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First Nations and Inuit Environmental Health Awareness Marketing Campaign Follow-up Survey

FINAL REPORT

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This certification is to be submitted with the final report submitted to the Project Authority.

I hereby certify as Senior Office of EKOS RESEARCH ASSOCIATES INC. that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the *Communications Policy* of the Government of Canada and Procedures for Planning and Contracting Public Opinion Research. Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate or ratings of the performance of a political party or its leader.

Signed:



Susan Galley, Senior Vice President
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EXECUTIVE SUMMARY

Research Purpose and Objectives

Through their everyday activities and environmental surroundings, Canadians face health risks from exposure to environmental factors such as air and water pollution, food and water contamination, and chemicals in household products. First Nations people living on reserves and Inuit in Canada's North face environmental risks to their health that differ somewhat from the general population due to differences in region and environment, traditional activities, proximity to industry, socio-economic disparities, and other factors.

As part of Health Canada's First Nations and Inuit Environmental Health Awareness Marketing Campaign, Health Canada developed Environmental Health Guides (EHGs) and associated marketing materials that provide First Nations people and Inuit with information about environmental risks to their health and the actions that can be taken to protect against these harms. Health Canada commissioned EKOS Research Associates to conduct public opinion research with First Nations people and Inuit to track awareness, perceptions, behaviours, and information needs related to environmental health risks (comparing results to a baseline survey conducted in March 2010), and to assess awareness and recall of the Environmental Health Awareness Marketing Campaign.

Methodology

Telephone interviews were conducted with a representative sample of 401 First Nations people living on reserves and 102 Inuit living in communities in the North, aged 18 years and older. Interviews were conducted between March 7 and 27, 2013. The margin of error for the sampling of First Nations people on reserves is plus or minus 4.9 per cent and for Inuit is plus or minus 9.8 per cent (both at the 95 per cent confidence level). The total cost of the study is \$68,004.53, HST included.

Key Findings

Perceptions of Environmental Health Issues

Majorities of First Nations people (eight in ten) and Inuit (just over half) feel that environmental issues affect their and their family's health a fair amount or a great deal. The proportion of First Nations people on reserves that feels the environment affects their/their family's health "a great deal" has grown since 2010 (52 per cent, up from 42 per cent) but fewer Inuit now say the same (22 per cent, down from 36 per cent).

Among the environmental issues that pose the greatest health concern to First Nations people on-reserve are water pollution, air pollution, and mould, each identified by between one in five and one in three. These were also the top three top-of-mind issues identified in 2010. The top two environmental issues cited top-of-mind by Inuit are air pollution and smoking/second-hand smoke, each mentioned by around one in five. A noteworthy minority in both groups (16 per cent of First Nations and 28 per cent of Inuit) is unable to identify any environmental concern top-of-mind; although this has decreased from 2010 (when 31 per cent of First Nations and 43 per cent of Inuit did not indicate any environmental issue). These proportions point to a continued need to raise awareness of environmental health issues with First Nations people and Inuit.

The specific environmental issues that First Nations and Inuit perceive as posing the greatest risk to health remain generally the same since 2010. For both First Nations and Inuit, mould is still a top concern (53 per cent of First Nations say it is a major risk to their health as do 40 per cent of Inuit). Other top issues of concern for both First Nations and Inuit are water pollution (51 per cent of First Nations and 31 per cent of Inuit say this is a major health risk), tobacco smoke (43 per cent of First Nations and 50 per cent of Inuit say this is a major health risk) and contaminated drinking water (48 per cent of First Nations and 35 per cent of Inuit). As was found in 2010, still relatively few see smoke from burning wood as posing a major health risk (14 per cent of First Nations people and 11 per cent of Inuit). It is interesting to note that fewer Inuit today think that lead contained in paint poses a major risk to their health (12 per cent, a proportion that has fallen from 32 per cent in 2010).

Protective Behaviour

Most First Nations people living on reserves and Inuit feel confident that they can take steps to prevent or lower the health risk to them and their family posed by environmental issues. While the overall level of confidence has remained the same, the strength of this confidence has increased since 2010. Today, more First Nations people on-reserve (49 per cent) and Inuit (51 per cent) are confident they can *definitely* take steps to protect their health, compared to 2010 (38 per cent and 31 per cent, respectively) when larger proportions said that they could *probably* take steps.

Exemplifying this confidence, seven in ten First Nations people living on reserves (72 per cent) and Inuit (70 per cent) report that they have taken steps in the past year to protect their health and the health of their family from environmental risks, relatively unchanged from the reported incidence in 2010. Both groups offer a wide range of actions they have taken to protect their health, especially actions related to changing smoking habits; cleaning around the house; changes to drinking water; and reducing exposure to problems. Inuit also mention taking actions like cutting down on energy use and adopting food safety practices.

Information Needs

Both First Nations and Inuit show a strong interest in information about environmental health issues. Strong majorities of First Nations people on-reserve and Inuit are somewhat or very interested in learning more about how to minimize health risks from environmental issues (92 per cent of First Nations and 78 per cent of Inuit), what types of environmental issues can affect health (90 per cent of First Nations and 76 per cent

of Inuit), and how to identify environmental health issues in the home (86 per cent of First Nations and 82 per cent of Inuit). The proportions of First Nations people saying they are very interested in these topics has increased considerably since 2010, while for Inuit it has declined, although the proportion of Inuit who are at least somewhat interested remains largely the same.

Following the global trend, both First Nations and Inuit cite Internet sources as their first preference for finding information about environmental health issues. The proportion of First Nations wishing to learn about these topics online has grown since 2010 (to 51 per cent from 40 per cent) and has remained steady for Inuit at around four in ten (39 per cent, 40 per cent in 2010). More than one-quarter of First Nations and Inuit would like to receive this information from health care professionals like health clinics and community nurses.

