



# QUEBEC FIRST NATIONS REGIONAL HEALTH SURVEY - 2008

## Chapter 6    Community well-being



FIRST NATIONS OF QUEBEC AND LABRADOR  
HEALTH AND SOCIAL SERVICES COMMISSION

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Document also available in French titled: *Enquête régionale sur la santé des Premières Nations du Québec - 2008. Faits saillants.*

The masculine in this document is intended to lighten the text, and without prejudice against women.

## METHODOLOGICAL NOTE

### *Background*

The First Nations Regional Health Survey (RHS) is a groundbreaking survey in the area of research by and for First Nations. Completely carried out by First Nations, it is an innovative endeavour with respect to the involvement of the communities in the process, ethics and cultural adaptation of research.

The RHS is the first research project to be carried out while completely respecting the principles of ownership, control, access and possession (OCAP). These principles aim to ensure the complete involvement of the First Nations communities in all of the steps of the research.

The governance and coordination of the RHS are ensured by the First Nations Information Governance Centre (FNIGC) at the national level and by the First Nations of Quebec and Labrador Health and Social Services Commission (FNQLHSSC) in Quebec.

This second wave of the RHS was preceded by the wave that took place in 2002 (first wave) as well as by a pilot project (1997). For the past 15 years, the RHS data has contributed to supporting the decision-makers and interveners while contributing to expanding the knowledge on the socio-sanitary situation of the First Nations. We plan on carrying out two phases following this one, which are phase 3 in 2013 and phase 4 in 2016.

1997	2002	2008	2013	2016
Pilot of the RHS	Phase 1 of the RHS	Phase 2 of the RHS	Phase 3 of the RHS	Phase 4 of the RHS
Completed	Completed	Completed		

### *Questionnaire*

Three distinct questionnaires were created for three different age groups (children, youth, adults). These questionnaires were administered in person by 63 First Nations interviewers who were trained for this purpose. In order to prevent the error risks, data entry was performed by the interviewers during the interview using laptop computers. With respect to children less than 12 years of age, the questionnaire was administered to the parent or guardian. The following table summarises the themes addressed according to each age group.

### Themes addressed in the 2008 RHS questionnaires

Themes	Children	Youth	Adults
	0 – 11 years	12 – 17 years	18 years and up
Vaccination	√		
Child care services	√		√
Demographic characteristics	√	√	√
Household characteristics	√	√	√
Education	√	√	√
Language and culture	√	√	√
Chronic diseases	√	√	√
Injuries	√	√	√
Dental care	√	√	√
Diabetes	√	√	√
Physical activity	√	√	√
Nutrition and traditional foods	√	√	√
Indian residential schools	√	√	√
Mental health		√	√
Community well-being		√	√
Smoking		√	√
Alcohol and drugs		√	√
Sexual health		√	√
Access to health care		√	√
Traditional medicine		√	√
Preventive health care			√
Housing			√
Natural caregivers			√
Depression			√
Migration			√
Employment and income			√
Gambling			√
Food security			√
Home care and limitations			√
Violence			√
State of health index			√

A total of 2 691 individual interviews were carried out (87.3% of the sampling that was initially anticipated).

0-11 years: 727 respondents (94.4% of the sampling initially anticipated).

12-17 years: 600 respondents (77.9% of the sampling initially anticipated).

18 years and up: 1 364 respondents (88.6% of the sampling initially anticipated).

### *Data collection period*

The data collection unfolded from September 2008 to February 2010 among the 21 selected communities in the Quebec region.

### *Sampling*

The RHS was carried out using a two-stage stratified sampling.

**First stage:** Classification of the communities from each nation according to their sizes among one of the following strata: small (between 75 and 299 residents); medium (between 300 and 1499 residents); large (1500 residents and up). The communities required at least 75 residents in order to be eligible. A random selection of the communities was then performed among each of the strata. With the goal of increasing statistical power, all of the large communities were invited to participate in the RHS. In the event that a stratum was represented by a single community of a given nation, it was automatically invited to participate in the survey.

**Second stage:** Breakdown of the populations of the selected communities according to eight strata established according to age and gender:

Stratum 1: 0-11 years/male;

Stratum 2: 0-11 years/female;

Stratum 3: 12-17 years/male;

Stratum 4: 12-17 years/female;

Stratum 5: 18-54 years/male;

Stratum 6: 18-54 years/female;

Stratum 7: 55 years +/male;

Stratum 8: 55 years +/female.

The individuals in each of the strata were randomly selected. This selection process was carried out using the band lists of each of the participating communities.

The number of respondents in the sampling was sufficient to allow for verifying the statistical significance of the results observed. As can be read among the survey's chapters, for the majority of the results observed, it is possible to apply the result observed in the sampling to the entire population with a margin of error of less than 5% or, depending on the case, less than 1%.

### Communities participating in the 2008 RHS

Nation (8)	Size	Community (21)	Sampling	Population	% of the pop. interrogated
Abenaki	Medium	Odanak	50	309	16.2%
Algonquin	Large	Kitigan Zibi	122	1535	7.9%
		Lac Simon	174	1403	12.4%
	Medium	Pikogan	95	567	16.8%
		Timiskaming	86	604	14.2%
		Eagle Village	55	261	21.1%
Atikamekw	Large	Manawan	167	2122	7.9%
		Opitciwan	183	2117	8.6%
	Medium	Wemotaci	118	1307	9.0%
Hurons-Wendat	Medium	Wendake	111	1332	8.3%
Innus	Large	Betsiamites	252	2848	8.8%
		Mashteuiatsh	183	2022	9.1%
		Uashat Mak Mani-Utenam	246	3080	8.0%
	Medium	Matimekush-Lac John	87	729	11.9%
		Natashquan	128	916	14.0%
		Pakua Shipi	50	314	15.9%
		Unamen Shipu	96	1016	9.4%
	Small	Essipit	38	177	21.5%
Mi'gmaqs	Large	Listuguj	220	2000	11.0%
	Medium	Gesgapegiag	72	608	11.8%
Mohawks	Medium	Kanesatake	94	1328	7.1%
Naskapis	Medium	Kawawachikamach	64	614	10.4%
<b>Total</b>			<b>2691</b>	<b>27209</b>	<b>9.9%</b>

## *Weighting*

All of the data presented in the RHS was weighted in order to provide an estimate with respect to the total First Nations population of Quebec living in the communities.

