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**APPENDIX F**

# **Preliminary Demographic Analysis of First Nations and Métis People**

A Background Paper Prepared for  
the Regina Qu'Appelle Health Region  
*Working Together Towards Excellence  
Project*

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## 1. Introduction

### Regina Qu'Appelle Health Region

The purpose of this brief paper is to provide a preliminary analysis of available population and demographic data for the First Nations and Métis people who live within the geographic boundaries of the newly established Regina Qu'Appelle Regional Health Authority. This paper is one in a series of discussion papers that has been prepared for the region's "Working Together Towards Excellence Project." This project, initiated in the Spring of 2002, is part of ongoing efforts by the region to explore how, together with key internal and external partners, the region can improve health and social outcomes for First Nations and Métis peoples.

The RQHR is a new organizational entity recently established by the government of Saskatchewan through the amalgamation of the former Regina, Pipestone and Touchwood Qu'Appelle Health Districts. There are some 250,000 residents within the new Region in 120 cities, towns, villages, rural municipalities and First Nation communities. In addition, The RQHR is responsible for providing specialized health care for the 465,000 residents of southern Saskatchewan.

In preparing this analysis, several quite significant obstacles were encountered:

1. The geographic boundaries of the new health region do not correspond with any of the boundaries that are used by agencies, such as Statistics Canada, for the collection of census information. More data is available with respect to "Census Metropolitan Areas" (CMAs) such as Regina, but much of the Region's area falls outside such easily distinguishable urban centres. Since a significant portion of the region's Aboriginal population resides outside CMAs, this is an issue. While it is possible to obtain a customized analysis, time and financial constraints prevented the WTTE project from pursuing this avenue;

2. It has been well documented that even in the CMAs where census data is available, it often significantly underestimates the true size of the Aboriginal population. This occurs for many reasons, including the fact that Aboriginal people tend to fill out fewer census forms. Moreover, conventional methods for estimating the gap in reporting do not always take account of the larger size of Aboriginal households, different mobility patterns among Aboriginal people, etc.. While considerable effort has been devoted to improving the accuracy of the data in recent years (e.g., a specialized "Aboriginal Peoples' Survey" has been developed by Statistics Canada), significant problems with the quality of available data remain;
3. Census data is usually quite dated and does not take account of current population trends, including growth, migration and mobility patterns. Using data that is five or more years old can significantly underestimate and distort the true picture today; and
4. While significant problems with the timeliness and accuracy of data with respect to First Nations are evident, especially in regard to those who reside off-reserve and in urban areas, these problems pale in comparison with those that are encountered in trying to establish an accurate demographic profile for the Métis. There is no equivalent to the "Indian Register" for Métis, and an accurate census has never been completed. Census data and expert opinion, the only available sources of information, are known to be problematic.

Nonetheless, several sources of information proved to be useful in preparing this analysis. These sources of information include:

1. Information on national Aboriginal population trends prepared by the federal government (Correction Services Canada - Aboriginal Issues Branch 2001);

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2. An analysis prepared by the Canada West Foundation regarding population trends among Aboriginal people in Western Canadian cities (Hanselman 2002);
  3. An analysis of Saskatchewan First Nations and Métis population trends prepared by the Federation of Saskatchewan Indian Nations with the assistance of the University of Saskatchewan (Federation Of Saskatchewan Indian Nations 1997);
  4. Information prepared in 2000 for the Aboriginal Health Initiative by Doug Elliott from Sask Trends Monitor (Regina Health District 2000). This information was based on Statistics Canada census information; and
  5. Supplementary information on current reserve populations broken down for each Region obtained from Indian and Northern Affairs Canada data base of the registered Indian Population.

Despite the limitations of the data, these sources allow some educated “guesstimates” to be made about the current population of First Nations and Métis people within the boundaries of the Region, as well as some of the population characteristics and trends.