Marketing Campaign Recall

More than half of First Nations people living on reserves and Inuit (54 per cent each) say, unprompted, that they recall having seen, heard, or read something about the impacts of the environment (outdoors and indoors) on their health in the previous 12 months. When asked, unprompted, about the topic of this information, the largest proportions of First Nations people mention drinking water safety (20 per cent), mould (18 per cent), and oil and gas pollution (16 per cent). The top mentions from Inuit are chemical products (22 per cent), smoking (19 per cent), and indoor air quality (13 per cent).

Around one-quarter of First Nations (27 per cent) and Inuit (24 per cent) recall seeing the indoor Environmental Health Guide (EHG), while fewer First Nations (16 per cent) and Inuit (15 per cent) recall seeing the outdoor EHG. Around one-quarter of First Nations (25 per cent) and Inuit (28 per cent) recall seeing an activity book for kids/teens about environmental health issues. Overall, awareness of the marketing campaign is quite high, given that around four in ten First Nations people (39 per cent) and Inuit (40 per cent) recall at least one of these campaign materials.

The main messages from the campaign seem to have had reasonably good penetration. The largest proportions of First Nations and Inuit who saw the campaign materials thought the main messages were about the risks in the environment that can affect one's health (28 per cent of First Nations and 16 per cent of Inuit), and things that one can do to keep safe (13 per cent of First Nations and 18 per cent of Inuit). Large minorities, however, do not recall the main message of the campaign materials (24 per cent of First Nations and 38 per cent of Inuit).

Demonstrating the impact of the campaign, more than one-third of First Nations (36 per cent) and one-quarter of Inuit (26 per cent) say they did something based on the campaign materials they saw. The largest proportions of First Nations took action to protect against harmful chemicals (19 per cent) and to prevent mould in the home (19 per cent), and talked to others about environmental health risks (17 per cent). Around one in five Inuit who saw the materials did something to improve indoor air quality, to protect from harmful chemicals, and to protect against water contamination.

As is often the case with sponsor recall in a public education campaign, awareness of Health Canada as the campaign sponsor is modest at around one in five First Nations (20 per cent) and lower among Inuit at four per cent. A further one in four Inuit and thirteen per cent of First Nations cited Government of Canada generally or government in general as the campaign sponsor, while the remainder provided other responses or did not know the sponsor.

More than half of First Nations people on-reserve (55 per cent) and seven in ten Inuit (69 per cent) have a Facebook account. The majority of First Nations and Inuit access Facebook one or more times a day. Majorities in each group access their accounts by a desktop computer but large minorities of First Nations are using mobile devices like Smartphones/mobile phones (48 per cent) and tablets (21 per cent).

Perhaps driven by the apparently higher reliance on Facebook among Inuit, Health Canada's Healthy First Nations and Inuit Facebook page has greater recognition in the Inuit population. Just over one in ten First Nations people (12 per cent) and one-quarter of Inuit (25 per cent) who have a Facebook account are familiar with Health Canada's Healthy First Nations and Inuit Facebook page, representing six per cent of First Nations people and 15 per cent of Inuit. Of those aware of the page (n=28 for First Nations, n=20 for Inuit), half of First Nations and just over one in ten Inuit recall seeing messages about environmental health issues posted on the page. Recall of the topic of these messages, however, is low (half or fewer do not remember the topic), though most who saw a message say it was at least somewhat helpful in helping them to take action to protect their health.

SOMMAIRE

Objet et objectifs de la recherche

Dans le cadre de leurs activités quotidiennes, compte tenu de leur environnement, les Canadiens sont confrontés à des risques pour la santé découlant de leur exposition à des facteurs environnementaux comme la pollution de l'air ou des eaux, la contamination alimentaire et la contamination de l'eau, de même que les produits chimiques que contiennent les produits nettoyants. Pour les membres des Premières nations vivant dans une réserve et pour les Inuits vivant dans le Nord canadien, les risques environnementaux pour la santé diffèrent quelque peu de ceux auxquels sont exposés les membres de la population en général, compte tenu des différences sur le plan de la région et de l'environnement, des activités traditionnelles, de la proximité avec les industries, des inégalités socioéconomiques et d'autres facteurs.

Dans le cadre de sa Campagne de marketing et de sensibilisation à la santé environnementale menée auprès des Premières nations et des Inuits, Santé Canada a mis au point des Guides sur la santé environnementale (GSE) et du matériel de marketing qui présentent aux membres des Premières nations et aux Inuits de l'information au sujet des risques que pose l'environnement pour leur santé et au sujet des mesures qu'ils peuvent prendre pour se protéger contre ces risques. Santé Canada a chargé les Associés de recherche EKOS de réaliser une recherche sur l'opinion publique auprès des membres des Premières nations et des Inuits afin d'assurer un suivi de leurs connaissances, de leurs perceptions, de leurs comportements et de leurs besoins d'information dans le contexte des risques environnementaux pour la santé (grâce à une comparaison des résultats en découlant avec ceux tirés d'un sondage de référence réalisé en mars 2010) et afin d'évaluer la connaissance et le souvenir de la Campagne de marketing et de sensibilisation à la santé environnementale.

Méthodologie

Des entrevues téléphoniques ont été réalisées auprès d'un échantillon représentatif réunissant 401 membres des Premières nations vivant dans une réserve et 102 Inuits résidant dans des collectivités du Nord ayant au moins 18 ans. Les entrevues se sont déroulées entre le 7 et le 27 mars 2013. La marge d'erreur associée à l'échantillonnage des membres des Premières nations vivant dans une réserve s'établit à plus ou moins 4,9 p. 100, tandis que la marge d'erreur s'établit à plus ou moins 9,8 p. 100 pour l'échantillon des Inuits (à un niveau de confiance de 95 p. 100 dans les deux cas). Le coût total de l'étude s'établit à 68,004.53 \$, TVH comprise.