## *Representation limits for the Mohawk Nation*

Even though the Mohawk Nation in Quebec is made up of Kahnawake, Kanesatake and part of Akwesasne, the only community that participated in the RHS is Kanesatake. Regarding the community of Akwesasne, it was excluded from the sampling plan for the Quebec region because of the fact that the majority of its residents reside on the Ontario side of the provincial border. As for the community of Kahnawake where most of the Mohawk population of Quebec resides, it opted not to participate in the RHS. For these reasons, it is impossible to produce estimates that can be applied to the entire Mohawk Nation of Quebec.

## *Geographic zone*

Some of the RHS data is presented according to geographic zone. This refers to the degree of isolation of the respondents' communities. The degree of geographic isolation is based on a zone system developed by Aboriginal Affairs and Northern Development Canada (AANDC).

Zone 1: The community is located less than 50 km from a service centre with year-round road access.

Zone 2: The community is located between 50 km and 350 km from a service centre with year-round road access.

Zone 3: The community is located over 350 km from a service centre with year-round road access.

Zone 4: The community has no year-round road access to a service centre.

Service centre: The nearest location where the community members must go in order to access service providers, banks and governmental services.





## SUMMARY

Community well-being is described as the perception of respondents of their communities' strengths and issues. Data show that community well-being seems rather low amongst First Nations. In fact, faced with various statements, respondents – mostly adults – have identified more issues than strengths for their communities. In addition, very few respondents have noticed progress within their communities over the year before the survey, especially with respect to street gangs and addictions.

However, many respondents said that they participate in their communities' cultural and traditional activities. Traditional culture might be an interesting way to promote community well-being.

## HIGHLIGHTS

### *Youths (age 12-17)*

- Fifty eight percent (58.2%) of youths see family values as their communities' main strength, followed by traditional activities (48.5%) and the use of traditional language (40.6%).
- For youths, a strong economy (10.1%), strong leadership (14.5%) and low rates of suicide, crime and drug abuse (13.1%) are fields that are the least seen as community strengths.
- Eighty two percent (82.1%) of youths believe that alcoholism and drug abuse are their communities' main challenge.
- Seventy seven percent (76.6%) of youths believe that alcoholism and drug abuse have not improved or have deteriorated over the twelve months before the survey.
- Seventy three percent (73.4%) of youths participate always or occasionally in their communities' cultural or traditional activities.



## *Adults (age 18 and up)*

- Fifty eight percent (58.1%) of adults see family values as their communities' main strength, followed by traditional activities (35.5%) and the use of traditional language (34.6%).
- Only 9.9% of adults consider a strong economy in their community as strength, 12.9% say the same about a low rate of suicide, crime and drug abuse, and 14.4% for a strong leadership. These three fields are therefore the least often seen as strengths.
- Eighty three percent (83.4%) of adults consider alcoholism and drug abuse as the main challenge faced by their communities, followed by limited job opportunities (53.8%) and housing (53.6%).
- Eighty five percent (85.4%) of adults consider that street gangs is the field which has the least improved or has deteriorated the most over the year before the survey, followed by insufficient financing (83.4%) and alcoholism and drug abuse (79.6%).
- Sixty eight percent (68.3%) of adults always or occasionally participate in their communities' cultural or traditional activities .

## *Elders (age 65 and up)*

- Fifty five percent (54.8%) of elders consider family values as their communities' main strength, and 53.2% believe that the latter is the traditional activities and ceremonies.
- Elders (19.7%) represent the age group with the highest proportion of people who consider that their communities' strong leadership as a strength.
- Eighty two percent (81.6%) of elders see alcoholism and drug abuse as their communities' main challenge.
- Twenty six percent (25.8%) of elders see the loss of culture as their communities' main problem.
- Elders represent the age group the least likely to participate in traditional and cultural activities; 61.3% say that they participate always or often, while 38.7% participate either rarely or never.

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## INTRODUCTION

Community well-being can be associated with community strengthening, organizational skill development and self-empowerment (Bartle, 2007). It can also be related to the quality of life or sense of safety, or be measured with the level of social issues in a given community. To have an approximate picture of a community's well-being, the following indicators can be used: the rate of reports to the Director of Youth Protection (DYP), the number of students having learning or behavioural issues, and the number of crimes against property (Boisvert, 2007).

To compare Inuit and First Nation communities' well-being with that of other Canadian communities, Aboriginal Affairs and Northern Development Canada (AANDC) uses four components: 1- education; 2- active population; 3- income and 4- housing (AANDC, 2010). However, AANDC advises that those components are not a comprehensive list of all of the aspects of community well-being. According to aboriginal literature, community well-being is more associated to the path followed after traumatic historic events and community healing (AHF, 2006).

The *Quebec First Nations Health and Social Services Blueprint, 2007-2017. Closing the gaps... Accelerating change* targets two main strategic objectives. The first one is: "progressively eliminate the disparities between First Nations populations and other Canadians in the areas of health and collective well-being" (FNQLHSSC, 2007: 8). The following is also mentioned:

*"Improvements to the health and quality of life of First Nations individuals and communities is [...] multidimensional, and cannot be made without comprehensive, concerted and consistent action in the various determinants involved"*  
(*Ibid.* : 55).

Such survey data help document the changes within the community and add to the government data, such as the AANDC's Community Well-Being (CWB) index for First Nations and Inuit communities.

In fact, this survey does not rely on a specific community well-being definition, but rather shows the perception of respondents for a predetermined list of strengths and challenges. They concern many different fields, such as health, housing, environment and culture. Change is also measured with observations by the respondents over the year before the survey about a series of statements similar to the ones found in the strengths and challenges section. Lastly, let's mention that this chapter only compares youth and adults, as questions related to community well-being are not part of the children's questionnaire.



# 1. STRENGTHS, CHALLENGES AND CHANGE OBSERVED WITHIN THE COMMUNITY

The first section shows the youths and adults' point of view of what they consider as their communities' strengths and challenges. In addition, respondents were asked about the progress or changes observed within their communities over the twelve months before the survey. These results are shown based on various socioeconomic criteria.

