A Study Examining Three Significant Health Determinants Affecting Today’s Métis Peoples: Smoking, Drinking & Drug Use

Métis Health Report

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May 25, 2014
1. Introduction

1.1 Subject Profile

The following report has been produced by the Congress of Aboriginal Peoples (Congress, CAP). The Congress is one of the five National Aboriginal Representative Organizations in Canada. CAP is the national political organization that advocates on behalf of the rights and interests of off-reserve Status and Non-Status Indians, Southern Inuit of Labrador and Métis Peoples living in urban, rural, remote and isolated areas throughout Canada. For over forty-three years, CAP has been providing input and feedback to the federal government by way of its agencies and departments on policy issues and program design on behalf of its constituency.

A general trend occurs when searching for statistical data pertaining to Métis Peoples. Very little information is available. The overall health of Métis Peoples living in Canada is uncertain due to limited data acquired. The lack of figures concerning Métis health diminishes public awareness and motivation to promote improvements to the health of Métis Peoples.

While there have been numerous studies on Aboriginal health, there has been a marked dearth of those which specifically address issues surrounding the health of today’s Métis Peoples. The Métis Centre of the National Aboriginal Health Organization cites a critical lack of academic research concerning Métis health. According to the organization, in a 29-year period (1980 to 2009), only 80 peer-reviewed articles published were related to Métis health, with just 12% of these being Métis-specific.\(^i\)

The limited availability of Métis health studies is further compounded by additional factors. Many provincial administrative databases do not currently contain ethnic identifiers. More importantly, Métis Peoples still do not have access to federal health services and benefits and, therefore, must rely on provincial services. This, in turn, results in a lack of data collection on the part of federal agencies concerning Métis health.

Knowledge pertaining to Métis Peoples’ health and well-being in Canada needs to be developed and an assessment needs to be made as to whether there is a need to improve programs and services for Métis Peoples. At present, Métis Peoples represent the fastest and youngest growing population in the country.

This report by the Congress is a study examining three specific health determinants affecting the Métis Peoples of Canada: smoking, drinking and drug use. The study will provide a much needed contribution to the field of study on Aboriginal health. To address the three cited health determinants in a proper context from the perspective of the Congress and its constituency, a historical examination of the term Métis is also provided.

1.2 Contextual history of the term Métis

The term Métis evolved as a result of intermarriage between Aboriginal and non-Aboriginal Peoples. The terminology used in describing Aboriginal ancestry has not been consistent by Aboriginal Peoples, government officials, historians or scholars.

The French referred to the fur trade Métis as coureurs de bois (forest runners) and bois brulés (burnt-wood people) in recognition of their wilderness occupations and their dark complexions. The Labrador Métis (whose culture had early roots) were originally called “livyers” or “settlers”, those who remained in the fishing settlements year-round rather than returning periodically to Europe or Newfoundland. The Cree people expressed the Métis character in the term Otepayemsuak, meaning the “independent ones”.\(^ii\)

The different historical circumstances of Métis across Canada make it difficult to define Métis in a general sense. To date the term “Métis”, that is recognized under section 35 under the Constitution Act, 1982, has
remained undefined by governments and the Courts. The undefined term “Métis” is also disputed amongst Aboriginal groups:

Many members of the Métis Nation believe that, because the term has been associated most often with them and their ancestors, they have a right to its exclusive use. They believe other Canadians of mixed Aboriginal/non-Aboriginal ancestry and culture should be described in some other way. Persons in the latter category point out that in terms of dictionary definitions, ‘Métis’ simply means ‘mixed’. They point to early historical references to the term on maps of areas outside Métis Nation territory and contend there is evidence that when the term was inserted in the constitution in 1982, it was intended to apply to all Métis people. The controversy has legal, social, cultural and political dimensions.

The federal government has classified mixed ancestry Indians under different categories and in different capacities throughout points in time. During the 19th and 20th centuries, Aboriginal Peoples frequently moved between categories placed upon them by the government of Canada. Historical terms used to describe this group include: country-born, half-breeds, mixed bloods and many more. Based on the Indian Act, the term “non-status Indian” has been used by the federal government and Aboriginal Peoples. Non-status Indians are granted equivalent rights as Métis and provided the equivalent opportunities as Métis.