Principales observations

Perceptions à l'égard des enjeux environnementaux pour la santé

C'est en majorité que les membres des Premières nations (dans une proportion de huit sur dix) et les Inuits (tout juste un peu plus de la moitié) sont d'avis que les enjeux environnementaux influent passablement ou beaucoup sur leur santé ou sur la santé de leur famille. La proportion des membres des Premières nations vivant dans une réserve qui sont d'avis que l'environnement influe « beaucoup » sur leur santé ou sur la santé de leur famille s'est accrue depuis 2010 (pour atteindre 52 p. 100, par rapport à 42 p. 100). Toutefois, les Inuits sont désormais moins nombreux à se dire de cet avis (dans une proportion de 22 p. 100, par rapport à 36 p. 100).

Au nombre des enjeux environnementaux qui posent le plus grand risque pour la santé des membres des Premières nations vivant dans une réserve, figurent la pollution de l'eau, la pollution de l'air et la moisissure, enjeux signalés, dans chaque cas, dans une proportion oscillant entre un pour cinq et un pour trois. Il s'agit aussi des trois principaux enjeux que leurs homologues avaient signalés spontanément en 2010. Par ailleurs, la pollution de l'air et le tabagisme ou la fumée secondaire sont les deux principaux enjeux environnementaux que les Inuits signalent spontanément, dans une proportion d'environ un pour cinq, dans chaque cas. Dans les deux groupes, une proportion minoritaire mais néanmoins remarquable des répondants (16 p. 100 des Premières nations et 28 p. 100 des Inuits) ne parviennent pas à définir spontanément un enjeu environnemental en réponse à cette question. Les proportions témoignant de ce résultat ont toutefois baissé depuis 2010 (année où 31 p. 100 des Premières nations et 43 p. 100 des Inuits n'avaient pas signalé d'enjeu environnemental). Ces proportions font penser qu'il faut continuer de sensibiliser les membres des Premières nations et les Inuits aux enjeux environnementaux qui touchent la santé.

Dans l'ensemble, de l'avis des Premières nations et des Inuits, l'enjeu environnemental précis qui pose le plus grand risque pour la santé est le même depuis 2010. En effet, chez les Premières nations et les Inuits, la moisissure demeure une préoccupation majeure (53 p. 100 des Premières nations affirment que ça constitue un risque majeur pour leur santé, comme 40 p. 100 des Inuits). Les autres grands enjeux qui préoccupent les Premières nations et les Inuits sont la pollution de l'eau (51 p. 100 des Premières nations et 31 p. 100 des Inuits affirment qu'il s'agit d'un risque majeur pour la santé), la fumée du tabac (43 p. 100 des Premières nations et 50 p. 100 des Inuits affirment qu'il s'agit d'un risque majeur pour la santé) et l'eau potable contaminée (48 p. 100 des Premières nations et 35 p. 100 des Inuits). Comme nous l'avons aussi observé en 2010, les répondants sont relativement peu nombreux à tenir la fumée de bois pour un risque majeur pour la santé (14 p. 100 des Premières nations et 11 p. 100 des Inuits). Fait intéressant à signaler, à l'heure actuelle, les Inuits sont moins nombreux à estimer que le plomb contenu dans la peinture pose un risque majeur pour leur santé (12 p. 100, un net recul par rapport à la proportion de 32 p. 100 enregistrée en 2010).

Comportement de protection

La plupart des membres des Premières nations vivant dans une réserve et des Inuits sont convaincus qu'ils peuvent prendre des mesures pour prévenir ou diminuer les risques que posent ces enjeux environnementaux pour leur santé ou pour la santé de leur famille. Bien que dans l'ensemble, le niveau de confiance demeure le même, le degré de confiance s'est accru depuis 2010. En effet, à l'heure actuelle, un plus grand nombre de membres des Premières nations vivant dans une réserve (49 p. 100) et d'Inuits (51 p. 100) croient qu'ils peuvent *assurément* prendre des mesures pour protéger leur santé, comparativement à 2010 (année où ces proportions s'établissaient à 38 p. 100 et à 31 p. 100, respectivement), lorsque de plus fortes proportions ont toutefois affirmé qu'ils pourraient *probablement* prendre des mesures.

À l'image des résultats sur la confiance, c'est dans une proportion de sept sur dix que les Premières nations vivant dans une réserve (72 p. 100) et les Inuits (70 p. 100) indiquent qu'ils ont pris des mesures au cours de la dernière année pour protéger leur santé et celle de leur famille contre ces enjeux environnementaux, un résultat très semblable à la fréquence déclarée en 2010. Dans les deux groupes, les répondants ont fait état d'un vaste éventail de mesures prises pour protéger leur santé, dont particulièrement des mesures pour modifier leur habitude de fumer; du nettoyage à la maison; des changements au chapitre de l'eau potable; et la réduction de l'exposition aux problèmes. Des Inuits signalent en outre des mesures comme la réduction de l'utilisation d'énergie et l'adoption de pratiques de salubrité alimentaire.

Besoins d'information

L'information au sujet des enjeux environnementaux qui influent sur la santé intéresse vivement tant les Premières nations que les Inuits. En effet, en fortes majorités, les membres des Premières nations vivant dans une réserve et les Inuits se sont révélés assez ou très intéressés à en savoir davantage au sujet de la façon de minimiser les risques pour la santé que posent les enjeux environnementaux (92 p. 100 des Premières nations et 78 p. 100 des Inuits), au sujet des types d'enjeux environnementaux qui affectent la santé (90 p. 100 des Premières nations et 76 p. 100 des Inuits) et au sujet de la façon de savoir s'il y a des problèmes environnementaux dans leur résidence (86 p. 100 des Premières nations et 82 p. 100 des Inuits). Les proportions des membres des Premières nations qui se disent très intéressés à en savoir davantage sur ces sujets se sont considérablement accrues depuis 2010, tandis que les proportions correspondantes ont fléchi chez les Inuits, encore que les proportions d'Inuits qui sont au moins assez intéressés à en savoir davantage demeurent les mêmes en grande partie.