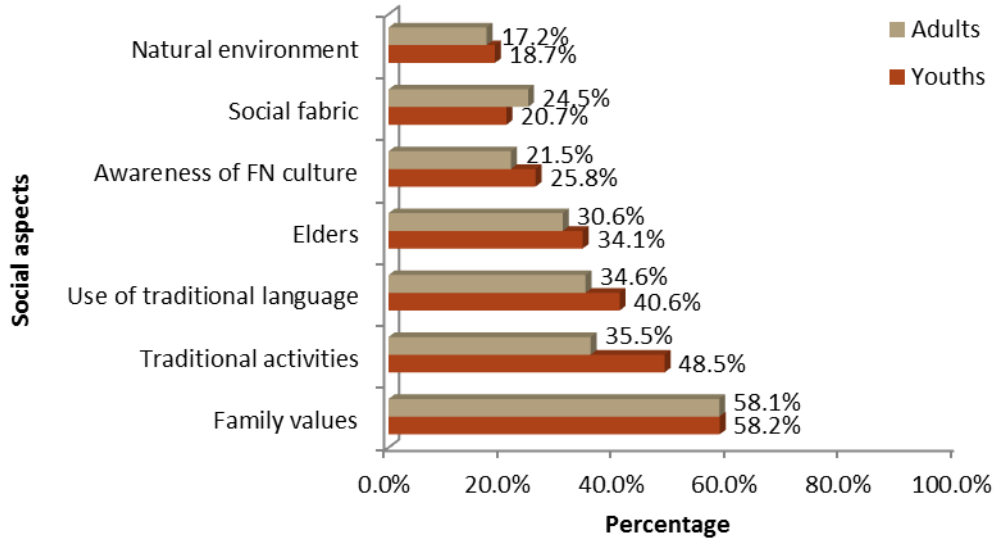
## 1.1 Strengths

The concept of *strength* refers to what the respondents see as an asset for their communities, something that increases community well-being and that brings positive change. Strengths are divided into three categories: 1- social; 2- political, economic, health and education; 3- low rate of suicide, crime and drug abuse.

### 1.1.1 Strengths pertaining to social aspects

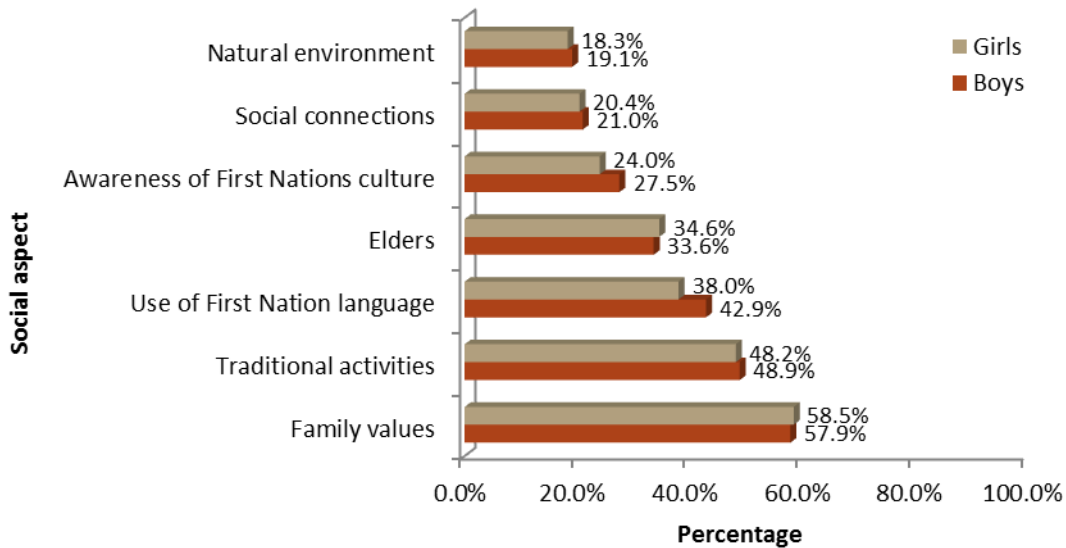
Adults and youths gave similar answers to many statements, with respect to what they see as their communities' strengths. More specifically, the majority says that family values are their communities' main strength (Figure 1).

Figure 1: Proportion of youths and adults who believe that statements about social aspects are part of their communities' strengths



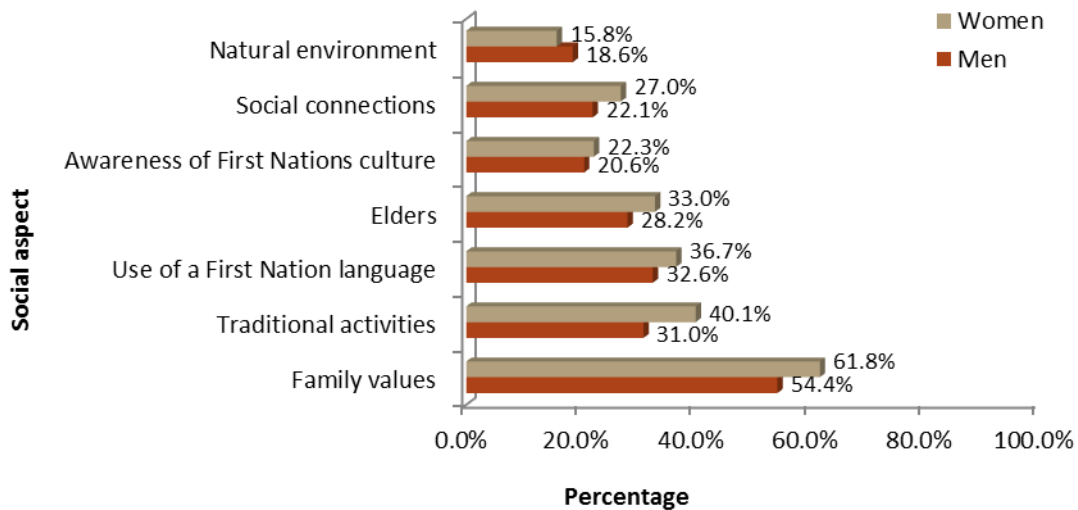
Looking at the data based on gender, one can see that the as many girls (58.5%) than boys (57.9%) see family values as their communities' main strength. They are followed by traditional activities and the use of traditional language (Figure 2).

Figure 2: Proportion of boys and girls who believe that the statements about social aspects are part of their communities' strengths



Amongst adults, more women (61.8%) than men (54.4%) see family values as their communities' main strength. In fact, for all of the statements about social aspects, more women believe that it is a strength, except for the natural environment, when more men (18.6%) than women (15.8%) agree that it is one of their communities' strengths (Fig. 3).

