

4 INDIVIDUAL, FAMILY AND COMMUNITY WELLNESS

4.1 Introduction

This section describes community wellness in the study area, which refers to the physical, emotional, social and economic well-being of all components of a community, including individuals and families as a functioning whole.

Aboriginal people have long recognized the interaction and interdependence of physical, emotional, mental and social well-being. Viewing the spiritual as the centrally important component, some Aboriginal communities have formed healing circles to deal with family issues, sentencing and rehabilitation of offenders, and the debilitating problems of those who experienced various forms of abuse while attending residential schools.

In western healing and helping professions, recognizing a holistic approach to wellness has been much more recent. GNWT HSS personnel have sought to deal with intertwined physical, social and emotional health concerns using a community wellness approach for almost a decade (GNWT HSS 1995).

The present emphasis on a community wellness approach by the GNWT HSS originated from an assessment in 2000 of the challenges and problems in wellness services (GNWT HSS 2001a). The most recent evidence of the GNWT's commitment to health and well-being is found in *Health Promotion Strategy* (GNWT Bureau of Statistics 2003h), which provides a framework for increased investment in promotion and prevention activities at the territorial, regional, local and individual levels.

The influence of these interrelated concerns is seen in this section on individual, family and community wellness, which deals with wellness-conserving facilities and services, and the conditions and activities of people to which these services must respond. Information is provided on:

- health conditions
- health care facilities and services
- family concerns and community conditions
- social service facilities and services
- education and training

The most significant achievement of GNWT HSS has been the sharp reduction in new cases of tuberculosis, once a very serious health problem for northern people. With implementation of the *Action Plan to Strengthen Tuberculosis Management and Control in the Northwest Territories*, the numbers of new cases per year have been steadily reduced, from 24 in 1996 to four in 2002. Of the four in 2002, two were immigrants (Case 2003).

Currently, the most serious addiction in the Northwest Territories is alcohol, which is the most frequent source of wellness problems. According to a recent coroner's report, 40% of health costs relate to addictions or mental health problems (Penney 2003).

The effects of alcohol abuse include:

- foetal alcohol syndrome (FAS) or foetal alcohol effects (FAE)
- sexual abuse of family members
- sexually transmitted infections (STIs)

The most costly effect is the birth of FAS/FAE babies to mothers abusing alcohol. Studies have shown that hospital use is many times higher by FAS/FAE children than by other children (Chatel 2003). These children are typically unable to learn from experience and thus have severe behavioural problems that may be life long. As a result, the lifetime health and social costs are estimated to be more than \$2 million per FAS/FAE person (Carey 2003). No further discussion of FAS/FAE children is provided here because statistical data is unavailable. This is because most births in the Northwest Territories are attended by nurse-midwives rather than by physicians, and only physicians can make a FAS/FAE diagnosis. However, from the accounts of nurses and teachers who work with FAS/FAE children in school, many such children exist in the Northwest Territories.

Incidents of sexual abuse are notably under-reported, thus the available data is unreliable (National Crime Prevention Centre 2001). Alcohol abuse and mental disorders are intimately related, as childhood abuse may lead to both, and increases in one may lead to parallel increases in the other. The RCMP reported over 400 cases of sexual assault for 2000 and 2001. Northwest Territories health centres report seeing 300 to 350 people annually for assessment and counselling related to sexual abuse or assault. Sexual abuse of children is the least acknowledged of offences, in part because the abuser is often well-known to the victim and his or her family. While between 2000 and 2003, child protection workers investigated 350 cases of suspected sexual abuse of children, this number should not be seen as a complete count, since many such incidents go unreported. Sexual abuse of children may infect them with STIs, and 15 children under 12 years of age were found to have STIs between 1998 and 2003. The STI incidence among children aged 12 to 15 years more than doubled during this period, from 44 to 90 cases per year (White 2003).

The rates for STIs are very high in the Northwest Territories, and the contexts in which these infections are transmitted are often associated with alcohol consumption. In recent years, chlamydia rates in the Northwest Territories were six times as high as Canadian rates, and gonorrhoea infection rates were over 20 times the Canadian rate. Among those aged 16 to 18 years, a 63% increase occurred between 1996 and 2001 (Harrison 2002). Community-specific data is provided in the following sections.

A final health concern in the Northwest Territories is suicide, both because the incidence of suicide is so high relative to the rest of Canada, and because so many are teenage suicides. Because of the unreliability of suicide frequencies, given the small populations, this discussion is based on rates for the Northwest Territories as a whole.

The three-year average age-adjusted suicide rates, which compensate for differences in age distributions, were twice as high in the Northwest Territories as in Canada for 1999 to 2001 (Little 2002). The 1998 to 2002 suicide rate of youths aged 10 to 19 years in the Northwest Territories was four times the all-Canada rate, and the rate for those aged 20 to 29 years in the Northwest Territories was almost three times the all-Canada rate. Data on hospitalizations of females for self-inflicted injuries is relevant because of women's relatively frequent rates of attempted unsuccessful suicide. The rate of such hospitalizations in 1995 to 1999 for Northwest Territories females aged 10 to 19 years was over three times as high as the rate for all-Canada females of this age (Little 2003).

Suicide deeply affects small Aboriginal communities because community members are so interrelated, with many residents being relatives of the victim. Mental health workers provide counsel, but community recovery from a suicide is a slow process.

4.2 Baseline Conditions – Inuvialuit Settlement Region

4.2.1 Health Conditions

The community-specific data for 1999 shows that among adults aged 18 years and over, 66% of the residents in the ISR communities smoked tobacco. In 1999, all of the Inuvialuit rates were higher than the 42% rate for the Northwest Territories, in which half the population is non-Aboriginal (GNWT Bureau of Statistics 1999, 2003d). A consequence of these high frequencies of smoking among the Inuvialuit is chronic obstructive pulmonary disease (IRHSSA nursing supervisor 2002, personal communication).

In Holman, there is increased awareness of the health effects of smoking. In increasing numbers of homes, smokers avoid smoking in the house, and smoke outdoors instead. As a result, fewer children in the community are troubled with chronic throat, sinus, asthma and eye problems than previously (Holman community health representative 2002, personal communication).

Table 4-1 provides three-year averages per 1,000 population from 1994 to 2002. It shows that the incidence of physician treatments of respiratory illnesses increased between 1994 to 1996 and 1997 to 1999, except in Holman, and then decreased in all communities except Holman.

Table 4-1: Cases of Respiratory Diseases Treated by Physicians in the Inuvialuit Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 638 | 612 | 587 | 559 | 543 | 504 | 481 |
| ISR total | 254 | 277 | 276 | 261 | 229 | 201 | 201 |
| Aklavik | 301 | 352 | 334 | 309 | 253 | 223 | 232 |
| Tuktoyaktuk | 204 | 237 | 254 | 275 | 254 | 211 | 213 |
| Holman | 242 | 203 | 184 | 165 | 162 | 183 | 185 |
| Paulatuk | 266 | 283 | 281 | 215 | 170 | 159 | 143 |
| Sachs Harbour | 348 | 371 | 396 | 320 | 279 | 185 | 153 |

NOTES:
Numbers are claim counts by ICD-9 (International Classification of Diseases, Version 9) code for the particular group of conditions
Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

Table 4-2 shows that the pattern was the same for treatment rates for infectious and parasitic diseases, except for Tuktoyaktuk, where the rate increased from 1994 to 1996 through 1997 to 1999, but dropped by 2000 to 2002.

Table 4-2: Cases of Infectious and Parasitic Diseases Treated by Physicians in the Inuvialuit Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 253 | 245 | 250 | 235 | 232 | 222 | 218 |
| ISR total | 89 | 76 | 79 | 72 | 75 | 69 | 67 |
| Aklavik | 92 | 99 | 107 | 85 | 82 | 88 | 95 |
| Tuktoyaktuk | 81 | 71 | 77 | 78 | 97 | 93 | 81 |
| Holman | 109 | 64 | 48 | 48 | 40 | 14 | 29 |
| Paulatuk | 74 | 41 | 48 | 45 | 32 | 25 | 25 |
| Sachs Harbour | 101 | 93 | 105 | 89 | 80 | 66 | 53 |

NOTES:
Numbers are claim counts by ICD-9 code for the particular group of conditions
Claim frequencies for each community were divided by the population of the community, giving a figure, usually a decimal, for the number of cases per person. This was then multiplied by 1,000.
Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

Table 4-3 shows that between 2000 and 2002, the three-year average rates per 1,000 population for STIs for both sexes and all ages in all the ISR communities, except Aklavik and Sachs Harbour, were all higher than the Northwest Territories rate. The rates in Tuktoyaktuk, Holman and Paulatuk have been rising, as has the Northwest Territories rate, whereas rates in Aklavik and Sachs Harbour have fluctuated.

Table 4-3: Cases of Sexually Transmitted Infections in the Inuvialuit Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|---|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| NWT | 11 | 11 | 12 | 12 | 14 | 15 | 16 |
| ISR total | 14 | 12 | 16 | 18 | 21 | 23 | 27 |
| Aklavik | 14 | 12 | 11 | 8 | 7 | 7 | 11 |
| Tuktoyaktuk | 13 | 13 | 21 | 24 | 27 | 30 | 37 |
| Holman | 17 | 12 | 13 | 23 | 30 | 37 | 32 |
| Paulatuk | 15 | 10 | 14 | 10 | 19 | 18 | 35 |
| Sachs Harbour | 16 | 9 | 15 | 21 | 27 | 15 | 8 |
| NOTES: STIs include chlamydia, gonorrhoea and hepatitis B Numbers are claim counts by ICD-9 code for the particular group of conditions Calculated based upon population estimates prepared by GNWT Bureau of Statistics Three-year average rates per 1,000 population, both sexes and all ages | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-4 shows that rates of physicians' treatments of accidental injuries generally increased between 1994 to 1996 and 1996 to 1998, but declined between 1997 to 1999 and 2000 to 2002 in all the ISR communities except Holman, where the rates increased. However, all of these rates were lower than those for the Northwest Territories as a whole.

Table 4-4: Cases of Accidents, Injuries and Poisonings Treated by Physicians in the Inuvialuit Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 442 | 424 | 408 | 399 | 394 | 371 | 353 |
| ISR total | 228 | 238 | 257 | 243 | 222 | 187 | 188 |
| Aklavik | 266 | 255 | 310 | 289 | 266 | 198 | 196 |
| Tuktoyaktuk | 218 | 257 | 257 | 238 | 210 | 182 | 189 |
| Holman | 148 | 148 | 173 | 185 | 199 | 188 | 184 |
| Paulatuk | 211 | 236 | 234 | 185 | 174 | 172 | 202 |
| Sachs Harbour | 369 | 292 | 293 | 331 | 264 | 200 | 122 |

NOTES:
Numbers are claim counts by ICD-9 code for the particular group of conditions
Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

The 1994 to 1998 five-year average suicide rate for the Inuvialuit communities, 38 per 100,000 population, is higher than the BDR rate of 25 per 100,000, and three times the Northwest Territories rate of 12 per 100,000 and Canada-wide rate of 13 per 100,000 population (Statistics Canada 1996; GNWT Bureau of Statistics 2003a). Rates at this level may reflect emotional disorders rooted in Inuit life experiences, described by the Inuit Tapiriit Kanatami as involving: *high rates of . . . substance abuse . . . [and] family violence . . . [and] lack[ing] family/community balance or harmony* (Mental Health Working Group et al. 2002: F2).

Indeed, it is likely that some suicides may be caused by emotional or mental disorders, and the emotional problems of some may be intensified by the suicide of a family or fellow community member. In describing the relevance of Inuit life circumstances to their mental wellness, the Inuit Tapiriit Kanatami include suicide, noting:

Compared to other Canadians, Inuit experience problems securing adequate education, employment, income, housing and nutritional foods. Inuit experience high rates of suicide, substance abuse, incarceration, repeat offences and family violence. Inuit may have problems coping with loss or change and lack family/community

balance or harmony (Mental Health Working Group et al. 2002: F2).

Table 4-5 shows that the average number of accidental deaths and deaths from injuries from 1994 to 1998 was high in the Inuvialuit coastal communities. At 41%, the rate was over twice the rate for Aklavik and the Northwest Territories as a whole. Motor vehicle accidents appear to have been a leading cause of accidental deaths. In Sachs Harbour, which had the highest rate, residents have observed that many young people do not wear helmets when driving off-road vehicles. The RCMP are not stationed there and so the police have a hard time enforcing this policy. In Paulatuk, where there is an RCMP detachment, helmets are worn and the death rate is lower (Sachs Harbour residents 2002, personal communication).

Table 4-5: Deaths from Injuries in the Inuvialuit Communities (1994 to 1998 average)

| Location | Deaths from Injuries | | | Average Number of Deaths |
|--|----------------------|----------------------|----------------------------|--------------------------|
| | Average Number | Per 1,000 Population | Percentage of Total Deaths | |
| Northwest Territories | 28.0 | 0.68 | 20 | 143.0 |
| BDR total | 9.0 | 1.27 | 26 | 34.5 |
| Aklavik | 1.0 | 1.33 | 20 | 5.0 |
| Coastal communities | 3.2 | 2.01 | 41 | 7.8 |
| Tuktoyaktuk | 1.6 | 1.64 | 33 | 4.8 |
| Holman | 0.6 | 1.33 | 50 | 1.2 |
| Paulatuk | 0.2 | 0.67 | 25 | 0.8 |
| Sachs Harbour | 0.8 | 5.52 | 80 | 1.0 |
| NOTE: Five-year average numbers, rates and percentages per year | | | | |
| SOURCE: GNWT Bureau of Statistics (2003a) | | | | |

Understanding that *wellness is an expression of the harmony of body, mind, emotions and spirit*, the Inuit Tapiriit Kanatami have devised:

an Inuit-specific framework for mental wellness. The framework is relevant to: Inuvialuit of the Beaufort Sea Region of the Northwest Territories, Inuit in the three regions of Nunavut Territory, Inuit in Labrador, Inuit in the Nunavik Region of Quebec. This framework will form a central part of the National Framework on Mental Health for the Inuit, and guide activities to restore mental wellness among Inuit (Mental Health Working Group et al. 2002: F1).

In describing the relevance of Inuit life circumstances to their mental wellness, the Inuit Tapiriit Kanatami notes:

Compared to other Canadians, Inuit experience problems securing adequate education, employment, income, housing and nutritional foods. Inuit experience high rates of suicide, substance abuse, incarceration, repeat offences and family violence. Inuit may have problems coping with loss or change and lack family/community balance or harmony (Mental Health Working Group et al. 2002: F2).

Mental wellness services and service providers are described as *not easily discernible in Inuit communities. In keeping with the multi-faceted nature of mental wellness, all human services tend to be viewed as mental wellness services (Mental Health Working Group et al. 2002: F3).* However,

- *current responses to mental wellness among Inuit are not working*
- *Inuit solutions to Inuit wellness are needed*
- *support from non-Inuit is needed to achieve successful outcomes (Mental Health Working Group et al. 2002: F5)*

Table 4-6 shows that the rates of mental disorders treated by physicians in the ISR communities were consistently below the territorial rate. Two small communities, Holman and Sachs Harbour, often had the highest rates.

Table 4-6: Cases of Mental Disorder Treated by Physicians in the Inuvialuit Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 335 | 338 | 355 | 367 | 369 | 349 | 337 |
| ISR total | 162 | 178 | 188 | 193 | 178 | 154 | 153 |
| Aklavik | 212 | 202 | 183 | 184 | 183 | 166 | 169 |
| Tuktoyaktuk | 143 | 144 | 158 | 173 | 159 | 145 | 141 |
| Holman | 112 | 161 | 211 | 271 | 245 | 198 | 173 |
| Paulatuk | 136 | 206 | 233 | 168 | 100 | 86 | 109 |
| Sachs Harbour | 229 | 267 | 241 | 193 | 230 | 164 | 189 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

4.2.2 Health Care Facilities and Services

The IRHSSA serves the five Inuvialuit and three Gwich'in communities of the BDR. Table 4-7 lists the names of local facilities and the services that they

provide for the ISR communities. Health centres staffed by registered nurses are found in all the ISR communities, except Sachs Harbour, which has a health station staffed by a single registered nurse or community health worker. The BDR communities are served by the new hospital facility in Inuvik that opened in 2003.

Table 4-7: Health Care Facilities in the Inuvialuit Settlement Region (2004)

| Location | Service Centre | Office |
|--|--|---|
| Holman | <ul style="list-style-type: none"> Enegak Health and Social Services Centre | <ul style="list-style-type: none"> health centre and Social Services office |
| Inuvik | <ul style="list-style-type: none"> Billy Moore Home Charlotte Vehus Group Home Inuvik Regional Hospital Inuvik Public Health Inuvik Social Services Inuvik Senior Citizens' Centre Inuvik Transition House Reliance Group Home | <ul style="list-style-type: none"> adult handicapped group home adult handicapped group home regional hospital public health unit Social Services office Independent Living women's/children's shelter Child Welfare facility |
| Paulatuk | <ul style="list-style-type: none"> Paulatuk Health and Social Services Centre | <ul style="list-style-type: none"> health centre and Social Services office |
| Sachs Harbour | <ul style="list-style-type: none"> Sachs Harbour Health and Social Services Centre | <ul style="list-style-type: none"> health station Social Services via Inuvik |
| Tuktoyaktuk | <ul style="list-style-type: none"> Crisis Centre Rosie Ovayouk Health Centre Tuktoyaktuk Social Services | <ul style="list-style-type: none"> family violence shelter health centre Social Services office |
| NOTE: A health centre is staffed by one or more registered nurses | | |
| SOURCE: GNWT HSS (2004) | | |

In 2002, the IRHSSA funded positions for 8.5 physicians, 63 nurses and 192 health and social services support staff (IRHSSA nursing supervisor 2002, personal communication).

4.2.3 Family and Community Conditions

The RCMP in Aklavik and Tuktoyaktuk reported that 80 to 90% of calls for service were alcohol-related (BDR RCMP officer 2002, personal communication). There is a correlation between substance abuse and other social problems, and the magnitude of these problems. This is seen in Aklavik, a community of less than 500 adults, which is not known for high rates of social problems. Three full-time counsellors deal with alcohol and drug issues, family violence, suicide counselling, and referrals for treatments and shelter in Aklavik (Aklavik GNWT HSS personnel 2002, personal communication).

Table 4-8 shows wide variations in the hospitalization rates for the ISR communities, but the rates are tending to decline in virtually all communities, as in the BDR. The zero rate for Aklavik in 1999 to 2001 is plausible, as for the years 1998 to 2000, the average was only one hospitalization case compared to 135 per 100,000 during 1998 to 2000.

Table 4-8: Hospitalizations for Alcohol-Related Illnesses in the Inuvialuit Communities

| Location | 1994–1996 (No./100,000) | 1995–1997 (No./100,000) | 1996–1998 (No./100,000) | 1997–1999 (No./100,000) | 1998–2000 (No./100,000) | 1999–2001 (No./100,000) |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT | 367 | 391 | 430 | 464 | 460 | 443 |
| BDR total | 405 | 428 | 463 | 452 | 373 | 378 |
| Aklavik | 132 | 132 | 222 | 179 | 135 | 0 |
| Tuktoyaktuk | 137 | 172 | 173 | 170 | 102 | 102 |
| Holman | 0 | 75 | 74 | 147 | 72 | 71 |
| Paulatuk | 561 | 337 | 223 | 217 | 324 | 413 |
| Sachs Harbour | 0 | 0 | 0 | 0 | 0 | 218 |
| NOTES: 0 = no hospitalization cases Three-year average rates per 100,000 population | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | |

Different communities have varying patterns for changes in alcohol offence rates over time. In Aklavik, the rate per 1,000 population has clearly increased since 1998. In Tuktoyaktuk, the rates show a curvilinear pattern, generally falling between 1997 and 1999, and increasing thereafter (GNWT HSS 2003b).

Inuvik IRHSSA personnel reported that drug consumption has increased considerably in Sachs Harbour, Holman and Paulatuk, noting that drugs were easier to transport to the outlying communities than liquor bottles (Inuvik IRHSSA personnel 2002, personal communication). According to the social service worker in Aklavik, the use of drugs and alcohol by youth has become more open and visible on the street (Aklavik GNWT HSS personnel 2002, personal communication).

Available data suggests that births to teen mothers, as a percentage of all births, were greater in the ISR communities than in the Northwest Territories as a whole, and are possibly increasing (GNWT Bureau of Statistics 2002b).

The RCMP in Holman reported domestic violence to be their biggest problem, including child abuse, sexual abuse, and spousal abuse by both men and women. Reports of child abuse and sexual abuse, without relevant statistics, were heard in several communities, but only the Holman RCMP explicitly reported increasing incidences. The RCMP said that such assaults were increasing because of work-related issues, increased incomes and alcohol consumption. The RCMP and

GNWT HSS workers in many Northwest Territories communities reported that increased income could lead to increased alcohol consumption, which results in increased violence in communities (Holman RCMP and senior administrative officer 2002, personal communication). Increased or more consistent reporting of domestic violence by the police may also be a factor.

Table 4-9 shows spousal assault offence rates in the BDR. The rates declined for the ISR as a whole, Aklavik and Tuktoyaktuk between 1997 and 2001, in the coastal communities between 1998 and 2001, and in Holman and Paulatuk between 1999 and 2001.

Table 4-9: Spousal Assaults in the Inuvialuit Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 10 | 25 | 24 | 19 | 17 |
| ISR total | 17 | 101 | 65 | 46 | 57 |
| Aklavik | 55 | 43 | 28 | 25 | 19 |
| Tuktoyaktuk | 42 | 224 | 127 | 91 | 110 |
| Holman ² | – | – | 2 | 1 | 1 |
| Paulatuk | – | – | 3 | 1 | 5 |
| NOTES: – = data not available or too small to be expressed 1 Includes all of the communities in the ISR, GSA, SSA and DCR 2 Holman has only had an RCMP detachment since 1998 Sachs Harbour has been policed by the Inuvik RCMP since 1995 Rates per 1,000 population | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

Family violence shelters in Inuvik and Tuktoyaktuk serve local residents who come as walk-ins, or those who are from other communities. Women from distant communities needing shelter, from Holman to Tulita, can be transported to the Transition House in Inuvik by home community social workers. If the Transition House is full when they arrive, they are provided with temporary accommodation, often at a hotel.

Table 4-10 shows that between 1997 to 1998 and 2002 to 2003, the rate of children taken into care in Aklavik and Tuktoyaktuk increased steadily, but not in the more remote High Arctic communities. The same pattern of increase is also seen in Inuvik and Fort McPherson, suggesting that proximity to the activities and substances accessible in the regional centre of Inuvik could be a relevant influence.

Table 4-10: Children Taken into Care in the Inuvialuit Communities

| Location | 1995–1996 (No./1,000) | 1997–1998 (No./1,000) | 1998–1999 (No./1,000) | 2000–2001 ¹ (No./1,000) | 2001–2002 ¹ (No./1,000) | 2002–2003 ¹ (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| NWT | 14 | 13 | 15 | 14 | 16 | 17 |
| NWT Aboriginal communities ² | 18 | 25 | 25 | 19 | 19 | 22 |
| ISR total | 6 | 13 | 20 | 18 | 20 | 22 |
| Aklavik | – | 8 | 28 | 12 | 25 | 32 |
| Tuktoyaktuk | 15 | 25 | 30 | 35 | 38 | 36 |
| Holman | – | 6 | 8 | – | – | – |
| Paulatuk | – | 3 | – | 19 | – | – |
| Sachs Harbour | – | 6 | – | – | – | – |
| <p>NOTES:</p> <p>– = data not available or too small to be expressed</p> <p>1 Numbers of children taken into care during some part of the fiscal year, including plan of care, supervision, apprehension, temporary custody and permanent custody children</p> <p>2 All study area communities in the Northwest Territories, except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise</p> <p>Average rates per 1,000 total population for fiscal years, calculated based on population estimates prepared by GNWT Bureau of Statistics</p> | | | | | | |
| SOURCES: GNWT HSS (2003b) | | | | | | |

Table 4-11 shows that the number of charges laid under the *Young Offenders Act* appeared to fluctuate in the ISR between 1997 and 2002, although they have risen consistently in Paulatuk.

Table 4-11: *Young Offenders Act* Offences in the Inuvialuit Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|---|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 48 | 150 | 154 | 98 | 130 |
| BDR total | 62 | 136 | 125 | 112 | 90 |
| ISR total | – | – | – | – | – |
| Aklavik | 20 | 159 | 130 | 178 | 168 |
| Coastal communities | 0 | 206 | 153 | 79 | 161 |
| Tuktoyaktuk | 0 | 366 | 227 | 95 | 189 |
| Holman ² | – | – | 24 | 0 | 77 |
| Paulatuk | – | – | 108 | 149 | 197 |
| NOTES: – = data not available or held confidential because of low frequencies 1 Includes all of the communities in the ISR, GSA, SSA and DCR 2 Holman has had a RCMP detachment only since 1998 Sachs Harbour is policed by the Inuvik RCMP detachment Rates per 1,000 population, aged 12 to 19 | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

Table 4-12 shows that violent crime and property crime rates declined in all the ISR communities between 1997 and 2000, except for property crimes in Aklavik and Holman, and violent crimes in the small communities of Holman and Paulatuk.