Suivant la tendance mondiale, tant les membres des Premières nations que les Inuits signalent les sources sur l'Internet comme principales sources préférées pour obtenir de l'information au sujet des enjeux environnementaux pour la santé. La proportion des membres des Premières nations souhaitant se renseigner en ligne sur ces sujets s'est accrue depuis 2010 (pour atteindre 51 p. 100, par rapport à 40 p. 100). La proportion correspondante d'Inuits est stable, s'établissant à quatre sur dix environ (39 p. 100, par rapport à 40 p. 100 en 2010). Plus du quart des membres des Premières nations et des

Inuits aimeraient que des professionnels de la santé, comme les membres des cliniques de santé ou des infirmières communautaires, leur communiquent cette information.

Souvenir de la campagne de marketing

Plus de la moitié des membres des Premières nations vivant dans une réserve et des Inuits (54 p. 100, dans chaque cas) affirment spontanément qu'ils se souviennent avoir vu, lu ou entendu quelque chose qui traitait des répercussions de leur environnement, à la maison ou dehors, sur leur santé, au cours des 12 mois précédents. Lorsque nous les avons invités à préciser spontanément quel était le sujet de ce matériel d'information, dans la plus forte proportion, les membres des Premières nations ont fait état de la qualité de l'eau potable (20 p. 100), de la moisissure (18 p. 100) et de la pollution par le pétrole et les gaz (16 p. 100). Les principales réponses qu'ont formulées les Inuits comprennent les produits chimiques (22 p. 100), le tabagisme (19 p. 100) et la qualité de l'air à l'intérieur (13 p. 100).

C'est le quart environ des membres des Premières nations (27 p. 100) et des Inuits (24 p. 100) qui se souviennent d'avoir vu le Guide portant sur la santé environnementale à la maison (GSE). Ils sont toutefois moins nombreux (16 p. 100 des Premières nations et 15 p. 100 des Inuits) à se rappeler le GSE à l'extérieur. Le quart environ des Premières nations (25 p. 100) et des Inuits (28 p. 100) se rappellent avoir vu un manuel d'activités pour enfants ou adolescents qui traitait des enjeux environnementaux pour la santé. Dans l'ensemble, la connaissance de la campagne de marketing est assez répandue, étant donné que dans une proportion d'environ quatre pour dix, les membres des Premières nations (39 p. 100) et les Inuits (40 p. 100) se souviennent d'au moins l'un des éléments de la campagne.

Les principaux messages de la campagne semblent avoir connu un assez bon rayonnement. Dans les plus fortes proportions, les membres des Premières nations et les Inuits ayant pris connaissance du matériel de la campagne estiment que les principaux messages ont pour objet les risques dans l'environnement qui peuvent nuire à la santé (28 p. 100 des Premières nations et 16 p. 100 des Inuits) et les choses que l'on peut faire pour veiller à sa santé (13 p. 100 des Premières nations et 18 p. 100 des Inuits). Par ailleurs, dans des proportions minoritaires néanmoins considérables, les personnes interrogées ne se souviennent pas du principal message faisant l'objet du matériel de la campagne (24 p. 100 des Premières nations et 38 p. 100 des Inuits).

À l'appui des résultats témoignant de l'effet de la campagne, plus du tiers des Premières nations (36 p. 100) et plus du quart des Inuits (26 p. 100) affirment avoir fait quelque chose parce qu'ils ont vu le matériel de campagne. Dans les plus fortes proportions, les membres des Premières nations ont fait quelque chose pour se protéger contre les produits chimiques nocifs (19 p. 100) ou pour prévenir l'apparition de la moisissure dans leur maison (19 per cent), et ils ont parlé avec d'autres personnes des risques environnementaux pour la santé (17 p. 100). D'autre part, c'est autour du cinquième des Inuits ayant vu le matériel de campagne qui ont fait quelque chose pour améliorer la qualité de l'air à l'intérieur, pour se protéger contre les produits chimiques nocifs et pour éviter la contamination de l'eau.

Comme on l'observe souvent au chapitre du souvenir du responsable d'une campagne dans le contexte de l'éducation du public, les résultats témoignant de la connaissance de Santé Canada comme commanditaire de la campagne sont modestes : ils s'établissent à un pour cinq chez les Premières nations (20 p. 100) et sont plus faibles encore, à 4 p. 100, chez les Inuits. En outre, le quart des Inuits et 13 p. 100 des membres des Premières nations disent que le gouvernement du Canada en général ou le gouvernement en général constitue le commanditaire de la campagne. Les autres personnes interrogées ont présenté d'autres réponses ou ont affirmé ne pas connaître le commanditaire de la campagne.

Plus de la moitié des membres des Premières nations vivant dans une réserve (55 p. 100) et sept Inuits sur dix (69 p. 100) ont un compte Facebook. En majorité, les membres des Premières nations et les Inuits accèdent à leur compte Facebook au moins une fois par jour. Dans chaque groupe, des proportions majoritaires des répondants indiquent qu'ils consultent leur compte au moyen d'un ordinateur de bureau. Toutefois, des proportions minoritaires mais néanmoins considérables des Premières nations utilisent des appareils mobiles comme des téléphones intelligents ou des téléphones mobiles (48 p. 100) ou encore, des tablettes (21 p. 100).