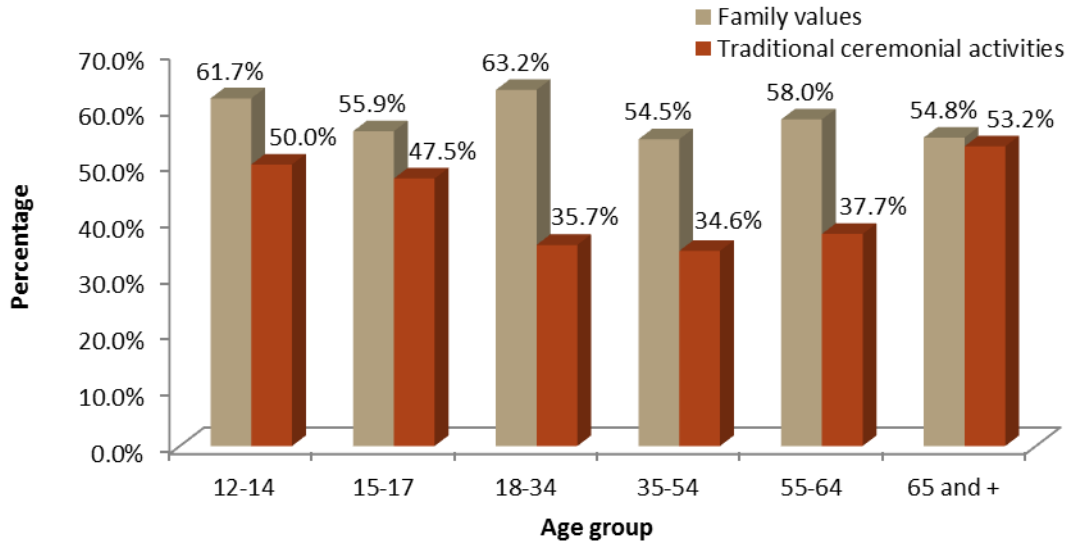
**Figure 3: Proportion of men and women who believe that the statements about social aspects are part of their communities' strengths**



Looking at age groups, one can notice that adults aged 18-34 (63.2%) and youth aged 12-14 (61.7%) are more inclined than any other age group to qualify family values as their communities' main strength (Figure 4). The difference between age groups for this variable is statistically significant ( $p = 0.0358$ ).



**Figure 4: Proportion of respondents who agree that family values and traditional activities are their communities' main strength, by age group**



As far as traditional activities and ceremonies go, there is a major difference between age groups (Figure 4). Elders (age 65 and up) and youths (age 12-14) are the ones who deem traditional activities as a community strength the most, while adults aged 35-54 are the least likely to have such opinion. The difference between age groups for this variable is statistically significant ( $p = 0.0014$ ).

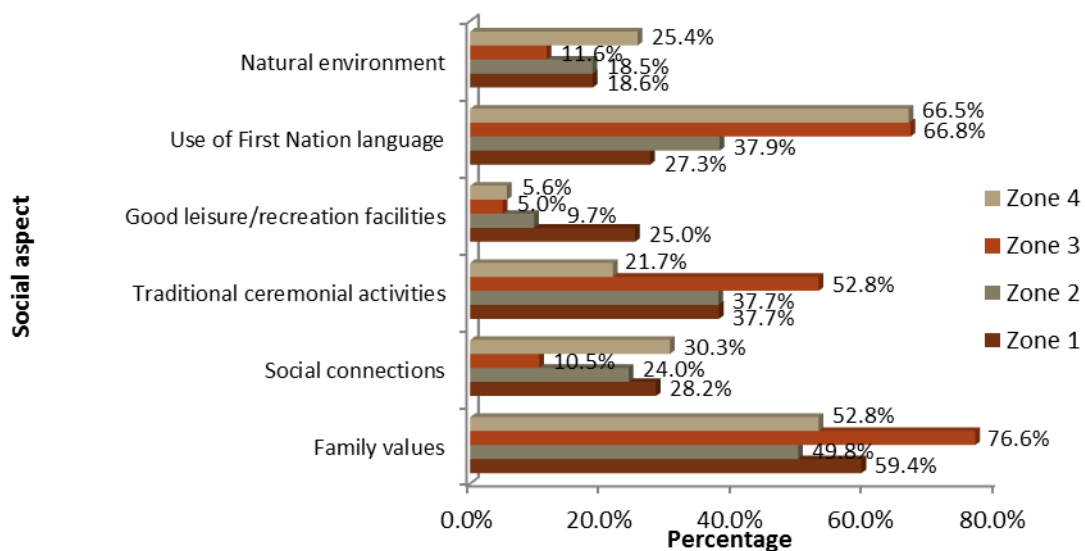
An analysis based on the respondents' education shows that 54.7% of youths with primary school education (complete or incomplete) agree that family values are their communities' main strength, while that number reaches 59.5% of youths with high-school education (incomplete, high-school diploma [DES] or professional diploma [DEP]). That difference is not statistically significant. Adults with completed university education (61.2%) were most likely to say that family values are one of their communities' strengths, followed by adult with college education (59.3%) and those with high-school education (incomplete, DES and DEP) (57.3%).

In addition, adults with a household income between \$40,000 and \$69,999 (66.2%) are the most likely to say that family values are their communities' main strength, while those with an income of \$70,000 or more (50.5%) are the least likely to say the same thing. Adults with an income between \$40,000 and \$69,999 (43.3%) are the most likely to say that traditional activities are one of their communities' main strengths, followed by those with an income between \$20,000 and \$39,999 (40.1%), those earning \$70,000 or more (34.6%) and those earning less than \$20,000 (33.7%).

Finally, according to Figure 5, adults' opinions with respects to their communities' strengths vary greatly based on geographical zone inhabited. For instance, 76.6% of adults living in geographic zone 3 (semi-isolated) argue that family values are one of

their communities' main strength, while 49.8% of adults living in a zone 2 (rural) have the same opinion. The difference between inhabited zones for this variable is statistically significant ( $p < 0.0001$ ). The same goes for each statement about social aspects: the number of adults who believe that social connections is one of their communities' strengths varies significantly based on geography ( $p = 0.0002$ ); those who believe that traditional ceremonial activities are a strength varies just as significantly based on the geographical zone ( $p < 0.0001$ ); the same applies to good leisure/recreation infrastructures ( $p < 0.0001$ ); the use of a First Nation language ( $p < 0.0001$ ); and the natural environment ( $p = 0.0475$ ).

**Figure 5: Proportion of adults who believe that the following statements are part of their communities' strengths, based on geographic zone**



### 1.1.2 Strengths pertaining to politics, economy, health and education

As far as statements on politics, economy, health or education, a small proportion of youths and adults believe that these are part of their communities' strengths (Figure 6). However, 30.3% of adults consider community programs as a strength.