Table 4-12: Violent Crimes and Property Crimes in the Inuvialuit Communities

| Location | Violent Crimes ¹ | | | | Property Crimes ² | | | |
|---------------------|-----------------------------|---------------------|---------------------|---------------------|------------------------------|---------------------|---------------------|---------------------|
| | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) |
| NWT | 54 | 50 | 50 | 47 | 66 | 70 | 58 | 57 |
| Aklavik | 75 | 60 | 69 | 72 | 82 | 120 | 94 | 107 |
| Coastal communities | 127 | 107 | 91 | 77 | 102 | 101 | 73 | 76 |
| Tuktoyaktuk | 127 | 103 | 109 | 68 | 102 | 127 | 98 | 87 |
| Holman | – | – | 54 | 57 | – | – | 52 | 89 |
| Paulatuk | – | 88 | 87 | 133 | – | – | 23 | 22 |

NOTES:
 – = data not available or held confidential because of low frequencies
 1 Violent crimes include homicide, attempted murder, sexual assault, nonsexual assault, other sexual offences, abduction and robbery
 2 Property crimes include breaking and entering, theft of motor vehicles, theft over \$5,000, theft \$5,000 and under, possession of stolen goods, and fraud
 Sachs Harbour is policed by the Inuvik RCMP detachment
 Rates per 1,000 population

SOURCE: GNWT Bureau of Statistics (2003c)

4.2.4 Social and Protection Facilities and Services

The IRHSSA delivers social services to all communities in the Inuvialuit area, except for Sachs Harbour, which is serviced from Inuvik. Social services, e.g., the family violence shelters in Tuktoyaktuk and Inuvik, are available to all the Inuvialuit and Gwich'in communities. IRHSSA staff can refer individuals to Yellowknife or outside of the Northwest Territories for services that are not available from the IRHSSA.

Table 4-13 shows that all Inuvialuit communities have police services except for Sachs Harbour, which is policed by the Inuvik RCMP detachment. Residents complained about the loss and current lack of an RCMP detachment in Sachs Harbour. They also reported that at times the RCMP failed to meet their schedule of four visits to the community each month (Sachs Harbour residents 2002, personal communication).

Table 4-13: Protection Service Features in the Inuvialuit Communities (2001)

| Location | RCMP – Officers and Facilities | | | Number of Firefighters | Current Emergency Plan |
|--|--------------------------------|------------------|---------------------------|------------------------|------------------------|
| | Number of Officers | Number of Cells | Maximum Capacity of Cells | | |
| Aklavik | 4 | 4 + holding cell | 10 + 7 in holding cell | 10 V | Yes |
| Tuktoyaktuk | 5 | 4 + holding cell | 8 + holding cell | 11 V | Yes |
| Holman | 2 | 2 | 4 | 1 C, 6–7 V | Yes |
| Paulatuk | 2 | 1 | 1 | 12 V | Yes |
| Sachs Harbour | Policed by Inuvik RCMP | 0 | 0 | 7 V | Yes |
| NOTES: C = career V = volunteer | | | | | |
| SOURCES: GNWT Municipal and Community Affairs (2002), RCMP G Division (2002) | | | | | |

In April 2003, the commanding officer of the Inuvik RCMP detachment said his 15 officers were overloaded, primarily from dealing with family and other violence resulting from substance abuse. In time, this detachment is scheduled to increase to 27 officers, and new facilities are planned for completion in 2007 (Inuvik RCMP commanding officer 2003, personal communication).

All of the Inuvialuit communities have volunteer firefighter units. Current emergency plans have been designed for all the communities.

4.2.5 Education and Training

4.2.5.1 Levels of Education and Training

Education attainment in the ISR is at a lower level than in the Northwest Territories as a whole. The percentages of adults who graduated from high school and had some post-secondary education in 2001 were higher in Aklavik, Holman and Sachs Harbour than they were in Tuktoyaktuk and Paulatuk.

Table 4-14 shows that in the five ISR Aboriginal communities, 39% of adults were high school graduates in 2001 and 36% had some post-secondary education. The percentage of high school graduates in the ISR as a whole fell slightly between 1994 and 2001, because of declines in Tuktoyaktuk and Sachs Harbour. At the same time, the percentage with some post-secondary training, including trades, technical, college and university training, increased from 28% to 36%. The greatest increases were in Aklavik and Holman. There was a decline in the percentage of those with post-secondary training in Sachs Harbour and Paulatuk.

Table 4-14: Education Attainment Levels in the Inuvialuit Communities

| Location | High School Graduation | | | Some Post-Secondary Education | | |
|---------------|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| NWT | 65 | 68 | 65 | 44 | 46 | 56 |
| ISR total | 41 | 42 | 39 | 28 | 29 | 36 |
| Aklavik | 42 | 56 | 43 | 30 | 35 | 41 |
| Tuktoyaktuk | 40 | 36 | 37 | 26 | 26 | 33 |
| Holman | 38 | 38 | 42 | 29 | 27 | 41 |
| Paulatuk | 30 | 34 | 31 | 26 | 24 | 23 |
| Sachs Harbour | 68 | 48 | 43 | 41 | 37 | 36 |

NOTE:
Percentage of population, aged 15 years and older

SOURCE: Calculated from GNWT Bureau of Statistics (2003f), Statistics Canada (2003a)

Table 4-15 shows gender differences in the highest level of education attained in the Inuvialuit communities in 2001. In the ISR total, as in the study area Aboriginal communities as a whole, more women than men are high school graduates. This is also true in all the individual ISR communities except Sachs Harbour. Higher proportions of women generally had post-secondary education – trades, training, college or university – than men in Aklavik, Tuktoyaktuk and Holman, but the opposite was true in Paulatuk and Sachs Harbour.

Table 4-15: Education Attainment by Gender in the Inuvialuit Communities (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|---|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total ¹ | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| ISR total | Males | 38 | 26 | 9 | 35 |
| | Females | 41 | 21 | 14 | 35 |
| Aklavik | Males | 42 | 29 | 10 | 40 |
| | Females | 48 | 31 | 14 | 45 |
| Tuktoyaktuk | Males | 35 | 20 | 9 | 29 |
| | Females | 37 | 17 | 13 | 30 |
| Holman | Males | 42 | 29 | 8 | 38 |
| | Females | 46 | 25 | 21 | 46 |

Table 4-15: Education Attainment by Gender in the Inuvialuit Communities (2001) (cont'd)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|---------------|---------|--------------------------|---|--|---|
| Paulatuk | Males | 28 | 22 | 11 | 33 |
| | Females | 31 | 0 | 13 | 13 |
| Sachs Harbour | Males | 50 | 67 | 0 | 67 |
| | Females | 43 | 29 | 0 | 29 |

NOTES:
 1 All study area communities in the Northwest Territories except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise
 Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)
 Rates per 1,000 population, aged 15 years and older

SOURCE: GNWT Bureau of Statistics (2001f)

These education attainment indicators are influenced somewhat by the numbers of predominantly non-Aboriginal people providing services, such as teachers, nurses and RCMP, who often have graduated from high school or have some post-secondary training. They typically comprise greater percentages of the total population in small communities, such as Sachs Harbour and Paulatuk, than in larger ones, such as Tuktoyaktuk, and thus tend to elevate rates of post-secondary education in small communities.

More women than men had post-secondary training in both Aklavik and Paulatuk. However, information is not available on the gender distribution of people in the service industries. This distribution could affect the proportions of men and women who have post-secondary training in small communities such as Paulatuk.

High school dropout rates are almost impossible to calculate because of the numbers of families migrating in and out of the Northwest Territories, and between different areas within the territory. A useful high school completion index is the ratio of numbers of students graduating from high school to those enrolled in Grades 7 to 12 for an area. Based on this indicator, in the document entitled, *State of the ISR Since the Signing of the Inuvialuit Final Agreement*, Vodden writes:

Perhaps the single most troubling indicator relating to the economy of the ISR is the high school graduation rate that is extremely low and getting worse relative to other areas of the North . . . Available data suggests future difficulties for the economy of the ISR . . . to the extent that the education or skill

levels of the Inuvialuit limits full participation in economic activities, economic development of the ISR economy will be hindered even with economic growth (Vodden 2001: 8).

Information is available on the results of standardized testing in December 2003 of all the students in Grades 1 to 12 in all nine of the schools in the ISR and GSA, supervised by the Beaufort Delta Education Council.

Table 4-16 shows that with the scores for all students in all the Beaufort Delta Education Council schools aggregated, 62% of the test scores were below average in terms of the Canada-wide standard, 33% of the test scores were average, and 5% were above average.

The performances of all Canadian students and all other categories of students were evaluated in terms of grade-specific norms based on Canada-wide student performance.

Table 4-16: Standardized Test Performances in the Beaufort Delta Region (2003)

| Indicator | Below Average (%) | Average (%) | Above Average (%) |
|--|-------------------|-------------|-------------------|
| All Canadian students, Grades 1 to 12 | 23 | 54 | 23 |
| All BDEC school students, Grades 1 to 12 | 62 | 33 | 5 |
| All Inuvik students | 51 | 39 | 10 |
| Inuvik Grade 9 students | 39 | 49 | 12 |
| Inuvik Grade 11 students | 48 | 52 | 0 |
| Inuvik Grade 12 students | 35 | 60 | 5 |
| NOTES: BDEC = Beaufort Delta Education Commission | | | |
| SOURCE: Gowans (2003) | | | |

These standardized test results are available only for the Beaufort Delta Education Commission schools.

The standing of all the Inuvik students, excluding those in the outlying communities, was somewhat better, with 51% below average, 39% average and 10% above average. The relative standing of Inuvik Grade 9 students was even better. However, the standings of both Inuvik Grade 11 and Grade 12 students both declined, though those above average increased in Grade 12 over Grade 11.

4.2.5.2 Education Facilities

Table 4-17 shows that all of the ISR communities offer education from kindergarten to 12, and all have excess capacity.

Table 4-17: School Profile Data for the Inuvialuit Communities

| Location | School | Teachers ¹ (No.) | Grades Offered ² | School Capacity ² (No.) | School Enrollment ² (No.) | Utilization ² (%) |
|----------------------------|--------------|--------------------------------|-----------------------------|---------------------------------------|---|---------------------------------|
| Aklavik ² | Moose Kerr | 12 | K to 12 | 332 | 144 | 43 |
| Tuktoyaktuk | Mangilaluk | 14 | K to 12 | 330 | 210 | 63 |
| Holman ² | Helen Kalvak | 10 | K to 12 | 234 | 122 | 52 |
| Paulatuk | Angik | 9 | K to 12 | 154 | 81 | 53 |
| Sachs Harbour ² | Inualthuyak | 3 | K to 12 | 55 | 38 | 69 |

NOTES:
 – = data not available
 K = kindergarten
 1 2002 data
 2 April 2004 data
 3 Enrollment data is full-time equivalents, e.g., two children attending kindergarten are counted as one full-time student
 GNWT ECE typically starts planning for new space when a school reaches a capacity of about 85%

SOURCE: GNWT ECE (2002, 2004)

Tuktoyaktuk may have problems in staffing classes and providing adequate classroom space. Some former storage space has been converted to extra classrooms for the high school program. The Beaufort Delta Education Authority reported in May 2003 that when school started in September, the Mangilaluk School would be five teachers short because of a housing shortage. In May 2003, many of the 16 teachers on staff were either living in temporary housing or sharing accommodation with other teachers.

Aurora College community learning centres in each Inuvialuit community offer diploma and certificate programs and courses. In recent years, the college has offered courses to train individuals to take advantage of expected increases in petroleum industry and other industrial employment.

In January 2002, the college, GNWT ECE and GNWT RWED joined petroleum industry representatives in organizing the Pipeline Operation Training Committee to develop a training plan. The college delivers the training, but the Career Development Division of GNWT ECE, mandated to promote education, training, apprenticeship, trades certification, and sector-related initiatives, funds programs to make education and training more accessible. GNWT ECE programs include the following:

- Schools North Apprenticeship Program – enrolling high school students in apprenticeship programs, enabling them to earn time credits toward a journeyman certificate, secondary school credits and wages of at least half of the journeyman’s pay scale
- Building and Learning Strategy Program – delivering certifiable, competency-based construction training, both on-the-job and in the classroom, leading to certification in on-site building construction occupations
- Student Financial Assistance Program – provides financial assistance to enable Northwest Territories residents to complete post-secondary training and education
- Rig Hands Training Project of 2001 – an impressive early example of what industry, government and educational institutions and regional representatives can achieve in mounting programs to train northern residents for oil and gas employment. A total of 70 people completed training in the floorhand rig or service rig training programs at a site near Inuvik, where the rig hands drilled a 400-m cased hole.

4.3 Baseline Conditions – Gwich’in Settlement Area

4.3.1 Health Conditions

The smoking rate among adults aged 18 years and over was 53% in Inuvik, 59% in Fort McPherson and 65% in Tsiigehtchic in 1999 (GNWT Bureau of Statistics 1999). The rate for the Northwest Territories as a whole was 42%.

Table 4-18 shows that the rates for respiratory diseases treated by physicians in Inuvik were the highest in the GSA. Rates in the GSA fluctuated, but did decrease over time.

Table 4-18: Cases of Respiratory Diseases Treated by Physicians in the Gwich'in Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 638 | 612 | 587 | 559 | 543 | 504 | 481 |
| GSA total | 604 | 638 | 672 | 605 | 562 | 500 | 518 |
| Inuvik | 702 | 755 | 802 | 723 | 673 | 606 | 628 |
| Gwich'in Aboriginal communities total | 286 | 262 | 265 | 238 | 224 | 177 | 177 |
| Fort McPherson | 272 | 244 | 247 | 217 | 208 | 159 | 163 |
| Tsiigehtchic | 363 | 357 | 361 | 350 | 303 | 263 | 236 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-19 shows that rates of infectious and parasitic diseases decreased between 1994 to 1996 and 2000 to 2002, except the GSA total and in Fort McPherson, where rates have fluctuated.

Table 4-19: Cases of Infectious and Parasitic Diseases Treated by Physicians in the Gwich'in Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 253 | 245 | 250 | 235 | 232 | 222 | 218 |
| GSA total | 158 | 141 | 140 | 125 | 125 | 126 | 130 |
| Inuvik | 89 | 76 | 79 | 72 | 75 | 69 | 67 |
| Gwich'in Aboriginal communities total | 55 | 55 | 58 | 49 | 81 | 104 | 112 |
| Fort McPherson | 53 | 51 | 51 | 37 | 78 | 91 | 94 |
| Tsiigehtchic | 70 | 78 | 96 | 112 | 95 | 165 | 190 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Claim frequencies for each community were divided by the population of the community, giving a figure, usually a decimal, for the number of cases per person. This was then multiplied by 1,000. Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-20 shows that three-year average rates for STIs, for both sexes and all ages, in Inuvik were much higher than the Northwest Territories rate. Since 1994, rates in Inuvik and Fort McPherson have stayed basically the same, and the rate in Tsiigehtchic has decreased, unlike the Northwest Territories figure, which has increased.

Table 4-20: Sexually Transmitted Infections in the Gwich'in Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 11 | 11 | 12 | 12 | 14 | 15 | 16 |
| GSA total | 19 | 17 | 19 | 20 | 23 | 23 | 22 |
| Inuvik | 21 | 19 | 21 | 22 | 23 | 23 | 21 |
| Gwich'in Aboriginal communities total | 27 | 29 | 25 | 23 | 23 | 24 | 25 |
| Fort McPherson | 20 | 17 | 19 | 22 | 24 | 22 | 21 |
| Tsiigehtchic | 30 | 33 | 28 | 25 | 22 | 23 | 25 |
| NOTES: STIs include chlamydia, gonorrhoea and hepatitis B Calculated based upon population estimates prepared by GNWT Bureau of Statistics Three-year average rates per 1,000 population, both sexes and all ages | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-21 indicates that rates of physician treatments for accidents, injuries and poisonings decreased in the GSA communities, following a peak in 1996 to 1998. Rates for Inuvik were much higher than for the Gwich'in Aboriginal communities.

Table 4-21: Cases of Accidents, Injuries and Poisonings Treated by Physicians in the Gwich'in Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 442 | 424 | 408 | 399 | 394 | 371 | 353 |
| GSA total | 442 | 448 | 451 | 441 | 430 | 410 | 400 |
| Inuvik | 495 | 498 | 506 | 499 | 494 | 480 | 473 |
| Gwich'in Aboriginal communities total | 267 | 287 | 276 | 261 | 234 | 197 | 173 |
| Fort McPherson | 231 | 233 | 232 | 227 | 215 | 175 | 156 |
| Tsiigehtchic | 468 | 580 | 509 | 441 | 327 | 302 | 246 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

The GSA had the second lowest suicide rate, 18 per 100,000, of any study area region between 1994 and 1998. The suicide rate for the Gwich'in communities was half again higher than the Northwest Territories as a whole, which was 12 per 100,000 (GNWT Bureau of Statistics, 2001a).

Table 4-22 shows death rates for the Gwich'in communities. From 1994 to 1998, 19% of deaths were accidental in Inuvik and 33% were accidental in Fort McPherson.

Table 4-22: Deaths from Injuries in the Gwich'in Communities (1994 to 1998 average)

| Location | Deaths from Injuries | | | Average Number of Deaths |
|--|----------------------|----------------------|----------------------------|--------------------------|
| | Average Number | Per 1,000 Population | Percentage of Total Deaths | |
| Northwest Territories | 28.0 | 0.68 | 20 | 143.0 |
| BDR total | 9.0 | 1.27 | 26 | 34.5 |
| Inuvik | 3.0 | 0.89 | 19 | 16 |
| Fort McPherson | 2.0 | 2.29 | 33 | 6 |
| Tsiigehtchic | – | – | – | – |
| NOTE: – = data not available or too small to be expressed Five-year average numbers, rates and percentages | | | | |
| SOURCE: GNWT Bureau of Statistics (2003a) | | | | |

Table 4-23 shows the three-year averaged rates of mental disorders treated by physicians between 1994 to 1996 and 2000 to 2002. These rates were consistently low in Fort McPherson and Tsiigehtchic, both well below the territorial rate and the even higher Inuvik rate. This pattern of much higher Inuvik and Northwest Territories rates could be explained by resident physicians working only in Inuvik, Yellowknife and Hay River. Yellowknife and Hay River have over half of the study area Northwest Territories population. All of the rates declined between 1996 to 1998 and 2000 to 2002.

Table 4-23: Cases of Mental Disorder Treated by Physicians in the Gwich'in Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 335 | 338 | 355 | 367 | 369 | 349 | 337 |
| BDR total | 281 | 279 | 292 | 291 | 260 | 216 | 216 |
| GSA total | 350 | 338 | 353 | 348 | 308 | 252 | 253 |
| Inuvik | 413 | 396 | 413 | 414 | 363 | 294 | 295 |
| GSA Aboriginal communities total | 146 | 153 | 166 | 144 | 138 | 122 | 123 |

Table 4-23: Cases of Mental Disorder Treated by Physicians in the Gwich'in Communities (cont'd)

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Fort McPherson | 132 | 134 | 154 | 138 | 140 | 124 | 124 |
| Tsiigehtchic | 229 | 251 | 230 | 173 | 133 | 112 | 117 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

The Gwich'in, through the Assembly of First Nations, participated in the Mental Health Working Group that produced the *Mental Wellness Framework* (see Section 4.2.1, Health Conditions (ISR)). The publication states that *current responses to mental wellness among (Aboriginal people) are not working* and that Aboriginal solutions to Aboriginal wellness are needed (Mental Health Working Group et al. 2002: F5).

4.3.2 Health Care Facilities and Services

The Inuvik Health and Social Services Authority provides health and social services to the GSA communities. Table 4-24 shows the facilities providing services in each of the Gwich'in communities. Fort McPherson and Tsiigehtchic both have health centres. The Inuvik Regional Hospital serves the GSA. Air ambulances are stationed in Inuvik for speedy response to medical emergencies in the other communities.

Table 4-24: Health Care Facilities in the Gwich'in Settlement Area (2004)

| Location | Facility Name | Description |
|--|--|---|
| Fort McPherson | <ul style="list-style-type: none"> William Firth Health Centre Fort McPherson Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| Inuvik | <ul style="list-style-type: none"> Billy Moore Home Charlotte Vehus Group Home Inuvik Regional Hospital Inuvik Public Health Inuvik Social Services Inuvik Senior Citizens' Centre Inuvik Transition House Reliance Group Home | <ul style="list-style-type: none"> adult handicapped group home adult handicapped group home regional hospital public health unit Social Services office independent living women's and children's shelter Child Welfare facility |
| Tsiigehtchic | <ul style="list-style-type: none"> Tsiigehtchic Social Services Centre | <ul style="list-style-type: none"> health centre; Social Services via Inuvik |
| NOTE: A health centre is staffed by one or more registered nurses | | |
| SOURCE: GNWT HSS (2004) | | |

4.3.3 Family and Community Conditions

According to RCMP and GNWT HSS personnel, alcohol abuse is a common factor in most of the problems they deal with. Table 4-25 indicates that alcohol-related hospitalizations in Inuvik were consistently at least twice the rates for Fort McPherson and virtually every other BDR community. The Inuvik rates, in common with almost every other community in this region, except Fort McPherson, continue to fluctuate.

Table 4-25: Hospitalizations for Alcohol-Related Illnesses in the Gwich'in Communities

| Location | 1994–1996 (No./100,000) | 1995–1997 (No./100,000) | 1996–1998 (No./100,000) | 1997–1999 (No./100,000) | 1998–2000 (No./100,000) | 1999–2001 (No./100,000) |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT | 367 | 391 | 430 | 464 | 460 | 443 |
| BDR total | 405 | 428 | 463 | 452 | 373 | 378 |
| Inuvik | 644 | 692 | 732 | 730 | 580 | 618 |
| Fort McPherson | 256 | 256 | 332 | 299 | 335 | 330 |
| Tsiigehtchic | 198 | 198 | 390 | 390 | 364 | 0 |
| NOTES: 0 = no hospitalization cases Three-year average rates per 100,000 population | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | |

The alcohol offence rate in Inuvik exceeded that for Fort McPherson, in part because Inuvik is the location of the local liquor store. The Inuvik rate decreased between 1997 and 2001, whereas the offence rates for Fort McPherson increased. After 2000, the rate for drug offences decreased in Inuvik. A sustained increase in drug offences was evident in Fort McPherson between 1997 and 2001 (RCMP local detachments 2002).

Between 1994 and 1998 in the Gwich'in Aboriginal communities, there was a slight decline in births to teenagers as a percentage of total births, but the Inuvik rate increased (GNWT Bureau of Statistics 2002b).

Table 4-26 shows that the rates of spousal assaults in Inuvik were above the rates for the study area and the BDR in 2000 and 2001.

Table 4-26: Spousal Assaults in the Gwich'in Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 11 | 19 | 21 | 17 | 14 |
| GSA total | 29 | 41 | 40 | 44 | 36 |
| Inuvik | 37 | 47 | 46 | 53 | 43 |
| Fort McPherson ² | 2 | 20 | 22 | 14 | 10 |
| NOTES: 1 Includes all of the communities in the ISR, GSA, SSA and DCR 2 The Fort McPherson RCMP detachment polices Tsiigehtchic Sachs Harbour has been policed out of Inuvik since 1995 Rates per 1,000 population | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

A family violence shelter in Inuvik serves local residents who come as walk-in clients, and those who come from other communities. Social service personnel provide women in need from other communities with transportation to the Inuvik Shelter House.

Table 4-27 shows that between 1997 to 1998 and 2002 to 2003, the number of children taken into care in both Fort McPherson and Inuvik increased steadily. The Fort McPherson rate was twice that of Inuvik by 2002 to 2003.

Table 4-27: Children Taken into Care in the Gwich'in Communities

| Location | 1995–1996 (No./1,000) | 1997–1998 (No./1,000) | 1998–1999 (No./1,000) | 2000–2001 ¹ (No./1,000) | 2001–2002 ¹ (No./1,000) | 2002–2003 ¹ (No./1,000) |
|---|--------------------------|--------------------------|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Northwest Territories | 14 | 13 | 15 | 14 | 16 | 17 |
| NWT Aboriginal communities ² | 18 | 25 | 25 | 19 | 19 | 22 |
| GSA total | 16 | 20 | 25 | 24 | 25 | 31 |
| Inuvik | 14 | 12 | 25 | 20 | 22 | 27 |
| Fort McPherson | 5 | 15 | 26 | 43 | 44 | 55 |
| Tsiigehtchic | – | – | – | – | – | – |

NOTES:
 – = data not available or too small to be expressed
 1 Numbers of children taken into care during some part of the fiscal year, including plan of care, supervision, apprehension, temporary custody and permanent custody children
 2 All study area communities in the Northwest Territories, except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise
 Average rates per 1,000 total population for fiscal years, calculated based upon population estimates prepared by GNWT Bureau of Statistics

SOURCE: GNWT HSS (2003b)

Table 4-28 shows that *Young Offenders Act* offence rates rose between 1997 and 1998 in the GSA, fell until 2001 and then rose again. The rates for Fort McPherson were higher than for Inuvik in every year except 1997.

Table 4-28: Young Offenders Act Offences in the Gwich'in Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) | 2002 (No./1,000) |
|-----------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 32 | 138 | 139 | 90 | 150 | 134 |
| Gwich'in | 97 | 217 | 216 | 197 | 147 | 315 |
| Inuvik | 114 | 209 | 199 | 162 | 124 | 313 |
| Fort McPherson ² | 40 | 243 | 269 | 316 | 228 | 326 |

NOTES:
 1 Includes all of the communities in the ISR, GSA, SSA and DCR
 Rates per 1,000 population, aged 10 to 19

SOURCE: RCMP G Division (2002), RCMP local detachments (2002, 2004)

Table 4-29 shows that violent crime and property crime rates fell in Inuvik between 1997 and 2000, as did property crimes in Fort McPherson. Rates of violent crimes in Fort McPherson were inconsistent during that period.