Sous l'effet peut-être de la plus grande confiance apparente des Inuits à l'égard de Facebook, la connaissance de la page Facebook de Santé Canada *Premières nations et Inuits en santé* est plus répandue dans la population des Inuits. En particulier, parmi les personnes interrogées qui ont un compte Facebook, c'est un peu plus du dixième des membres des Premières nations (12 p. 100) et le quart des Inuits (25 p. 100) qui connaissent la page Facebook *Premières nations et Inuits en santé* de Santé Canada, ce qui représente 6 p. 100 des membres des Premières nations et 15 p. 100 des Inuits. Au nombre des personnes qui connaissent la page (n=28 des Premières nations, n=20 des Inuits), la moitié des membres des Premières nations et un peu plus d'un Inuit sur dix se rappellent les messages liés à des questions de santé environnementale qui sont affichés sur cette page. En revanche, les résultats témoignant du souvenir du sujet des messages sont faibles (jusqu'à la moitié des personnes interrogées ne se souviennent pas du sujet), encore que la plupart des personnes ayant vu un message affirment que les renseignements se sont révélés au moins plutôt utiles pour leur permettre de prendre des mesures pour protéger leur santé.

1. INTRODUCTION

Through their everyday activities and environmental surroundings, Canadians face the risk of exposure to environmental contaminants such as through contamination and pollution of air, food, water, and personal products. The Action Plan to Protect Human Health from Environmental Contaminants is a federal initiative delivered jointly by Health Canada, Statistics Canada and the Public Health Agency of Canada (PHAC) with the goal of protecting the health of Canadians from the harms of environmental contaminants by fostering awareness and action.

First Nations people living on reserves and Inuit in Canada's North face environmental risks to their health that differ somewhat from the general population due to differences in region and environment, traditional activities, proximity to industry, socio-economic disparities, and other factors. Among the activities of the Action Plan, Health Canada developed Environmental Health Guides (EHGs) and an associated marketing campaign tailored specifically to First Nations and Inuit to enable them to identify, prevent and address potential environmental health impacts. The marketing campaign material included the following:

- Indoor and outdoor EHGs for First Nations people and Inuit, published as separate spring/summer and fall/winter editions; and
- Activity books for First Nations and Inuit youth.

The EHGs for First Nations were distributed in local communities through Health Canada's Environmental Health Officers at health centres, band offices, and home visits. The EHGs for Inuit were distributed at health care centres and communities and hamlets. Additionally, Health Canada used posters, web-based tools (Google Adwords, Facebook ads, messages on Health Canada's Healthy First Nations and Inuit Facebook page and an Environmental Health webpage), community events, and a partnership with the Aboriginal Peoples Television Network (APTN) to disseminate information as part of this awareness campaign.

Prior to the launch of this campaign, Health Canada conducted public opinion research with First Nations people and Inuit to assess baseline levels of knowledge, awareness, and action regarding environmental risks to health. As a follow-up to this campaign, Health Canada has commissioned a survey of First Nations and Inuit to measure attitudes, awareness, and knowledge regarding environmental health, and perceptions about the impacts on health and behavioural intentions to take actions to mitigate health risks. Specific objectives of the survey are to:

- Assess current levels of knowledge and understanding regarding environmental health, including the link between environment and health and how to minimize risk;
- Profile behaviour in relation to environmental health and levels of concern;
- Profile information needs in these areas and preferred communications medium;

- Measure the impact of the Environmental Health Awareness Marketing Campaign, comparing results to a baseline survey conducted in March 2010; and,
- Assess awareness of the Environmental Health Awareness Marketing Campaign materials.

This report presents the results of the follow-up research with 401 First Nations Canadians living on reserves and 102 Inuit living in Northern communities. The findings from this research will be used to assess the impact and effectiveness of this campaign; to inform government and other initiatives that deliver programs and services to meet the needs of First Nations people and Inuit; and to evaluate the achievement of outcomes of the Action Plan. The total cost of the study is \$68,004.53, HST included.

2. METHODOLOGY

EKOS Research Associates conducted a national telephone survey with First Nations residents living on reserves across Canada and Inuit living in northern communities. Eligible adults (18 years of age and older) were surveyed in their choice of English, French, or Inuktitut. Interviews were conducted with 401 First Nations residents on-reserve across the country and 102 Inuit in the North. These two samples were randomly selected from wider sample frames of listed landlines in Canada in the eligible communities (First Nations reserves and Northern communities with an established Inuit population).

Sampling of First Nations households was based on a random selection of listed telephone numbers associated with geographical areas listed as reserves. Screening at the start of the interview established respondent eligibility (a member of a First Nation who lives on a reserve for at least six months of the year). The sample of Inuit households was randomly drawn from listed numbers in communities in Labrador, Northern Quebec, Nunavut and Northwest Territories. Screening at the start of the interview established respondent eligibility (e.g., self identification as an Inuk).

The survey questionnaire was largely based on questions previously asked in the 2010 baseline survey, incorporating a few slight revisions to questions/response categories. As well, some new questions were added to measure recall of aspects of the campaign using items from the Government of Canada's Advertising Campaign Evaluation Tool (ACET) (e.g., questions on recall of campaign materials, messaging, and sponsor; actions taken in response to advertising). A number of items were also added to capture use of Facebook given that some of the campaign relied on Health Canada's Healthy First Nations and Inuit Facebook page. Once the survey instrument was designed in English, it was reviewed, programmed, and tested (ten cases with First Nations and five with Inuit). No substantial changes were made based on the testing of the questionnaire. Following this, French and Inuktitut translations were developed from the revised English questionnaire. The French questionnaire was also tested prior to survey launch (three completed cases). The pretest cases were used in the survey analysis. Copies of the questionnaires are attached as appendices to this report.