**Figure 6: Proportion of youths and adults who believe that statements about politics, economy, health or education are part of their communities' strengths**



Still about politics, economy, health or education, 23.6% of teenage girls and 22.8% of teenage boys consider health and community programs as strengths. They are followed by leisure and recreation facilities for boys (22.5%) and education and training opportunities for girls (21.4%). A small proportion of boys and girls consider economy and leadership as part of their communities' strengths (Figure 7).

**Figure 7: Proportion of boys and girls who believe that statements about politics, economy, health or education are part of their communities' strengths**



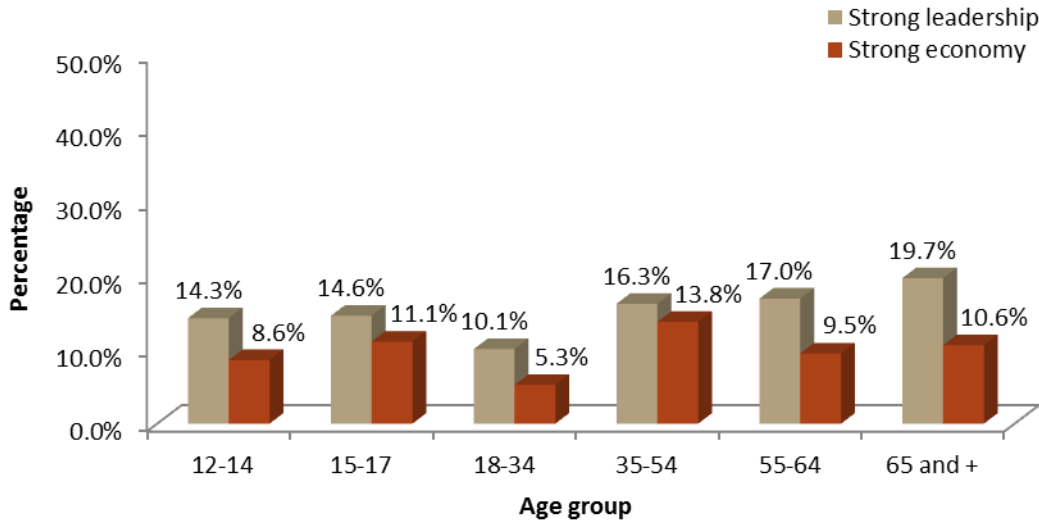
With adults, 26.0% of men and 34.7% of women believe that health and community programs are part of their communities' strengths, which is the highest proportion. In addition, 25.0% of women and 19.6% of men see education and training options as the second main strength amongst these fields. Lastly, a small proportion of men and women see economy and leadership as one of their communities' strengths (Figure 8).

**Figure 8: Proportion of men and women who believe that statements about politics, economy, health or education are part of their communities' strengths**



Of all the age groups, adults aged 35-54 have the highest proportion of individuals who believe that economy is one of their communities' strengths, while adults aged 18-34 (5.3%) are the ones who believe the least in that statement. Amongst those who consider leadership as a strength, the elders (19.7%) have the highest proportion, followed by adults aged 55-64 (17.0%), 35-54 (16.3%) and 18-34 (10.1%). Youths show little difference in that respect, with 14.3% for youths aged 12-14 and 14.6% for those aged 15-17 (Figure 9).

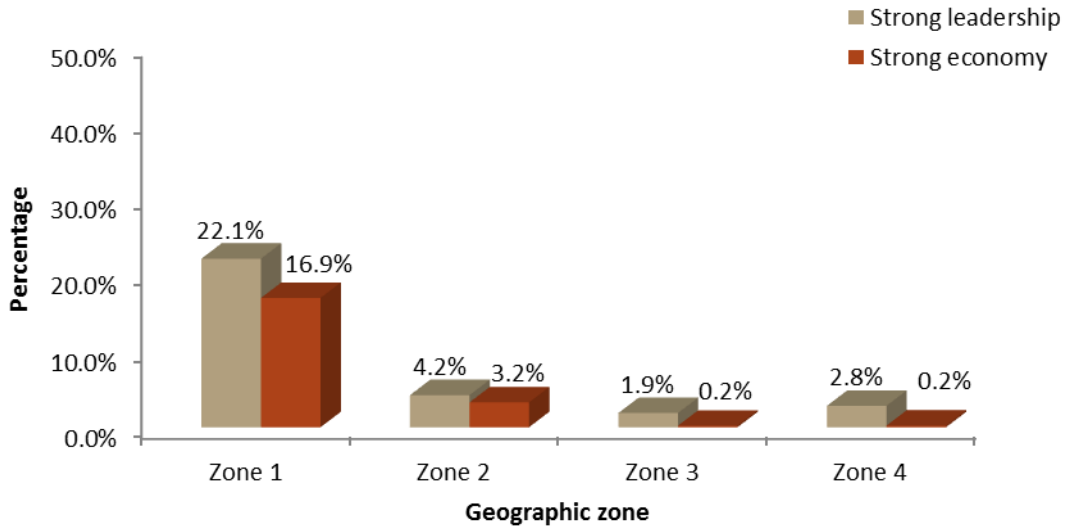
Figure 9: Proportion of respondents who believe that a strong leadership and strong economy are part of their communities' strengths, based on age group



Looking at the answers from adults respondents based on their income, one can notice that 47.3% of those with an income of \$70,000 or more believe that health and community programs are a strength. In comparison, 24.9% of respondents with an income under \$20,000 share that opinion. That difference is not statistically significant.

It is also interesting to see that, as far as statements about politics and economy go, the geographic zone has a considerable impact on the opinion of adults as to whether or not they are one of their communities' strengths. As shown in Figure 10, adults living near an urban centre consider leadership and economy as part of their communities' strengths, whereas adults living elsewhere are much less likely to do so. The difference for this variable based on geographical zones is statistically significant ( $p < 0.0001$ ).