Table 4-29: Violent Crimes and Property Crimes in the Gwich'in Communities

| Location | Violent Crimes ¹ | | | | Property Crimes ² | | | |
|----------------|-----------------------------|---------------------|---------------------|---------------------|------------------------------|---------------------|---------------------|---------------------|
| | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) |
| NWT | 54 | 50 | 50 | 47 | 66 | 70 | 58 | 57 |
| Inuvik | 93 | 93 | 68 | 62 | 102 | 88 | 74 | 75 |
| Fort McPherson | 84 | 99 | 103 | 89 | 110 | 121 | 97 | 89 |
| Tsiigehtchic | – | – | – | – | – | – | – | – |

NOTES:
 – = data not available or too small to be expressed
 1 Violent crimes includes homicide, attempted murder, sexual assault, nonsexual assault, other sexual offences, abduction and robbery
 2 Property crimes include breaking and entering, theft of motor vehicles, theft over \$5,000, theft of \$5,000 and under, possession of stolen goods and fraud
 Rates per 1,000 population

SOURCE: GNWT Bureau of Statistics (2003c)

4.3.4 Social and Protection Facilities and Services

The IRHSSA delivers social services to all Gwich'in communities.

Table 4-30 provides details regarding the staffing and facilities of the Inuvik and Fort McPherson RCMP detachments. The Fort McPherson detachment also polices Tsiigehtchic.

Table 4-30: Protection Service Features in the Gwich'in Communities (2001)

| Location | RCMP – Officers and Facilities | | | Number of Firefighters | Current Emergency Plan |
|----------------|--------------------------------|-----------------|----------------------------------|------------------------|------------------------|
| | Number of Officers | Number of Cells | Maximum Capacity of Cells | | |
| Inuvik | 12 | 9 | 18 in cells + 40 in holding cell | 2 C, 24 V | Yes |
| Fort McPherson | 5 | 6 | 12 in cells + holding cell | 8 V | Yes |
| Tsiigehtchic | Policed from Fort McPherson | 0 | 0 | 5 V | Yes |

NOTES:
 C = career
 V = volunteer

SOURCES: GNWT Municipal and Community Affairs (2002), RCMP G Division personnel (2002)

Inuvik has professional firefighters and a volunteer firefighter unit, whereas Fort McPherson and Tsiigehtchic have only volunteer fire departments. All three communities have current emergency plans.

4.3.5 Education and Training

4.3.5.1 Levels of Education and Training

Table 4-31 shows that between 1994 and 2001, the percentages of the adult population that had graduated from high school remained essentially unchanged in each community, as in the Northwest Territories as a whole. In the regional centre of Inuvik, where many non-Aboriginal people live, 71% were high school graduates in 2001.

Table 4-31: Education Attainment Levels in the Gwich'in Communities

| | High School Graduation | | | Some Post-Secondary Education | | |
|--|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| NWT | 65 | 68 | 65 | 44 | 46 | 56 |
| GSA total | 64 | 65 | 64 | 47 | 48 | 54 |
| GSA Aboriginal communities total | 41 | 43 | 41 | 26 | 34 | 35 |
| Inuvik | 72 | 72 | 71 | 54 | 53 | 61 |
| Fort McPherson | 41 | 45 | 41 | 25 | 34 | 36 |
| Tsiigehtchic | 40 | 37 | 40 | 28 | 34 | 32 |
| NOTE: Percentage of population, aged 15 years and older | | | | | | |
| SOURCE: Calculated from GNWT Bureau of Statistics (2003f), Statistics Canada (2003a) | | | | | | |

In 2001, Inuvik had the highest proportion of people with post-secondary education, 61%, up from 53% in 1994. The proportions with some post-secondary education also increased in both Fort McPherson and Tsiigehtchic during this period. As previously mentioned, non-Aboriginal people in professions such as teachers, nurses, RCMP and some managers, might increase the post-secondary training rates in small communities.

Table 4-32 shows that gender differences are apparent in educational attainment in the Gwich'in communities in 2001. More women than men were high school graduates in Fort McPherson, but not in Tsiigehtchic. More women than men had some post-secondary education in Fort McPherson, but in Tsiigehtchic, it was the opposite.

Table 4-32: Education Attainment by Gender in the Gwich'in Communities (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|---|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| GSA total | Males | 62 | 33 | 22 | 55 |
| | Females | 65 | 26 | 29 | 55 |
| GSA Aboriginal communities total | Males | 39 | 24 | 12 | 36 |
| | Females | 42 | 22 | 15 | 37 |
| Inuvik | Males | 70 | 36 | 25 | 61 |
| | Females | 72 | 28 | 33 | 61 |
| Fort McPherson | Males | 38 | 19 | 11 | 30 |
| | Females | 77 | 40 | 27 | 67 |
| Tsiigehtchic | Males | 46 | 46 | 15 | 62 |
| | Females | 33 | 17 | 17 | 33 |
| <p>NOTES:</p> <p>1 All communities in the Northwest Territories study area except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise</p> <p>Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)</p> <p>Rates per 1,000 population, aged 15 years and older</p> | | | | | |
| SOURCE: GNWT Bureau of Statistics (2001b) | | | | | |

4.3.5.2 Education and Training Facilities

Table 4-33 shows that by 2004, all Gwich'in communities had schools providing kindergarten to Grade 12 education, and all had substantial excess capacity.

Table 4-33: School Profile Data for the Gwich'in Communities

| Location | School | Budgeted Full-time Equivalents ¹ | | | | Grades Offered ² | School Capacity ² (No.) | School Enrollment ^{2,3} (No.) | Utilization ² (%) |
|----------------|-------------------------|---|------------------------|-----------------------|----------------------|-----------------------------|---------------------------------------|---|---------------------------------|
| | | Teachers (No.) | Support Staff (No.) | Admin. Staff (No.) | Other Staff (No.) | | | | |
| Inuvik | Inuvik total | 61 | 12 | 8 | 9 | K-12 | 1,276 | 799 | 63 |
| | Samuel Hearne | 29 | - | - | - | 7-12 | 682 | 361 | 53 |
| | Sir Alexander Mackenzie | 32 | - | - | - | K-6 | 594 | 438 | 74 |
| Fort McPherson | Chief Julius | 14 | 3 | 0 | 3 | K-12 | 350 | 220 | 63 |
| Tsiigehtchic | Chief Paul Niditchie | 3 | 2 | 0 | 1 | K-12 | 88 | 45 | 51 |

NOTES:
K = kindergarten
1 2002 data
2 April 2004 data
3 Enrollment data is full-time equivalents, e.g., two children attending kindergarten are counted as one full-time student
GNWT ECE typically starts planning for new space when a school reaches a capacity of about 85%

SOURCE: GNWT ECE (2002, 2004)

The Aurora College campus in Inuvik offers diverse diploma and certificate courses and programs. Adult basic education and career development courses are provided at the community learning centres in Fort McPherson and Tsiigehtchic in response to effective demand. Recently, these courses have helped people obtain jobs in the oil industry. See Section 4.2.5.2, Education Facilities (ISR) for further information on available post-secondary courses.

4.4 Baseline Conditions – Sahtu Settlement Area

4.4.1 Health Conditions

Tobacco use data for the Sahtu communities shows that in 1999 in all of the Aboriginal communities, about 60% of adults, 18 or more years of age, smoked. Only Norman Wells had a lower rate, 42% (GNWT Bureau of Statistics 1999, 2003d).

Table 4-34 shows that rates per 1,000 population for physician treatment of respiratory illnesses in the SSA were consistently less than half the territorial rates. These rates declined in all Sahtu communities, as in the Northwest Territories, in the late 1990s through the early 2000s. Colville Lake was the exception, where rates began increasing in 1998 to 2000.

Table 4-34: Cases of Respiratory Diseases Treated by Physicians in the Sahtu Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 638 | 612 | 587 | 559 | 543 | 504 | 481 |
| SSA total | 250 | 243 | 231 | 218 | 210 | 205 | 189 |
| Norman Wells | 237 | 218 | 227 | 205 | 207 | 182 | 170 |
| Sahtu Aboriginal communities total | 255 | 255 | 233 | 224 | 211 | 215 | 197 |
| Fort Good Hope | 204 | 193 | 167 | 186 | 190 | 181 | 143 |
| Déline | 302 | 303 | 287 | 261 | 262 | 263 | 257 |
| Tulita | 249 | 281 | 277 | 241 | 171 | 169 | 165 |
| Colville Lake | 351 | 250 | 136 | 180 | 230 | 371 | 366 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-35 shows that the rates for infectious and parasitic diseases in the SSA Aboriginal communities were also less than half the territorial rates. In all SSA communities, the percentage rate of respiratory diseases treated by physicians decreased between 1994 to 1996 and 2000 to 2002, except in Colville Lake.

Table 4-35: Cases of Infectious and Parasitic Diseases Treated by Physicians in the Sahtu Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 253 | 245 | 250 | 235 | 232 | 222 | 218 |
| SSA total | 96 | 92 | 107 | 101 | 96 | 86 | 77 |
| Norman Wells | 176 | 169 | 208 | 202 | 182 | 156 | 117 |
| Sahtu Aboriginal communities total | 61 | 58 | 62 | 57 | 58 | 56 | 59 |
| Fort Good Hope | 60 | 56 | 59 | 71 | 64 | 54 | 50 |
| Déline | 78 | 72 | 73 | 53 | 58 | 72 | 84 |
| Tulita | 43 | 43 | 48 | 37 | 48 | 39 | 41 |
| Colville Lake | 46 | 59 | 82 | 76 | 64 | 46 | 54 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Claim frequencies for each community were divided by the population of the community, giving a figure, usually a decimal, for the number of cases per person. This was then multiplied by 1,000. Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-36 shows cases of STIs in the Sahtu communities. Between 1994 to 1996 and 2000 to 2002, increases occurred in the rates of STIs in all Sahtu communities. There was a three-fold increase in the rates for both sexes and all ages during this period.

Table 4-36: Cases of Sexually Transmitted Infections in the Sahtu Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 11 | 11 | 12 | 12 | 14 | 15 | 16 |
| SSA total | 9 | 8 | 8 | 14 | 21 | 28 | 28 |
| Norman Wells | 4 | 4 | 4 | 6 | 8 | 9 | 13 |
| Sahtu Aboriginal communities total | 11 | 10 | 10 | 18 | 26 | 37 | 35 |
| Fort Good Hope | 11 | 9 | 7 | 13 | 26 | 42 | 41 |
| Déline | 15 | 12 | 14 | 23 | 29 | 38 | 33 |
| Tulita | 9 | 9 | 12 | 21 | 28 | 32 | 31 |
| Colville Lake | 0 | 0 | 0 | 0 | 0 | 10 | 13 |
| NOTES: STIs include chlamydia, gonorrhoea and hepatitis B2 Numbers are claim counts by ICD-9 code for the particular group of conditions Calculated based upon population estimates prepared by GNWT Bureau of Statistics Three-year average rates per 1,000 population, both sexes and all ages | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-37 shows that the SSA rate for physician treatments of accidents and injuries was considerably lower than the Northwest Territories rate. Rates in Norman Wells and Tulita have decreased, but rates in all other communities have increased.

Table 4-37: Cases of Accidents, Injuries and Poisonings Treated by Physicians in the Sahtu Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 442 | 424 | 408 | 399 | 394 | 371 | 353 |
| SSA total | 237 | 238 | 240 | 247 | 240 | 233 | 218 |
| Norman Wells | 265 | 269 | 285 | 284 | 271 | 219 | 207 |
| Sahtu Aboriginal communities total | 61 | 483 | 456 | 465 | 480 | 511 | 495 |
| Fort Good Hope | 246 | 253 | 251 | 289 | 303 | 300 | 258 |
| Déline | 194 | 171 | 188 | 196 | 197 | 223 | 211 |
| Tulita | 229 | 228 | 194 | 185 | 173 | 156 | 159 |
| Colville Lake | 248 | 372 | 333 | 256 | 114 | 289 | 328 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Between 1994 and 1998, the average number of suicides per year for the five Sahtu communities was 22 per 100,000, compared to the Northwest Territories rate of 12 per 100,000 (GNWT Bureau of Statistics 2003a, Statistics Canada 1996).

Table 4-38 shows that the SSA has the lowest rate of accidental deaths as a percentage of total deaths among the study area regions. The 1994 to 1998 average for the Sahtu communities was 11%, one half of the Northwest Territories rate of 20%, and much smaller relative to the BDR and DCR rates of 26% each. Only in Colville Lake was the rate high, at 40%.

Table 4-38: Deaths from Injuries in the Sahtu Communities (1994 to 1998 average)

| Location | Deaths from Injuries | | | Average Number of Deaths |
|--|----------------------|----------------------|----------------------------|--------------------------|
| | Average Number | Per 1,000 Population | Percentage of Total Deaths | |
| Northwest Territories | 28.0 | 0.68 | 20 | 143.0 |
| SSA total | 1.0 | 0.36 | 11 | 9.2 |
| Norman Wells | – | 0.00 | – | 1.0 |
| Sahtu Aboriginal communities total | 1.0 | 0.52 | 9 | 9.0 |
| Fort Good Hope | 0.4 | 0.57 | 13 | 3.0 |
| Déline | – | 0.00 | – | 3.0 |
| Tulita | – | 0.43 | – | 2.0 |
| Colville Lake | 0.4 | 4.40 | 40 | 1.0 |
| NOTE: – = data not available or too small to be expressed Five-year average numbers, rates and percentages | | | | |
| SOURCE: GNWT Bureau of Statistics (2003a) | | | | |

The Sahtu, through the Assembly of First Nations, participated in the Mental Health Working Group that produced the *Mental Wellness Framework* (see Section 4.3.1, Health Conditions (GSA)). The publication stated that *current responses to mental wellness among (Aboriginal people) are not working* and that Aboriginal solutions to Aboriginal wellness are needed (Mental Health Working Group et al. 2002: F5).

Table 4-39 shows that the rates of mental disorders treated by physicians in the SSA communities generally increased until 1997 to 1999, and then decreased until 2000 to 2002. However, in Tulita and Colville Lake, the rate increased in 2000 to 2002. The decline in the Sahtu Aboriginal communities was not as marked as it was in Norman Wells.

Table 4-39: Cases of Mental Disorder Treated by Physicians in the Sahtu Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 335 | 338 | 355 | 367 | 369 | 349 | 337 |
| SSA total | 190 | 181 | 188 | 213 | 208 | 176 | 151 |
| Norman Wells | 249 | 211 | 208 | 211 | 186 | 153 | 103 |
| Sahtu Aboriginal communities total | 164 | 168 | 180 | 214 | 217 | 187 | 173 |
| Fort Good Hope | 208 | 215 | 184 | 260 | 285 | 252 | 204 |
| Déline | 142 | 133 | 198 | 214 | 201 | 146 | 153 |
| Tulita | 144 | 169 | 168 | 168 | 116 | 115 | 163 |
| Colville Lake | 76 | 55 | 82 | 83 | 71 | 69 | 118 |
| NOTES: Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

4.4.2 Health Care Facilities and Services

The Sahtu Region Health and Social Services Authority (SRHSSA) was to have assumed responsibility for delivering health and social services in the SSA from the IRHSSA early in 2004, but this has now been postponed until April 2005. The new authority chief executive officer is developing an integrated service delivery approach to deal with the health and social services issues in the SSA. Table 4-40 lists the facilities and services in the SSA which are now provided by the IRHSSA. Four of the Sahtu communities have health centres, and Colville Lake has a health station.

Table 4-40: Health Care Facilities in the Sahtu Settlement Area (2004)

| Location | Facility Name | Description |
|--|--|--|
| Colville Lake | <ul style="list-style-type: none"> Colville Lake Health Station Colville Lake Social Services | <ul style="list-style-type: none"> health station served by Norman Wells |
| Déline | <ul style="list-style-type: none"> Deline Health Centre, Residence and Garage Deline Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| Fort Good Hope | <ul style="list-style-type: none"> Fort Good Hope Health Centre Fort Good Hope Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| Norman Wells | <ul style="list-style-type: none"> Norman Wells Health Centre Norman Wells Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| Tulita | <ul style="list-style-type: none"> Tulita Health Centre Tulita Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| NOTE: A health centre is staffed by registered one or more nurses A health station is staffed by a community health worker, trained in basic first aid and cardiopulmonary resuscitation | | |
| SOURCE: GNWT HSS (2004) | | |

In 2004, the SRHSSA chief executive officer reported that adequate GNWT HSS resources existed in the region, but are not being used efficiently. As a result, the front-line workers are stretched to their limits, with the situation becoming worse in the last year (SRHSSA chief executive officer 2004, personal communication). A particular concern of the chief executive officer is the shortage of housing for health staff in several Sahtu communities. Particularly severe is the situation in Norman Wells where teachers and nurses are being forced to move on a monthly basis and to pay higher and higher rents. The chief executive officer fears that the housing situation will get worse as the build-up to a pipeline proceeds, and that GNWT HSS vacancies will not be filled because the high housing prices will discourage people from accepting positions in Norman Wells. Housing is now also becoming an issue in Fort Good Hope. The chief executive officer believes that communities need to address the shortage, and ensure that housing is available to professional staff so their services will be available (SRHSSA chief executive officer 2004, personal communication 2004).

Hospital care is provided to the SSA by the hospital in Inuvik, with access provided by a readily accessible med-evac airplane.

4.4.3 Family and Community Conditions

Indicators of alcohol abuse are of particular interest because of the frequency with which such abuse is associated with wellness and policing problems. Table 4-41 shows that the overall SSA rates have increased in recent years. Although Norman Wells experienced declining rates between 1994 to 1996 and 1999 to 2001, and rates have fluctuated in Tulita, Fort Good Hope, Déline and Colville Lake.

Table 4-41: Hospitalizations for Alcohol-Related Illnesses in the Sahtu Communities

| Location | 1994–1996 (No./100,000) | 1995–1997 (No./100,000) | 1996–1998 (No./100,000) | 1997–1999 (No./100,000) | 1998–2000 (No./100,000) | 1999–2001 (No./100,000) |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT | 367 | 391 | 430 | 464 | 460 | 443 |
| SSA total | 182 | 158 | 169 | 249 | 277 | 220 |
| Norman Wells | 118 | 118 | 80 | 77 | 83 | 76 |
| Fort Good Hope | 191 | 191 | 279 | 317 | 402 | 268 |
| Déline | 154 | 0 | 155 | 425 | 538 | 362 |
| Tulita | 356 | 427 | 211 | 277 | 67 | 198 |
| Colville Lake | 0 | 0 | 0 | 0 | 344 | 347 |
| NOTES: 0 = no hospitalization cases Three-year average rates per 100,000 population | | | | | | |
| SOURCE: GNWT HSS (2003c) | | | | | | |

Fort Good Hope, Déline and Tulita have similar patterns of alcohol offence rates, which generally fell within the same timeframe, 1998 to 2001. However, rates increased in 1999 in Fort Good Hope and in 1998 in Tulita (RCMP G Division 2002, RCMP local detachments, 2002). The increased incomes from 2003 to 2004 winter exploration work in the Fort Good Hope and Colville Lake areas have led to increased substance abuse and other associated social problems (SRHSSA chief executive officer 2004, personal communication).

The 2001 rate for Norman Wells was predictably higher than for the other communities. However, the low rates for 1998 to 2000 are inexplicable.

Substance abuse by teenagers is reported to be unusually high (Fort Good Hope RCMP officer 2002, personal communication).

Births to teenagers as a percentage of total births in the Sahtu communities did not change much between 1994 and 1998 (GNWT Bureau of Statistics 2002b).

Table 4-42 shows a decline in spousal assault rates per 1,000 population in the SSA, similar to the trend in the Northwest Territories study area. The fluctuations for Fort Good Hope are explained as variations in policing practices.

Table 4-42: Spousal Assaults in the Sahtu Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 11 | 19 | 21 | 17 | 14 |
| SSA total | 18 | 63 | 91 | 34 | 25 |
| Norman Wells | 7 | 6 | 1 | 2 | 0 |
| Fort Good Hope ² | 40 | 152 | 256 | 101 | 69 |
| Déline | 16 | 43 | 45 | 20 | 11 |
| Tulita | 6 | 48 | 22 | 2 | 18 |
| NOTES: 1 includes all of the communities in the ISR, GSA, SSA and DCR 2 Colville Lake is policed by the Fort Good Hope RCMP detachment Rates per 1,000 population | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

Nurses in Norman Wells reported in the fall of 2002 that there had been an increase in domestic violence there that is not reflected in the statistics because people are reluctant to call the police or to report it. They stated that when people do seek help, it is usually for family counselling, which is not recorded as domestic violence (Norman Wells nurses 2002, personal communication).

There is no family violence shelter in Norman Wells. The shelters in Inuvik and Hay River accommodate those able to reach either one from the Sahtu communities. Social workers in Tulita felt that the lack of shelters and treatment centres in the SSA was a problem requiring immediate attention (Tulita GNWT HSS personnel 2002, personal communication).

Table 4-43 shows that the rates of children taken into care have fluctuated generally in the SSA and SSA Aboriginal communities between 1995 to 1996 and 2002 to 2003.

Table 4-43: Children Taken into Care in the Sahtu Communities

| Location | 1995–1996 (No./1,000) | 1997–1998 (No./1,000) | 1998–1999 (No./1,000) | 2000–2001 ¹ (No./1,000) | 2001–2002 ¹ (No./1,000) | 2002–2003 ¹ (No./1,000) |
|---|--------------------------|--------------------------|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Northwest Territories | 14 | 13 | 15 | 14 | 16 | 17 |
| NWT Aboriginal communities ² | 18 | 25 | 25 | 19 | 19 | 22 |
| SSA total | 15 | 11 | 18 | 13 | 13 | 14 |
| SSA Aboriginal communities total | 22 | 15 | 17 | 19 | 19 | 20 |
| Norman Wells | – | – | 19 | – | – | – |
| Fort Good Hope | 36 | 20 | 23 | 20 | 14 | 15 |
| Déline | 25 | 24 | 27 | 16 | 26 | 28 |
| Tulita | – | – | – | 24 | 22 | 22 |
| Colville Lake | – | – | – | – | – | – |

NOTES:

– = data not available or too small to be expressed

1 Numbers of children taken into care during some part of the fiscal year, including plan of care, supervision, apprehension, temporary custody and permanent custody children

2 All study area communities in the Northwest Territories, except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise

Average rates per 1,000 total population for fiscal years, calculated based upon population estimates prepared by GNWT Bureau of Statistics

SOURCE: GNWT HSS (2003b)

Table 4-44 shows that the rates of *Young Offenders Act* offences fluctuated during 1997 and 2001. The rates for the Sahtu communities tended to increase. Déline was the exception, with inconsistent rates that first increased sharply between 1997 and 1998, and then declined through to 2002. No explanation for the sharp increase is available as there have been several complete staff turnovers since 1998 in Déline, in accordance with RCMP staff rotation practices.

Table 4-44: Young Offenders Act Offences in the Sahtu Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) | 2002 (No./1,000) |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT study area ¹ | 32 | 138 | 139 | 90 | 150 | 134 |
| SSA total | 53 | 150 | 278 | 104 | 221 | 166 |
| SSA Aboriginal communities total | 65 | 209 | 356 | 138 | 269 | 226 |
| Norman Wells | 31 | 43 | 124 | 44 | 140 | 61 |
| Fort Good Hope | 107 | 219 | 718 | 235 | 471 | 339 |
| Déline | 7 | 348 | 165 | 68 | 75 | 53 |
| Tulita | 78 | 60 | 112 | 100 | 241 | 279 |
| NOTES: 1 Includes all of the communities in the ISR, GSA, SSA and DCR Rates per 1,000 population, aged 10 to 19 | | | | | | |
| SOURCE: RCMP G Division (2002), RCMP local detachments (2002, 2004) | | | | | | |

Table 4-45 shows that the rates of violent crimes and property crimes for the Aboriginal Sahtu communities were higher than those for the Northwest Territories as a whole. However, the Norman Wells rates were consistently below the rates for the Northwest Territories. The rates in the other communities fluctuated between 1997 and 2001 for both violent and property crimes.

Table 4-45: Violent Crimes and Property Crimes in the Sahtu Communities

| Location | Violent Crimes ¹ | | | | Property Crimes ² | | | |
|----------------|-----------------------------|---------------------|---------------------|---------------------|------------------------------|---------------------|---------------------|---------------------|
| | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) |
| NWT | 54 | 50 | 50 | 47 | 66 | 70 | 58 | 57 |
| SSA total | 74 | 67 | 70 | 47 | 88 | 91 | 97 | 76 |
| Norman Wells | 35 | 31 | 26 | 17 | 50 | 33 | 86 | 49 |
| Fort Good Hope | 153 | 108 | 125 | 58 | 153 | 137 | 196 | 132 |
| Déline | 84 | 80 | 92 | 68 | 107 | 156 | 40 | 59 |
| Tulita | 21 | 66 | 44 | 67 | 44 | 58 | 56 | 75 |
| Colville Lake | – | – | – | – | – | – | – | – |

NOTES:

– = data not available or too small to be expressed

1 Violent crimes includes homicide, attempted murder, sexual assault, nonsexual assault, other sexual offences, abduction and robbery

2 Property crimes include breaking and entering, theft of motor vehicles, theft over \$5,000, theft of \$5,000 and under, possession of stolen goods and fraud

Rates per 1,000 population

SOURCE: GNWT Bureau of Statistics (2003c)

4.4.4 Social and Protection Facilities and Services

Table 4-46 shows that all SSA communities have RCMP local detachments, except Colville Lake, which is policed from Fort Good Hope.