Throughout the years, various government legislation and policies have disenfranchised Aboriginal Peoples recognized under section 91(24) of the Constitution Act, 1867. Aboriginal Peoples affected by government legislation were identified as “Indians” or “Métis” or “non-status Indians”. Subsequently, the implementation of Bill C-31 and Bill C-3 reinstated many people identified as “Non-Status” and “Métis” to “Status Indians”.

The Congress recognizes all Aboriginal Peoples’ unique circumstances in determining Aboriginal identity and advocate for a more inclusive view of Métis identity. Aboriginal Peoples are located in all of the provinces and territories of Canada. Those who may or may not be entitled to status under the Indian Act, are Métis culturally, historically and for purposes of constitutional recognition.

In a landmark ruling on January 8, 2012, the Federal Court affirmed the position that the Congress of Aboriginal Peoples has maintained that “Métis” and “Non-Status Indians” are Indians under section 91 (24) of the Constitution Act of 1867. This historic decision by the Federal Court provides recognition to over 600,000 Aboriginal People. On April 17, 2014, the Federal Court of Appeal reaffirmed this historic decision. An estimated 448,610 people in Canada are identified as Métis.

1.3 Survey Objectives and Data Sources

The objective for the Congress’ survey is to determine and provide the most recent statistical information available on a number of health determinants which can affect the overall quality of life for Métis Peoples. The results will be able to provide the Congress, other Aboriginal organizations and governmental agencies with a working reference tool in order to plan and implement more effective health prevention initiatives for Métis.

The primary source of data for this study are a set number of statistical tables as supplied by Statistics Canada. These tables were created by using data collected through the 2012 Aboriginal Peoples Survey (APS) and solely reflect the Métis population in Canada. The APS is a national survey of Aboriginal Peoples living off-reserve, Métis and Inuit aged six years and over. The APS collects detailed data on education, employment and health, data which are not available from any other source.

For comparative Canadian statistics, the Congress studied and employed data from CANSIM (Statistics Canada’s key socioeconomic database) vi, The Canadian Tobacco Use Monitoring Survey (CTUMS) vii, and The Canadian Alcohol and Drug Use Monitoring Survey (CADUMS) viii. The latter two surveys were produced through Health Canada.
The following APS statistical tables were examined and compared by the Congress:

**Smoking:**
- Smoking
- Pregnant Smoking
- Median Age Smoking
- Average Age Smoking
- Median Cigarettes Daily
- Average Cigarettes Daily
- Grouped Cigarettes Daily
- Smoking Home

*Age groups in all provinces & territories were examined in relation to above-listed tables:*
- 14 years and over
- 14 to 19 years
- 20 to 34 years
- 35 to 44 years
- 45 to 54 years
- 55 years and over

**Drinking:**
- ALC (alcohol consumption in the last 12 months)
- Type of Drinker
- Frequent Drinking (drinkers only)
- Frequent Drinking (total population)
- Heavy Drinking (drinkers only)
- Heavy Drinking (total population)

*Age groups in all provinces & territories were examined in relation to above-listed tables:*
- 12 years and over
- 12 to 19 years
- 20 to 34 years
- 35 to 44 years
- 45 to 54 years
- 55 years and over

**Drug use:**
- All Drugs
- Marijuana, Cannabis or Hashish
- Prescription drugs
- Street drugs

*Age groups in all provinces & territories were examined in relation to above-listed tables:*
- 12 years and over
- 12 to 19 years
- 20 to 34 years
- 35 to 44 years
- 45 to 54 years
- 55 years and over
2. Detailed Findings of Three Health Determinants

2.1 Smoking

Aboriginal Peoples have long considered tobacco to be one of the most sacred plants used in traditional ceremonies. Indications confirm tobacco has been cultivated for thousands of years. Yet, there is no evidence to support that tobacco was abused prior to European contact.

