

15 QUEBEC FIRST NATIONS: PREVENTIVE HEALTH CARE

Chapter 15 of the Quebec First Nations Regional Health Survey (RHS, 2008) portrays the prevention and screening measures most frequently used among First Nations youth and adults of Quebec by establishing the proportion of individuals who received various routine tests and prevention measures during the 12 months preceding the survey.

This is a summary of the information included in Chapter 15. Therefore, it does not include all the knowledge covered by the survey, and may be open to different interpretations. To have a complete understanding of the results, the reader is invited to consult the entire chapter.

Participation in medical tests and exams among youths and adults

Considering that First Nations are more likely to be diagnosed with chronic illnesses such as diabetes, heart disease or cancer (Garner et al., 2010), preventive exams are particularly important to quickly detect and treat these problems. According to data collected in 1997 by the First Nations Centre (2004), the rate of diabetes among First Nations was 3.6 and 5.3 times higher respectively than in non-Aboriginal men and women.

The proportion of people (youths and adults) who had medical examinations of a preventive nature in the 12 months preceding the survey varies between 41.8% and 54.4% depending on the exam. Compared with the results from the 2002 First Nations Regional Health Survey (RHS, 2002), the 2008 results show a general increase in this type of preventive measures. However, for the same period, the proportion of individuals who took a vision exam decreased proportionally by 29.9% (59.6% vs. 41.8%), while that of individuals who took a blood sugar test decreased proportionally by 1.7% (46.6% vs. 45.8%).

As shown in Table 1, the proportion of individuals who had medical examinations during the year preceding the survey increases significantly according to age among adults, for all the different exams (cholesterol, vision, blood pressure, blood sugar and complete physical examinations). This trend is consistent with what was observed under RHS 2002.

Table 1: Percentage of individuals who took medical exams or tests over the 12 months before the survey, based on age group, First Nations of Quebec youth and adult population (N=22,729)

Medical tests and exams	Age group					
	12-14	15-17	18-34	35-54	55-64	65 and up
	%	%	%	%	%	%
Cholesterol	5.8	8.0	24.1	57.6	73.1	77.1
Vision exam	32.1	24.4	34.4	45.6	58.8	61.2
Blood pressure test	24.4	26.3	38.5	66.9	78.6	88.6
Blood sugar test	13.5	12.0	31.1	58.1	72.7	81.4
Complete physical examination	23.1	17.5	34.6	53.1	67.5	74.0

Overall, the proportion of women who received preventive health care is higher than that of men, but is not statistically significant for adults. Among youth (12-17 years), girls took significantly more blood pressure and blood sugar tests. Finally, the proportion of men who underwent medical exams seems to have increased between 2002 and 2008 while the trend is downward for women.

Compared with the rest of the Canadian population, First Nations of Quebec aged over 12 years who reported having had preventive health examinations are much less numerous. In fact, 42.3% of First Nations reported having taken a cholesterol test, 45.8% a blood glucose test and 45.1% had received a complete physical exam. According to the Canadian Institute for Health Information (CIHI, 2009), 94.0% of Canadians reported having had their blood pressure tested, 82.0% reported having taken a cholesterol test and 80.0% reported having a blood glucose test.

As shown in Table 2, the proportion of people who had examinations increases with household income, for all tests, except for people whose household income exceeds \$70,000 per year. There was also an increase in the proportion of people who underwent tests or examinations based on their level of education, for all tests, except for university graduates. They are less likely to adopt preventive measures than people with college degrees.

Table 2: Proportion of adults aged 18 and up who took medical tests or exams during the 12 months before the survey, based on household income, First Nations of Quebec adult population (N=4,948)

Medical tests and exams	Household income			
	<\$20,000	\$20,000 - \$39,999	\$40,000 - \$69,999	>\$70,000
	%	%	%	%
Cholesterol	43.1	53.6	63.7	64.8
Vision exam	39.8	49.1	50.1	52.3
Blood pressure test	56.9	64.6	73.1	72.2
Blood sugar test	47.0	57.2	62.6	63.9
Complete physical examination	47.0	53.3	60.8	54.2

¹ Geographic zone

Degree of geographic isolation is based on a zone system developed by Indigenous and Northern Affairs Canada (INAC).

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.

The communities of zones 1 and 4 recorded the highest proportions of persons who took medical tests and had preventive medical examinations. Moreover, the proportions of individuals who receive routine checkups decreased significantly from zone 1 to zone 3. Even though living in urban areas usually means increased access to health services, the results obtained in regard to remote areas raise questions. The hypotheses offered to explain these results are 1) increased use of services by communities when they are not continuously available; 2) the fact that services are developed locally and are therefore more adapted to the needs of the population.

Consultation with a traditional healer

Less than 10% (9.7%) of those interviewed said they had consulted with a traditional healer in the last year and a similar number (9.5%) reported that their last consultation with a traditional healer happened over a year ago. Overall, 76% of those surveyed had never consulted a traditional healer.