Figure 10: Proportion of adults who believe that a strong leadership and strong economy are part of their communities' strengths, based on geographical zones

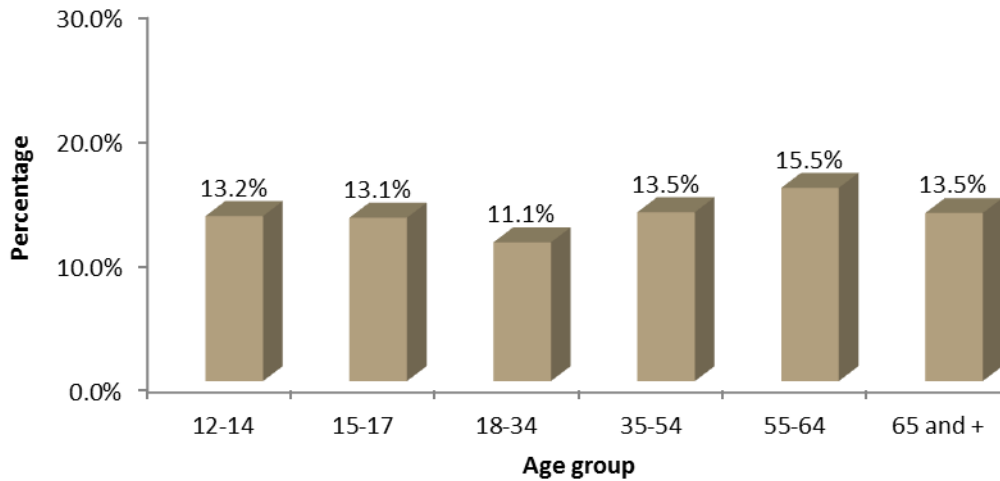


### 1.1.3 Low rate of suicide, crime and drug abuse as a community's strength

As far as the low rate of suicide, crime and drug abuse go, 13.1% of youths and 12.9% of adults see it as part of their communities' strengths, compared to 86.9% of youths and 87.1% of adults who don't.

Looking at this variable based on age groups, one can see that adults aged 55-65 (15.5%) are those who believe, with the highest proportion, that a low rate of suicide, crime and drug abuse is part of their communities' strengths, while young adults aged 18-34 (11.1%) show the lowest proportion for that statement (Figure 11).

**Figure 11: Proportion of respondents who believe that low rates of suicide, crime and drug abuse are part of their communities' strengths, based on age group**



In addition, youths with primary school education (9.6%) are less likely to consider than high-school trained youths (14.1%) that a low rate of suicide, crime and drug abuse is part of their communities' strengths. The difference is not statistically significant ( $p = 0.4449$ ).

With adults, considering the low rate of suicide as part of a community's strengths also varies based on the level of schooling completed. Hence, 19.0% of respondents with completed university education consider the low rate of suicide, crime and drug abuse as part of their communities' strengths, compared to 11.8% for adults with high-school education (complete or incomplete). The difference for this variable based on the level of schooling completed in adults is not statistically significant ( $p = 0.0938$ ).

## 1.2 Challenges

For a vast majority of youths (82.1%), alcoholism and drug abuse are the biggest challenge faced by their communities. It is worth mentioning that youths (38.4%) are more likely than adults (26.0%) to see the loss of culture as a major challenged faced by their communities (Tableau 1).

**Table 1: Proportion of youths and adults who see the following fields as challenges faced by their communities**

Field	Youths		Adults	
	N	%	N	%
Education and training opportunities	814	22.3	6,591	34.7
Alcoholism and drug abuse	2,998	82.1	15,998	84.3
Housing	1,074	29.4	10,181	53.6
Culture	1,404	38.4	4,931	26.0
Environment and natural resources	3,653	25.1	4,579	24.1
Health	3,653	23.7	5,891	31.0
Financing	3,653	26.1	7,523	39.6
Decision-making autonomy	3,653	20.1	4,746	25.0
Street gangs	3,653	22.9	3,179	16.7
Limited job opportunities	3,653	29.4	10,221	53.8

For the vast majority of adults (84.3%), alcoholism and drug abuse are also the main challenge faced by their communities, followed by limited job opportunities (53.8%) and financing (39.6%) (Table 1).

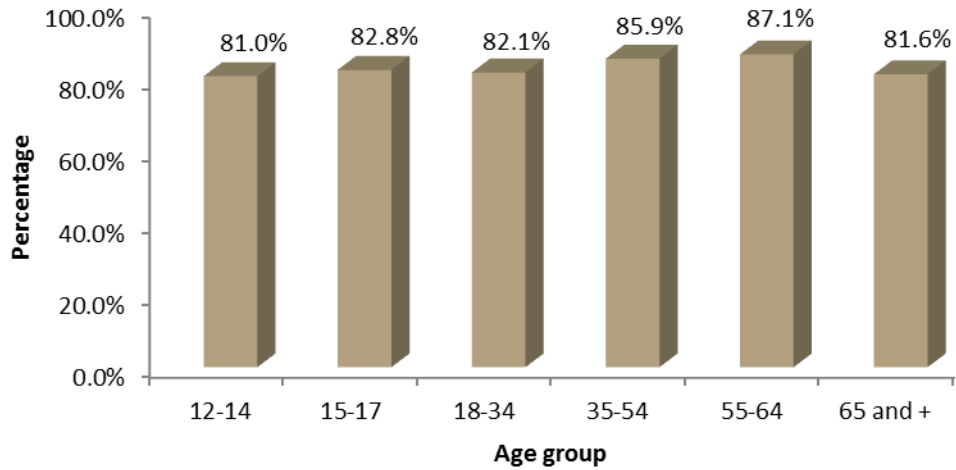
On the subject of addictions (alcohol and drugs), girls (86.4%) and women (87.7%) are more likely than boys (77.7%) and men (80.9%) to see them as their communities' main challenge. The difference between gender for this variable is statistically significant for youths ( $p = 0.0035$ ) and adults ( $p = 0.0006$ ).

As far as the limited job opportunities go, men (51.5%) are slightly more likely than women (48.5%) to see it as one of the main problems. For housing, more women (54.4%) see it as a major challenge compared to men (45.6%). Among youths, girls (40.7%) are more likely than boys (36.2%) to see the loss of culture as one of the main challenges faced by their communities.

On the subject of alcoholism and drug abuse, all age groups show similar proportions (Figure 12). However, adults aged 55-64 (87.1%) are the most likely to see them as their communities' main challenge.