## 2. Findings

Findings are discussed under three broad headings: the size of the Aboriginal population, the characteristics of the population, and population trends. In each section, national data is presented first, followed by provincial data, followed by available information about the new Region.

### The Size Of the First Nations and Métis Populations

The 1996 Census estimates the Aboriginal population of Canada to be 799,010. Of this number, 111, 245 Aboriginal people (or 14% of the total) live in Saskatchewan. In 1996, Saskatchewan’s total

population was estimated to be 976,615, therefore the Aboriginal population of the province was 11.4% of the total. Except for Manitoba (at 11.7%), Saskatchewan has the largest percentage of Aboriginal people of any province in Canada. However, there is a considerably higher percentage of Aboriginal people in Canada’s three territories. Four out of five Aboriginal people in Canada live west of Quebec (Aboriginal Issues Branch 2001).

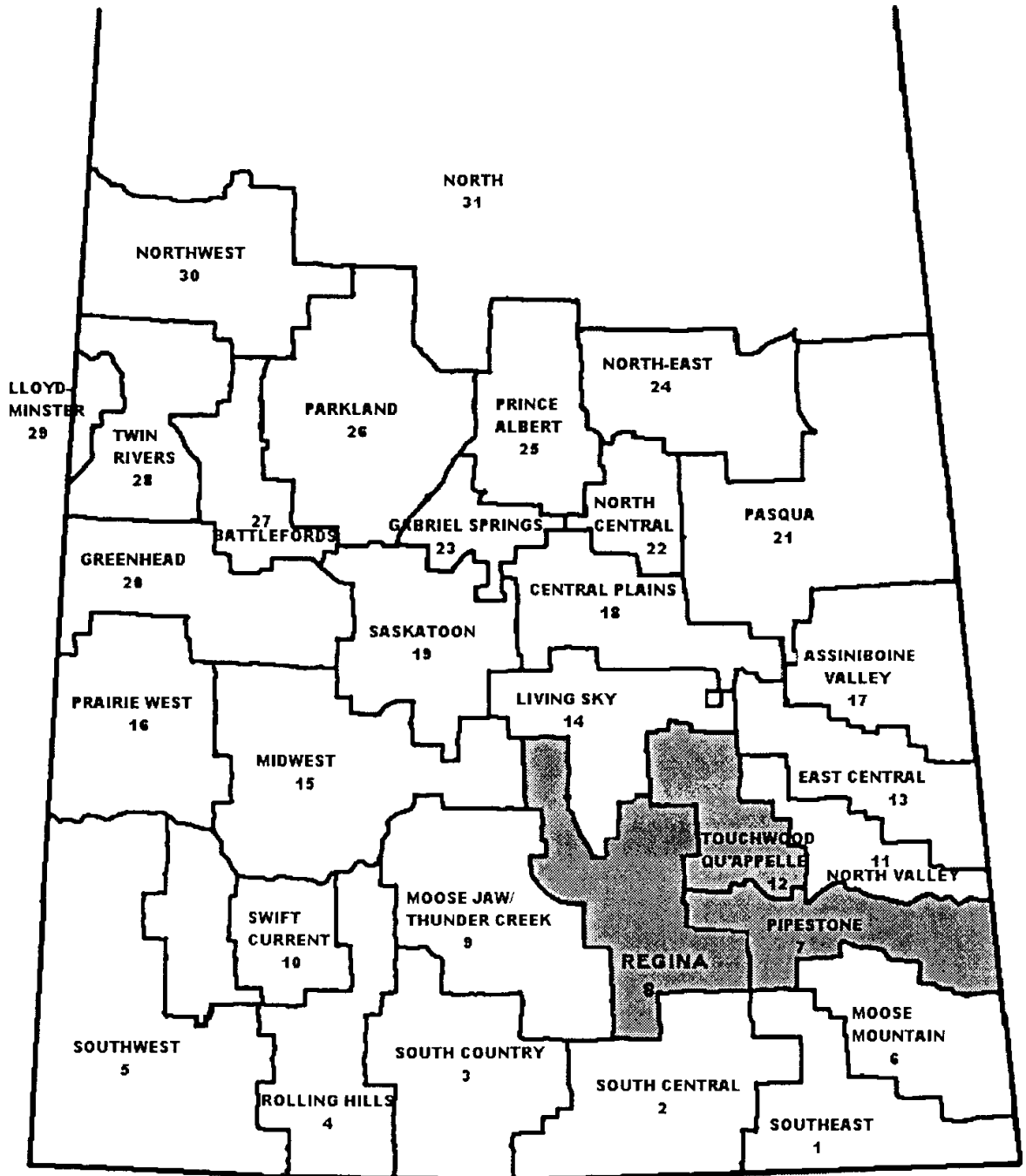
In 1996, the Census indicated there were 75,205 First Nations (and a very small number of Inuit) people in Saskatchewan, as well as 36,535 Métis. In Saskatchewan, Métis represent about one third of the Aboriginal people of the province, a larger proportion than in many other provinces. Saskatchewan First Nations people make up 13.6% of the total population of First Nations people in Canada, while the corresponding figure for Métis is 17.4% (Aboriginal Issues Branch 2001).