Table 4-46: Protection Service Features in the Sahtu Communities (2001)

| Location | RCMP – Officers and Facilities | | | Number of Firefighters | Current Emergency Plan |
|--|--------------------------------|-----------------|---------------------------|------------------------|------------------------|
| | Number of Officers | Number of Cells | Maximum Capacity of Cells | | |
| Norman Wells | 3 | 3 | 6 | 19 V | Yes |
| Fort Good Hope | 4 | 3 | 9 | 6 V | Yes |
| Déline | 3 | 2 | 8 | 9 V | Yes |
| Tulita | 2 | 2 | 10 | 2 V | Yes |
| Colville Lake | Policed from Fort Good Hope | 0 | 0 | 0 V | No |
| NOTE: V = volunteer | | | | | |
| SOURCES: GNWT Municipal and Community Affairs (2002), RCMP G Division (2002) | | | | | |

All of the SSA communities have firefighting capability and a current emergency plan, except Colville Lake, which has neither.

4.4.5 Education and Training

4.4.5.1 Levels of Education and Training

Table 4-47 shows that among the SSA population aged 15 years and older, 55% were high school graduates in 2001, with minimal change since 1994. In 2001, 49% had some post-secondary education, up from 38% in 1994. In largely non-Aboriginal community of Norman Wells, 84% were high school graduates in 2001. Between 1994 and 2001, increases occurred in the percentages of high school graduates in Deline and Colville Lake, but not in Fort Good Hope or Tulita.

Table 4-47: Education Attainment Levels in the Sahtu Communities

| Location | High School Graduation | | | Some Post-Secondary Education | | |
|--|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| NWT | 65 | 68 | 65 | 44 | 46 | 56 |
| SSA total | 54 | 58 | 55 | 38 | 40 | 49 |
| Norman Wells | 83 | 83 | 84 | 55 | 54 | 72 |
| Fort Good Hope | 60 | 48 | 49 | 40 | 41 | 45 |
| Déline | 23 | 38 | 39 | 19 | 26 | 37 |
| Tulita | 37 | 51 | 36 | 29 | 33 | 34 |
| Colville Lake | 33 | 32 | 46 | 31 | 32 | 31 |
| NOTE: Percentage of population, aged 15 years and older | | | | | | |
| SOURCE: Calculated from GNWT Bureau of Statistics (2003f), Statistics Canada (2003a) | | | | | | |

There were increases in the percentages of people with some post-secondary education between 1994 and 2001 in every Sahtu community except Colville Lake. Norman Wells had the highest proportion, 72%, of adults with post-secondary education, trades, technical, college and university training. The highest rate among the Aboriginal communities was in Fort Good Hope, 45%, the lowest rates were found in Tulita, 34%, and Colville Lake, 31%.

The adult educator in Fort Good Hope reported that most of their high school graduates have poor skills and need some upgrading before successfully participating in post-secondary training (Fort Good Hope adult educator 2002, personal communication). In contrast, whole families are leaving Fort Good Hope so the parents can get higher education elsewhere (Fort Good Hope principal 2002, personal communication). During 2002, 16 families moved from Fort Good Hope to Inuvik, Norman Wells, Fort Simpson and Yellowknife, almost all to pursue education.

Table 4-48 shows gender differences in the levels of education attained in the Sahtu communities in 2001. In the SSA total Aboriginal communities, more men than women were high school graduates, which is also the case in Déline, Norman Wells and Colville Lake. However, in Fort Good Hope and Tulita, the situation was reversed. Men had post-secondary education more often than women in Déline and Tulita.

Table 4-48: Education Attainment by Gender in the Sahtu Communities (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|--|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| SSA total | Males | 55 | 31 | 16 | 46 |
| | Females | 54 | 20 | 28 | 48 |
| SSA Aboriginal communities total | Males | 43 | 24 | 11 | 36 |
| | Females | 41 | 17 | 20 | 38 |
| Norman Wells | Males | 84 | 45 | 25 | 71 |
| | Females | 82 | 27 | 44 | 71 |
| Fort Good Hope | Males | 48 | 30 | 13 | 43 |
| | Females | 50 | 31 | 17 | 47 |
| Déline | Males | 41 | 24 | 11 | 35 |
| | Females | 34 | 14 | 14 | 29 |
| Tulita | Males | 35 | 23 | 13 | 35 |
| | Females | 37 | 0 | 30 | 30 |
| Colville Lake | Males | 57 | 0 | 0 | 0 |
| | Females | 50 | 33 | 33 | 67 |
| <p>NOTES:</p> <p>1 All communities in the Northwest Territories study area except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise</p> <p>Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)</p> <p>Rates per 1,000 population, aged 15 years and older</p> <p>SOURCE: GNWT Bureau of Statistics (2001b)</p> | | | | | |

4.4.5.2 Education and Training Facilities

Table 4-49 shows that in 2004, all of the Sahtu communities offer kindergarten to Grade 12 schooling and have excess capacity, except Tulita, which operated at 92% of capacity. The principal of the Tulita School reported overcrowding, and an unstable building because of faulty pilings.

Table 4-49: School Profile Data for the Sahtu Communities

| Location | School | Budgeted Full-Time Equivalents ¹ | | | | Grades Offered ² | School Capacity ² (No.) | School Enrollment ² (No.) | Utilization ² (%) |
|-----------------------------|---------------------|---|------------------------|-----------------------|----------------------|-----------------------------|---------------------------------------|---|---------------------------------|
| | | Teachers (No.) | Support Staff (No.) | Admin. Staff (No.) | Other Staff (No.) | | | | |
| Norman Wells | Mackenzie Mountain | 10 | 5 | 4.5 | 2 | K to 12 | 209 | 137 | 65 |
| Fort Good Hope ² | Chief T'selehye | 14 | 3 | 2 | 3 | K to 12 | 264 | 159 | 60 |
| Déline | Tehtseo Ayha | 10 | 3 | 0 | 2 | K to 12 | 275 | 147 | 53 |
| Tulita ² | Chief Albert Wright | 15 | 6 | 0 | 1.5 | K to 12 | 165 | 162 | 92 |
| Colville Lake | Territorial | 1 | 1 | 0 | 0.2 | K to 12 | 44 | 30 | 67 |

NOTES:
 K = kindergarten
 1 2002 data
 2 April 2004 data
 Enrollment data is full-time equivalents, e.g., two children attending kindergarten are counted as one full-time student
 GNWT ECE typically starts planning for new space when a school reaches a capacity of about 85%

SOURCE: GNWT ECE (2002, 2004)

Within the SSA, Aurora College has community learning centres in Fort Good Hope and Déline. The college offers adult basic education, a General Equivalency Diploma, employable skills training programs and apprenticeship training. Unfortunately, apprenticeship training is currently lagging because trainees who have finished the required apprenticeship classroom preparation often cannot find a journeyperson under whom to complete their training (Aurora College administrative officer 2002, personal communication).

A variety of courses is offered in response to adequate local demands, including courses that provide the work force with the skills required to respond to local employment opportunities. For example, Aurora College has offered safety, camp cook-kitchen helper, trades foundations and heavy-duty equipment driving courses. On occasion, Aurora College has teamed up with the GNWT RWED and various oil and gas exploration and drilling courses to provide training for jobs in the oil industry.

Section 4.2.5.2, Education Facilities (ISR) provides further information on available post-secondary courses.

4.5 Baseline Conditions – Deh Cho Region

4.5.1 Health Conditions

In 1999, about 50% of the adults aged 18 years and over smoked tobacco in Fort Providence, Fort Liard, Nahanni Butte, Trout Lake and Kakisa. About 60% of adults were smokers in the other communities (GNWT Bureau of Statistics 1999).

Table 4-50 shows data on rates per 1,000 population of respiratory illnesses. These rates declined between 1994 to 1996 and 2000 to 2002 in the DCR, except Fort Liard.

Table 4-50: Cases of Respiratory Diseases Treated by Physicians in the Deh Cho Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 638 | 612 | 587 | 559 | 543 | 504 | 481 |
| DCR total | 303 | 305 | 307 | 290 | 269 | 242 | 211 |
| Fort Simpson | 340 | 350 | 334 | 289 | 264 | 231 | 183 |
| Fort Providence | 227 | 203 | 198 | 211 | 190 | 151 | 117 |
| Fort Liard | 317 | 329 | 383 | 380 | 366 | 384 | 380 |
| Wrigley | 308 | 305 | 336 | 344 | 351 | 283 | 218 |
| Nahanni Butte | 243 | 278 | 306 | 267 | 276 | 224 | 215 |
| Trout Lake | 408 | 338 | 327 | 356 | 359 | 342 | 293 |
| Jean Marie River | 352 | 237 | 245 | 200 | 272 | 242 | 190 |
| Kakisa | 315 | 642 | 600 | 533 | 175 | 92 | 183 |
| Hay River Reserve | – | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – | – |
| NOTES: – = data not available Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-51 shows that rates of infectious and parasitic diseases generally fell in the DCR, most notably in Fort Liard, between 1994 to 1996 and 2000 to 2002. Fort Simpson and Jean Marie River were exceptions, with rates that increased steadily during that time.

Table 4-51: Cases of Infectious and Parasitic Diseases Treated by Physicians in the Deh Cho Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 253 | 245 | 250 | 235 | 232 | 222 | 218 |
| DCR total | 158 | 153 | 156 | 140 | 128 | 110 | 111 |
| Fort Simpson | 106 | 104 | 134 | 140 | 141 | 122 | 108 |
| Fort Providence | 95 | 101 | 89 | 77 | 67 | 64 | 78 |
| Fort Liard | 443 | 405 | 370 | 276 | 227 | 189 | 215 |
| Wrigley | 70 | 73 | 115 | 118 | 106 | 63 | 41 |
| Nahanni Butte | 117 | 99 | 95 | 102 | 88 | 73 | 60 |
| Trout Lake | 63 | 98 | 63 | 54 | 14 | 17 | 20 |
| Jean Marie River | 62 | 87 | 49 | 65 | 81 | 98 | 73 |
| Kakisa | 8 | 42 | 33 | 42 | 0 | 8 | 8 |
| Hay River Reserve | – | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – | – |
| NOTES: – = data not available Numbers are claim counts by ICD-9 code for the particular group of conditions Claim frequencies for each community were divided by the population of the community, giving a figure, usually a decimal, for the number of cases per person. This was then multiplied by 1,000. Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

Table 4-52 provides data on STI rates, for both sexes and all ages, in the DCR for the years 1994 to 1996 through 2000 to 2002. There are inconsistent patterns of rate changes. Rates in Fort Simpson tended to increase, whereas Fort Providence, Fort Liard and Wrigley rates fell during this period. Nurses reported that the incidences of STIs increased noticeably during the hydrocarbon exploration and development activities in the Fort Liard area (Fort Simpson nurses 2002, personal communication).

Table 4-52: Cases of Sexually Transmitted Infections in the Deh Cho Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 11 | 11 | 12 | 12 | 14 | 15 | 16 |
| DCR total | 19 | 17 | 16 | 13 | 15 | 15 | 22 |
| Fort Simpson | 13 | 14 | 15 | 13 | 15 | 16 | 27 |
| Fort Providence | 23 | 19 | 18 | 12 | 15 | 13 | 20 |
| Fort Liard | 34 | 28 | 23 | 20 | 25 | 26 | 24 |
| Wrigley | 17 | 17 | 15 | 13 | 5 | 5 | 9 |
| Nahanni Butte | – | – | – | – | – | – | – |
| Trout Lake | 5 | – | – | – | – | – | – |
| Jean Marie River | 12 | 13 | 12 | 6 | 5 | 10 | 10 |

NOTES:
 – = incidences less than five held confidential to protect confidentiality
 STIs include chlamydia, gonorrhoea and hepatitis B
 Kakisa data is included with the Hay River data. Hay River and West Point Reserve data is not available.
 Numbers are claim counts by ICD-9 code for the particular group of conditions
 Calculated based upon population estimates prepared by GNWT Bureau of Statistics
 Three-year average rates per 1,000 population, both sexes and all ages

SOURCE: GNWT HSS (2003b)

Table 4-53 shows that the rates for treatment of accidents and injuries by physicians declined in the DCR total and all individual communities between 1994 to 1996 and 2000 to 2002.

Table 4-53: Cases of Accidents, Injuries and Poisonings Treated by Physicians in the Deh Cho Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 442 | 424 | 408 | 399 | 394 | 371 | 353 |
| DCR total | 310 | 316 | 295 | 280 | 239 | 202 | 161 |
| Fort Simpson | 323 | 348 | 335 | 344 | 287 | 241 | 165 |
| Fort Providence | 235 | 225 | 214 | 224 | 203 | 167 | 148 |
| Fort Liard | 345 | 340 | 293 | 240 | 203 | 189 | 166 |
| Wrigley | 274 | 275 | 269 | 220 | 245 | 187 | 179 |
| Nahanni Butte | 317 | 287 | 248 | 218 | 193 | 267 | 210 |
| Trout Lake | 341 | 267 | 278 | 212 | 170 | 94 | 109 |
| Jean Marie River | 735 | 793 | 730 | 300 | 185 | 129 | 132 |
| Kakisa | 403 | 433 | 333 | 358 | 208 | 141 | 208 |
| Hay River Reserve | – | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – | – |
| NOTES: – = data not available Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

The DCR was the only Northwest Territories region that had no suicides between 1994 and 1998 (GNWT Bureau of Statistics 2003a).

Table 4-54 shows death rates in the Deh Cho communities. The five-year averages, from 1994 to 1998, of all accidental injury deaths as a percentage of total deaths was 26%. This is over twice the SSA rate of 11% and one third higher than that for the Northwest Territories as a whole at 20%, but the same as the BDR.

Table 4-54: Deaths from Injuries in the Deh Cho Communities (1994 to 1998 average)

| Location | Deaths from Injuries | | | Average Number of Deaths |
|--|----------------------|----------------------|----------------------------|--------------------------|
| | Average Number | Per 1,000 Population | Percentage of Total Deaths | |
| Northwest Territories | 28.0 | 0.68 | 20 | 143.0 |
| DCR total ¹ | 3.8 | 1.18 | 26 | 14.4 |
| Fort Simpson | 1.0 | 0.77 | 20 | 5.0 |
| Fort Providence | 1.0 | 1.26 | 50 | 2.0 |
| Fort Liard | 0.6 | 1.11 | 17 | 3.6 |
| Wrigley | 1.0 | 5.56 | 100 | 1.0 |
| Nahanni Butte | 0.2 | 2.50 | 33 | 0.6 |
| Trout Lake | – | – | – | 1.0 |
| Jean Marie River | – | – | – | 1.0 |
| Kakisa | – | – | – | – |
| Hay River Reserve | – | – | – | – |
| West Point Reserve | – | – | – | – |
| NOTES: – = data not available or too small to be expressed 1 Hay River Reserve and West Point data is not included in this total Five-year average numbers, rates and percentages | | | | |
| SOURCE: GNWT Bureau of Statistics (2003c) | | | | |

The Deh Cho, through the Assembly of First Nations, participated in the Mental Health Working Group that produced the *Mental Wellness Framework*, described in more detail in Section 4.4.1, Health Conditions (DCR). The publication stated that: *current responses to mental wellness among (Aboriginal people) are not working* and that Aboriginal solutions to Aboriginal wellness are needed (Mental Health Working Group et al. 2002: F5).

Table 4-55 presents the rates of mental disorders treated by physicians in the DCR communities. The rate generally increased between 1994 to 1996 and 1995 to 1997, and then declined until 2000 to 2002. However, Fort Providence, Jean Marie River and Trout Lake rates declined after 1996 to 1998. Nahanni Butte experienced fluctuating rates.

Table 4-55: Cases of Mental Disorder Treated by Physicians in the Deh Cho Communities

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 335 | 338 | 355 | 367 | 369 | 349 | 337 |
| DCR total | 230 | 238 | 235 | 207 | 185 | 167 | 161 |
| Fort Liard | 253 | 229 | 212 | 197 | 176 | 197 | 220 |
| Fort Providence | 124 | 132 | 154 | 138 | 139 | 109 | 102 |
| Fort Simpson | 267 | 271 | 253 | 208 | 195 | 165 | 150 |
| Jean Marie River | 148 | 212 | 331 | 300 | 255 | 180 | 127 |
| Kakisa | 177 | 192 | 158 | 217 | 175 | 183 | 150 |
| Nahanni Butte | 431 | 422 | 410 | 498 | 461 | 422 | 498 |
| Trout Lake | 238 | 284 | 327 | 230 | 215 | 150 | 89 |
| Wrigley | 300 | 420 | 411 | 377 | 210 | 233 | 216 |
| Hay River Reserve | – | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – | – |
| NOTES: – = data not available Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

4.5.2 Health Care Facilities and Services

The DCHSSA provides health and social services to the Deh Cho communities. Its administrative headquarters are in Fort Simpson. The authority consists of 13 members:

- the chair
- three members from Fort Simpson
- two members each from Fort Providence and Fort Liard
- one member each from the remaining six DCR communities

Table 4-56 shows that Fort Simpson, Fort Liard and Fort Providence all have health and social service centres. Wrigley has a health centre, with social services provided by Fort Simpson. Nahanni Butte, Trout Lake and Jean Marie River have health stations, and associated social services are provided by Fort Simpson. The health care needs of Hay River Reserve and West Point Reserve residents are met

by Hay River health care facilities. Kakisa depends on the Fort Providence health and social services.

Table 4-56: Health Care Facilities in the Deh Cho Region (2004)

| Location | Facility Name | Description |
|--|---|---|
| Fort Liard | <ul style="list-style-type: none"> Fort Liard Health and Social Services Centre | <ul style="list-style-type: none"> health centre and Social Services office |
| Fort Providence | <ul style="list-style-type: none"> Fort Providence Health and Social Services Centre | <ul style="list-style-type: none"> health centre and Social Services office |
| Fort Simpson | <ul style="list-style-type: none"> Fort Simpson Health and Social Services Centre Stanley Isaiah Centre | <ul style="list-style-type: none"> health centre and social services office, and long-term care facility use not yet determined |
| Hay River Reserve | <ul style="list-style-type: none"> Nats'ejee' K'eh Treatment Centre Judith Fabian Elders' Centre | <ul style="list-style-type: none"> alcohol and drug treatment centre supported independent living |
| Jean Marie River | <ul style="list-style-type: none"> Jean Marie River Health Station Jean Marie River Social Services | <ul style="list-style-type: none"> health station serviced by Fort Simpson |
| Kakisa | <ul style="list-style-type: none"> none | <ul style="list-style-type: none"> serviced by Fort Providence |
| Nahanni Butte | <ul style="list-style-type: none"> Nahanni Butte Health Station Nahanni Butte Social Services | <ul style="list-style-type: none"> health station serviced by Fort Simpson |
| Trout Lake | <ul style="list-style-type: none"> Trout Lake Health Station Trout Lake Social Services | <ul style="list-style-type: none"> health station serviced by Fort Simpson |
| Wrigley | <ul style="list-style-type: none"> Wrigley Health Centre and Residence Wrigley Social Services | <ul style="list-style-type: none"> health centre serviced by Fort Simpson |
| <p>NOTES: A health centre is staffed by registered one or more nurses A health station is staffed by a community health worker, trained in basic first aid and cardiopulmonary resuscitation</p> | | |
| <p>SOURCE: GNWT HSS (2004)</p> | | |

Hospital services in the DCR are provided by the Stanton Hospital in Yellowknife. Air ambulances are stationed there to ensure fast response to medical emergencies in the other communities.

4.5.3 Family and Community Conditions

Alcohol abuse is the source of most wellness and policing problems in the DCR. The Fort Simpson RCMP detachment, like the detachments in many other northern communities, reported that over 90% of the work of its officers is a result of alcohol consumption and abuse (Fort Simpson RCMP officer 2002, personal communication).

Table 4-57 shows that the DCR rates of hospitalizations for alcohol-related illnesses, the indicator for alcohol abuse, were the highest of the study area regions, at 608 per 100,000 population in 1999 to 2001. This indicator rate was

consistently higher in Jean Marie River and Fort Liard than in the other DCR communities between 1994 to 1996 and 1999 to 2001, and three to five times higher in 1999 to 2001 than in the other DCR communities.

Table 4-57: Hospitalizations for Alcohol-Related Illnesses in the Deh Cho Communities

| Location | 1994–1996 (No./100,000) | 1995–1997 (No./100,000) | 1996–1998 (No./100,000) | 1997–1999 (No./100,000) | 1998–2000 (No./100,000) | 1999–2001 (No./100,000) |
|--------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT | 367 | 391 | 430 | 464 | 460 | 443 |
| DCR total | 719 | 708 | 604 | 654 | 644 | 608 |
| Fort Simpson | 859 | 631 | 462 | 335 | 392 | 262 |
| Fort Providence | 43 | 85 | 40 | 119 | 200 | 239 |
| Fort Liard | 804 | 1,175 | 1,197 | 1,406 | 1,165 | 1,336 |
| Wrigley | 578 | 578 | 729 | 372 | 368 | 0 |
| Nahanni Butte | 0 | 0 | 0 | 417 | 412 | 406 |
| Trout Lake | 1,351 | 1,351 | 1,316 | 995 | 513 | 490 |
| Jean Marie River | 1,258 | 1,258 | 1,923 | 2,614 | 2,516 | 1,360 |
| Kakisa | – | – | – | – | – | – |
| Hay River Reserve | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – |

NOTES:
 – = data not available or frequencies are too small to be reported
 0 = no hospitalization cases
 Three-year average rates per 100,000 population

SOURCE: GNWT HSS (2003b)

The alcohol offence rates in Fort Simpson have been declining for the past three or four years, whereas the rates for Fort Providence and Fort Liard have recently increased (Fort Simpson RCMP officer 2002, personal communication).

RCMP data for marijuana and other illegal drug offences shows low frequencies in the DCR (RCMP 2002).

In the Deh Cho communities, the incidence of teenage motherhood decreased by over one half between 1994 and 1998 (GNWT Bureau of Statistics 2003b).

Table 4-58 shows the spousal assault rates per 1,000 population for the DCR communities, which are considerably lower than the BDR rates. The data shows essentially curvilinear patterns of rate changes, with rates rising from 1997 to 1998 or 1999 and falling thereafter in the DCR communities. Fort Liard and Fort Providence were exceptions. In Fort Liard, as with alcohol-related

hospitalizations, rates have been consistently high since 1998 and in Fort Providence, the rate increased between 2000 and 2001.

Table 4-58: Spousal Assaults in the Deh Cho Communities

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 11 | 19 | 21 | 17 | 14 |
| DCR total | 8 | 28 | 25 | 27 | 17 |
| Fort Simpson ² | 1 | 13 | 18 | 23 | 14 |
| Fort Providence | 24 | 50 | 40 | 34 | 115 |
| Fort Liard ³ | 2 | 34 | 24 | 29 | 30 |
| Hay River Reserve | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – |
| NOTES: – = data not available 1 Includes all of the communities in the ISR, GSA, SSA and DCR 2 The Fort Simpson RCMP detachment provides policing to Wrigley and Jean Marie River 3 The Fort Liard RCMP detachment provides policing to Nahanni Butte and Trout Lake Rates per 1,000 population | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

There is no family violence shelter in Fort Simpson. If space is available, the shelter in Hay River accommodates those from the Deh Cho communities for whom GNWT HSS provides transportation (GNWT HSS 2001a).

Table 4-59 shows the rates of children taken into care in the DCR. Data is available only for the larger communities, showing a pattern of decline in Fort Simpson and Fort Providence. Rate changes were inconsistent, but appear to have increased in 2002 to 2003 in Fort Liard.

Table 4-59: Children Taken into Care in the Deh Cho Communities

| Location | 1995–1996 (No./1,000) | 1997–1998 (No./1,000) | 1998–1999 (No./1,000) | 2000–2001 ¹ (No./1,000) | 2001–2002 ¹ (No./1,000) | 2002–2003 ¹ (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Northwest Territories | 14 | 13 | 15 | 14 | 16 | 17 |
| NWT Aboriginal communities ² | 18 | 25 | 25 | 19 | 19 | 22 |
| DCR total | 16 | 13 | 13 | 14 | 12 | 17 |
| Fort Simpson | 25 | 23 | 21 | 20 | 22 | 18 |
| Fort Providence ³ | 15 | 7 | 12 | 11 | 10 | 14 |
| Fort Liard | 18 | 15 | 7 | 12 | 10 | 27 |
| Wrigley | – | – | – | – | – | – |
| Nahanni Butte | 2 | 1 | 1 | – | – | – |
| Trout Lake | – | – | – | – | – | – |
| Jean Marie River | – | – | – | – | – | – |
| NOTES: – = data not available or too small to be expressed 1 Numbers of children taken into care during some part of the fiscal year, including plan of care, supervision, apprehension, temporary custody and permanent custody children 2 All study area communities in the Northwest Territories, except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise 3 Kakisa is included in Fort Providence Hay River Reserve, West Point Reserve and Enterprise are included in Hay River (Section 4.6.3) Average rates per 1,000 total population for fiscal years, calculated based upon population estimates prepared by GNWT Bureau of Statistics | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | |

Table 4-60 shows that the pattern for *Young Offenders Act* offence rates in the Deh Cho communities during the previous four years was variable, with the highest rate in 1998. In 1998, Fort Providence had the highest of the DCR community rates, but in virtually every year after 1998, this community had one of the lowest of the DCR rates.