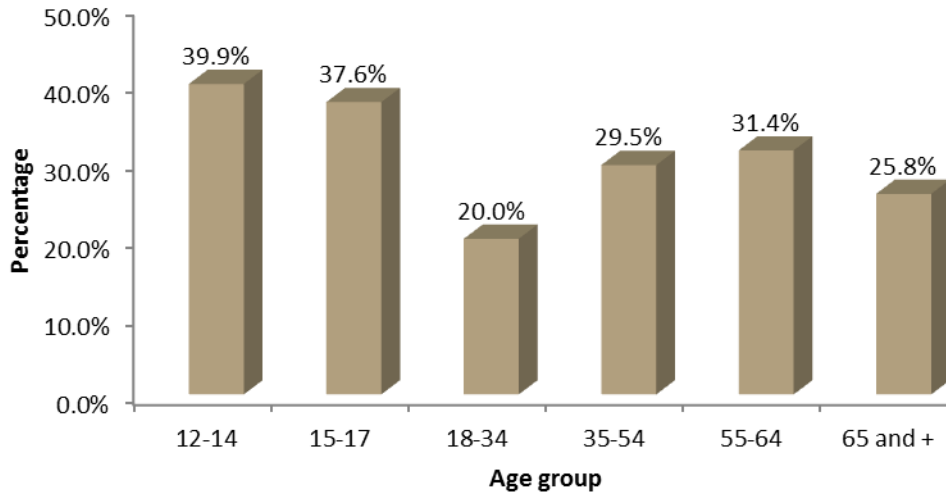
**Figure 12: Proportion of respondents who believe that alcoholism and drug abuse are their communities' main challenges, based on age group**



Looking at the data based on the education level, the proportion of youths who consider alcoholism and drug abuse as one of their communities' major challenge is slightly higher (83.4%) with those with high-school education (complete, incomplete and DEP) than it is for youths with primary school education (complete or incomplete) (80.4%). With adults, those with a DEC (89.0%) are the most likely to believe that alcoholism and drug abuse are part of their communities' main challenges, while adults with high-school education (complete and incomplete) (83.0%) are the least likely to consider these challenges as severe within their communities. However, the difference is not statistically significant.

As for culture, youths aged 12-14 are the ones who most often believe that the losses are part of their communities' main challenges. Among them, 39.9% believe that the loss of traditional culture is one of their communities' main challenges, while 25.8% of elders (age 65 and up) and 20.0% of adults (age 18-34) share that opinion. The difference between age group for that variable is statistically significant ( $p < 0.0001$ ).

Figure 13: Proportion of respondents who believe that the loss of culture is one of their communities' main challenges, based on age group



### 1.3 Measuring change

Globally, data show that very few respondents, adults or youths, have seen major or minor change within their communities over the twelve months before the survey. For instance, health and culture are the two fields most often associated with progress by adults, but the proportion is only 36.0%. According to youths, the two fields that have improved the most are health and housing, with a proportion of 44.0% (Table 2).

**Table 2: Proportion of youths and adults who believe that the following fields have significantly or somewhat improved over the twelve months before the survey**


Field	Youths		Adults	
	N	%	N	%
Education/training options	237	32.2	1,825	29.4
Alcoholism and drug abuse	648	23.4	3,113	20.4
Housing	423	44.0	2,931	29.7
Culture	466	37.3	1,668	35.1
Limited job opportunities	340	35.9	2,261	22.9
Environment destruction	223	25.8	1,063	24.3
Health	327	44.0	2,017	35.8
Insufficient financing	236	28.4	1,203	16.6
Lack of autonomy	185	27.9	1,251	28.9
Street gangs	185	24.6	443	14.6

In short, the proportion of respondents who believe that the above fields have not improved or have deteriorated is higher than the proportion of those who believe that they have significantly or somewhat improved<sup>1</sup> (Table 3).

**Table 3: Proportion of youths and adults who believe that the following fields have not improved or have deteriorated over the past twelve months before the survey**

Field	Youths		Adults	
	N	%	N	%
Education/training opportunities	498	67.8	4,387	70.6
Alcoholism and drug abuse	2 118	76.6	12,182	79.6
Housing	538	56.0	6,922	70.3
Culture	783	62.7	3,089	64.9
Limited job opportunities	608	64.1	7,611	77.1
Environment destruction	643	74.2	3,304	75.7
Health	416	56.0	3,613	64.2
Insufficient financing	594	71.6	6,049	83.4
Lack of autonomy	477	72.1	3,073	71.1
Street gangs	567	75.4	2,593	85.4

<sup>1</sup> There is missing data for these results, and statistical testing may not be appropriate. These results must be interpreted with caution.



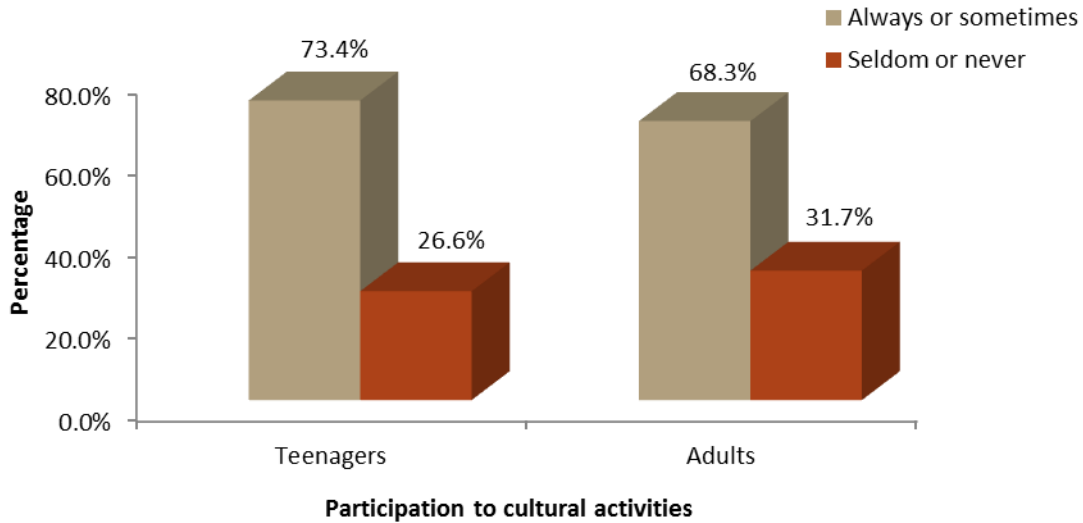
Amongst youths who believe that the above fields have not improved or have deteriorated, a big proportion believes that alcoholism and drug abuse is the field that has the least improved. In fact, 23.4% of youths believe that this field has improved over the twelve months before the survey (Table 2), compared to 76.6% of teenagers who think it has not improved or has deteriorated (Table 3). In second position, youths see street gangs as the field which has the least improved, followed by environment destruction.