At 7.1% of the population, Regina has the second largest proportion of Aboriginal people of any major urban area in Canada, only slightly behind Saskatoon at 7.5%. Remarkably, more Aboriginal people live in the RQHR than in Toronto (Aboriginal Issues Branch 1996). More Aboriginal people live in Winnipeg than in the NWT and Nunavut combined (Hanselman 2001).

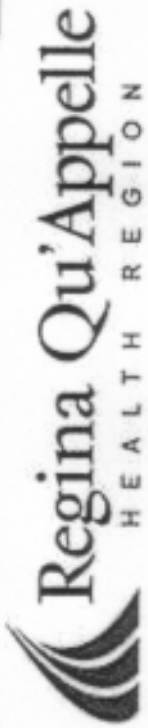
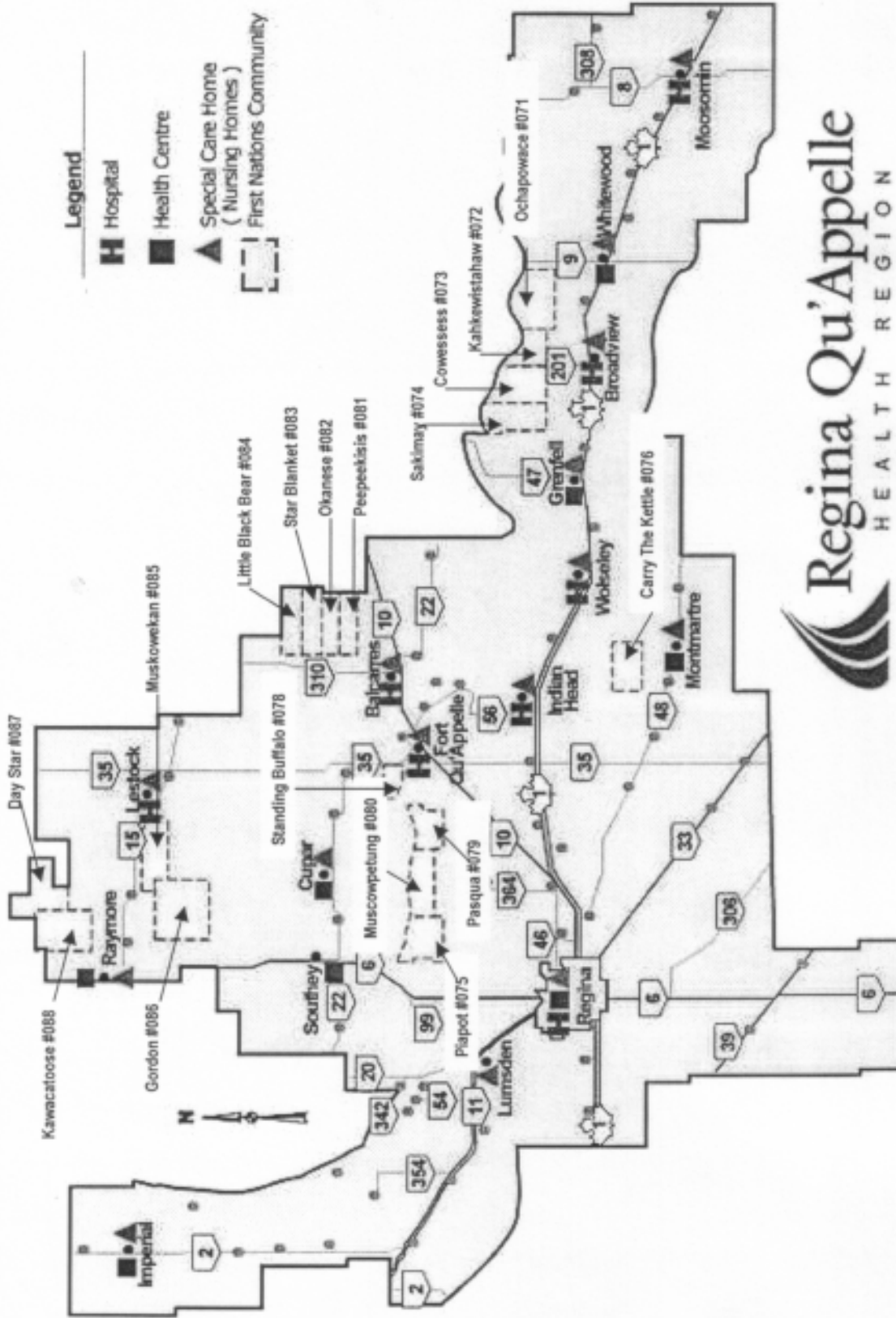
Prior to the expansion of the RQHR, it was estimated that there were approximately 14,000 Aboriginal people within the District, 7% of the district population (Regina Health District 2001). This constituted 13.5% of the provincial Aboriginal population. Of these Aboriginal residents, two-thirds were estimated to be First Nations, while one-third were estimated to be Métis. At the time, the analysis indicated that 94% of the District’s Aboriginal population lived in Regina.

The amalgamation of the Pipestone, Touchwood-Qu’Appelle and Regina Health Districts has dramatically changed the Aboriginal profile of the new RQHR. Whereas only two reserves were within the boundaries of the former Regina Health District, there

Maps Showing Detail Of Regina Qu'Appelle Health Region  
Including Location Of First Nations Communities



Regina Qu'Appelle Health Region - Map



are now 17 reserves within the new health region, the largest number within any health Region in Saskatchewan. These communities have a total on-reserve and off-reserve population of 24,729 (see Table 1). As a result, some 33% of Saskatchewan's First Nations population (now estimated to be some 85,000 to 90,000 people), live within the boundaries of the new Region. Whereas Prince Albert-Parkland Health Region has a slightly larger on-reserve population, the off-reserve population of bands within RQHR (16,269) is by far the largest of any region, some 50% higher than the region with the next largest number.

If there is one third as many Métis as First Nations people within the boundaries of the new Health Region (a ratio that often seems to hold true in these types of analyses, but an assumption that needs to be borne out with further study), it may be estimated, that some 8160 Métis also now live within the boundaries of the new Region.<sup>1</sup> This would bring the total Aboriginal population within the Region to some, 33,000 a 135% increase over the Aboriginal population within the previous Regina Health District. Furthermore, the on-reserve population has increased from less than 1000 people in the previous Regina Health District (Regina Health District 2001), to 8,460 in RQHR. Moreover, whereas 94% of the Aboriginal population within the Regina Health District lived in Regina, the ratio is likely now closer to 50% urban and 50% reserve or rural. About 4% of Canada's Aboriginal people now live within the health region.