Table 4-60: *Young Offenders Act* Offences in the Deh Cho Communities

| Location | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 |
|---|------|------|------|------|------|------|
| NWT study area ¹ | 32 | 138 | 139 | 90 | 150 | 134 |
| DCR total | 61 | 146 | 101 | 73 | 103 | 122 |
| DCR, excluding Fort Simpson | 126 | 163 | 75 | 69 | 91 | 114 |
| Fort Simpson | 0 | 130 | 125 | 77 | 117 | 132 |
| Fort Providence | 99 | 177 | 98 | 72 | 105 | 115 |
| Fort Liard | 168 | 141 | 41 | 65 | 70 | 113 |
| NOTES: | | | | | | |
| 1 Includes all of the communities in the ISR, GSA, SSA and DCR Rates per 1,000 population, aged 10 to 19 | | | | | | |
| SOURCE: RCMP G Division (2002), RCMP local detachments (2002, 2004) | | | | | | |

Table 4-61 shows that between 1997 and 2000, violent and property crime rates fluctuated in all communities.

Table 4-61: Violent Crimes and Property Crimes in the Deh Cho Communities

| Location | Violent Crimes ¹ | | | | Property Crimes ² | | | |
|------------------------|-----------------------------|---------------------|---------------------|---------------------|------------------------------|---------------------|---------------------|---------------------|
| | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) |
| NWT | 54 | 50 | 50 | 47 | 66 | 70 | 58 | 57 |
| DCR total ³ | 92 | 104 | 87 | 99 | 78 | 81 | 76 | 67 |
| Fort Simpson | 94 | 94 | 83 | 86 | 86 | 80 | 100 | 81 |
| Fort Providence | 129 | 168 | 135 | 154 | 112 | 110 | 76 | 62 |
| Fort Liard | 136 | 145 | 118 | 153 | 98 | 132 | 105 | 118 |
| Wrigley | – | – | – | – | – | – | – | – |
| Nahanni Butte | – | – | – | – | – | – | – | – |
| Jean Marie River | – | – | – | – | – | – | – | – |
| Trout Lake | – | – | – | – | – | – | – | – |
| Kakisa | – | – | – | – | – | – | – | – |
| Hay River Reserve | – | – | – | – | – | – | – | – |
| West Point Reserve | – | – | – | – | – | – | – | – |

NOTES:
– = data held confidential because of low frequencies
1 Violent crimes include homicide, attempted murder, sexual assault, nonsexual assault, other sexual offences, abduction and robbery
2 Property crimes include breaking and entering, theft of motor vehicles, theft over \$5,000, theft of \$5,000 and under, possession of stolen goods, and fraud
3 Data for Hay River Reserve and West Point Reserve is unavailable and therefore not included in these totals
Rates per 1,000 population

SOURCE: GNWT Bureau of Statistics (2003c)

4.5.4 Social and Protection Facilities and Services

The Deh Cho Health and Social Services Authority (DCHSSA) serves the Deh Cho communities, delivering a full range of services locally to the larger communities. Personnel from the larger communities serve the neighbouring small communities. Table 4-62 indicates where each of the small Deh Cho communities receives support.

Table 4-62: Social Services Facilities in Deh Cho Region

| Small Community | Supporting Community |
|--|----------------------|
| Wrigley | Fort Simpson |
| Jean Marie River | Fort Simpson |
| Nahanni Butte | Fort Liard |
| Trout Lake | Fort Liard |
| Kakisa ¹ | Fort Providence |
| NOTE: 1 Many Kakisa residents prefer to go to Hay River, which is closer than Fort Providence | |

Table 4-63 provides information regarding the staffing and facilities of the Deh Cho RCMP detachments. Police services are available in the larger communities, but not in the smallest communities.

Table 4-63: Protection Service Features in the Deh Cho Communities (2001)

| Location | RCMP – Officers and Facilities | | | Number of Firefighters | Current Emergency Plan |
|------------------|--------------------------------|-----------------|--|------------------------|------------------------|
| | Number of Officers | Number of Cells | Maximum Capacity of Cells | | |
| Fort Simpson | 8 | 7 | 34 | 18 V | Yes |
| Fort Providence | 3 | 3 | 6, not including holding cell capacity | 8 V | Yes |
| Fort Liard | 4 | 2 | 4 | 6 V | Yes |
| Wrigley | Policed from Fort Simpson | 0 | 0 | 12 V | Yes |
| Nahanni Butte | Policed from Fort Liard | 0 | 0 | 6 V | No |
| Trout Lake | Policed from Fort Liard | 0 | 0 | 8 V | No |
| Jean Marie River | Policed from Fort Simpson | 0 | 0 | 8 V | No |
| Kakisa | Policed from Fort Providence | 0 | 0 | 5 V | No |

Table 4-63: Protection Service Features in the Deh Cho Communities (2001) (cont'd)

| Location | RCMP – Officers and Facilities | | | Number of Firefighters | Current Emergency Plan |
|--|--------------------------------|-----------------|---------------------------|--------------------------|------------------------|
| | Number of Officers | Number of Cells | Maximum Capacity of Cells | | |
| Hay River Reserve | Policed from Hay River | N/A | N/A | V, assisted by Hay River | No |
| West Point Reserve | Policed from Hay River | N/A | N/A | Serviced by Hay River | No |
| NOTES: N/A = not applicable V = volunteer | | | | | |
| SOURCES: GNWT Municipal and Community Affairs (2002), RCMP G Division (2002) | | | | | |

Volunteer firefighting units operate in all the DCR communities. The four larger communities have current emergency plans, but the remainder do not.

4.5.5 Education and Training

4.5.5.1 Levels of Education and Training

Table 4-64 shows the variation in education levels among the DCR communities. Between 1994 and 2001, the percentage of the adults who had graduated from high school decreased from 47% to 46% in the DCR. In Fort Simpson, where residents had the highest levels of education, there was an increase from 58% to 62%. Similarly, it appears that there was a 5% increase in Wrigley and a 12% increase in Jean Marie River, but the populations of these communities are too small for the rates to be reliable. The percentage of high school graduates fell in Fort Providence, and was unchanging in Fort Liard between 1994 and 2001.

Table 4-64: Education Attainment Levels in the Deh Cho Communities

| Location | High School Graduation | | | Some Post-Secondary Education | | |
|------------------------|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| NWT | 65 | 68 | 65 | 44 | 46 | 56 |
| DCR total ¹ | 47 | 50 | 46 | 30 | 36 | 37 |
| Fort Simpson | 58 | 65 | 62 | 39 | 50 | 52 |
| Fort Providence | 45 | 45 | 38 | 28 | 31 | 30 |
| Fort Liard | 33 | 32 | 33 | 16 | 20 | 27 |
| Wrigley | 30 | 31 | 35 | 16 | 18 | 30 |
| Nahanni Butte | 20 | 55 | – | 16 | 26 | 17 |
| Trout Lake | 79 | 40 | 33 | 51 | 33 | 17 |

Table 4-64: Education Attainment Levels in the Deh Cho Communities (cont'd)

| Location | High School Graduation | | | Some Post-Secondary Education | | |
|--------------------|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| Jean Marie River | 17 | 39 | 29 | 11 | 27 | 27 |
| Kakisa | 26 | 14 | 43 | 24 | 14 | – |
| Hay River Reserve | 40 | 40 | 37 | 33 | 36 | 31 |
| West Point Reserve | – | – | – | – | – | – |

NOTES:
 – = data is unavailable or held confidential because of low frequencies
 1 Does not include data for West Point Reserve
 Percentage of population, aged 15 years and older

SOURCE: Calculated from GNWT Bureau of Statistics (2003f), Statistics Canada (2003a)

GNWT ECE personnel reported that in Fort Liard, high school students often drop out to take seasonal employment (Fort Liard GNWT ECE personnel 2002, personal communication).

The percentages of adults with some post-secondary education in the Deh Cho communities increased from 30% in 1994 to 37% in 2001. Increases were typical of communities experiencing increased demands for skills, including Fort Simpson where the increase was 13%. Despite the reported concerns about leaving school early, Fort Liard residents showed an 11% increase during this period in post-secondary education.

The principal of the Deh Gah School in Fort Providence reported several concerns relating to:

- reading problems
- high dropout rates
- the challenges posed by the numbers of FAS/FAE children

In addition, she noted that there are no arrangements in place for students who, after graduation, will need further support to be ready for project or other employment (Deh Gah School principal 2002, personal communication).

Table 4-65 shows the gender differences in highest educational attainment in the Deh Cho communities in 2001. Men had the highest percentages of high school graduates in Fort Simpson, Fort Providence, Wrigley, Trout Lake and Hay River Reserve. Post-secondary education was more frequent among men than women in Fort Simpson, Fort Liard and Wrigley, but the reverse was true in Fort Providence. Because of small populations and random rounding procedures, apparent differences in very small communities may not be reliable.

Table 4-65: Education Attainment by Gender in the Deh Cho Communities (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|----------------------------------|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| DCR total | Males | 46 | 26 | 12 | 37 |
| | Females | 44 | 4 | 1 | 8 |
| DCR Aboriginal communities total | Males | 35 | 19 | 8 | 27 |
| | Females | 35 | 16 | 13 | 29 |
| Fort Simpson | Males | 63 | 36 | 18 | 54 |
| | Females | 60 | 26 | 23 | 49 |
| Fort Providence | Males | 38 | 21 | 7 | 28 |
| | Females | 36 | 16 | 14 | 30 |
| Fort Liard | Males | 33 | 18 | 10 | 28 |
| | Females | 34 | 14 | 11 | 26 |
| Wrigley | Males | 31 | 15 | 15 | 31 |
| | Females | 30 | 0 | 20 | 20 |
| Trout Lake | Males | 50 | 0 | 0 | 0 |
| | Females | 33 | 33 | 0 | 33 |
| Jean Marie River | Males | 25 | 0 | 0 | 0 |
| | Females | 33 | 0 | 0 | 0 |
| Hay River Reserve | Males | 35 | 25 | 10 | 35 |
| | Females | 33 | 27 | 13 | 40 |

NOTES:

1 All communities in the Northwest Territories study area except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise

Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)

Rates per 1,000 population, aged 15 years and older

SOURCE: GNWT ECE (2002, 2004)

In the DCR total communities as a whole, as in the Northwest Territories study area Aboriginal communities as a whole, more women than men are high school graduates. Fort Simpson is an exception, with about equal percentages of male and female high school graduates.

The highest proportion of individuals with post-secondary education is in Fort Simpson, where men have more such training than women, and Fort Liard, where women's rates are higher than those for men.

4.5.5.2 Education and Training Facilities

Table 4-66 shows that all of the Deh Cho communities offer kindergarten to Grade 12 schooling, except Wrigley and Kakisa, which have kindergarten to Grade 10 available. Kindergarten to Grade 12 is offered in Trout Lake, where only eight students were enrolled in 2004, all taught by one teacher in an adequately sized room in the band office (Trout Lake school principal and teacher, 2003 personal communication). In 2004, all of the Deh Cho schools had substantial excess capacity.

Table 4-66: School Profile Data for the Deh Cho Communities

| Location | School | Budgeted Full-time Equivalents ¹ | | | | Grades Offered ² | School Capacity ² (No.) | School Enrollment ² (No.) | Utilization ² (%) |
|---|-----------------------------------|---|---------------------|--------------------|-------------------|-----------------------------|------------------------------------|--------------------------------------|------------------------------|
| | | Teachers (No.) | Support Staff (No.) | Admin. Staff (No.) | Other Staff (No.) | | | | |
| Fort Simpson | Total | 24 | 7 | 5.25 | 3 | K to 12 | 616 | 273 | 44 |
| | Bompass | 12 | – | – | – | K to 6 | 330 | 143 | 43 |
| | Thomas Simpson | 12 | – | – | – | 7 to 12 | 286 | 130 | 45 |
| Fort Providence | Deh Gah ² | 12 | 3 | 1 | 2 | K to 12 | 266 | 173 | 65 |
| Fort Liard | Acho-Dene School ² | 10 | – | – | – | K to 12 | 242 | 108 | 45 |
| Wrigley | Chief Julian Yendo ² | 2 | 1 | 0 | 0.3 | K-10 | 110 | 33 | 30 |
| Nahanni Butte | Charles Yohin School ² | 6 | – | – | – | K to 10 | 48 | 28 | 58 |
| Trout Lake | Charles Tetcho | 1.6 | 0.52 | 0 | 0.09 | K to 12 | 33 | 8 | 23 |
| Jean Marie River | Louis Norwegian ² | 2 | 1 | 0 | 0.2 | K to 12 | 44 | 25 | 56 |
| Kakisa | Territorial ² | 1 | 1 | 0 | 0.1 | K to 10 | 22 | 6 | 27 |
| Hay River Reserve | Chief Sunrise | – | – | – | – | K to 12 | 110 | 82 | 75 |
| NOTES: K = kindergarten 1 2002 data 2 April 2004 data Enrollment data is full-time equivalents, e.g., two children attending kindergarten are counted as one full-time student GNWT ECE typically starts planning for new space when a school reaches a capacity of about 85%. | | | | | | | | | |
| SOURCE: GNWT ECE (2002, 2004) | | | | | | | | | |

During the 2002 to 2003 school year, Aurora College offered courses in four Deh Cho community learning centres.

Section 4.2.5.2, Education Facilities (ISR) provides further information on available post-secondary courses.

4.6 Baseline Conditions – Industrial and Commercial Communities in the Northwest Territories

4.6.1 Health Conditions

In 1999, 31% of the population over 15 years of age in Yellowknife used tobacco, as did 33% of those in Hay River. Available data shows declining rates of respiratory diseases for the Northwest Territories, Yellowknife and Hay River (GNWT Bureau of Statistics 1999).

Table 4-67 shows the rate of physician treatments of a respiratory diseases for Yellowknife, Hay River and Enterprise. Table 4-68 shows the indicator rates for infectious and parasitic diseases for Yellowknife and Hay River. The rates are higher than the rates for the BDR, SSA or DCR, probably because physicians are easily accessible in both communities.

Table 4-67: Cases of Respiratory Diseases Treated by Physicians in Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 638 | 612 | 587 | 559 | 543 | 504 | 481 |
| Yellowknife | 807 | 747 | 706 | 685 | 683 | 636 | 605 |
| Hay River | 928 | 911 | 894 | 863 | 792 | 705 | 609 |
| Enterprise | – | – | – | – | – | – | – |

NOTES:
 – = data not available
 Numbers are claim counts by ICD-9 code for the particular group of conditions
 Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

Table 4-68: Cases of Infectious and Parasitic Diseases Treated by Physicians in Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 253 | 245 | 250 | 235 | 232 | 222 | 218 |
| Yellowknife | 361 | 356 | 369 | 358 | 355 | 338 | 326 |
| Hay River | 245 | 229 | 220 | 190 | 190 | 214 | 232 |
| Enterprise | – | – | – | – | – | – | – |

NOTES:
 – = data not available
 Numbers are claim counts by ICD-9 code for the particular group of conditions
 Claim frequencies for each community were divided by the population of the community, giving a figure, usually a decimal, for the number of cases per person. This was then multiplied by 1,000.
 Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

Table 4-69 shows that the three-year average STI rates for the years 1994 to 1996 through 2000 to 2002 in Hay River, for both sexes and all ages, declined steadily until 2000 to 2002, whereas those in the Northwest Territories as a whole increased during this period. Those in Yellowknife increased until 1998 to 2000, and thereafter declined.

Table 4-69: Cases of Sexually Transmitted Infections in Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 11 | 11 | 12 | 12 | 14 | 15 | 16 |
| Yellowknife | 8 | 8 | 11 | 13 | 15 | 12 | 11 |
| Hay River ¹ | 14 | 11 | 12 | 9 | 8 | 10 | 14 |
| Enterprise | – | – | – | – | – | – | – |

NOTES:
 – = data not available
 1 Data for Kakisa is included in the Hay River statistics
 STIs include chlamydia, gonorrhoea and hepatitis B
 Numbers are claim counts by ICD-9 code for the particular group of conditions
 Calculated based upon population estimates prepared by GNWT Bureau of Statistics
 Three-year average rates per 1,000 population, both sexes and all ages

SOURCE: GNWT HSS (2003b)

Table 4-70 shows that cases of accidents, injuries and poisonings treated by physicians in Yellowknife, Hay River and Enterprise declined steadily between 1994 to 1996 and 2000 to 2002.

Table 4-70: Cases of Accidents, Injuries and Poisonings Treated by Physicians in Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 442 | 424 | 408 | 399 | 394 | 371 | 353 |
| Yellowknife | 531 | 495 | 471 | 463 | 468 | 434 | 407 |
| Hay River | 596 | 544 | 509 | 479 | 470 | 452 | 457 |
| Enterprise | – | – | – | – | – | – | – |

NOTES:
 – = data not available
 Numbers are claim counts by ICD-9 code for the particular group of conditions
 Three-year average rates per 1,000 population

SOURCE: GNWT HSS (2003b)

Suicide rates were slightly lower in Yellowknife and Hay River than in the Northwest Territories as a whole between 1994 and 1998 (GNWT Bureau of Statistics 2003a). The lower rates may be because these centres have lower Aboriginal components in their populations, and the fact that Aboriginal people

are statistically at higher risk than non-Aboriginal people, possibly for reasons related to their life circumstances (GNWT Bureau of Statistics 2003a).

The percentage of all deaths from accidents and injuries fell sharply between 1994 and 1998 in Yellowknife and tended to decline in Hay River. The five-year average percentages for Yellowknife, 15%, and Hay River, 17%, were considerably lower than the territorial rates.

Table 4-71 shows that the five-year averages, from 1994 to 1998, of all accidental injury deaths as a percentages of total deaths was 14% for Yellowknife and 17% for Hay River, both lower than the DCR rate of 26%.

Table 4-71: Deaths from Injuries in Yellowknife and Hay River (1994 to 1998 average)

| Location | Deaths from Injuries | | | Average Number of Deaths |
|--|----------------------|----------------------|--------------------------|--------------------------|
| | Average Number | Per 1,000 Population | Percentage of All Deaths | |
| Northwest Territories | 28.0 | 0.68 | 20 | 143.0 |
| DCR total ¹ | 3.8 | 1.18 | 26 | 14.4 |
| Yellowknife | 5.4 | 0.30 | 14 | 38.2 |
| Hay River | 2.6 | 0.68 | 17 | 15.4 |
| Enterprise | – | – | – | – |
| NOTE: – = data not available 1 Data for the Hay River Reserve and Westpoint Reserve are unavailable, and so not included in this total Five-year average numbers, rates and percentages | | | | |
| SOURCE: GNWT Bureau of Statistics (2003c) | | | | |

Table 4-72 indicates that the high rates of physician treatments of mental disorders in Yellowknife and Hay River reflect easy access to physicians. These rates were consistently higher than the Northwest Territories rates. Between 1994 and 2002, these rates declined in both Yellowknife and Hay River.

Table 4-72: Cases of Mental Disorder Treated by Physicians in the Northwest Territories, Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./1,000) | 1995–1997 (No./1,000) | 1996–1998 (No./1,000) | 1997–1999 (No./1,000) | 1998–2000 (No./1,000) | 1999–2001 (No./1,000) | 2000–2002 (No./1,000) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| NWT | 335 | 338 | 355 | 367 | 369 | 349 | 337 |
| Yellowknife | 807 | 747 | 706 | 685 | 683 | 636 | 492 |
| Hay River | 928 | 911 | 894 | 863 | 792 | 705 | 302 |
| Enterprise | – | – | – | – | – | – | – |
| NOTES: – = data not available Numbers are claim counts by ICD-9 code for the particular group of conditions Three-year average rates per 1,000 population | | | | | | | |
| SOURCE: GNWT HSS (2003b) | | | | | | | |

The influence of diamond mine employment on mental health was discussed with mental health and nursing professionals in Yellowknife. These interviews explored the effects of work cycles on family relationships, including the effects of:

- work schedules of 14 unbroken, 12-hour days at the mine
- father absences
- substantial increases in income

The most general effect of this increased employment is elevated levels of tension and stress within families. Men returning from the work cycle need rest and often want a holiday. Their wives, burdened during the work cycle with sole responsibility for running the household and managing the children, need their husbands to resume their share of the load. Yellowknife GNWT HSS personnel and nurses reported the following common behaviours and symptoms:

- increased use of alcohol and drugs
- more severe anxiety
- somatic complaints
- depression

These are effects to which both non-Aboriginal and Aboriginal people may be vulnerable.

4.6.2 Health Care Facilities and Services

Hay River and Yellowknife each have a health and social services authority. Table 4-73 lists the facilities and services provided by the Hay River Authority for Hay River town, Enterprise and the Hay River Reserve. Table 4-74 shows the facilities and services the Yellowknife Authority provides to Yellowknife and N'dilo, and also to Fort Resolution and Lutsel K'e (not presented here). The Stanton Territorial Health Authority administers the Stanton Hospital in Yellowknife (see Table 4-75).

Table 4-73: Hay River Health and Social Service Authority Facilities (2004)

| Location | Facility Name | Description |
|-------------------------|---|--|
| Enterprise | <ul style="list-style-type: none"> Enterprise Social Services | <ul style="list-style-type: none"> serviced from Hay River |
| Hay River | <ul style="list-style-type: none"> Hay River Emergency Group Home Hay River Public Health Hay River Social Services H.H. Williams Memorial Hospital medical clinic Woodland Manor | <ul style="list-style-type: none"> Child Welfare facility public health unit Social Services office regional hospital medical clinic multiple-level care residence |
| Hay River Reserve | <ul style="list-style-type: none"> Hay River Reserve Health Station Hay River Reserve Social Services | <ul style="list-style-type: none"> health station serviced from Hay River |
| SOURCE: GNWT HSS (2004) | | |

Table 4-74: Yellowknife Health and Social Service Authority Facilities (2004)

| Location | Facility Name | Description |
|--|--|---|
| Dettah | <ul style="list-style-type: none"> Dettah Health Station | <ul style="list-style-type: none"> health station |
| Fort Resolution | <ul style="list-style-type: none"> Fort Resolution Health Centre and Residence Fort Resolution Social Services Fort Resolution Elders' Facility | <ul style="list-style-type: none"> health centre Social Services office supported living |
| Lutsel K'e | <ul style="list-style-type: none"> Lutsel K'e Health Centre and Residence Lutsel K'e Social Services | <ul style="list-style-type: none"> health centre Social Services office |
| Yellowknife and N'dilo | <ul style="list-style-type: none"> Jan Stirling Centre family medical clinic Frame Lake family physicians Gibson medical clinic Great Slave medical house | <ul style="list-style-type: none"> Community Health, Community and Family Services, and administration offices primary care clinic primary care clinic primary care clinic primary care clinic |
| NOTE: A health centre is staffed by one or more registered nurses A health station is staffed by a community health worker, trained in basic first aid and cardiopulmonary resuscitation | | |
| SOURCE: GNWT HSS (2004) | | |

Table 4-75: Stanton Territorial Health Authority Facilities and Social Service (2004)

| Location | Facility Name | Description |
|-------------------------|---|--|
| Yellowknife | <ul style="list-style-type: none"> • Station Territorial Hospital • Stanton Medical Clinic • Stanton Eye Clinic • Stanton Mental Health Clinic • Stanton Health Promotion and Protection | <ul style="list-style-type: none"> • territorial hospital • clinic • clinic • clinic • office |
| SOURCE: GNWT HSS (2004) | | |

Yellowknife and Hay River both have hospitals that serve the Aboriginal communities in the southern half of the territorial study area and, when required, serve as overflow facilities for the Inuvik Hospital. Residents of Enterprise requiring hospitalization use the facilities in Hay River.

4.6.3 Family and Community Conditions

As in other Northwest Territories communities, alcohol abuse is the cause of many problems in Yellowknife and Hay River. Table 4-76 shows the hospitalizations for alcohol-related illnesses, which is used as an indicator of abuse. The 1999 to 2001 rate for Yellowknife was 329 per 100,000 population, much lower than the Northwest Territories rate of 443 per 100,000 population. The rates for hospitalization for local alcohol-related wellness in Yellowknife were markedly higher starting in 1997 to 1999, compared to previous years. The rates for Hay River and Enterprise are not available.

Table 4-76: Hospitalizations for Alcohol-Related Illnesses in Yellowknife, Hay River and Enterprise

| Location | 1994–1996 (No./100,000) | 1995–1997 (No./100,000) | 1996–1998 (No./100,000) | 1997–1999 (No./100,000) | 1998–2000 (No./100,000) | 1999–2001 (No./100,000) |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NWT | 367 | 390 | 430 | 464 | 460 | 443 |
| Yellowknife | 213 | 206 | 257 | 318 | 354 | 329 |
| Hay River | – | – | – | – | – | – |
| Enterprise | – | – | – | – | – | – |
| NOTES: – = data not available Alcohol-related conditions include alcohol psychoses, alcohol dependency syndrome and nondependent alcohol abuse Three-year average rates per 100,000 population | | | | | | |
| SOURCES: GNWT HSS (2003b) | | | | | | |

Alcohol-related offence rates have fallen in Yellowknife and Hay River in recent years (GNWT HSS 2002). However, dealing with alcohol-induced violence continues to make major demands on the Yellowknife RCMP detachment.

Rates of drug offences appear to have increased in both Yellowknife and Hay River since 1998, but these are very low in comparison with rates for liquor offences. The illicit drug traffic, now increasing because of the elevated prosperity, is a major concern in both Yellowknife and Hay River (RCMP local detachments 2002).

The rates of teen births during 1994 to 1998 were lower in Yellowknife than in the Northwest Territories as a whole. Such rates were typically higher in Hay River, but still lower than the Northwest Territories rates (GNWT Bureau of Statistics 2002a). In both communities, the incidence of lone-parent families increased slightly between 1991 and 1996 (GNWT Bureau of Statistics 2003b; Statistics Canada 2001a).

Table 4-77 indicates that spousal assaults were much lower in Yellowknife and Hay River than in the other study area communities, and lower in Yellowknife than in Hay River. In both communities, the rates fluctuated between 1997 and 2001, with no clear indication of a trend.