Smoking and exposure to second-hand smoke have been linked to an increased risk of a number of diseases and conditions affecting the cardiovascular and respiratory systems. The Public Health Agency of Canada notes that, from 1985 to 2012, in spite of a decrease in the prevalence of smoking among Canadians, Aboriginal Peoples’ rates of non-traditional tobacco continued to be high, including 31% of the Métis population.

Health Canada estimates more than 37,000 Canadians die each year due to Tobacco related illnesses. In 2010, Health Canada launched a drive toward reducing smoking in on-reserve communities. Métis and non-status Indians have similar needs to Status Indians, but do not receive the same access to distinct federal programming and services designed to meet their specific needs. Health Canada does not provide services to Métis Peoples, thereby excluding Métis from similar campaigns to assist in reducing smoking rates.

Question #1: Type of Smoker (Aged 12 years and over)

Respondents were asked to identify themselves as to which type of smoker they considered themselves to be. Most Métis (65.8%) stated that they did not smoke at all while 25.9% claimed to smoke on a daily basis. Those who smoke occasionally were numbered at 8.4%.

- Approximately the same percentage of Métis males and females smoked on a daily basis (26.6% versus 25.2%)
- 20.3% of Canadians aged 12 and over reported being a current smoker
- More male Canadians were smokers (23.1%) than were females (17.5%)
Question #2: Daily Smoking Indicator for Pregnant Women (Aged 12 years and over)
Much of the resulting data for this question has proven to be too unreliable to be completely published. It can be noted, however, that 81.5% of pregnant Métis women do not smoke daily.

Question #3: What is the Median Age that Respondents began smoking? (Aged 12 years and over)
The median age for Métis who began smoking is 15 years. The median ages for male and female is practically the same (15.1 years versus 14.8 years).

Question #4: What is the average age at which respondents began smoking? (Aged 12 years and over)
The average age at which Métis Peoples begin smoking is 15.9 years. The average age for males and females is fairly close as well (16.1 years versus 15.7 years).

Question #5: What is the median number of cigarettes smoked daily? (Aged 12 years and over)
The median number of cigarettes smoked per day is 12. The median number is higher for males (14.3) than it is for females (11.4).

• Similarly, the average number of cigarettes smoked daily for Canadians aged 15 years and over is also 15 cigarettes.

Question #6: What is the average number of cigarettes smoked daily? (Aged 12 years and over)
Métis people smoked an average of 15.1 cigarettes per day. Again, the average number is slightly higher for males (16.5 per day) than for females (13.8 per day).

Question #7: What is the number of cigarettes smoked daily (grouped) for daily smokers only? (Aged 12 years and over)
Over half of the respondents smoked 1 to 14 cigarettes daily (54.8%), 25.6% of the respondents smoked 15 to 24 cigarettes daily, while 19.5% smoked 25 or more cigarettes daily.

• More Métis females smoked 1 to 14 cigarettes daily (62.8%) than males (46.4%)
• More males smoked 25 cigarettes or more daily (23.9%) than females (15.4%)

Question #8: Do those that smoke daily or near daily, do so in the home? (Aged 12 years and over)
Of those surveyed, 82.6% did not smoke in the home while 17.4% do so. Percentages between Métis males and females who did not smoke in the home were approximately the same (82.3% versus 82.9%).

Question #9: Type of drinker and smoker (Aged 12 years and over)
The purpose of this particular question was to examine if there might be any co-relation between those who smoke and consume alcohol. For Métis who are smokers, over half (52.9%) stated that they were regular drinkers (once a month or more), and 22.2% of those surveyed classified themselves as occasional drinkers (less than once a month) while 24.9% stated that they were non-drinkers. These statistics are reflective of those who smoke either on a daily basis or occasionally.

For those respondents who smoked daily, 55.9% were regular drinkers (once a month or more), 23.9% were occasional drinkers and 20.2% were non-drinkers. Of those surveyed who smoked occasionally, 62.9% were regular drinkers and 21.7% were occasional drinkers. For Métis people who did not smoke at all, 50.4% were still regular drinkers, 21.6% were occasional drinkers, while 28% did not drink.