Telephone interviewing in English and French was conducted between March 7 and 27, 2013 from the EKOS call centre in Ottawa. Interviewers scheduled follow-up telephone appointments with respondents who requested an interview in Inuktitut. Interviewing in Inuktitut was conducted by March 20 and 28, 2013. Ten per cent of interviews were monitored by survey supervisors for quality control. The average length of time required to complete the interview was 18.5 minutes. The survey was registered with the Research Registration System, maintained by the Marketing Research and Intelligence Association (MRIA). The overall response rate for the survey was 13 per cent (see Appendix A for further details).

Prior to analysis, the database was reviewed for data quality, outliers, coding requirements, weighting and construction of independent variables used to explore sub-group patterns. Following the

procedure for the treatment of results since the 2010 baseline, the survey data were weighted for age, gender, region and education separately in the First Nations and the Inuit data tables, using the same population targets as used in 2010. Detailed tables were produced with results presented for a variety of First Nations sub-groups (age, education, income level, province/territory, number of people in household, first language) and by whether respondents feel their and their family's health is affected by environmental issues, versus those who do not; and by whether respondents have taken any action to reduce the health risk of environmental factors. The First Nations sample was stratified to enable sub-group analysis by major region. Results for the Atlantic regions were collapsed into one region, producing seven regions: British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec and Atlantic. Detailed tables for Inuit were produced with subgroups for region (Nunavut or elsewhere), education, age, income, gender, number of people in household, belief that their health is affected by the environment, and incidence of taking action to protect their health. The margin of error for the sampling of First Nations people on reserves is plus or minus 4.9 per cent (and plus or minus 5.8 to 14.9 for key sub-groups) at the 95 per cent confidence level. For the Inuit sample the margin of error is plus or minus 9.8 per cent (and 11.3 to 21.4 for key sub-groups), also at the 95 per cent confidence level.

2.1 SAMPLE CHARACTERISTICS

The following table summarizes the sample of First Nations and Inuit respondents by province/territory/region and demographic characteristics.

Table 2.1: Sample Characteristics – First Nations and Inuit respondents

	First Nations n=401	Inuit n=102
Gender		
Male	50%	49%
Female	50%	51%
Age		
Under 25	20%	22%
25-29	10%	11%
30-34	11%	13%
35-39	9%	9%
40-44	12%	14%
45-49	8%	6%
50-54	9%	7%
55-64	10%	8%
65+	8%	8%
Including yourself, how many people live in your household?		
1	9%	14%
2	16%	10%
3	15%	19%

	First Nations n=401	Inuit n=102
4	21%	33%
5	11%	6%
6	14%	11%
7+	13%	3%
<i>What is the language you first learned at home as a child and still understand?</i>		
English	52%	17%
Cree	19%	0%
Mi'Kmaq	4%	0%
Ojibway	3%	0%
French	2%	1%
Inuktitut	2%	81%
Ojibway variations/mixes	2%	0%
Algonquin	2%	0%
Atikamekw	2%	0%
Mohawk	1%	0%
Blackfoot	1%	0%
Dene	1%	0%
Saulteaux	1%	0%
Other	7%	0%
Don't know/no answer	1%	1%
<i>What is the highest level of education that you have reached?</i>		
Some elementary (Grades 1-6)	4%	6%
Completed elementary (Grade 7 or 8)	7%	5%
Some high school (Grades 9-11)	24%	25%
Completed high school (Grades 12 or 13 or OAC)	10%	16%
Some community college, vocational, trade school	15%	16%
Completed community college, vocational, trade school	28%	17%
Some university (no degree)	11%	6%
Completed university (Bachelor's Degree)	6%	1%
Post graduate/professional school (Master's Degree, Ph.D)	4%	2%
No schooling	0%	1%
Don't know/no answer	1%	6%
<i>Which of the following categories best describes the total income of all the people living in your household for 2012?</i>		
Under \$20,000	27%	30%
\$20,000 to just under \$40,000	26%	10%
\$40,000 to just under \$60,000	16%	10%
\$60,000 to just under \$80,000	8%	10%
\$80,000 to just under \$100,000	4%	3%
\$100,000 to just under \$150,000	3%	4%
\$150,000 and above	2%	14%

	First Nations n=401	Inuit n=102
Refuse	2%	3%
Don't know	12%	15%
Region		
British Columbia	19%	0%
Alberta	14%	0%
Saskatchewan	15%	0%
Manitoba	18%	0%
Ontario	17%	0%
Quebec	12%	0%
Atlantic	6%	0%
Nunavut	0%	75%
Other (Labrador, Northern Quebec, NWT)	0%	24%

2.2 ORGANIZATION OF REPORT

This report presents graphic and tabular results by survey question. Text narrative describes the results and relationships between the data, and any significant subgroup differences based on region, education, income, age, gender, number of people living in the household, first language, views on whether environmental factors have influenced one's/one's family's health, and incidence of having taken protective action against environmental factors. The narrative also highlights any year over year changes, comparing the findings to results from the baseline survey conducted in 2010. The survey instrument is included as an appendix. Detailed banner tables are provided as a separate companion document.

3. FIRST NATIONS PEOPLE LIVING ON A RESERVE

3.1 PERCEPTIONS OF ENVIRONMENTAL HEALTH ISSUES

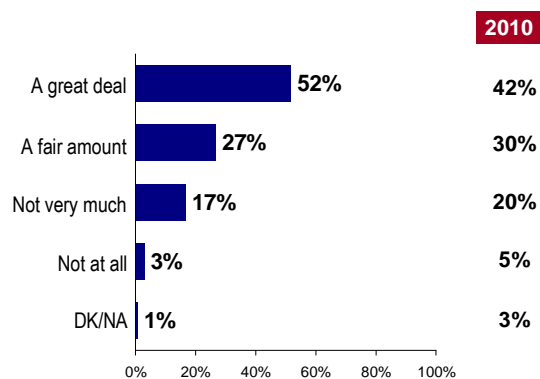
a) Impact of Environmental Issues on Health

First Nations people living on reserves generally believe that environmental issues can affect the health of themselves and their families. More than half believe that environmental issues affect their health and the health of their family a great deal (52 per cent), and more than one-quarter (27 per cent) say that their/their family's health is affected a fair amount. Just 17 per cent say environmental issues do not have very much of an effect, and three per cent say they have no effect at all on health.