**Table 1**  
**First Nations On-Reserve and Off-Reserve Populations**  
**2001: RQHR**

	<b>On-reserve</b>	<b>Off-reserve</b>	<b>Total</b>
<b>Yorkton Tribal Council</b>			
71. Ochapowace First Nation	566	732	1,298
72. Kahkewistahaw First Nation	445	909	1,354
73. Cowessess First Nation	537	2,544	3,081
74. Sakimay First Nation	246	1,029	1,275
	<b>1,794</b>	<b>5,214</b>	<b>7,008</b>
<b>File Hills Qu' Appelle Tribal Council</b>			
76. Carry the Kettle First Nation	764	1,280	2,044
75. Piapot First Nation	626	1,192	1,818
80. Muscowpetung First Nation	308	754	1,062
81. Peepeekisis First Nation	660	1,472	2,132
82. Okanese First Nation	252	272	524
83. Starblanket First Nation	233	269	502
84. Little Black Bear First Nation	219	201	420
78. Standing Buffalo First Nation	398	608	1,006
79. Pasqua First Nation	561	965	1,526
	<b>4,021</b>	<b>7,013</b>	<b>11,034</b>
<b>Touchwood Agency Tribal Council</b>			
85. Muskowekwan First Nation	382	918	1,300
87. Day Star First Nation	136	275	411
86. Gordon First Nation	1,028	1,590	2,618
88. Kawacatoose First Nation	1,099	1,259	2,358
	<b>2,645</b>	<b>4,042</b>	<b>6,687</b>
<b>Total</b>	<b>8,460</b>	<b>16,269</b>	<b>24,729</b>

### **The Characteristics Of These Populations**

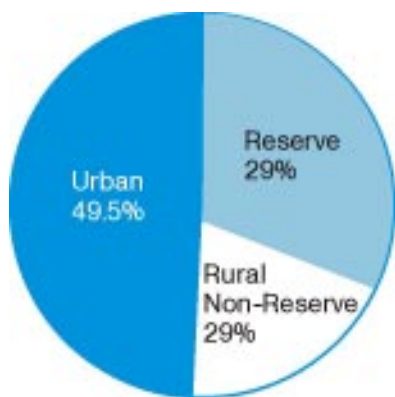
According to the 1996 Census, about one-quarter of the Aboriginal population of Canada is Métis – 210,000 of 799, 010 (Aboriginal Issues Branch 2001). Some 70% of Aboriginal people, including 47% of registered Indians, live “off-reserve,” many in urban areas. A breakdown is shown in Figure 1.

On an average, the Aboriginal population in Canada is 10 years younger than the Canadian population (25 years vs. 35 years). 35% of Aboriginal people are under 15, compared with 20% for Canada generally. Of Aboriginal children in

1. These figures also assume that the off-reserve population resides within the region, or that any proportion that does not is matched by off-reserve members of bands from outside the boundaries of the Region who now live within the RQHR.

Source: Registered Indian Population, 2001 - Indian & Northern Affairs Canada (obtained from: www.ainc-inac.gc.ca)

**Figure 1:  
Geographic Distribution of Canada's Aboriginal  
Identity Population (1996 Census)**



Source: Statistics Canada, 1996 Census

this age group, one-third live in lone parent families, twice the proportion in the general population. Half of urban dwelling Aboriginal children under 15 live in lone parent families (Aboriginal Issues Branch 2001).

There is a 6.5 year difference in life expectancy between First Nations people and Canadians generally. This is explained by higher rates of injury, poisoning, suicide, and many chronic and infectious diseases. Despite poorer health status, the Aboriginal population continues to grow by between 2% and 3% a year. Fertility rates, the number of live births per women of child bearing age, is substantially higher among First Nations women (2.9) than for Canadian women generally (1.7) (Aboriginal Issues Branch 2001).