• Métis males who smoked daily were more likely to be regular drinkers (66.6%) than females (45.8%)
• An even higher percentage of males who smoked occasionally were more likely to be heavy drinkers (78.9%) than females (46.8%)
The percentage of males and females who chose not to smoke or drink at all almost mirror each other (27.3% versus 28.6%)

2.2 Drinking\textsuperscript{xii}

Alcohol consumption has had a long history in Europe. It is estimated that by 1577, there were approximately 17,000 venues that sold alcohol in England alone.\textsuperscript{xiii} When Europeans came into contact with North American Indians, it is believed that Europeans introduced alcohol to Indians and formed unique trading relationships. Valuable commodities such as furs and pots would be traded to Europeans for alcohol.

Alcohol intoxication can harm physical and mental health and affect personal relationships as well as people’s ability to work and study; in extreme cases, it can cause death.

Research on alcohol use is focused primarily on Indian Act reserve communities. Studies show that reserve communities have lower rates of alcohol use compared to the general population; however, studies show that Aboriginal people who abuse alcohol may be more destructive than a non-Aboriginal person. In terms of Métis, there is very little data to determine the comparable rates.

The National Native Alcohol and Drug Abuse Program (NNADAP) was permanently funded in 1982 to address addictions and substance abuse problems among Aboriginal Peoples. Programs such as NNADAP can easily collect data and assess specific needs for Aboriginal Peoples and their communities. Unfortunately, there is no nationally funded treatment program for Métis People, further adding to the lack of data collection and needs assessment studies.

Question #1: During the past 12 months, have you had a drink of beer, wine, liquor or any other alcoholic beverage? (Aged 12 years and over)

Of those surveyed, 75.1% of Métis people have had an alcoholic beverage while 24.9% have not.

- Métis males were slightly more likely to have had alcohol during the past 12 months (77.6%) than females (72.9%)
- According to the 2012 Canadian Alcohol and Drug Use Monitoring Survey (CADUMS), 78.4% of Canadian respondents have had an alcoholic beverage during the past 12 months\textsuperscript{xiv}
Of those who responded to CADUMS, Canadian males were more likely to have had an alcoholic beverage during the past 12 months (82.7%) than females (74.4%) xv

**Alcohol Consumption Within the Last 12 Months**

<table>
<thead>
<tr>
<th>Had a Drink Within the Last 12 Months</th>
<th>Have Not Drank Within the Last 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>75.1</td>
<td>24.9</td>
</tr>
</tbody>
</table>

**Question #2: Type of drinker (Aged 12 years and over)**

Respondents were asked as to what type of drinker they considered themselves to be; regular drinker (once a month or more), occasional drinker (less than once a month), or a non-drinker. 5 out of 10 (52.9%) Métis people stated that they drank regularly, 22.2% affirmed that they occasionally drank, and 24.9% did not drink at all.

- Métis males drank alcohol more on a regular basis (60.4%) than did females (46.2%)
- More Métis females drank occasionally (26.7%) than males (17.1%)

**Type of Drinker (Aged 12 and Over)**

<table>
<thead>
<tr>
<th>Drink Regularly</th>
<th>Occasionally Drink</th>
<th>Do Not Drink</th>
</tr>
</thead>
<tbody>
<tr>
<td>52.9</td>
<td>22.2</td>
<td>24.9</td>
</tr>
</tbody>
</table>
**Question #3: Frequency of alcohol drank in the last 12 months (Drinkers only/aged 12 years and over)**

Responses to this question varied for Métis Peoples. Only 4.7% of respondents drank alcohol every day and 3.7% drank 4 to 6 times a week; however, 16.7% stated that they drank alcohol 2 to 3 times a week in addition to 15.2% who drank once a week. 16.5% of Métis people drank alcohol 2 to 3 times a month, 13.7% drank once a month and 29.5% drank less than once a month.

- A higher percentage of Métis males drank every day (7.1%) than females (2.5% E\textsuperscript{vi})
- More Métis males drank 2 to 3 times week (20.3%) than females (13.3%)
- More Métis females drank less than once a month (36.6%) than males (22.1%)

**Question #4: Frequency of alcohol drank in the last 12 months (Including non-drinkers/aged 12 years and over)**

Of those surveyed, one quarter of the Métis population were non-drinkers (24.9%). 22.2% drank alcohol less than once a month, 22.7% drank 1 to 3 times a month, while 30.3% drank once a week or more.