Table 4-77: Spousal Assaults in Yellowknife, Hay River and Enterprise

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 11 | 19 | 21 | 17 | 14 |
| Yellowknife | 2 | 5 | 7 | 5 | 6 |
| Hay River | 10 | 12 | 10 | 15 | 11 |
| Enterprise | – | – | – | – | – |
| NOTES: – = data not available 1 Includes all of the communities in the ISR, GSA, SSA and DCR Rates per 1,000 population | | | | | |
| SOURCE: RCMP local detachments (2002) | | | | | |

The number of women and children using family violence shelters is an imperfect indicator of the extent of this problem, because it is likely that many victims cannot gain access to a shelter for various reasons. However, it is noteworthy that the number of Northwest Territories women and children seeking shelter from family violence is five times higher than in Canada as a whole (GNWT HSS 1999).

Table 4-78 shows that the rates of children taken into care were lower in Yellowknife and Hay River than in the Northwest Territories Aboriginal communities. Between 1995 to 1996 and 2002 to 2003, the number of children taken into care per 1,000 population increased steadily in Yellowknife, but fluctuated in Hay River.

Table 4-78: Children Taken into Care in Yellowknife, Hay River and Enterprise

| Location | 1995–1996 (No./1,000) | 1997–1998 (No./1,000) | 1998–1999 (No./1,000) | 2000–2001 ¹ (No./1,000) | 2001–2002 ¹ (No./1,000) | 2002–2003 ¹ (No./1,000) |
|------------------------|--------------------------|--------------------------|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| NWT | 14 | 13 | 15 | 14 | 16 | 17 |
| Yellowknife | 10 | 12 | 11 | 13 | 15 | 16 |
| Hay River ² | 8 | 11 | 16 | 10 | 10 | 12 |
| Enterprise | – | – | – | – | – | – |

NOTES:
 – = data not available
 1 Numbers of children with a protection status during some part of the fiscal year, including plan of care, supervision, apprehension, temporary custody and permanent custody children
 2 Hay River Reserve, West Point Reserve and Enterprise are included in Hay River
 Average rates per 1,000 total population for fiscal years, calculated based on population estimates prepared by GNWT Bureau of Statistics

SOURCES: GNWT HSS (2003b)

More than anywhere else in the Northwest Territories, Aboriginal young people living in Yellowknife and the larger territorial towns are caught between the pressures to live a more traditional life and being attracted to a commercial, southern-Canadian lifestyle. A mental health worker in Yellowknife, with 16 years of experience, reported that many of his Aboriginal adolescent clients are becoming less attached to their cultural base. They want more material goods, and everything that southern adolescents have and do (Yellowknife GNWT HSS personnel 2002, personal communication). The result is that many young people get into trouble and come to the attention of the police. They might be charged under the *Young Offenders Act*, applicable only to offenders under 18 years of age.

Table 4-79 shows that the rates of those charged in 2002 in Yellowknife were 73 per 1,000 youths aged 12 to 19 years, and 138 per 1,000 youths in Hay River. Between 1997 and 2001, the rates for both Yellowknife and Hay River fluctuated without a definite trend.

Table 4-79: Young Offenders Act Offences in Yellowknife, Hay River and Enterprise

| Location | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 2001 (No./1,000) | 2002 (No./1,000) |
|-----------------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| NWT study area ¹ | 32 | 138 | 139 | 90 | 150 | 134 |
| Yellowknife | 61 | 88 | 110 | 77 | 79 | 73 |
| Hay River | 140 | 104 | 117 | 126 | 134 | 138 |
| Enterprise | – | – | – | – | – | – |

NOTES:
 – = data not available
 1 Includes all of the communities in the ISR, GSA, SSA and DCR
 Rates per 1,000 population aged 12 to 19

SOURCE: RCMP local detachments (2002)

Violent crime rates were unchanged in Yellowknife between 1997 and 2000, but fell somewhat in Hay River during this period. Property crime rates fluctuated inconclusively in both communities during this period (see Table 4-80).

Table 4-80: Violent Crimes and Property Crimes in Yellowknife, Hay River and Enterprise

| Location | Violent Crimes ¹ | | | | Property Crimes ² | | | |
|------------------------|-----------------------------|---------------------|---------------------|---------------------|------------------------------|---------------------|---------------------|---------------------|
| | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) | 1997 (No./1,000) | 1998 (No./1,000) | 1999 (No./1,000) | 2000 (No./1,000) |
| NWT | 54 | 50 | 50 | 47 | 66 | 70 | 58 | 57 |
| Yellowknife | 32 | 28 | 32 | 32 | 52 | 57 | 48 | 51 |
| Hay River ³ | 50 | 42 | 41 | 46 | 59 | 60 | 54 | 50 |

NOTES:
 1 Violent crimes include homicide, attempted murder, sexual assault, nonsexual assault, other sexual offences, abduction and robbery
 2 Property crimes include breaking and entering, theft of motor vehicles, theft over \$5,000, theft of \$5,000 and under, possession of stolen goods, and fraud
 3 Enterprise is policed by the Hay River RCMP
 Rates per 1,000 population

SOURCE: GNWT Bureau of Statistics (2003c)

A report from the Crime Statistics Division of the Yellowknife RCMP to the City of Yellowknife in February 2004 detailed increases in offences during the fourth quarter (Q4) of 2003 over the same quarter in 2002. Total offences against persons increased by 68%, from 158 to 266, and total property crime complaints increased by 34%, from 261 in Q4 2002 to 351 in Q4 2003. Combined offences

(property, theft and other) increased by 39% during the same period, from 1,251 to 1,737 (RCMP 2004).

These offences involved a workload of 58 criminal investigation files per member of the Yellowknife detachment during Q4, a 28% increase compared with the same period in 2002.

Total drug offences increased by 20% during this quarter, from 35 in 2002 to 42 in 2003. There were fewer total liquor-related offences in 2003 than in 2002, however.

Automobile collisions in Yellowknife increased by 15%, from 228 in 2002 to 262 in 2003 during Q4. Overall, there was a 23% increase in policing incidents, from 2,144 throughout 2002 to 2,784 throughout 2003. However, during 2003, 3,444 people were detained in Yellowknife detachment cells. This was 32% fewer than the 4,976 detained in 2002 (RCMP 2004).

4.6.4 Social and Protection Facilities and Services

The health and social services boards in Yellowknife and Hay River deliver social services to these communities. Board social services are available to the residents of all the communities served by these boards. Services that are not available from these boards can be sought outside of the Northwest Territories, upon referral of board staff.

Table 4-81 lists the protection service features in Yellowknife and Hay River. Hay River and Yellowknife both have RCMP local detachments, with Hay River also supplying policing services to Enterprise.

Table 4-81: Protection Service Features in Yellowknife, Hay River and Enterprise (2001)

| Location | RCMP – Officers and Facilities | | | Ambulance Service | Numbers of Firefighters | Current Emergency Plan |
|--|--------------------------------|------------------|--------------------------------------|-------------------|-------------------------|------------------------|
| | Numbers of Officers | Numbers of Cells | Maximum Capacity of Cells | | | |
| Yellowknife | 30 | 11 | 110, including holding cell capacity | Yes | 18 C, 18 V | Yes |
| Hay River | 9 | 4 | 12, not including holding cell | Yes | 31 V | Yes |
| Enterprise | Policed from Hay River | N/A | N/A | No | 2V (but typically more) | No |
| NOTES: C = career N/A = not applicable V = volunteer | | | | | | |
| SOURCES: GNWT Municipal and Community Affairs (2002), RCMP G Division (2002) | | | | | | |

The Yellowknife detachment of the RCMP is substantially understaffed, according to typical caseload burden criteria (McGregor 2002, personal communication). The Yellowknife caseload burden has become heavier because of the diamond mining boom and subsequent growth of the Yellowknife population. The last two years have seen increases in calls for service relating to alcohol abuse and violent crime. The demands on the police have so increased that it was projected that by the end of 2002, the Yellowknife detachment would require 12 more officers to address all relevant policing issues (Inuvik RCMP officer 2003, personal communication).

Hay River and Yellowknife both have emergency medical technician ambulance service. Yellowknife has professional firefighters and volunteer firefighters operate in Hay River and Enterprise. Only Enterprise does not have a current emergency plan.

4.6.5 Education and Training

4.6.5.1 Levels of Education and Training

Table 4-82 shows that the levels of educational attainment in both Yellowknife and Hay River have been well above attainment figures for the Northwest Territories, and show little change between 1994 and 2001. The percentages of adults with some high school education remains unchanged, at 65% in the Northwest Territories, down from 80% to 78% in Yellowknife, and up from 65%

to 67% in Hay River between 1994 and 2001. In all three jurisdictions, the percentage of adults with post-secondary training increased 2 to 16% between 1994 and 2001, with the greatest increase in Hay River.

Table 4-82: Education Attainment Levels in Yellowknife, Hay River and Enterprise

| Location | High School Graduation | | | Some Post-Secondary Education | | |
|-----------------------|------------------------|----------|----------|-------------------------------|----------|----------|
| | 1994 (%) | 1999 (%) | 2001 (%) | 1994 (%) | 1999 (%) | 2001 (%) |
| Northwest Territories | 65 | 68 | 65 | 44 | 46 | 56 |
| Yellowknife | 80 | 82 | 78 | 53 | 53 | 66 |
| Hay River | 65 | 74 | 67 | 42 | 50 | 58 |
| Enterprise | – | – | 60 | – | – | 20 |

NOTES:
– = data not available
Percentage of population, aged 15 years and older

SOURCE: Calculated from GNWT Bureau of Statistics (2003f), Statistics Canada (2003a)

The high school completion indicator for Yellowknife is virtually identical with that for Canada, and almost 2.5 times that for *rural Northwest Territories only*, the best available identifier for Aboriginal residents (data not shown) (Vodden and Svoboda 2000).

Table 4-83 shows that males had much higher high school graduation rates in Yellowknife and Hay River, but only slightly higher rates for some post-secondary education.

Table 4-83: Education Attainment by Gender in Yellowknife, Hay River and Enterprise (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|----------------------------------|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| ICCs | Males | 76 | 32 | 34 | 65 |
| | Females | 76 | 22 | 42 | 64 |
| Yellowknife | Males | 77 | 31 | 36 | 67 |
| | Females | 78 | 22 | 44 | 66 |

Table 4-83: Education Attainment by Gender in Yellowknife, Hay River and Enterprise (2001)
 (cont'd)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|------------|---------|--------------------------|---|--|---|
| Hay River | Males | 68 | 38 | 22 | 60 |
| | Females | 67 | 24 | 33 | 56 |
| Enterprise | Males | 60 | – | – | – |
| | Females | 60 | – | – | – |

NOTES:
 1 All communities in the Northwest Territories study area except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise
 Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)
 Rates per 1,000 population, aged 15 years and older

SOURCE: GNWT Bureau of Statistics (2001a)

The contrast between the education attainment rates for these two communities, to the total Aboriginal communities shows the presence of service delivery people, managers, teachers, nurses, RCMP and leaders in the ICCs.

4.6.5.2 Education and Training Facilities

The *Northwest Territories Education Act* established the student–teacher ratio in the Northwest Territories at 16:1. Table 4-84 shows that the overall student–teacher ratios for Yellowknife and Hay River are in keeping with or lower than the legislated ratio. In-school professionals and nonprofessional staff support classroom teachers and students. The GNWT ECE calculates the capacity of each Northwest Territories school. In 2004, Yellowknife District 1 was operating at 71% of capacity and Catholic schools at 99%. GNWT ECE defines capacity, but there is no requirement except that a school must conform to this guideline. The occupancy rate of the two schools in the Yellowknife Catholic system currently exceeds the GNWT ECE guideline. According to plans, a new school is to be constructed by September 2008 and although no decision has yet been made concerning allocation, some expectation exists that it could be designated as a Catholic school.

Table 4-84: School Profile Data for Yellowknife, and Hay River and Enterprise

| Location | Budgeted Full-Time Equivalents ¹ | | | | Grades Offered | School Capacity (No.) | School Enrollment ^{3,4} (No.) | Utilization (%) |
|---|---|----------------------------------|--------------------|-------------------|----------------|-----------------------|--|-----------------|
| | Teachers ² (No.) | Support Staff ² (No.) | Admin. Staff (No.) | Other Staff (No.) | | | | |
| Yellowknife ⁵ | 192.2 | 31.02 | 13.5 | 46.96 | | 4,571 | 3,678 | 80 |
| Yellowknife District No. 1 | 117.3 | 18.48 | 8 | 28.75 | | 3038 | 2161 | 71 |
| Alain St. Cyr | 6 | 3 | – | – | K to 12 | 132 | 79 | 60 |
| J.H. Sissons | 17.10 | 3.75 | – | – | K to 5 | 341 | 224 | 66 |
| Mildred Hall | 19.50 | 5 | – | – | K to 8 | 517 | 262 | 51 |
| N.J. MacPherson | 17.91 | 5 | – | – | K to 6 | 374 | 237 | 63 |
| Range Lake North | 19.08 | 5 | – | – | K to 8 | 440 | 340 | 77 |
| William McDonald | 17.00 | 3.5 | – | – | 6 to 8 | 484 | 283 | 58 |
| Sir John Franklin | 37.25 | 8.5 | – | – | 9 to 12 | 750 | 736 | 98 |
| Yellowknife Catholic Schools ² | 74.9 | 12.54 | 5.5 | 18.21 | | 1533 | 1517 | 99 |
| St. Joseph's | 35.25 | 15.7 | 3 | 0 | K to 8 | 583 | 609 | 104 |
| St. Patrick's | 34 | 18 | 3 | 0 | 9 to 12 | 400 | 510 | 128 |
| Weledeh | 16 | 12.5 | 3 | 0 | K to 8 | 550 | 398 | 72 |
| Yellowknife Private Schools | PYs not Allocated | – | – | – | – | – | 34 | |
| The Learning Centre | – | – | – | – | K to 9 | – | 14 | |
| Montessori | – | – | – | – | K to 1 | – | 4 | |
| Kiononia Christian | – | – | – | – | K to 5 | – | 16 | |
| Hay River ⁶ | 52.1 | 13.01 | 0 | 12.22 | | 1,253 | 847 | 68 |
| Diamond Jenness | 27.3 | 7 | 1 | 4 | 8 to 12 | 517 | 353 | 68 |
| Harry Camsell | 15.85 | 6.7 | 2 | 2.74 | K to 3 | 374 | 211 | 56 |
| Princess Alexandra | 8.4 | 2.5 | 2 | 2.12 | 4 to 7 | 362 | 283 | 78 |
| Francophone | 12 | – | – | – | K to 4 | – | – | |

NOTES:

– = indicates data unavailable

K = kindergarten

1 Full-time equivalent totals for the schools within the Yellowknife District 1 will not add to the total for the District as the data includes additional staffing positions

2 Staffing data is for the 2002–2003 school year; the remainder of the data is for April 2004

3 Yellowknife District 1 and Hat River data are for 2003-04, Yellowknife Catholic schools data are for 1999-2000

4 Enrollment data is full-time equivalents, e.g., two children attending kindergarten are counted as one full-time student

5 Exclusive of private schools

6 Enterprise children go to school in Hay River

GNWT ECE typically starts planning for new space when a school reaches a capacity of about 85%

SOURCE: GNWT ECE (2002, 2004)

The (Anglophone) schools in Hay River were operating at about 68% of capacity in 2004.

Aurora College has a campus in Yellowknife and offers courses in Hay River when justified by demand. No courses are currently offered in Enterprise.

4.7 Baseline Conditions – Dene Tha’ First Nation in Northwestern Alberta

4.7.1 Health Conditions

Presently there is no statistical data relating to health conditions and services among the DTFN.

Tobacco is widely used among the DTFN. People often start smoking at the young age of 14 years, and many who do not smoke chew tobacco. The percentage of smokers is also high among the Elders (DTFN residents 2002, personal communication).

Health concerns in the DTFN include:

- diabetes, which has increased notably during the past decade
- various cancers
- hypertension
- heart disease

Heart disease might be associated with alcohol abuse. Substance abuse program meetings are held monthly in Meander River and Bushe River.

Although statistical data is not available, residents indicate that STIs are not rare among Dene Tha’ community residents (DTFN residents 2002, personal communication).

Common injuries include those associated with:

- alcohol-related fights
- falls on the ice
- Ski-Doo, all-terrain vehicle and bicycle accidents

Bushe River residents experience more traffic and highway-related injuries than those in the other two communities. Pedestrians are often injured while on the highway, walking between Bushe River and High Level (Meander River nurses 2004, personal communication).

Alcohol abuse is the cause of many deaths in DTFN communities, and the incidence of deaths from alcohol has risen during the last 10 to 20 years, often resulting from:

- exposure
- cold weather

- drowning
- automobile accident
- suicide

People less than 50 years of age are the most frequent victims (DTFN residents 2002, personal communication).

Mental wellness data is not currently available for the Dene Tha'. However, through the Assembly of First Nations, the DTFN participated in the Mental Health Working Group, which produced the *Mental Wellness Framework* (see Section 4.7.1, Health Conditions (DTFN)). The publication states: *current responses to mental wellness among (Aboriginal people) are not working and that Aboriginal solutions to Aboriginal wellness are needed* (Mental Health Working Group et al. 2002: F5).

4.7.2 Health Care Facilities and Services

Table 4-85 shows the health care facilities available to the Dene Tha' communities. The large Chateh nursing station and the smaller Meander River health centre deliver health care to the Dene Tha'. A new, larger health centre is under construction, and it will replace these facilities. A nurse visits Bushe River once a week to deal with minor needs, but this community has easy access to nearby High Level. Hospitalization is available in High Level or, for serious conditions, in Edmonton.

Table 4-85: Health Care Facilities in the Dene Tha' Communities (2001)

| Location | Description of Facilities |
|---|---------------------------|
| Chateh | • nursing station |
| Meander River | • health centre |
| Bushe River | • nurse visits weekly |
| SOURCE: Chateh and Meander River health care personnel (2003, personal communication) | |

4.7.3 Family and Community Conditions

Formal community consultation meetings did not occur in the Dene Tha' communities. As a result, this section is based on informal conversations with local people, but without local verification and other input from DTFN residents people themselves.

No data is available on teenage mothers, but it was reported that teenage pregnancies are not common in the Dene Tha' communities. The 2001 census indicated that the percentage of lone parents for the DTFN was 35%, higher than the 28% reported for most of the Aboriginal communities in the Northwest Territories (Statistics Canada 2001).

Alcohol abuse occurs in the Dene Tha' communities and, as elsewhere, it is sometimes associated with family or community violence. Officers in the Assumption and High Level RCMP detachments identified a pattern common to some residents of the Dene Tha' communities in which the communities experience increased levels of alcohol abuse, violence and petty crimes when men return home from seasonal work. Some men returning from seasonal work with pay cheques may go to High Level to cash their cheques, consume alcohol, and cause policing problems. Some may return to their home community with alcohol, and consume alcohol there. They may become violent in their family or community, or involved in petty crimes (Assumption and High Level RCMP officers 2004, personal communication).

Generally, crime rates are high in the Dene Tha' communities. Chateh has the highest rate of criminal offences in Alberta (Assumption RCMP officers 2004, personal communication). Bushe River and Meander River also have above-average crime rates (High Level RCMP officers 2004, personal communication). Alcohol abuse is the main contributor to the high crime rates in all three communities (Assumption and High Level RCMP commanding officers 2004, personal communication). Breaking-and-entering, assault, impaired driving, and vandalism are the most common offences (DTFN residents 2002, personal communication). To deal with these problems, six of the seven RCMP officers in the Assumption detachment are assigned to Chateh, and one is assigned to Rainbow Lake, though both have populations similar in size (Assumption RCMP officers 2004, personal communication).

Some of the information on child welfare conditions in Section 4.8, Baseline Conditions – ICCs in Northwestern Alberta, is relevant because child protection services are delivered to the Dene Tha' from High Level.

4.7.4 Social and Protection Facilities and Services

The social service facilities on the Dene Tha' reserves include:

- a social services office and a group home in Chateh for troubled youth that delivers some basic schooling and teaches life skills
- a social services office in Meander River
- a social services office and the North Peace Tribal Council Office in Bushe River

The social service offices supply child welfare and social assistance services in each of the three communities. In addition, they deliver counselling and community wellness programs, and offer:

- youth services
- grievance and alcohol counselling
- substance abuse programs
- adult in-home care
- a family violence healing team

Child and family services are also provided in Bushe River at the North Peace Tribal Council Office.

Chateh has a RCMP local detachment. The High Level RCMP detachment, working with the North Peace Tribal Police Service, police Meander River and Bushe River. Volunteer fire departments serve Chateh and Meander River. Chateh has new firefighting facilities. The North Peace Tribal Council provides a fire safety officer, who is responsible for:

- conducting fire inspections
- facilitating fire safety training programs
- training local firefighters
- investigating the causes of fires
- maintaining statistical information relating to fire losses

4.7.5 Education and Training

4.7.5.1 Levels of Education and Training

Table 4-86 shows that the percentage of DTFN residents who are high school graduates increased from 22% in 1991 to 27% in 2001, whereas those with post-secondary training increased from 18% to 22%.

In both 1991 and 2001, the highest rates of high school graduation were for Bushe River, which has the youngest population, and the lowest rates were for Meander River. In 1991, 19% of both the Chateh and Bushe River populations had some post-secondary training, and by 2001, those with some post-secondary education had increased to 21% in Chateh and 43% in Bushe River.

Table 4-86: Education Attainments of Dene Tha' Community Residents

| | High School Graduate | | Some Post-Secondary Education | | Some Trades or Technical Training | | Some College or University Education | |
|---|----------------------|------|-------------------------------|------|-----------------------------------|------|--------------------------------------|------|
| | 1991 | 2001 | 1991 | 2001 | 1991 | 2001 | 1991 | 2001 |
| Census Division 17 | – | 51 | – | 41 | – | 14 | – | 27 |
| DTFN total | 22 | 27 | 18 | 22 | 13 | 8 | 5 | 14 |
| Chateh | 22 | 26 | 19 | 21 | 11 | 9 | 8 | 12 |
| Meander River | 16 | 12 | 11 | 8 | 11 | 0 | 0 | 8 |
| Bushe River | 29 | 57 | 19 | 43 | 19 | 17 | 0 | 26 |
| NOTES: – = indicates data not available Percentage of population, aged 15 years and older | | | | | | | | |
| SOURCE: Calculated from Statistics Canada (1991, 2001) | | | | | | | | |

4.7.5.2 Education and Training Facilities

The Dene Tha' have schools that meet Alberta standards on the Chateh and Meander River reserves. Bushe River students attend school in High Level.

Table 4-87 provides information on DTFN schools. The Chateh Community School, opened in fall 2002, provides kindergarten to Grade 12, and a Head Start Program. This school accommodates up to 450 students, well over the current 250 to 350 enrollment numbers. The second school for Dene Tha' children, in Meander River, was built in 2000 and offers kindergarten to Grade 9. Some Dene Tha' children attend regional public schools, which offer kindergarten to Grade 12 classes. The Fort Vermillion School Division No. 52 operates the Meander River School and the regional public schools.

Table 4-87: School Profile Data in the Dene Tha' First Nation Area (2002)

| Location | School | Teachers (No.) | Grades Taught | School Capacity (No.) | School Enrollment (No.) |
|---|-------------------------|----------------|---------------|-----------------------|-------------------------|
| Chateh | Chateh Community School | – | K to 12 | 450 | – |
| Meander River | Upper Hay River School | 18 | K to 9 | about 280 | about 200 |
| Bushe River | – | – | – | – | – |
| NOTE: – = data not available K = kindergarten | | | | | |
| SOURCE: DTFN and Fort Vermillion School Division personnel (2002, personal communication) | | | | | |

The Dene Tha' are seeking to attract Slavey-speaking teachers. Cultural programs in the Chateh and Meander River schools teach Dene.

The North Peace Tribal Council administers post-secondary education resources, in part making use of an interactive video-conferencing network that connects several of the reserve communities (DTFN residents 2002, personal communication). A variety of adult education and post-secondary options, including adult upgrading programs, are available in Chateh, Meander River and Bushe River. The Dene Tha' have a partnership with Fairview College for a variety of programs and courses.

4.8 Baseline Conditions – Industrial and Commercial Communities in Northwestern Alberta

4.8.1 Health Conditions

Tobacco use has a direct impact on health status and is a major cause of illness and death. In the winter of 2000 to 2001, 26% of Canadians smoked, as did 28% of Albertans and only an estimated 27% of Health Region 17 residents, which includes High Level, Rainbow Lake, Zama City and the DTFN communities. This contrasts with the 46% of Northwest Territories residents who smoked (Statistics Canada, 2003d).

Information on the incidence of respiratory diseases in Health Region 17 is not presently available.

The tuberculosis rate in Health Region 17 in 2001 was 30.2 per 100,000, almost eight times the 3.91 rate for all of Alberta. As is true elsewhere in Canada, the rate for Health Region 17 has increased since 1995, up from 11.7 per 100,000. The Alberta rate for 1995 was 4.6 (Alberta Health and Wellness 2004).

In Health Region 17, STI rates have been about one third higher than in all of Alberta. Between 1998 and 2002, the rates of these diseases rose in Health Region 17 from 700 to 930 per 100,000 population, a somewhat greater relative increase than that for all of Alberta, which increased from 298 to 362 per 100,000 population. However, the Health Region 17 rate was less than half the 1,640 rate per 100,000 for the whole of the Northwest Territories.

