

Housing triggers health problems for Canada's First Nations

Despite evidence that overcrowded, poorly maintained housing is leading to health problems in Canada's Indigenous communities, the government has yet to act. Paul C Webster reports.

Dean Kicknosway figures his health collapse began 18 years ago, when he first noticed black mould creeping up the interior walls of his home. Kicknosway, who is a member of the Chippewa Potawatomi Aboriginal band on Walpole Island, which is located on the St Clair River between Canada and the USA, adamantly blames his mouldy home for years of troubled breathing, and for a stroke, which forced him into hospital in 2013, and then into the long-term health-care facility where he now lives. "I'm not the only one whose health was wrecked this way", he mutters angrily. "Lots of people around here are ashamed to show their homes to strangers because of the mould."

Huge numbers of Aboriginal Canadians like Kicknosway blame their health problems on substandard housing. For hard evidence, they point to the fact that tuberculosis transmission among Aboriginals is at least 20 times higher than among non-Aboriginals—an inequity they blame on overcrowding and inadequate housing support from the Canadian Government, which is legally responsible for Aboriginal health. These arguments got a substantial boost from the UN Special Rapporteur on the Rights of Indigenous Persons, James Anaya, shortly before he stepped down in 2013.

In a report noting that Aboriginals compare unfavourably with other Canadians on measures of life expectancy, infant mortality, suicide, and communicable and chronic diseases, Anaya argued that "crisis level" housing problems propel these inequities, "especially in the north, where remoteness and extreme weather exacerbate housing problems". According to Anaya, whose findings were based on a countrywide tour of Canadian Aboriginal communities,

"endemic" overcrowding "contributes to higher rates of respiratory illness, depression, sleep deprivation, family violence, poor educational achievement, and an inability to retain skilled and professional members in the community".

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But overcrowding isn't the only housing-related problem, Anaya concluded. In an echo of Kicknosway's complaints, Anaya said much of the housing stock available to Canada's 1.5 million Aboriginals, who are often referred to as First Nations people, needs major repairs, including plumbing, electrical work, and mould elimination. These conditions, Anaya reported, "add to the broader troubling water situation in First Nations reserves, in which more than half of the water systems pose a medium or high health risk to their users". Substandard housing, Anaya charged, is a major reason why "of the bottom 100 Canadian communities on the Community Wellbeing Index, 96 are First Nations".

Scientific studies

Although the Canadian Government offered little response to Anaya's housing concerns—to avoid repeating a controversy in which federal ministers labelled a well substantiated 2012 UN report on food scarcity among Canadian Aboriginals "ill-informed" and "completely ridiculous"—a spate of recent medical studies validate his conclusions. Housing is a big driver of respiratory illnesses among Indigenous children in the far north, says Anna Banerji,

director of global and Aboriginal health studies in the University of Toronto's Continuing Medical Education programme. "In one of my studies", Banerji observes, "overcrowding was associated with a two-and-a-half times increased odds of hospital admission for lower respiratory tract infections". Nunavut, Canada's northernmost Arctic territory, has the world's highest hospital admission rates for respiratory syncytial virus, Banerji adds.

Linda Larcombe, an infectious disease specialist working to develop healthier housing models with Aboriginal communities in the western Canadian province of Manitoba, says the realities are stark: "Children and adults sleeping on mattresses on the floor in living rooms, mouldy walls, broken windows, pails instead of toilets, and expressions of despair are frequent images in the Canadian media", she explains. 40% of Manitoba Aboriginals live in overcrowded conditions and 58% of their houses have mould, she adds. Spending by the Canadian Government on Aboriginal social programmes has failed to keep pace with rapid population growth, notes Larcombe, while arguing that the construction of new housing—especially housing



Dean Kicknosway

Paul C Webster



First Nations reserve in Easterville, northern Manitoba, Canada

Brendan Kennedy/Contributor

designed to suit Aboriginal living patterns rooted in rural food gathering practices—would dramatically alleviate conditions that “contribute to an array of respiratory infections, tuberculosis, chronic illnesses, increased rates of learning disabilities, and attempted suicides among youth”. In Larcombe’s assessment, addressing the housing crisis would help alleviate a wide array of health inequities. “Housing is the place to start”, she insists. “If we can’t address the housing issue, something is seriously wrong.”