It is well documented that Aboriginal people experience higher unemployment (in 1991, 19.4% vs 9.9%), lower educational attainment, and have lower average incomes (in 1991, \$14,198 vs. \$20,264).<sup>2</sup> While the size of these inequities is diminishing over time, there continue to be significant gaps.

These characteristics are mirrored in an analysis of the Aboriginal population within the former Regina Health District (Regina Health District 2001). This

2. Unfortunately, the 1991 census data is the latest available for these indicators. Data from the 2001 census will be available shortly.

analysis uncovered a number of important findings with respect to broad determinants of health:

- reflecting the youth of the Aboriginal population, 48% of Aboriginal people within the district, vs. 33% of the general population, were unmarried and living at home;
- 50% of Aboriginal residents had completed high school, vs 66% for the general population;
- employment stood at 42% for Aboriginal residents, but 65% for the general population;
- average income in 1995 was \$25,820, vs. \$14,584 for Aboriginal residents; and
- Aboriginal women had double the birth rates of the general population.

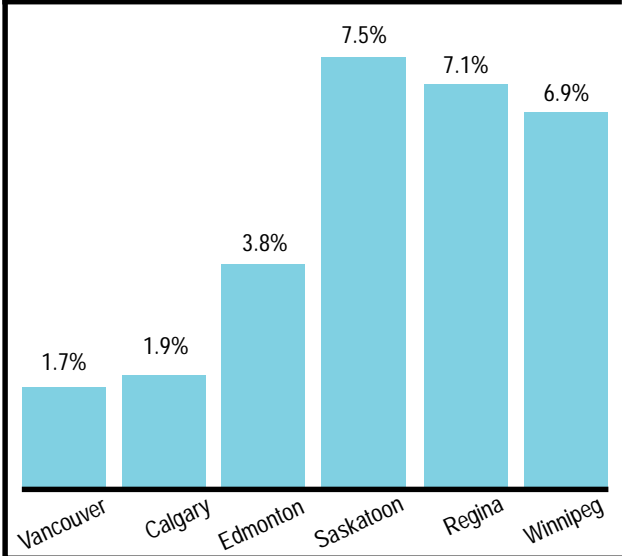
Currently, one in five Aboriginal people in Canada live in one of seven cities (see Table 2 below and Figure 2 next page).

<b>Table 2 Aboriginal People in Urban Areas</b>			
	Total Population	Aboriginal	%
Toronto	4,232,905	16,100	.4
Winnipeg	660,055	45,750	6.9
Regina	191,480	13,605	7.1
Saskatoon	216,445	16,160	7.5
Calgary	815,985	15,200	1.9
Edmonton	854,230	32,825	3.8
Vancouver	1,813,935	31,140	1.7

Source: Statistics Canada, 1996 Census



**Figure 2**  
**Aboriginal Identity Population as a Percentage of Urban Population (1996 Census)**



Source: Statistics Canada, 1996 Census

**The Trends**

The registered Indian population in Canada increased from 230,000 in 1967 to 642,414 in 1998 – a 280% increase in 30 years. The Indian population is expected to reach 900,000 by 2015. The Indian population of Canada has doubled in the last 15 years (Aboriginal Issues Branch 2001). Between 1980 and 1990, for example, the rate of growth for registered Indians in Canada was almost five times higher than the rate of growth for the general population (Federation of Saskatchewan Indian Nations 1997).

In 1967, 8 out of 10 Registered Indians lived on reserve, while in 1992, less than six out of ten lived on reserve. The off-reserve population continues to grow at a faster rate than the on-reserve population (Aboriginal Issues Branch 2001).