The rates of selected infectious and parasitic diseases, including pertussis, rubella, measles, *Haemophilus influenzae* (Hib) and diphtheria, in Health Region 17 are generally no higher than in the whole province. Pertussis was an exception in 2001, and the explanation might have been a local epidemic. The people of Health Region 17 are no more at risk from these diseases than people elsewhere in the province.

Community-specific mortality data by cause is not currently available for the communities in northwestern Alberta. However, data exists for all of Health Region 17, showing the potential years of life lost, i.e., the number of years of life less than 75 lost to various diseases and disorders. The data show that more years

were lost in Health Region 17 than in Alberta, during both 1992 to 1994 and 1997 to 1999, for both men and women. Although the years lost declined for women between 1992 to 1994 and 1997 to 1999, the men experienced an increase in lost years.

Information on deaths by cause in Health Region 17 and Alberta for 1992 to 1994 and 1997 to 1999 is of particular interest, because of the numbers of people employed in higher risk occupations and the numbers of Aboriginal people in Health Region 17. The death rates for injuries and motor vehicle related deaths were higher in Health Region 17 than in all of Alberta. Women's rates were lower than men's rates for these causes of death.

The rates of suicide deaths were higher in both 1992 to 1994 and 1997 to 1999 for males and females combined in Health Region 17 than in Alberta, as were the rates for males alone. The suicide rate for women in 1993 to 1994 was higher in Health Region 17 than in Alberta, but the reverse was true in 1997 to 1999.

Health Region 17 death rates for cancer, heart attack, stroke and pneumonia were all lower than the Alberta rates for these causes, because the Health Region 17 population is much younger than the all-Alberta population.

Table 4-88 shows hospitalization rates per 100,000 population of selected mental and emotional problems for Health Region 17 and all of Alberta for 1996 to 1997 and 2001 to 2002. No gender breakdown of the rates is available. In both years, the rates of neuroses, depression and hypertension disease were higher in Health Region 17 than in all of Alberta. The rates decreased for all three illness conditions between 1996 to 1997 and 2001 to 2002 in both jurisdictions. Generally, the reductions had the effect of reducing the Health Region 17 rates relative to those for all of Alberta.

Table 4-88: Hospitalizations for Selected Mental and Emotional Disorders for Alberta and Health Region 17

| Years | Neuroses | | Depression | | Hypertension Disease | |
|--|--------------------------|--------------------------------------|--------------------------|--------------------------------------|--------------------------|--------------------------------------|
| | Alberta (No./100,000) | Health Region 17 (No./100,000) | Alberta (No./100,000) | Health Region 17 (No./100,000) | Alberta (No./100,000) | Health Region 17 (No./100,000) |
| 1996 to 1997 | 59.1 | 81.3 | 38.5 | 184.3 | 53.4 | 119.3 |
| 2001 to 2002 | 45.8 | 72.2 | 32.5 | 52.9 | 45.6 | 86.6 |
| NOTE: Rate per 100,000 population | | | | | | |
| SOURCE: Alberta Health and Wellness (2004) | | | | | | |

4.8.2 Health Care Facilities and Services

Health care services are supplied by Northwestern Health Services, with a staff of over 250 serving the 18,000 residents in the area that includes Rainbow Lake and

Zama City. The High Level Hospital supplies treatment region-wide, providing eight acute treatment beds and the High Level Medical Clinic. The medical clinic in Rainbow Lake offers health care and 24-hour emergency response. Municipal District No. 23, in conjunction with Aeromedical Services, supplies emergency medical services in Zama City.

Patients with conditions that challenge the local services are transported to a larger facility in Edmonton.

4.8.3 Family and Community Conditions

There is presently no data available on family and community conditions in Rainbow Lake or Zama City.

Alcohol abuse is the source of most wellness and policing problems in northwestern Alberta. The High Level and Assumption RCMP detachments, like detachments in many other northern communities, reported that 80 to 90% of the workload is a result of alcohol consumption and abuse. Most of their problems are with Aboriginal people, comprising about half of the permanent populations of their service areas.

The resulting problems are sufficiently numerous and frequent that six of the seven RCMP officers in the Assumption detachment are assigned to Chateh and only one is assigned to Rainbow Lake, which is similar in size to Chateh. This detachment is also responsible for dealing with incidents on Highway No. 58 and the Zama Road for roughly half the distance to High Level. Incidents on both are frequent, generally involving fast-moving, large trucks. Few incidents are caused by inebriated drivers. The pressures on both the Assumption and High Level RCMP detachments are presently so great that they investigate incidents only if they involve physical injuries (Assumption RCMP commanding officer 2004, personal communication; Rainbow Lake residents 2004, personal communication).

The Assumption detachment was the busiest or second busiest detachment in Alberta in 2001 and 2002, on a per-officer basis (Assumption RCMP commanding officer 2004, personal communication).

More detail is available from the High Level detachment in the form of selected offence rates. In 2003, the rate of charges laid by the High Level detachment were as follows:

- violent crimes – 78 per 1,000 population
- property crimes – 122 per 1,000
- various liquor offences – 475 per 1,000

These rates are generally comparable with the ISR rates for 2000:

- violent crimes – 76 per 1,000 population
- property crimes – 85 per 1,000
- various liquor offences – 462 per 1,000

However, although the ISR rates are for communities with 93% Aboriginal residents, only about 37% of the residents of the High Level RCMP policing area are Aboriginal. The significance of this is reflected in the number of people detained in cells by High Level RCMP during August, September and October 2003. Of the 635 people detained, only 37, or 13 per 1,000, were High Level residents.

During the year, the rate for prisoners in cells was 893 per 1,000 population. The pressures on cell facilities is often so great that at times some prisoners have to be driven from the High Level detachment to be held in RCMP cells in Assumption or Fort Vermillion. At other times, prisoners must be transported from the Assumption detachment to holding cells in High Level (High Level and Assumption RCMP commanding officers 2004, personal communication).

However, the commanding officers of the Assumption and High Level detachments emphasized that generally a relatively small number of people commit the same offences, and are repeatedly placed in cells (Assumption and High Level RCMP commanding officers 2004, personal communication).

Drugs are available in all northwestern Alberta communities, as in generally all Alberta communities. The Alberta Youth Experience Survey (AADAC 2004) of Alberta states the following percentages of adolescent drug use in Grades 7 through 12:

- cannabis – 28%
- mescaline – 10%
- *club drugs*, e.g., ecstasy – 5%
- cocaine – 3%

Generally, only cannabis is used in Chateh, but cocaine and crack are available in High Level (Assumption and High Level RCMP officers 2004, personal communication).

The incidences of domestic issues are relatively rare in High Level. In October and November 2003, there were nine incidents.

Other indications of family and community conditions in this area include data from the High Level Women's Shelter, and from Child Protection Services.

Table 4-89 provides information on child protection cases and children in care for Municipal District 23 and all of Alberta. The child protection caseload consists of both children in the care of the Child Protection Director and other children not in the care of the Director, but whose situations have been or are under observation because of child protection concerns. For the most part, children in care are not living at home.

Table 4-89: Children Taken into Care in Municipal District 23 and Alberta

| Case Type | MD 23 | | Alberta | |
|--|-----------|-----------|-----------|-----------|
| | 1998–1999 | 2002–2003 | 1998–1999 | 2002–2003 |
| Child protection cases (No.) | 256 | 479 | 1,025 | 992 |
| In foster care (No.) | 85 | 147 | 93 | 105 |
| Aboriginal protection cases (No.) | 171 | 262 | 141 | 165 |
| Aboriginal protection cases (%) | 67 | 55 | 40 | 44 |
| Children in care (No.) | 137 | 170 | 203 | 233 |
| Aboriginal children in care (No.) | 68 | 147 | 99 | 125 |
| Aboriginal children in care (%) | 50 | 86 | 51 | 54 |
| NOTE: Rates per 10,000 families with children, by fiscal year | | | | |
| SOURCE: Government of Alberta, Child and Family Services (2004b) | | | | |

The primary care legal arrangements are:

- Emergency Apprehension
- Apprehension Order
- Order to Extend Custody/TGO to three years
- Custody Agreement with Guardian
- Custody Agreement with Child
- Temporary Guardianship Order
- Interim Custody Order
- Permanent Guardianship Agreement
- Permanent Guardianship Order

The primary not in care legal arrangements are:

- Support Agreement with Guardian
- Support Agreement with Child
- Supervision Order
- Interim Access Order
- Extended Care and Maintenance Agreement
- Open under Assessment

The data shows that the Alberta rates of child protection and children in care are both higher than the Municipal District 23 rates in 1998 to 1999 and 2002 to 2003. However, the child protection caseload increased substantially during this period in the municipal district, but fell slightly in Alberta. The rates of children in care increased in both the municipal district, by 24%, and in the province, by 15%, during this period. These differences were greater for Aboriginal children. Their rates in protection and in care were higher in Municipal District 23 than in Alberta in both 1998 and 1999, and 2002 and 2003. Although these rates increased during this period in both jurisdictions, the increases were much greater in the municipal district. Aboriginal children also comprised higher percentages of all protection and all in care cases in the municipal district than in Alberta.

Generally, the data shows that there is less need for child protection in Municipal District 23 than in Alberta, but also that the protection and in care incidence rates of Aboriginal children are higher than for all Alberta children. Moreover, although both are increasing, the rates for Aboriginal children are increasing much more rapidly.

4.8.4 Social and Protection Facilities and Services

Family Community Support Services in High Level provides referral services and information to the residents of this community, under a mandate to serve all ages. This office employs a community youth worker-program assistant and a receptionist-community resource worker.

Table 4-90 shows that a 14-officer RCMP detachment in High Level supplies policing services to the surrounding region. Rainbow Lake and Zama City are policed by the Assumption RCMP detachment. One member of the Assumption detachment lives in Rainbow Lake, and is available for emergency response when at home.

Table 4-90: Protection Service Features in High Level, Rainbow Lake and Zama City (2001)

| Location | RCMP – Officers and Facilities | | Number of Firefighters | Current Emergency Plan |
|--|--|---|------------------------|------------------------|
| | Number of Officers | Number of Cells | | |
| High Level | 14 | Multiple, including male and female holding cells | 1 C 35 V | Yes |
| Rainbow Lake | Policed by the 7-officer Assumption detachment | 8, including male and female holding cells | 15 V | Yes |
| Zama City | Policed by the 7-officer Assumption detachment | 0 | 10 V | Yes |
| NOTES: V = volunteer C = career | | | | |
| SOURCE: RCMP officers and fire chiefs in High Level, Rainbow Lake and Zama City (2002, personal communication) | | | | |

High Level is the only Alberta ICC that has a professional firefighter as fire chief. He provides some advisory services to Rainbow Lake and Zama City, and is assisted by 35 volunteer firefighters when responding to fires in High Level.

4.8.5 Education and Training

4.8.5.1 Levels of Education and Training

Table 4-91 shows that in 2001, 70% of people aged 20 years and older were high school graduates in High Level. In Rainbow Lake, 77% were high school graduates, and in Zama City, 74% were high school graduates. The percentage of those aged 20 and over in that year that had some post-secondary education was 61% for High Level, 56% for Rainbow Lake and 42% for Zama City. However, the 2001 rates are for persons aged 20 years and over, whereas the 1991 data are for those aged 15 years and older. This explains in part the 12% apparent increase in high school graduates, and the 15% increase in post-secondary training in High Level between 1991 and 2001. This difference in the population base could explain Rainbow Lake's 1991 to 2001 7% increase in high school graduates, but the 2% reduction in those with post-secondary training between 1991 and 2001 indicates a decline.

Table 4-91: Education Attainment in High Level, Rainbow Lake and Zama City

| Location | High School Graduation | | Some Post-Secondary Education | |
|--------------|--------------------------|--------------------------|-------------------------------|--------------------------|
| | 1991 ¹ (%) | 2001 ² (%) | 1991 ¹ (%) | 2001 ² (%) |
| High Level | 58 | 70 | 46 | 61 |
| Rainbow Lake | 70 | 77 | 58 | 56 |
| Zama City | – | 74 | – | 42 |

NOTES:
– = data not available
1 Percentage of population, aged 15 years and older
2 Percentage of population, aged 20 years and older

SOURCE: Statistics Canada (1991, 2001)

Table 4-92 shows the highest education or training achievement level of those aged 20 years and over. High Level had 37% of its population with some college or university training. However, the highest proportion of adults having a trades certificate or diploma, 42%, was found in Zama City. The data shows that in comparison with men, slightly lower percentages of women in these communities were high school graduates. Although fewer women had trades or technical training, more had some college or university education, in comparison with men, in 2001.

Table 4-92: Highest Level of Education in Alberta, High Level, Rainbow Lake and Zama City (2001)

| Communities | Gender | Total Aged 20–64 (%) | Less than High School Graduation (%) | High School Graduates Only (%) | Some Trades or Technical Training (%) | Some College or University (%) |
|-----------------|--------|----------------------------|---|---|--|---|
| Alberta | Total | 1,816,025 | 22 | 25 | 14 | 38 |
| | Male | 911,510 | 22 | 24 | 20 | 34 |
| | Female | 904,515 | 21 | 27 | 9 | 43 |
| High Level | Total | 2,115 | 29 | 20 | 15 | 37 |
| | Male | 1,100 | 27 | 20 | 23 | 30 |
| | Female | 1,020 | 30 | 20 | 6 | 44 |
| Rainbow Lake | Total | 670 | 24 | 33 | 23 | 19 |
| | Male | 370 | 18 | 31 | 34 | 18 |
| | Female | 310 | 31 | 37 | 10 | 21 |
| Zama City | Total | 670 | 47 | 53 ^a | 42 ^b | – |

NOTES:
a All high school graduates
b All with post-secondary training

SOURCE: Statistics Canada (2004c)

4.8.5.2 Education and Training Facilities

Table 4-93 shows the school profile of Fort Vermillion School Division No. 52 that operates the education services in High Level, Rainbow Lake and Zama City. Three schools in High Level provide kindergarten to Grade 12 education. In Rainbow Lake, kindergarten to Grade 12 schooling uses teleconferencing to enhance education. The Zama City School offers Grades 1 to 8 education.

Table 4-93: School Profile Data for High Level, Rainbow Lake and Zama City (2003)

| Location | School | Teachers (No.) | Grades Taught | School Capacity (No.) | School Enrollment (No.) |
|--|---|-------------------|--------------------|-----------------------------|-------------------------------|
| High Level | High Level School | 26 | K to 12 | – | 422 |
| | Florence MacDougall Community School | 18 | K to 12 | 392 | 342 |
| | Fairview College | – | Post- secondary | – | – |
| | High Level Christian Academy | 5 | K to 9 | 75 | 68 |
| | Holy Cross All-grade School | 22 | K to 9 | 800 | 452 |
| Rainbow Lake | Rainbow Lake School | 18 | K to 12 | 320 | 206 |
| Zama City | Zama City School | 2 | 1 to 8 | 75 | 22 |
| NOTE: – = data not available K = kindergarten | | | | | |
| SOURCE: High Level, Rainbow Lake and Zama City school personnel (2003, personal communication) | | | | | |

A branch of Fairview College in High Level provides some post-secondary training.

4.9 Synopsis

4.9.1 Health Conditions

Table 4-94 summarizes some health indicators comparing rates for the Northwest Territories and Canada supplied by GNWT HSS in 2003.

Table 4-94: Selected Health Indicators for the Northwest Territories and Canada

| Health Indicator ¹ | NWT Indicator | Canada Indicator | NWT Rate as % of Canadian Rate |
|---|---------------|------------------|--------------------------------|
| Life Chance Indicators | | | |
| Life expectancy at birth, years (1997–1999 ²) | 76 | 79 | 97 |
| Infant mortality per 1,000 live births (1997–1999 ²) | 12 | 5 | 235 |
| Low birth weight babies (%) (1997–1999 ²) | 5 | 6 | 86 |
| Fatal Conditions | | | |
| All cancers, incidence per 100,000 (2000–2002 ²) | 339 | 395 | 86 |
| Lung cancer deaths per 100,000 (1997–1999 ²) | 71 | 49 | 144 |
| Prostate cancer deaths per 100,000 (1997–1999 ²) | 21 | 28 | 77 |
| Breast cancer deaths per 100,000 (1997–1999 ²) | 14 | 26 | 53 |
| Colorectal cancer deaths per 100,000 (1997–1999 ²) | 26 | 19 | 135 |
| Acute myocardial infarction (heart attack) deaths per 100,000 (1997–1999 ²) | 46 | 64 | 73 |
| Stroke deaths per 100,000 (1997–1999 ²) | 32 | 39 | 83 |
| Injury deaths, PYLL (1997–1999 ²) | 1,309 | 697 | 188 |
| Suicide deaths, PYLL (1997–1999 ²) | 960 | 431 | 223 |
| Hospitalizations (actual and potential) | | | |
| Total hip replacements per 100,000 (1999–2000) | 74 | 66 | 112 |
| Total knee replacements per 100,000 (1999–2000) | 89 | 59 | 151 |
| Hospitalizations, conditions treatable by ambulatory care per 100,000 (1999–2000) | 1,513 | 401 | 377 |
| Pulmonary tuberculosis per 100,000 (1999–2001) | 26 | 6 | 445 |
| Sexually Transmitted Infections | | | |
| HIV rate per 100,000 (1999–2001 ²) | 1 | 7 | 11 |
| Chlamydia, all ages per 100,000 (1999–2001 ²) | 1,167 | 150 | 777 |
| Chlamydia, females 15–19 years per 100,000 (1999–2001 ²) | 9,161 | 1,214 | 755 |

Table 4-94: Selected Health Indicators for the Northwest Territories and Canada (cont'd)

| Health Indicator ¹ | NWT Indicator | Canada Indicator | NWT Rate as % of Canadian Rate |
|--|---------------|------------------|--------------------------------|
| Sanitation Problem Conditions | | | |
| Verotoxigenic <i>E. coli</i> per 100,000 (1999–2001) | 10 | 5 | 214 |
| Health-threatening conditions | | | |
| Smokers, daily/occasional, all ages per 100,000 (2000–2001) | 46 | 24 | 192 |
| Smokers, daily/occasional, 12–19 years per 100,000 (2000–2001) | 35 | 20 | 176 |
| Physically inactive people, all ages per 100,000 (2000–2001) | 50 | 54 | 94 |
| Physically inactive people, aged 65+ years per 100,000 (2000–2001) | 80 | 64 | 126 |
| Obese population, all ages per 100,000 (2000–2001) | 22 | 15 | 151 |
| NOTES: PYLL = potential years of life lost 1 For indicated years, both sexes and all ages, except as noted 2 Three-year averages Data is age-standardized with Northwest Territories–Canada rate differences. Because the Northwest Territories population is younger than that of Canada as a whole, the illness rate distributions of each tend to be different. The age standardization process eliminates this influence when comparing health indicator rates for the Northwest Territories and Canada. | | | |
| SOURCE: GNWT HSS (2003d) | | | |

Because one half of the Northwest Territories population is non-Aboriginal, the Northwest Territories data in the table should not be considered as a valid indicator of health conditions among Aboriginal people in the Northwest Territories. These indicator rates may underestimate some of their health problems.

The last column in Table 4-94 indicates the size of the Northwest Territories indicator rates relative to the rates for Canada. Thus, the first figure (97%) indicates that in the Northwest Territories, life expectancy at birth is 97% of the Canadian life expectancy rate at birth. The data shows that for two-thirds of the indicators, the territorial rates are higher than the Canadian rates. In most cases, this is to the disadvantage of those living in the Northwest Territories.

The life chance indicators favour Northwest Territories residents by showing fewer low birth weight babies, but favour Canadian residents in terms of life expectancy and lower infant mortality. Rates of fatal conditions are more associated with urban than traditional lifestyles, as is seen in the higher Canadian indicators for most cancers, heart attacks and strokes. However, colorectal and

lung cancer death rates in the Northwest Territories exceed those in Canada, and this differential is even greater in the case of injury and suicide deaths.

The hospitalization indicators might indicate that hospital care or procedures are more accessible to territorial residents than to those in Canada as a whole. However, the sanitation problem data indicates that residents in the Northwest Territories more frequently experience unsanitary conditions than those in all of Canada.

Many health concerns in the North today relate to people's health-threatening behaviours, which are shown as health-threatening conditions. Such threats include:

- STIs
- smoking
- babies with FAS/FAE
- increased rates of diabetes

High STI rates indicate high-risk sexual behaviour. The HIV rate for the Northwest Territories is substantially lower than for Canada, but the chlamydia rates for the Northwest Territories are much higher. Chlamydia and gonococcal infections are the most common STIs resulting from unprotected sex. Chlamydia infections in the Northwest Territories are seven times the national rate and gonococcal infections are nine times the national rate (GNWT HSS 2002). Most of these infections occur among persons aged 15 to 35 years. STI rates are highest in the regional Aboriginal communities, and are substantially lower in the regional centres.

Table 4-95 shows that the incidence of smoking is substantially higher throughout the Northwest Territories than the rest of Canada, as the high Northwest Territories rate for lung cancer shows. Within the Northwest Territories, almost twice as many Aboriginal people smoke as non-Aboriginal people. Tobacco smoke, whether inhaled directly or second-hand, has a direct impact on health status, and is a major cause of illness and death.

Table 4-95: Smokers in the Northwest Territories

| Location | Current Smokers 1999 (%) | Current Smokers 2002 (%) |
|--|--------------------------------|--------------------------------|
| Northwest Territories | 42 | 46 |
| Aboriginal | – | 61 |
| Non-Aboriginal | – | 32 |
| Yellowknife | 31 | 35 |
| Regional centres | – | 44 |
| Other communities | – | 62 |
| NOTE: – = data not available Percentage of adult population, aged 15 years and older | | |
| SOURCES: GNWT Bureau of Statistics (1999, 2003i) | | |

Table 4-96 shows contrasting accidental injury and death rates for the Northwest Territories and most of the Aboriginal communities. In Aboriginal communities, these rates are higher than in the rest of Canada.

Table 4-96: Selected Health Problem Indicators in the Northwest Territories

| Location | Sexually Transmitted Infections ¹ (No./1,000) | Accident and Injury Deaths ² (No./1,000) | Physician Treatments for Mental Disorders ¹ (No./1,000) |
|--|---|--|---|
| Northwest Territories | 16 | 0.68 | 337 |
| ISR total | 27 | 1.27 ^a | 153 |
| GSA total | 22 | 1.27 ^a | 252 |
| GSA Aboriginal communities total | 25 | – | 122 |
| SSA total | 28 | 0.36 | 151 |
| SSA Aboriginal communities total | 35 | 0.52 | 173 |
| DCR total | 22 | 1.18 | 161 |
| DCR, excluding Fort Simpson | – | – | – |
| Inuvik | 21 | 0.89 | 294 |
| Norman Wells | 13 | 0 | 103 |
| Fort Simpson | 27 | 0.77 | 150 |
| Yellowknife | 11 | 0.30 | 492 |
| Hay River | 14 | 0.68 | 302 |
| NOTES: – = data not available 1 2000 to 2002 three-year averaged data 2 1994 to 1998 five-year averaged data a BDR rate because there is no individual rate for the ISR or GSA | | | |
| SOURCES: GNWT HSS (2002), GNWT Bureau of Statistics (2003a) | | | |

One additional indicator, physician treatments for mental disorders, shows high rates for the regional centres of Yellowknife, Hay River and Inuvik, compared to the smaller, largely Aboriginal communities of the study area.

The incidence rates of mental disorders have been relatively under-reported. Patients subsequently found to have a mental disorder often present other symptoms when they seek treatment, according to some health centre nurses. Mental health personnel in Yellowknife report that rotation employment in the diamond mines sometimes gives rise to family stresses and mental or emotional disorders. Table 4-96 indicates that the risks are higher in Yellowknife and the towns than in the Aboriginal communities.

Because diabetes is not a reportable disease like cancer or tuberculosis, statistics on the incidence of this disease have not been collected systematically. However, diabetes is increasing in Canada, as indicated by the numbers of people suffering from obesity who are at high risk of becoming diabetic. The 2000 to 2001 Canadian Community Health Survey found that 15% of the household population aged 20 to 64 excluding pregnant women were obese, up from 13% in 1994 to 1995. The incidence of obesity in the Northwest Territories was even higher, 22%, up from 17% in 1994 to 1995. The risk of diabetes in the Northwest Territories is about three to five times higher than for the rest of Canada (Statistics Canada 2003a).

Apart from health-threatening behaviour, exposure to fine particulates, which are tiny airborne solids, might be associated with damage to human lungs. Inuvik and Norman Wells are often subject to inversion layers in winter. A low-lying blanket of cold air acts as a lid, trapping the air containing vehicular exhaust emission pollutants close to the ground. The resulting buildup of air pollution is intensified when vehicles are left with engines running when not in use.

Northern residents are concerned about the current long-range transport of air pollutants, and the increased threats to human health as pollutants travel up the food chain, affecting traditional foods.

Accidents and injuries caused over one third of life lost during the 1990s (GNWT Bureau of Statistics 2002b, 2002a). Regional data for accidental injury deaths show that five-year averaged rates were highest in the ISR and GSA regions, followed by the DCR, and were lowest in the SSA. The pattern for percentages of all deaths from accidents and injuries was similar. Percentages were highest in the BDR Aboriginal communities, at 33%, followed by the DCR, at 26%, and lowest in the SSA, at 11% (GNWT Bureau of Statistics 2003a).

Suicide rates for the BDR, SSA and DCR were calculated from five-year average numbers of suicides for 1994 to 1998. They were all much higher than the whole of the Northwest Territories and Canadian rates (GNWT Bureau of Statistics 2003). Suicide is a major and growing concern in the Northwest Territories, both

because the incidence of suicide is so high relative to the rest of Canada, and because so many are teenage suicides. The tragedy a suicide inflicts on the victim's family is much broader in small Aboriginal communities. Because these communities are so interrelated, with many residents being relatives of the victim, the shock is inevitably widely felt. Community recovery from a suicide can be a slow process.