- A higher percentage of male respondents drank once a week or more (38%) than females (23.3%)

**Question #5: Frequency of alcohol drank in the last 12 months (At-least-once-a-week-drinkers/aged 12 years and over)**

The majority of respondents drank alcohol less than once a week or stated that they were non-drinkers (69.7%). Subsequently, 11.4% drank once a week, 12.6% drank 2 to 3 times a week, while 6.3% of those surveyed drank 4 times a week to every day.

- More Métis females drank less than once a week or were non-drinkers (76.7%) compared to males (62%)
- More Métis males drank 4 times a week to every day (9.7%) as opposed to females (3.2%)

**Question #6: Heavy Drinkers (Specifically drinkers only/aged 12 years and over)**

Respondents considered to be heavy drinkers (5 or more drinks on a single occasion once a month or more) totaled at 29.6%. 32.6% of respondents drank the same amount but less than once a month. Lastly, 37.8% of those surveyed never have more than 4 drinks on a single occasion.
• More Métis males were heavy drinkers (38.3%) compared to females (21.4%)
• More Métis females consumed never more than 4 drinks on a single occasion (46.2%) as opposed to males (29%)
• For Canadians aged 12 and over, 17.4% reported having 5 or more drinks on one occasion, at least once a month in the past 12 months xvii
• More Canadian males were heavy drinkers (24.3%) than females (10.7%) xviii

**Question #7: Heavy drinkers (Including non-drinkers/aged 12 years and over)**
Responses to this question were spread out fairly evenly. Of those surveyed, 22.2% have had 5 or more drinks on a single occasion once a month or more. 24.4% have had 5 or more drinks on a single occasion less than once a month. 28.3% of Métis people have had never more than 4 drinks on a single occasion while 25.1% consider themselves to be non-drinkers.

• Métis males were more likely to have 5 or more drinks on a single occasion once a month or more (29.6%) than females (15.5%)

### 2.3 Drug Use xix

The use of illicit drugs can affect human performance and in some cases, cause death. Illicit drug usage has been linked to various health and social problems, including violent behaviour. In Canada, the most commonly used illicit drug is cannabis. Prescribed pharmaceutical drugs may also be abused due to their psychoactive properties. Street drugs are, by definition, drugs which are sold illegally and used for their mood-altering, stimulant or sedative effects. Examples of such drugs are cocaine, heroin and speed.

**Question #1: Have you ever used or tried drugs? (Aged 14 years and over)**
Of those surveyed, 6 out of 10 (59.8%) Métis people have used or tried drugs. Comparatively, 40.2% of the respondents have not.

- More Métis females have not used or tried drugs compared to males (43.6% versus 36.1%)
- Slightly more Métis males aged 20 to 34 years and over have used or tried drugs (75.4%) as opposed to females (69.8%)
Question #2: Have you ever used or tried marijuana, cannabis, or hashish? (Aged 14 years and over)
Of those surveyed, 6 out of 10 (59.1%) of Métis Peoples have used or tried marijuana, cannabis or hashish while 40.9% have not.

- Métis males were more likely to have or used marijuana, cannabis or hashish (63.4%) than females (55.6%)
- A high percentage of Métis males aged 20 to 34 years (74.7%) and those aged 35 to 44 years (73.7%) have used or tried marijuana, cannabis or hashish, in addition to Métis females aged 20 to 34 years (69.2%) and 35 to 44 years (63.9%)
- Of those respondents taking part of the 2012 Canadian Tobacco Use Monitoring Survey (CTUMS), 8.1% have tried marijuana once, 31.4% have tried marijuana more than once, while 60.5% have never tried marijuana.

Question #3: Have you ever used prescription drugs for recreational purposes? (Aged 14 years and over)
An overwhelming 9 out of 10 respondents (90.7%) stated that they had never used prescription drugs for recreational purposes compared with just 9.3% of the population who indicated that they had.