Life expectancy is increasing. For registered Indians, it is expected to increase by 14 years from 1975 (59 years for men and 66 years for women) to 2015 (73

years for men and 80 years for women) (Aboriginal Issues Branch 2001).

Saskatchewan trends mirror those in other parts of the country. While the general population is not growing, but aging, the Aboriginal population is younger and growing much more quickly. There is also significant migration from rural areas to the cities. For example, in 1971, 490,000 people lived in Saskatchewan’s urban centres, while 435,00 lived in rural areas. By 1991, there were 623,000 urban residents and 365,000 rural residents — an urban increase of 41% and a rural decrease of 16%. Between 1967 and 1992, the off-reserve First Nations

**Table 3**  
**First Nations On-Reserve and Off-Reserve Populations 1998 and 2001: RQHR**

	2001	1998
<b>Yorkton Tribal Council</b>		
Ochapowace First Nation	566	553
Kahkewistahaw First Nation	445	436
Cowessess First Nation	537	517
Sakimay First Nation	246	252
<b>File Hills Qu’ Appelle Tribal Council</b>		
Carry the Kettle First Nation	764	741
Piapot First Nation	626	614
Muscowpetung First Nation	308	309
Peepeekisis First Nation	660	677
Okanese First Nation	252	245
Starblanket First Nation	233	228
Little Black Bear First Nation	219	223
Standing Buffalo First Nation	398	389
Pasqua First Nation	561	585
<b>Touchwood Tribal Agency</b>		
Muskowekwan First Nation	382	371
Day Star First Nation	136	127
Gordon First Nation	1,028	1,038
Kawacatoose First Nation	1,099	1,110
<b>Total</b>	<b>8,460</b>	<b>7,946</b>

Source: Registered Indian Population, 1998 and 2001 Indian and Northern Affairs Canada (obtained from www.ainc-inac.gc.ca)



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population in Saskatchewan increased by 86% (Federation of Saskatchewan Indian Nations 1997).

At the same time, the on-reserve population of First nations people is also growing (Table 3). This population increased by 514 between 1998 and 2001 – about 6.5% over a three year period.

The proportion of the urban population that is made up of Aboriginal people is also growing. In Regina, Census data indicates that 2% of the city's population was Aboriginal in 1971. The figure was 4% in 1981, and 5.8% in 1991. The estimate based on data from the mid nineties was 7.1%. The current % is almost certainly much higher.

In Saskatchewan, one quarter of all labour force entrants, and one third of all new school entrants, are Aboriginal people. Over the next ten years, the Aboriginal labour force is expected to grow by 280% from 82,000 to 311,000, while the non-Aboriginal labour force is expected to grow by only 7.5% from 665,000 to 685,000.

### 3. Conclusion

There is a large and growing population of Aboriginal people within Saskatchewan and within the boundaries of Regina Qu'Appelle Health Region. The importance of this population to the makeup of the provincial population is increasing rapidly. This population is also much younger than the general provincial population. As a consequence, Aboriginal people are making an increasing contribution as new employees and new students.

Some 33,000 Aboriginal people live within the boundaries of the Regina Qu'Appelle Health Region. Because of the recent changes in boundaries, there has been a 135% increase in the Aboriginal population over the numbers that were within the previous Regina Health District. The RQHR has more Aboriginal communities than any other health region in Saskatchewan. Moreover, whereas the Aboriginal

residents of the former Regina Health District overwhelmingly resided in urban areas, the urban-rural population split within the new Health Region is closer to 50%-50%.

There are very serious inequities in health and social outcomes for Aboriginal people. While there is some indication that some of these gaps are getting smaller, very significant challenges remain. This is particularly the case with regard to education and employment status, income differentials, the large number of single parent families, and the impact of these social conditions on health outcomes.

The growth of the Aboriginal population within the province, the fact that some 33% of this population now resides within the Health Region, and the reality that serious inequities in health and social outcomes remain, underscores the importance of the Region's objectives as reflected in the WTTE project.

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