expectancy was found to be about seven years lower than that of the general Manitoba population. In the new study, that disparity has grown to about 11 years.

A First Nation girl’s life expectancy at birth is now 72 years, while all other Manitoba girls can expect to live to age 84. A First Nation boy can expect to live to age 68, while all other Manitoba boys’ life expectancy is 79 years.

In the 2002 report, First Nation people’s rate of premature mortality (death before age 75) was double that of other Manitobans. That gap has now worsened to being three times the rate for other Manitobans.

The health gap is widening because the underlying factors that negatively affect the health of First Nation people, including the ongoing trauma of colonization, generations of racism, poor housing, lack of clean water and imposed poverty, are not being adequately addressed, said Dr. Alan Katz, director of the MCHP, who co-led the study with Star and Dr. Kathi Avery Kinew of FNHSSM.

“The health of Manitobans is improving overall, but First Nation people are not experiencing the same rate of improvement,” Katz said. “They’re being left further behind and are not being meaningfully involved in decisions on health care.”

The research project is the first in Canada to compare data from a study designed and implemented by First Nation researchers across Canada – the First Nations Regional Health Survey (2015-16) – with data that reports on the health of a representative sample of all First Nation communities in Manitoba, stored in a repository at MCHP.

“This partnership between FNHSSM and MCHP is a sign of progress,” Star said. “It’s essential for First Nation researchers to take leadership roles in studying First Nation health.”

The study was undertaken in response to the Truth and Reconciliation Commission (TRC) Calls to Action, which include a call for gaps in health outcomes to be identified and closed.

The researchers found that First Nation people, both on-reserve and off-reserve, are medically underserved in many ways. However, they are over-prescribed opioid painkillers – a cause for great concern, the study team said.

Rates of opioid prescribing are more than twice as high for a single prescription, and more than four times as high for multiple prescriptions, for First Nation patients as for other Manitobans.

Other gaps identified in the study include:

- The suicide rate is about five times higher for First Nation people, while the rate of suicide attempts is five to six times higher;
- The incidence of cervical and colorectal cancer is significantly higher among First Nations, but cancer screening rates are significantly lower among First Nations;
- Continuity of care (seeing the same health professional regularly for primary care) is much lower among First Nations, and they are less likely to be provided care close to home.

The researchers emphasized that First Nation communities are drawing on traditional healing to build people’s resilience and wellness. “Going forward, we need data collection that aligns with the TRC Calls to Action and documents those strengths and positive initiatives, as well as indicators of ill health,” Star said.

The study’s recommendations include:

- Annual reporting on progress in addressing health gaps;
- Addressing racism in the health-care system through initiatives such as mandatory cultural safety training for health-care providers;
- Prioritizing the training and hiring of First Nation health-care professionals;
- Further development of First Nation health research partnerships;
- Improving access to health care designed and delivered through First Nation-led partnerships.

The full study is available here:

http://umanitoba.ca/faculties/health_sciences/medicine/units/chs/departmental_units/mchp/Landing-FNAtlas.html

For more information, please contact:

Ilana Simon
Director of Communications & Marketing
Rady Faculty of Health Sciences
University of Manitoba
Ph. 204-295-6777 | ilana.simon@umanitoba.ca

Renata Meconse
Communications Specialist
First Nations Health and Social Secretariat of
Manitoba
Ph. 204-799-8814 | rmeconse@fnhssm.com