- Slightly more female Métis (95.1%) have never used prescription drugs for recreational purposes compared to male Métis (93.4%)

Question #4: Have you ever used or tried street drugs? (Aged 14 years and over)
Of those surveyed, 8 out of 10 Métis Peoples have not used or tried street drugs (82.9%) while 17.1% admitted to having done so.

- Slightly more Métis males (19.6%) have used or tried street drugs compared to females (15.1%)
- Of those surveyed as part of the Canadian Tobacco Use Monitoring Survey (CTUMS) 2012, 43.2% of respondents have used or tried street drugs
- More Canadian males have used or tried street drugs (49.8%) as opposed to females (37%)
3. Summary

Prior to examining the APS statistical health tables, the Congress had anticipated the following results:

- Smoking rates will have remained the same or increased; there will be a need to provide services/campaigns geared to Métis people to reduce smoking.

- Drinking was expected to be as prevalent in use as the non-Aboriginal population.

- Drug use was expected to be as prevalent in use as the non-Aboriginal population.

- The Congress anticipated there would be indications for greater needs to improve health and wellness measures on smoking, alcohol and drug related issues concerning the Métis population.

With the possible exception of drug usage, the overall statistical findings generated through the 2012 APS mirrored the Congress’ initial outlook.

While the majority of Métis respondents did not smoke at all (65.8%), a significant percentage of Métis males (23.9%) smoke 25 cigarettes or more on a daily basis. Métis Peoples who do smoke began at a fairly early age (15.9 years) and smoke an average of 15.1 cigarettes per day. At the same time, however, the average number of cigarettes smoked daily for Canadians aged 15 years and over is also 15 cigarettes.

In relation to alcohol consumption, a higher percentage of Métis have had an alcoholic beverage during the last 12 months (75.1%); however, a similar percentage of the Canadians drank alcohol within the same time frame (78.4%). While more Métis males drank once a week or more than females (76.7% versus 62%), the majority of Métis Peoples surveyed either drank alcohol less than once a week or were non-drinkers (69.7%).

Regarding the usage of drugs, while a large number of the Métis population aged 20 to 44 years have used or tried marijuana, cannabis or hashish, 9 out of 10 respondents indicated that they had never used or tried prescription drugs for recreational use. In addition, 8 out of 10 Métis Peoples have not used or tried street drugs.

The 2012 APS illustrates that there is a distinct need to address the negative issues with which the Métis have been affected by through smoking, drinking and drugs. These issues, which compromise the overall quality of an individual’s life, and are in themselves life-threatening, should be dealt with through the creation of health wellness initiatives. Such initiatives will ensure that the needs and wishes of Métis Peoples are met and fulfilled.
References


iv http://www5.statcan.gc.ca/cansim/a00?lang=eng&mode=aboutCansim

v The Canadian Tobacco Use Monitoring Survey (CTUMS) was first collected in 1999 and is implemented by Statistics Canada on behalf of Health Canada. CTUMS was developed to provide Health Canada and its partners with timely, reliable and continual data on tobacco use and related issues. The survey’s primary objective is to track changes in smoking status and amount smoked, especially for youth aged 15 to 24, who are most at risk for taking up smoking. CTUMS is an annual survey of approximately 20,000 Canadians aged 15 years and older, excluding residents of the three territories and full-time residents of institutions.

vi The Canadian Alcohol and Drug Use Monitoring Survey (CADUMS) is an annual general population survey of alcohol and illicit drug use among Canadians aged 15 years and older that ran from 2008 through 2012. Derived from and similar to the Canadian Addiction Survey (CAS) of 2004, CADUMS was designed to provide detailed national and provincial estimates of alcohol- and drug-related behaviours and outcomes. The following report presents results from the fifth and final annual CADUMS data collection, which commenced in February 2012. The Canadian Tobacco, Alcohol and Drugs Survey (CTADS) will replace CADUMS; it was launched in 2013 and asks key questions about alcohol and drug use on a biennial basis.

vii Questions on smoking were asked only if the respondent was 12 years of age or older.


xii Questions on alcohol were asked only if the respondent was 12 years of age or older.


xvi E = use data with caution


xix Questions on drug use were asked only in non-proxy interviews where the respondent was 14 years of age and over.