Prevention and screening measures specific to cancer

Breast self-examinations and breast cancer screening

The results of the survey show that the proportion of women who perform a breast self-examination once per month increases among women aged 40 up to the age of 65. In regard to mammography, the proportion of First Nations women aged 40 and up who carried out this type of examination (56.9%) is less than that of the general population. Indeed, throughout the province of Quebec, the mammogram coverage for women aged 50 to 69 was 73.9% in 2009.

Cervical cancer screening

Regarding the Papanicolaou (Pap smear) test, a similar trend is observed among First Nations women and women in Quebec, depending on the age group. Indeed, the proportions of women undergoing Pap smear tests during the three years preceding the survey increases from the 15-17 age group to the 35-54 age group (target population for cervical cancer screening). The proportion of women from the Quebec population who took this test during the three years preceding the survey, however, is much higher (71.2%) than that of First Nations women from Quebec (56.6%) (INSPQ, 2006).

Vaccination against the human papilloma virus (HPV)

The results show that more than half of First Nations female youths (12 to 17) reported receiving the HPV vaccine. Among girls aged 15 to 17, 64.6% reported having received the vaccine compared to 55.5% of youths aged 12-14. However, the data does not enable the number of doses taken to be differentiated. Having received the HPV vaccine is not statistically associated with age among youths.

Prostate cancer screening for men

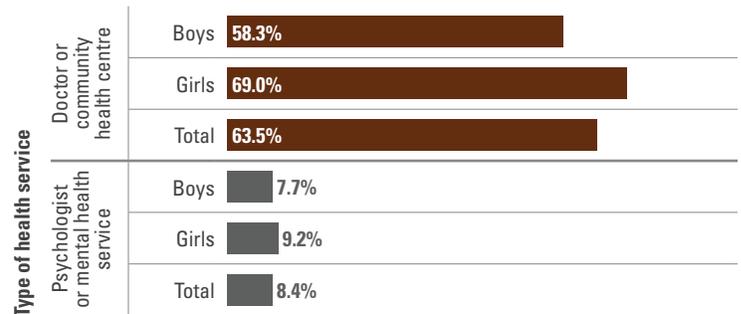
In regard to the prostate specific antigen (PSA) tests, similar trends are observed among First Nations men and men from the Quebec population. In both groups, we can observe significant increases in the number of tests according to age among men 40 and up. For First Nations men, a detection rate of 55.2% was observed among men aged 55-64 and 72.4% among men aged 65 and up. By comparison, detection rates are lower among Quebecers aged 50 and up (38.3%).²

Other prevention and screening services used among First Nations youths

In the 12 months preceding the survey, 63.5% of youths reported consulting a doctor or visiting a community health centre and 8.4% used a mental health service or consulted a psychologist. While the fact of consulting a doctor or psychologist does not significantly vary statistically based on age

among youths, gender is however associated with significant differences. Just over two-thirds of girls (69%) and half of boys (58.3%) visited a doctor during the 12 months preceding the survey. On the other hand, 9.2% of girls had used mental health services compared to 7.7% of boys (Figure 1).

Figure 1: Proportion of youths aged 12-17 who used certain health services over the 12 months before the survey, based on gender (N=3,661)

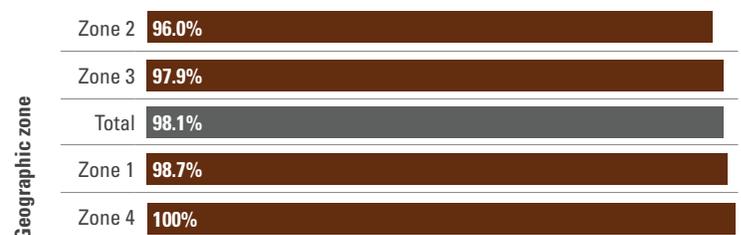


Preventive measures used among First Nations children

According to statements of the respondents, 98.0% of First Nations children in Quebec have received their routine vaccinations (Figure 2). These proportions, however, vary from 92.3% to 100% depending on the nations. Interestingly, children from zone 4 communities are more likely than those from other zones to have received routine vaccinations (100%).

Among the reasons mentioned by respondents to explain why their children had not received their routine vaccinations, forgetting is the most frequently cited (45.6%) followed by the belief that vaccines are unsafe (27.2%). Other reasons identified included cultural reasons (24.3%), the amount of required vaccines (19.4%) as well as waiting lists (6.8%).

Figure 2: Proportion of children aged 0-11 who received their routine vaccination, based on geographic isolation, First Nations of Quebec's population (N = 724)



Finally, this summary provides an overview of Chapter 15 of the Quebec First Nations Regional Health Survey. For more details on the survey results, the full chapter is available at the following link: <http://www.cssspnql.com/docs/centre-de-documentation/chapitre-15-soins-de-santé-préventifs-eng.pdf?sfvrsn=2>

² Ministère de la Santé et des Services sociaux. 2006. *Pour guider l'action, Portrait de santé du Québec et de ses régions, Les statistiques*, p. 280.