The proportion of First Nations on reserves that understands there is a connection between the environment and their/their family's health has grown since 2010, when 42 per cent said environmental issues affected health a great deal and 30 per cent said they had a fair amount of impact.

Impact of Environmental Issues on Health

“How much, if at all, do you believe environmental issues affect your health and your family's health? Would you say...?”



The view that environmental issues affect health a fair amount or more is more likely to be held by First Nations people in Ontario (91 per cent), those with a university education (91 per cent) and by those for whom English is their first language (85 per cent). First Nations living on reserves in Quebec are less likely to feel that the environment has an effect on their health (60 per cent), as well as those living in a household with six or more people (65 per cent), those with less than a high school education (66 per cent), and younger First Nations people under age 30 (69 per cent). Men are also somewhat less apt to say that environmental issues have a fair to great amount of affect on their health (75 per cent versus 84 per cent among women).

b) Unaided Awareness of Environmental Issues

First Nations respondents were asked to identify (without prompting) which environmental issue(s) they feel pose the greatest risk to their health and the health of their family. Top-of-mind responses indicate that First Nations people are increasingly concerned about outdoor environmental issues and the potential impact on their health.

Outdoor environmental issues were identified by a full 74 per cent of respondents, representing a sharp increase from the 43 per cent measured in 2010. As was the case in 2010, water pollution is mentioned most often although the proportion citing water pollution has increased over time (32 per cent; up from 18 per cent in 2010). This is followed by air pollution/smog (24 per cent, from 17 per cent in 2010). Pollution in general was mentioned by eight per cent, up from three per cent in 2010. Notably, the current survey registered concern about issues related to oil and gas (pipelines, drilling and extraction) mentioned by seven per cent of First Nations people. Similar to 2010, small proportions cited other outdoor environmental issues: industrial pollution (seven per cent), climate change and global warming (four per cent), municipal garbage/landfills (four per cent), sewage/wastewater (two per cent), flooding (two per cent), herbicides and pesticides use (two per cent), mining and related pollution (two per cent), ozone depletion and UV radiation (one per cent), and windmills (one per cent).

More than four in ten (43 per cent) cited indoor environmental issues top of mind, unchanged from 2010. As in 2010, mould is the most frequently cited issue, mentioned by 22 per cent (consistent with 19 per cent mentioning it in 2010). Drinking water contamination is a concern for 12 per cent, increased from eight per cent in 2010. As in 2010, small proportions mention other issues: smoking/second-hand smoke (six per cent), food safety and contaminated food (five per cent), indoor air quality (four per cent), toxic chemicals (four per cent), dust and dust mites (three per cent), smoke from burning wood (three per cent), housing quality/conditions (three per cent), carbon monoxide (one per cent), and lead (one per cent).

Table 3.1: Environmental Issues that Pose the Greatest Health Risk

	2013 n=401	2010 n=400
<i>In your view, what environmental issue(s) would you say poses the greatest risk to the health of you and your family?</i>		
Outdoor – Net	74%	43%
Water pollution	32%	18%
Air pollution/smog	24%	17%
Pollution (general)	8%	3%
Industrial pollution	7%	4%
Oil and gas, pipelines, drilling/extraction	7%	--
Municipal garbage/landfills	4%	6%
Global warming/climate change	4%	3%
Flooding	2%	--
Herbicides/pesticide spraying	2%	--
Mining, mining pollution/effects	2%	1%
Ozone depletion/UV radiation	1%	1%
Windmills	1%	--
Indoor – Net	43%	43%
Mould	22%	19%
Drinking water contamination	12%	8%
Smoking/second hand smoke	5%	5%
Food safety/contaminated food	5%	3%
Indoor air quality/indoor air pollution	4%	5%
Toxic chemicals	4%	5%
Dust/dust mites	3%	2%
Smoke from burning wood	3%	1%
Sewage/wastewater	2%	2%
Housing quality, poor housing conditions	2%	--
Carbon monoxide	1%	1%
Lead	1%	--
Other	8%	7%
Don't know/no response ¹	16%	31%

¹ Responses based on first mention only for Don't know/no response.

Outdoor environmental issues are more likely to be mentioned as the greatest risk to health by First Nations people with a university level of education (89 per cent), as well as those with household incomes of \$40,000 to \$60,000 (86 per cent), and those who are between ages 30 to 49 (79 per cent). It is also true of individuals who already think that environmental issues impact their/their family's health a great deal (82 per cent). Indoor environmental issues are more often cited by those with a college level of education (54 per cent) and those with household incomes of \$20,000 to \$40,000 (54 per cent), those who speak English as a first language (49 per cent), as well as by people who think environmental issues impact their health a great deal (49 per cent), and those who have taken steps to protect themselves (47 per cent).