The available three-year averaged data for physician treatments of infectious and parasitic diseases for 1994 to 1996 through 2000 to 2002 show higher rates for the whole of the territories than for the ISR, GSA, SSA or DCR. The 1994 to 1996 rate was highest for the GSA and DCR, but these rates fell consistently so that in 2000 to 2002, the DCR rate was lower than the GSA rate, although still higher than the ISR and SSA rates.

For respiratory diseases, the rate for the SSA was again lowest, having declined consistently. GSA rates were the highest, and sometimes above the territorial rate.

4.9.2 Health Care Facilities and Services

For some Aboriginal people, traditional healing practices provide the procedure of choice for some health complaints. As part of the traditional knowledge study for the project, information on the following is now being collected:

- numbers of traditional healers
- conditions that healers are asked to heal
- the proportions of the Aboriginal community residents who depend on these healing practices

Health care facilities, and family and community services are provided to ISR and GSA residents by the IRHSSA. The IRHSSA has funded 8.5 positions for physicians, 63 for nurses and 192 for support staff.

SSA residents are served by the new SRHSSA based in Norman Wells. The DCHSSA, with headquarters in Fort Simpson, delivers services to residents of the DCR.

The three hospitals in the study area are:

- Inuvik Regional Hospital, which serves the Inuvialuit, Gwich'in and Sahtu communities
- Stanton Hospital in Yellowknife, which serves the Deh Cho communities and others outside the study area
- H.H. Williams Memorial Hospital in Hay River

Substance abuse is a large problem in many northern communities. Severely addicted persons might be sent for treatment to the Inuvik Hospital, Stanton Hospital in Yellowknife or Nats'ejee K'eh Treatment Centre in Hay River. Stanton hospital has 10 beds assigned to mental health patients. A total of 261 patients were hospitalized for 2,417 patient days in 2001 to 2002 (Stanton Hospital administrator 2003, personal communication).

The Nats'ejee K'eh Treatment Centre is the only residential alcohol and drug treatment centre in the Northwest Territories, serving male and female, Aboriginal and non-Aboriginal clients from the Northwest Territories, Nunavut and northern Alberta. This 32-bed facility offers a 28-day treatment program, a 14-day followup program and a 14-day support program. The treatment resources include one-on-one counselling, group counselling and community presentations oriented toward prevention. In 2000 and 2001, this centre served 238 clients.

Patients with special needs that the Northwest Territories facilities are not equipped to handle are sent to provincial centres. They include:

- pregnant women
- people with physical or mental illnesses
- young people under age 17

The larger communities are served by health centres, i.e., public health units where there are hospitals, staffed by several registered nurses. Health stations staffed by a single community health worker serve the smaller communities. These community health workers can contact a registered nurse at any time, i.e., 24 hours a day, for consultation and treatment advice.

In addition to integrated primary care, the health and social service boards deliver a broad range of community health services.

4.9.3 Family and Community Conditions

Alcohol abuse is the source of many problems in the Northwest Territories. The RCMP in several communities in 2002 and 2003 reported that 90% of their policing problems were alcohol related. Nurses and social workers consulted agreed that alcohol abuse was a serious problem among men and women (Binder, Smith and Lennie 2002, personal communication).

Data for the Northwest Territories for 2000 to 2001 shows that rates for drinking alcohol during the previous 12 months and during the previous week were substantially higher among non-Aboriginal than among Aboriginal people. However, the rates of heavy drinking during the previous month were higher among Aboriginal people. Among both Aboriginal and non-Aboriginal respondents, the alcohol consumption rates among males were about twice as high as among females.

The highest consumption rates were among young people aged 19 to 29 for both ethnic groups. Non-Aboriginal people, who more often live in communities where there are liquor stores, had somewhat higher consumption rates than Aboriginal young people (GNWT HSS 2003b, 2003d).

Table 4-97 shows the hospitalization rates for alcohol-related illnesses and alcohol-related offences. One indication of excessive alcohol consumption is rates of hospitalization for alcohol-related conditions, i.e., alcohol psychoses, alcohol dependency syndrome. The highest regional rates are in the DCR and the GSA.

Table 4-97: Hospitalizations for Alcohol-Related Illnesses and Alcohol-Related Offences

| Location | Hospitalizations for Alcohol-Related Illnesses ¹ (No./100,000) | 2002 Alcohol Offences (No./1,000) | 2002 Alcohol Offence Rate as % of 1998 Rate (%) |
|---|--|--------------------------------------|--|
| NWT study area ² | 316 | 313 | -15 |
| ISR total | 150 | 462 | 117 |
| GSA total | 549 | 570 | 5 |
| GSA Aboriginal communities total | 336 | 747 | 191 |
| SSA total | 220 | 256 | 18 |
| SSA Aboriginal communities total | 276 | 305 | 13 |
| DCR total | 608 | 435 | 3 |
| DCR, excluding Fort Simpson | 772 | 334 | -9 |
| Inuvik | 618 | 525 | -16 |
| Norman Wells | 76 | 153 | 49 |
| Fort Simpson | 262 | 549 ^a | 16 |
| Yellowknife | 329 | 253 | -36 |
| Hay River | – | 341 | 35 |
| Tuktoyaktuk | 102 | 663 | 130 |
| Aklavik | – | 498 | 171 |
| Fort Good Hope | 268 | 380 | 78 |
| Tulita | 198 | 222 | -46 |
| NOTES: – = data not available 1 Three-year average rate for 1999 to 2001 2 Includes all of the communities in the ISR, GSA, SSA and DCR a Jean Marie River and Wrigley are policed by the Fort Simpson RCMP detachment, and accordingly their offences are included in the Fort Simpson total | | | |
| SOURCES: GNWT HSS (2003b), RCMP G Division (2002) | | | |

Table 4-98 shows that such hospitalization rates were about five times higher among Aboriginal than non-Aboriginal people in 1999 to 2001. In addition, rates are highest in the regional centres, which have liquor stores. Other data shows that heavy drinking is most common among adults aged 19 to 29 years (GNWT HSS 2003b, Bureau of Statistics 2003d).

Table 4-98: Hospitalizations for Alcohol-Related Illnesses in the Northwest Territories

| Ethnicity and Location | 1994–1996 | 1995–1997 | 1996–1998 | 1997–1999 | 1998–2000 | 1999–2001 | Change, 1994-1996 to 1999-2001 (%) |
|---|---------------|---------------|---------------|---------------|---------------|---------------|---|
| | (No./100,000) | (No./100,000) | (No./100,000) | (No./100,000) | (No./100,000) | (No./100,000) | |
| Northwest Territories | | | | | | | |
| Both | 367 | 390 | 430 | 464 | 460 | 443 | 21 |
| Aboriginal | 581 | 665 | 741 | 799 | 775 | 736 | 27 |
| Non-Aboriginal | 168 | 135 | 135 | 128 | 134 | 141 | -16 |
| BDR | | | | | | | |
| Both | 405 | 428 | 463 | 452 | 373 | 378 | -7 |
| Aboriginal | 506 | 556 | 588 | 563 | 454 | 459 | -9 |
| Non-Aboriginal | 95 | 38 | 60 | 83 | 103 | 117 | 23 |
| SSA | | | | | | | |
| Both | 182 | 158 | 169 | 249 | 277 | 220 | 21 |
| Aboriginal | 221 | 170 | 185 | 317 | 366 | 312 | 41 |
| Non-Aboriginal | 84 | 127 | 129 | 82 | 44 | 0 | -100 |
| DCR | | | | | | | |
| Both | 719 | 708 | 604 | 654 | 644 | 608 | -15 |
| Aboriginal | 852 | 852 | 736 | 788 | 772 | 707 | -17 |
| Non-Aboriginal | 170 | 113 | 57 | 60 | 62 | 178 | 5 |
| Yellowknife | | | | | | | |
| Both | 213 | 206 | 257 | 318 | 354 | 329 | 55 |
| Aboriginal | 584 | 637 | 841 | 1036 | 1104 | 960 | 64 |
| Non-Aboriginal | 116 | 93 | 100 | 110 | 125 | 132 | 14 |
| Other Northwest Territories | | | | | | | |
| Both | 722 | 837 | 926 | 908 | 872 | 884 | 22 |
| Aboriginal | 974 | 1,255 | 1,433 | 1,443 | 1,401 | 1,413 | 45 |
| Non-Aboriginal | 437 | 364 | 334 | 251 | 220 | 226 | -48 |
| SOURCE: GNWT HSS (2003d), GNWT Bureau of Statistics (2003a) | | | | | | | |

A consequence of alcohol abuse among women is the substantial and possibly growing number of babies with FAS/FAE. There are currently no statistics on FAS/FAE babies in the Northwest Territories, because only a physician can make the diagnosis. Most babies are born in nursing stations, and a doctor is rarely there to make the determination.

Two programs, designed for the well-being of northern Aboriginal people, are now known to have had severe adverse effects on many families in the Northwest Territories:

- evacuating people suffering from tuberculosis to tuberculosis sanatoria in Edmonton, Winnipeg and elsewhere, beginning in the 1950s
- educating Aboriginal children in residential schools. This began in the early 1800s and involved separating Aboriginal children from their parents, transporting some of them many hundreds of kilometres to residential schools, and housing them in church-run hostels. There, some of them were subjected to physical, mental and sexual abuse.

The continuing effects of residential schooling commonly include damaged family and community relationships. Substance abuse, family violence, sexually abusing others and suicide are common among victims of sexual abuse.

Other current issues of concern regarding families are:

- teenage motherhood
- lone-parent families
- family violence
- elder abuse

Births to teenage mothers are more common in the Northwest Territories than in Canada as a whole. The Northwest Territories rate was 120 per 1,000 live births for 1994 to 1997, compared to 20 per 1,000 live births in Canada for 1998 (Family Facts 2001).

Lone parents can face particular challenges without a spouse to share responsibilities, and they often have low incomes (GNWT HSS 1999). In 2001, the percentage of single-parent families in the Northwest Territories, 28%, was slightly higher than in the rest of Canada, 25% (Statistics Canada 2001). Between 1991 and 1996, the percentages of lone-parent families increased in some of the study area communities and decreased in others (GNWT Bureau of Statistics 2003a).

Family violence is a serious problem throughout the Northwest Territories, particularly in the ISR. Table 4-99 shows that spousal assault rates were high in the ISR and the SSA Aboriginal communities as well as in Inuvik. Assaults were generally declining in the Inuvialuit and Gwich'in Aboriginal communities, but were increasing in the Sahtu and Deh Cho communities, and in Inuvik. However, data is most consistent with the conclusion that spousal violence might be increasing slightly (RCMP local detachments 2002). Although the data is imprecise, the rate of Northwest Territories women seeking shelter from family violence is eight times the rate in Canada as a whole (GNWT HSS 2001b).

Family violence shelters in Inuvik and Tuktoyaktuk serve those who come as walk-ins or who come from other communities.

Table 4-99: Statistical Indicators of Dysfunctional Families and Weakness in Community Controls

| Location | Spousal Violence ¹ | Children in Care ² | Young Offenders ¹ | Violent Crimes ³ | Property Crimes ³ |
|--|-------------------------------|-------------------------------|------------------------------|-----------------------------|------------------------------|
| Northwest Territories | – | 17 | – | 47 | 57 |
| NWT study area ⁴ | 17 | 17 | 134 | 57 | 63 |
| ISR total | 57 | 22 | 205 | 75 | 85 |
| GSA total | 36 | 31 | 315 | 69 | 78 |
| GSA Aboriginal communities total | 10 | 45 | 230 | 62 | 75 |
| SSA total | 25 | 14 | 166 | 47 | 76 |
| SSA Aboriginal communities total | 37 | 20 | 1226 | 61 | 88 |
| DCR total | 17 | 17 | 123 | 99 | 67 |
| DCR, excluding Fort Simpson | 21 | 18 | 114 | 106 | 58 |
| Inuvik | 43 | 27 | 313 | 62 | 75 |
| Norman Wells | 0 | – | 61 | 17 | 49 |
| Fort Simpson | 14 | 18 | 132 | 86 | 81 |
| Yellowknife | 6 | 16 | 73 | 32 | 51 |
| Hay River | 11 | 12 | 138 | 46 | 50 |
| <p>NOTES: – = data not available 1 2001 data (RCMP data) 2 2002 to 2003 data (GNWT HSS data) 3 2000 data (Statistics Canada data) 4 Includes all of the study area communities in the ISR, GSA, SSA and DCR Rates per 1,000 population</p> | | | | | |
| <p>SOURCES: RCMP G Division (2002), GNWT HSS (2003b), Statistics Canada (2001), GNWT Bureau of Statistics (2002b)</p> | | | | | |

A family violence centre and a child welfare facility are located in Inuvik to serve residents of the ISR, GSA and SSA. There are also women's shelters in Tuktoyaktuk, Hay River and Yellowknife. Residents of all the Northwest Territories communities can access the facilities and services in their regional health centres on a space-available basis. Services not available in these centres may be sought in Yellowknife or outside the Northwest Territories, upon referral by a relevant authority.

Child protection is a major issue in the study area communities. The highest rates for children taken into care in 2002 to 2003 were in the GSA, well above the rate for Northwest Territories as a whole. Providing for children in care is hampered

by a shortage of foster homes in which to place these children (GNWT HSS 2002, 2003b).

Three indicators provide additional insights into community conditions:

- *Young Offender Act* offences
- incidences of violent crimes and property crimes
- gambling offences
- Elder abuse

An indicator of adolescent problems is the *Young Offender Act* offence data for 1997 to 2001, supplied by RCMP local detachments. *Young Offender Act* offender rates were about twice as high for the ISR and SSA as they were for the GSA and DCR for this period (RCMP local detachments 2002).

Data for violent crimes and property crimes in 2000 indicate that the smaller communities in the study area had higher offence rates than the towns of Inuvik and Hay River, and Hay River had higher violent crime rates than Yellowknife. Violent crime rates increased in the GSA and DCR, and declined in the ISR and SSA during the 1990s. Property crime rates have declined in all of the settlement areas (GNWT Bureau of Statistics 2002b).

Gambling was reported by IRHSSA personnel (2002, personal communication) to be a serious problem among men and women. Inuvik and Aklavik GNWT HSS personnel indicated that gambling, like alcoholism, is an addiction. Both are destructive of family and community wellness, frequently resulting in severe financial problems and child neglect (IRHSSA personnel 2002, personal communication). Charges are seldom laid because it is a quiet activity, not leading to public disturbances, and thus does not attract the attention of the RCMP.

The executive director of the Northwest Territories Seniors' Society reported that Elder abuse is a big and growing problem in the Northwest Territories (2002, personal communication). A toll-free hotline received over 800 calls during 2001 from all over the Northwest Territories, reporting abuse and other seniors' problems. No statistical data is currently available.

4.9.4 Social and Protection Facilities and Services

Social services are delivered to the Northwest Territories study area communities by the:

- IRHSSA
- SRHSSA
- DCHSSA
- Yellowknife Authority
- Hay River Authority

- Stanton Territorial Health Authority

A variety of service providers are engaged in the Alberta communities.

Table 4-100 lists the prison facilities to which offenders can be sent. All the Northwest Territories communities with more than 400 residents have RCMP detachments. Smaller communities are typically policed by the closest detachments. All of the detachment headquarters are equipped with holding cells.

Table 4-100: Locations and Capacities of Correctional Facilities in the Northwest Territories (2003)

| Name | Location | Capacity | Prisoner Gender and Age | Total Prisoners (1999–2002) |
|--|-------------|----------------------------|------------------------------------|-----------------------------|
| Dene K'onía Young Offender Facility | Hay River | 16 open custody | M only (since 2002), aged 12 to 17 | 315 |
| River Ridge Young Offender Facility | Fort Smith | 14 secure custody | M only, aged 12 to 17 | 156 |
| Arctic Tern Female Young Offender Facility | Inuvik | 4 secure, 10 open custody | F only, aged 12 to 17 | New facility (no data) |
| North Slave Young Offender Facility | Yellowknife | 15 secure, 10 open custody | M only, aged 12 to 17 | New facility (no data) |
| Yellowknife Correctional Facility | Yellowknife | 132 | M only, aged 18+ | 2,972 |
| Territorial Women's Correctional Centre | Fort Smith | 10 | F only, aged 18+ | 157 |
| South Mackenzie Correctional Centre | Hay River | 54 | M only, aged 18+ | 829 |
| NOTES: M = male F = female | | | | |
| SOURCE: Department of Justice personnel (2003, personal communication) | | | | |

4.9.5 Education and Training

4.9.5.1 Levels of Education and Training

In the Northwest Territories, the level of educational attainment is used as a measure of literacy. The Northwest Territories has not been included in surveys that assess prose, document and quantitative literacy, e.g., the 1994 International Adult Literacy Survey. People who have achieved Grade 9 but less than Grade 12 are considered to have low literacy, and those with less than Grade 9 are considered to be of questionable literacy. A Grade 9 education is a minimum requirement for employment in many jobs.

However, in 1999, 87% of the Northwest Territories adult population, 96% of the Yellowknife population and 93% of the Hay River population had achieved a

Grade 9 education, showing that the level of education is improving. In all four Northwest Territories settlement areas in 1996, only two thirds of adults aged 15 years and over had a Grade 9 education.

Table 4-101 shows that between 1994 and 2001, the proportion of the adult population in the Northwest Territories who were high school graduates remained the same, at 65%. In the regional Aboriginal communities, this rate fluctuated between 41% and 42%.

Table 4-101: Education Attainments Summary

| Location | High School Graduation | | Post-Secondary Education | |
|--|------------------------|----------|--------------------------|----------|
| | 1994 (%) | 2001 (%) | 1994 (%) | 2001 (%) |
| NWT | 65 | 65 | 44 | 56 |
| Study area Aboriginal communities total ¹ | 40 | 39 | 27 | 34 |
| ISR total | 41 | 39 | 29 | 36 |
| GSA total | 64 | 64 | 40 | 54 |
| GSA Aboriginal total | 41 | 41 | 25 | 35 |
| SSA total | 54 | 55 | 38 | 50 |
| SSA Aboriginal total | 41 | 42 | 30 | 38 |
| DCR total ² | 47 | 46 | 30 | 36 |
| DCR, excluding Fort Simpson | 39 | 36 | 24 | 27 |
| Inuvik | 72 | 71 | 54 | 61 |
| Norman Wells | 83 | 84 | 55 | 72 |
| Fort Simpson | 58 | 62 | 39 | 53 |
| Hay River | 65 | 67 | 42 | 58 |
| Yellowknife | 80 | 78 | 53 | 66 |
| Tuktoyaktuk | 40 | 37 | 28 | 30 |
| NOTES: | | | | |
| 1 All study area communities in the Northwest Territories except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise | | | | |
| 2 Does not include data for West Point Reserve | | | | |
| Percentage of population, aged 15 years and older | | | | |
| SOURCE: GNWT Bureau of Statistics (2003f), Statistics Canada (2001) | | | | |

Table 4-102 shows that in the Northwest Territories as a whole, in the study area Aboriginal communities and in some individual communities, i.e., Tuktoyaktuk, Fort Good Hope, Inuvik and Yellowknife, slightly more women than men were high school graduates. The highest rates of high school graduation for women in the Aboriginal communities were found in the GSA, 42%, and the SSA, 41%. The lowest rate for women was in the DCR (35%). Men had more post-secondary

education than women in the southern centres. There were no gender differences in post-secondary education in Norman Wells.

Table 4-102: Education Attainment, by Gender (2001)

| Location | Gender | High School Graduate (%) | Some Post-Secondary Trades Training (%) | Some College or University Education (%) | Some Trades Training, College or University (%) |
|---|---------|--------------------------|---|--|---|
| NWT | Males | 64 | 30 | 26 | 56 |
| | Females | 66 | 22 | 34 | 56 |
| NWT Aboriginal communities total ¹ | Males | 43 | 25 | 11 | 37 |
| | Females | 44 | 20 | 18 | 38 |
| ISR total | Males | 38 | 26 | 9 | 35 |
| | Females | 41 | 21 | 14 | 35 |
| GSA Aboriginal communities total | Males | 39 | 24 | 12 | 36 |
| | Females | 42 | 22 | 15 | 37 |
| SSA Aboriginal communities total | Males | 43 | 24 | 11 | 36 |
| | Females | 41 | 17 | 20 | 38 |
| DCR Aboriginal total | Males | 35 | 19 | 8 | 27 |
| | Females | 35 | 16 | 13 | 29 |
| Inuvik | Males | 70 | 36 | 25 | 61 |
| | Females | 72 | 28 | 33 | 61 |
| Norman Wells | Males | 84 | 45 | 25 | 71 |
| | Females | 82 | 27 | 44 | 71 |
| Fort Simpson | Males | 63 | 36 | 18 | 54 |
| | Females | 60 | 26 | 23 | 49 |
| Hay River | Males | 68 | 38 | 22 | 60 |
| | Females | 67 | 24 | 33 | 56 |
| Yellowknife | Males | 77 | 31 | 36 | 67 |
| | Females | 78 | 22 | 44 | 66 |
| Tuktoyaktuk | Males | 35 | 20 | 9 | 29 |
| | Females | 37 | 17 | 13 | 30 |
| Fort Good Hope | Males | 48 | 30 | 13 | 43 |
| | Females | 50 | 31 | 17 | 47 |

NOTES:

1 All study area communities in the Northwest Territories except Inuvik, Norman Wells, Fort Simpson, Yellowknife, Hay River and Enterprise

Percentages frequently do not sum to 100 for two cumulating reasons: Statistics Canada random rounding of frequencies, and small community populations (see Section 1.8.3, Limitations of Low-Frequency Data)

Rates per 1,000 population, aged 15 years and older

SOURCE: GNWT Bureau of Statistics (2002b)

Leaving school before graduation is a concern throughout the Northwest Territories. The reasons for leaving school early are complex and inter-related, and based on circumstances in the home, school, community or a combination of these factors, and the personal lives of students. Stay-in-school initiatives and access to higher levels of education in Northwest Territories communities help to keep students in school and facilitate graduation.

Dropout rates are almost impossible to calculate because of the numbers of families migrating in and out of the Northwest Territories, as well as among different areas within the territory. However, in *State of the ISR Since the Signing of the Inuvialuit Final Agreement*, Vodden writes, *Perhaps the single most troubling indicator relating to the economy of the ISR is the high school graduation rate that is extremely low and getting worse relative to other areas of the North* (Vodden 2001: 8).

A large portion of the adult population has taken trade or other nonuniversity courses. The percentage with some post-secondary education in the Northwest Territories increased from 44% to 46% between 1996 and 2001.

A high school completion index has been developed, which makes it possible to compare high school completions in the Northwest Territories to those in all of Canada. Table 4-103 includes the high school completion rate, i.e., the ratio of numbers graduating from high school to those enrolled in Grades 7 to 12 for an area, expressed as a percentage of the same ratio for all of Canada. The result is an index number, with the Canadian index set at 100 for a particular year and the index for the ISR (23 for 1999, for example) equal to the ISR completion rate expressed as a percentage of the Canada-wide completion rate.

Table 4-103: High School Completion Indicators

| Location | 1990 Completion Index | 1999 Completion Index | 1990–1999 Average Completion Rate (%) |
|-----------------------------------|-----------------------|-----------------------|---------------------------------------|
| Canada | 100 | 100 | 12 |
| ISR total | 34 | 23 | 4 |
| Yellowknife | 88 | 98 | 10 |
| Northwest Territories | 44 | 60 | 6 |
| Northwest Territories, except ISR | 49 | 65 | 6 |
| Rural Northwest Territories only | 2 | 40 | 3 |
| Inuvik | – | – | 4 |
| ISR, except Inuvik | – | – | 3 |
| NOTE: – = data not available | | | |
| SOURCE: Vodden and Svoboda (2000) | | | |

The index figure for the ISR fell from 34 to 23 between 1990 and 1999, whereas the indices for the other four Northwest Territories areas all increased. The decline in the rate of high school completions among the Inuvialuit was confirmed by an Inuvialuit Regional Corporation report that completions had dropped by 20% (Sachs Harbour residents 2002, personal interview).

The GNWT ECE is responsible for providing kindergarten to Grade 12 education services. In each community with a primary or secondary school or both, a locally elected district education authority oversees the delivery of education services.

Northwest Territories adults can pursue further education or acquire skills training within their home community, in a regional centre in the Northwest Territories or in southern Canada. Aurora College has campuses in Inuvik and Yellowknife, and community learning centres in many other communities.

The full-time equivalent enrollment in primary and secondary schools throughout the study communities remained stable from 1995 to 2000. Generally, Northwest Territories schools have found that enrollment in elementary and junior high school has remained stable, whereas enrollment in senior high school has increased.

In the Northwest Territories, almost all the study area communities have satisfactory school facilities, suitably equipped and staffed with qualified teachers to a ratio of no more than 19 students per teacher, as required by the Northwest Territories *Education Act*. An apparent exception is Tuktoyaktuk where, because high school grades are provided in the pre-existing school facility, some make-shift, unsatisfactory classrooms are being used, according to local residents.

Aurora College delivers a wide variety of academic upgrading and skills training courses to Aboriginal communities, when there is adequate local demand. Examples of short-term training programs are driver, oil and gas, rig, first aid and safety training courses. See Section 2, People and the Economy for additional details on labour force discussions. Substantial financial assistance is available to qualifying students. Almost 1,500 Northwest Territories adults, including 830 adults in Yellowknife and 124 in Hay River, received financial assistance to attend school in 1999 to 2000.