Mental health

As in western Canada, more than 40% of Aboriginals living in Canada’s far north live in overcrowded households, says Mylène Riva, an epidemiologist at Laval University in Quebec who studies Arctic health disorders. Although the physical effects of overcrowding are reasonably well known, Riva argues, the mental health effects remain under-appreciated. In a recent study of 822 Inuit adults in Nunavik, Quebec’s northernmost region, Riva probed the “biological wear and tear bodies and brains experience when cumulatively exposed to chronic stressful situations”, and found overcrowding is significantly associated with raised stress levels, especially in women. The risks for at least seven physiological indicators, including high blood pressure, doubled for women living in overcrowded conditions, she found. “When I first visited Nunavik”, she explains, “I was strongly advised to focus my health research in housing.” With 90% of people in Nunavik living in government-provided housing, she adds, the onus is on government to address the problems. “Housing conditions are a critical public health issue in many Aboriginal communities.”

Governmental response

The Canadian Government rejects the suggestion that its legal responsibilities for Aboriginal health care oblige it to address the housing crisis. Systematic, high-profile calls for government

action on housing and health date to 1996, when a high-level Royal Commission on Aboriginal People published a massive report including a chapter damning “intolerable housing” conditions and noting that 26% of the total Aboriginal housing stock needed major repairs at that time. Aboriginal households were more than 90 times as likely as other Canadian households to be living without a piped water supply, the Royal Commission report revealed. “The current state of Aboriginal housing and community services poses acute threats to health”, the report charged. “Such direct threats to health would not be tolerated in other Canadian communities.”

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A follow-on federal report warned in 2000 that inadequate housing was seriously damaging Aboriginal “health, education, employment and social well-being”. In 2006, Statistics Canada, the federal statistics-gathering agency, also emphasised the interplay between inadequate housing and health problems in a census of First Nations people. In 2009, in an indication of concern, the Canadian Government earmarked US\$400 million to support new on-reserve housing, and renovations of existing social housing. But 2 years later, an audit report from Canada’s Auditor General charged that the Aboriginal housing crisis was still deepening. “Although the federal government takes the view that it does not provide housing support on reserves as a result of legislative or treaty obligations”, the Auditor explained, “mould contamination has been identified as a serious health and safety problem in First Nations reserves, liable to cause respiratory illnesses such as asthma. In this audit, we found that housing conditions on reserves are worsening. We also

found that federal organisations have not taken significant direct actions to remediate mould contamination.” Despite repeated warnings about the mould crisis, the Auditor charged, the federal agencies responsible for Aboriginal housing “have neither assessed the extent of the mould problem nor taken responsibility for developing a comprehensive strategy to address it”.

Testifying before a committee of Senate of the Canadian Parliament in September, 2013, Theresa Spence, chief of the Attawapiskat First Nation, a remote community on the shores of James Bay in northern Ontario, painted a disturbing picture about the conditions there. “Things are not getting better despite recent efforts to increase our housing stock.” Of 329 housing units on the reserve, Spence told the Senate committee, “73 require immediate replacement—not repair, replacement—and have been condemned, and we have people still living in them”.

Spence added, “Most of our people are living in overcrowded housing, in substandard homes, contaminated by mould and sewage.”

Overcrowding, Spence explained, has substantial effects on almost everyone in the community. “They suffer from infectious disease, family conflict, even violence and disruption of education and employment.”

In an emotionally charged appeal to the Senate committee, Spence denounced “the Third World conditions” endured by many Canadian Aboriginal communities. “On behalf of the First Nations, I invite this committee and other federal and provincial leaders to visit our community so that you can see the hardship we experience and to get a more accurate understanding of our circumstances. I apologise for the way I sound, but it’s a very sensitive issue for me as the chief. Every day, I see my people crying, and it’s hard to see them like that.”

Paul C Webster