

Our Health Counts London

The first inclusive, community-driven health survey for Indigenous peoples in London

ABILITY, PAIN, & PRESCRIPTION MEDICATION USE

A common Indigenous teaching is that every person has gifts received from the Creator that are special to each person – and as individuals and communities we need to work together to support each person to discover and nurture these gifts. From an Indigenous perspective, a person who experiences different abilities than others is not necessarily considered “disabled” in the way that they may be labeled from the rest of society. Rather, differing abilities may be perceived as part of their unique set of gifts allowing them to experience the world in unique ways that can benefit their community. Unfortunately, the lived reality for people with differing abilities in areas such as mobility, sensing, expression or cognition, include very real structural and social access barriers. For Indigenous people with different abilities these barriers are compounded by racism, discrimination, gaps in Indigenous community infrastructure and resources, jurisdictional confusion, and fear/mistrust of non-Indigenous service providers.^{1,2} Ongoing experiences of colonialism, racism and the resulting trauma are linked to high rates of physical and emotional pain and have been associated with higher rates of chronic health conditions, mental illness and poverty.³ Chronic pain is also directly associated with poor mental health outcomes such as major depression, post-traumatic stress disorder, and suicidal ideation. Chronic pain can be physically and mentally debilitating yet biomedicine has few management techniques available. Prescription medications are often used to deal with chronic pain, impairment and health-related illness although high costs and lack of prescription benefit plans can limit access or compound impacts of poverty for Indigenous peoples.⁴

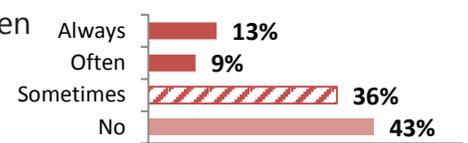
Differing Abilities and Special Gifts from Creator

40% of Indigenous adults in London said that they are limited in the kinds or amount of activity they can do at home, work or otherwise because of a physical or mental condition or health problem.

11% of Indigenous adults in London suffer from blindness or a serious visual problem that cannot be corrected. In 2006, 3.2% of Canadians 15 years of age and older reported having a sight impairment.⁵

Almost 1 in 4 Indigenous adults in London needed eyeglasses in the past year but could NOT get them.

Over 1/5 Indigenous adults often or always have difficulty learning, remembering, or concentrating.



19% of Indigenous adults aged 20 to 79 in London suffer from self-reported hearing impairment. This is over 4x higher than the rate among Canadians aged 20 to 79 years (4%).⁶

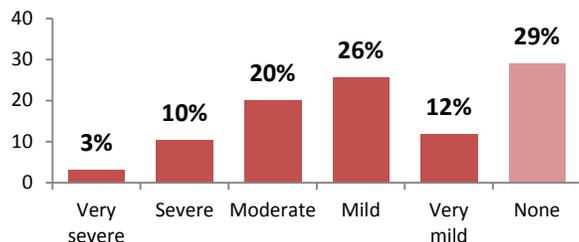
Assistive Equipment Access

7% of Indigenous adults in London need equipment to help them see, hear, communicate, eat, move around and get dressed but do not have them.

The most common limitations to accessing assistive equipment included a lack of health insurance from work that covered this equipment and lack of coverage by Non-Insured Health Benefits (NIHB), such as claim denied or not eligible due to “non-Status”.

Physical Pain

29% of Indigenous adults in London reported that they were free from pain or discomfort over the past month. This rate is over 2.5 times lower than the general Canadian population (78%).⁷



The average age of Indigenous adults in London is much younger than the average age of Canadian adults – so Indigenous adults are experiencing more pain at younger ages.

Prescription Medication

Over half (57%)

of Indigenous adults are currently prescribed medication(s) by a health care provider.

84% of those who were prescribed medication(s) are currently taking the medication(s) as prescribed.

Reasons for not taking medications as prescribed:

- Don't want to/chose not to take the medication
- Afraid of the side effects
- Forget to take the medication

Definitions

Population based estimates were created using respondent driven sampling (see Project Overview and Methods Factsheet)
 Indigenous adults: persons self-identifying as Indigenous such as First Nations, Métis, Inuit, or other Nation aged 15 years and older living or using services in the City of London.

Sources

1. Durst and Bluehardt (2001); 2. Durst (2006); 3. Hirji-Khalfan (2009); 4. Nelson et al. (2016); 5. Statistics Canada (2006); 6. Feder et al. (2015); 7. Gilmour (2015); 8. Rotermann et al. (2014).

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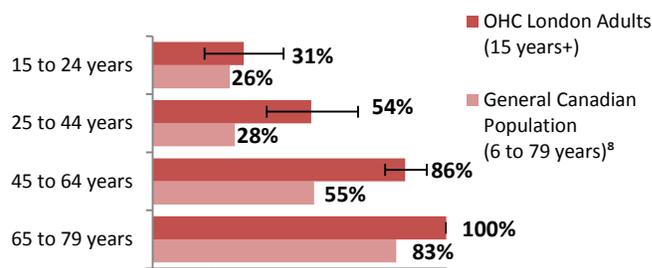
Over 75%

of those who described pain in the past month said their pain interfered with their normal work either outside or inside their home.

Those who screened positive for PTSD experienced more physical pain.

83% of Indigenous adults in London who screened positive for Post-Traumatic Stress Disorder (PTSD) reported having at least mild pain in the past month.

Prescribed medication(s) by age



1 in 4 Indigenous adults were unable to purchase a prescription medication for themselves or their family in the past year due to lack of a benefit plan and/or drug cost.

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