Adults are more likely to say that street gangs is the field which has the least improved: 14.6% of adults believe that this field has somewhat improved, while 85.4% believe that it has not improved or has deteriorated, followed by insufficient financing and alcoholism and drug abuse. In comparison, let's mention that, in 2002, 33.6% of adults believed that the alcoholism and drug abuse issue had somewhat improved over the twelve months before the survey, while 66.4% believed that this field had not improved or had deteriorated. Therefore, adults at that time believed that this field had the least improved. The difference in the comparison between survey years (2002/2008) for this variable is statistically significant ( $p < 0.0001$ ).

## 2. PARTICIPATION TO THE COMMUNITY'S CULTURAL EVENTS

This section is about youths and adults participation to their communities' cultural activities as an indicator of community well-being. Based on the data collected, the majority of respondents say they always or sometimes participate in their communities' cultural activities. In fact, the proportion of youths (73.4%) who participate in their communities' cultural activities is higher than the adults' (68.3%) (Figure 14).

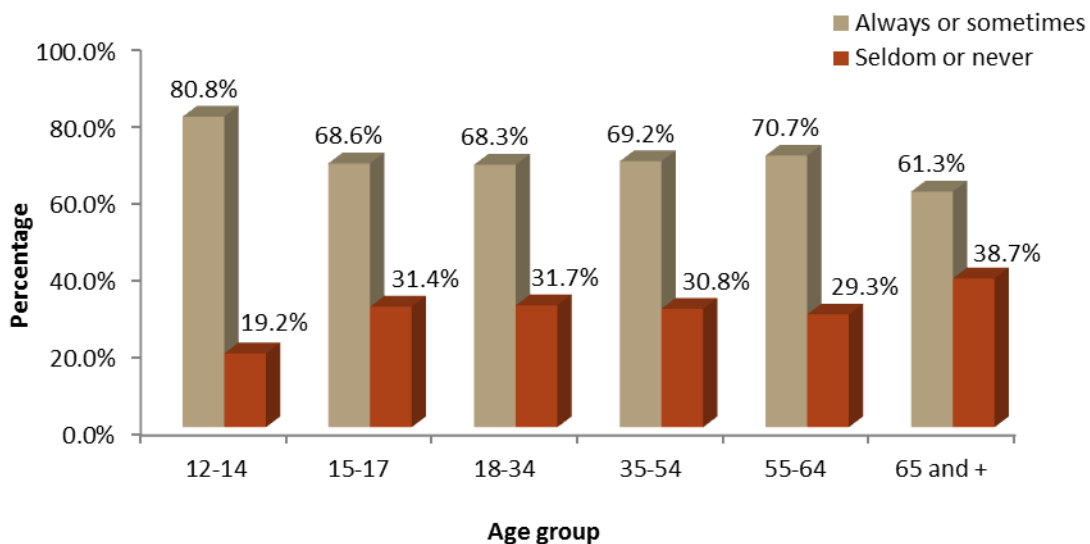
**Figure 14: Proportion of youths and adults who participate in their communities' cultural activities**




Looking at the data based on gender, teenage boys (74.5%) are slightly more likely than teenage girls (72.1%) to always or sometimes participate in their communities' activities. With adults, there is no difference between men (68.2%) and women (68.5%).

Youths aged 12-14 (80.8%) are the ones who are the most likely to always or sometimes participate in their communities' cultural activities, while the elders aged 65 and up (61.3%) are the least likely to do so (Figure 15).

**Figure 15: Proportion of respondents who say they participate in their communities' cultural or traditional activities, by age group**





Lastly, 81.9% of adults with university education say they participate in their communities' cultural activities, compared to 66.7% of adults with college education (incomplete, DEC or DEP completed or not). In addition, 78.8% of adults with an income of \$70,000 or more say they sometimes or always participate in their communities' cultural activities. In comparison, 64.8% of adults with a household income of less than \$20,000 say the same. The difference between incomes is statistically significant for this variable ( $p = 0.0032$ ).

## DISCUSSION AND INTERPRETATION

Data show that, except for family values, less than 50.0% of respondents, youths or adults, consider that the statements they were presented with are part of their communities' strengths. In particular, a strong economy, strong leadership and a low rate of suicide, crime and drug abuse are considered as strengths by less than 15,0% of respondents. Conversely, three statements were identified by more than 50.0% of adults as major challenges for their communities: alcoholism and drug abuse, limited job opportunities and housing. Consequently, in the choices they had, respondents identified more challenges than strengths for their communities, especially adults.

A majority of youths and adults have noticed no improvement for the various fields that were presented to them. In addition to alcoholism and drug abuse, considered as the field with the least improvement by youths and adults in 2002, the 2008 survey shows that the majority of adults consider street gangs as the field with the least improvement.

In summary, there is a trend that shows that community well-being with Quebec First Nations seems to decline. The various actions implemented over the past decades aimed at stimulating the settling process and modernisation of First Nations, combined with cultural and identity losses, are in close relation to the challenge which is reaching community well-being nowadays. Changes will have to be implemented smoothly over several generations. On that aspect, First Nations play the leading role. Let's not forget that the data from this survey show that the elders are the ones who believe the most in traditional activities and ceremonies as part of their communities' strengths, while also being the ones who are the least likely to participate in such activities. It would be interesting to continue researching that topic and try to explain such results. At this time, let's wish that those results will foster reflection on actions that help community cohesion in Quebec First Nations communities.





## CONCLUSION

The results in this chapter undoubtedly show that First Nations communities' well-being is not improving. AANDC also mentions that: "Since 2001, the CWB has known little to no progress within First Nations and Inuit communities" (AANDC, 2010) [free translation].

This is a dramatic finding, but the literature shows that there are many ways to improve community well-being, and one of them is to develop initiatives based on local needs and in agreement with First Nations autonomy objectives. In Quebec, an increasing number of programs are developed for First Nations using that method, and regional First Nations agencies, such as the FNQLHSSC, tend to focus their activities accordingly. The *Quebec First Nations Health and Social Services Blueprint, 2007-2017. Closing the gaps... Accelerating change* relies on a constructive integration approach with all parties involved (communities, federal and provincial governments) and proposes "structural change based on an innovative approach that builds on the principles and values of the First Nations' historical, political, cultural heritage and on their ethnic identity" (FNQLHSSC, 2007 : 9).

A clear, positive aspect emerges from the results shown in this chapter, and future actions could be based on it: the majority of youths and adults participate in their communities' cultural and traditional activities. Youths seem particularly interested in those activities. The traditional culture and younger generation therefore seem like interesting angles to promote community well-being.



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