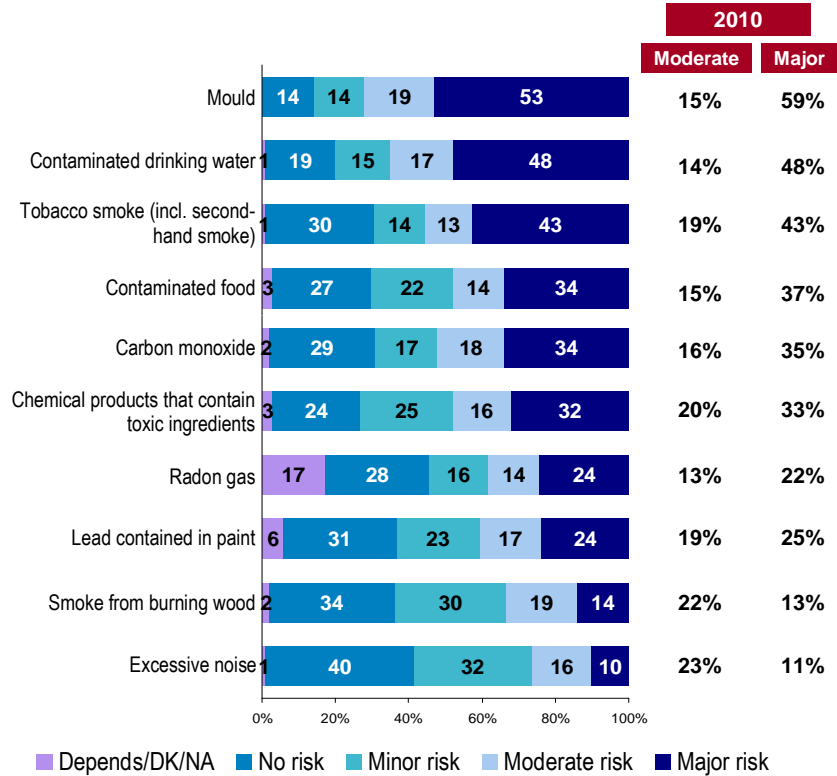
c) Perceived Risk to Health from Indoor Environmental Issues

First Nations people living on reserve were asked to specify the relative risk associated with ten indoor environmental issues. Concern with individual environmental risks is generally the same as found in 2010. The biggest concern is still mould, which more than half feel is a major risk to their health (53 per cent, compared with 59 per cent in 2010), and another 19 per cent feel that this presents at least a moderate risk (compared to 15 per cent in 2010). More than one-quarter feels this presents no risk or a minor risk (28 per cent, compared to 25 per cent in 2010).

The next most predominant concern is with contaminated drinking water, which is said to be a major risk by 48 per cent (consistent with 2010) and a moderate risk by a further 17 per cent (compared to 14 per cent in 2010). Just over four in ten (43 per cent) say that tobacco smoke presents a major risk to their health (consistent with 2010). Consistent with figures from 2010, around one in three feel that a high level of risk is associated with contaminated food (34 per cent), carbon monoxide (34 per cent), and chemical products that contain toxic ingredients (32 per cent). Also consistent with 2010 figures, around one in four associate a high degree of risk with radon gas (24 per cent) and lead contained in paint (24 per cent). Relatively few associate a major risk with smoke from burning wood (14 per cent, consistent with 2010). Similarly, a relatively small proportion think that excessive noise is a major risk (10 per cent, unchanged from 2010).

Health Risk from Indoor Environmental Issues

“Do you think the health risk to you and your family from this environmental issue is a major risk, moderate risk, minor risk, or no risk?”



EKOS Research Associates Inc.

n=401

Follow-Up Survey, First Nations 2013
Baseline Survey, First Nations 2010, n=400

Majorities of most subgroups feel that mould poses a major or moderate risk to their health, especially those between ages 30 to 49 (82 per cent), individuals with a college level of education (80 per cent), and those who believe their health is affected a great deal by environmental factors (79 per cent). On the other hand, First Nations people under age 30 (61 per cent), those generally less apt to see environmental issues as a health concern (60 per cent), and those with incomes of \$60,000 or more (58 per cent) are less likely to be concerned about mould.

First Nations people between ages 30 and 49 are more likely to feel that a variety of other indoor environmental factors pose a major or moderate health risk, including carbon monoxide (60 per cent), lead in paint (48 per cent), chemical products with toxic ingredients (56 per cent), contaminated drinking water (76 per cent), and contaminated food (57 per cent). Lower income households (under \$20,000) are more likely to be concerned about toxic ingredients in products (59 per cent say this is a major or moderate risk). First Nations people living alone or with one other person are more likely to be concerned about

contaminated food (61 per cent) and lead in paint (51 per cent). People who think that the environment impacts health a great deal are more likely to associate major or moderate risk with lead-based paint (57 per cent), toxic ingredients in chemical products (58 per cent), and contaminated drinking water (71 per cent). People who have taken action to protect their health are more likely to feel carbon monoxide poses a major or moderate risk to health (57 per cent). Seeing excessive noise as a major or moderate risk to health is higher among First Nations people ages 50 and older (36 per cent) compared to the younger age groups, as well as those whose mother tongue is an Aboriginal language (33 per cent).

Regionally, while recognized as a risk in most parts of Canada, First Nations people in Alberta (79 per cent) and in Saskatchewan (76 per cent) are even more likely than others across the country to cite contaminated drinking water as a moderate or greater risk. The exception is Quebec where First Nations people are less likely to hold this concern (34 per cent). Ontario residents are more likely than others to associate carbon monoxide as a major or moderate health risk (68 per cent), while First Nations people in Manitoba are less likely to associate major or moderate risk with carbon monoxide (36 per cent). Chemical products that contain toxic ingredients are more often seen as a moderate to major risk in Alberta (65 per cent) than elsewhere in Canada. Lead paint is also rated as a moderate to major risk more often in Alberta (54 per cent). Residents of BC (50 per cent) are more sensitive to the (moderate or major) risk associated with burning wood than found elsewhere in the country. First Nations people living in Quebec and Ontario are also more likely to feel that noise is a major or moderate health risk (37 per cent each) relative to residents in other parts of the country. BC residents (35 per cent) stand out insofar as they are least likely among First Nations residents across the country to rate contaminated food as a moderate to major health risk.

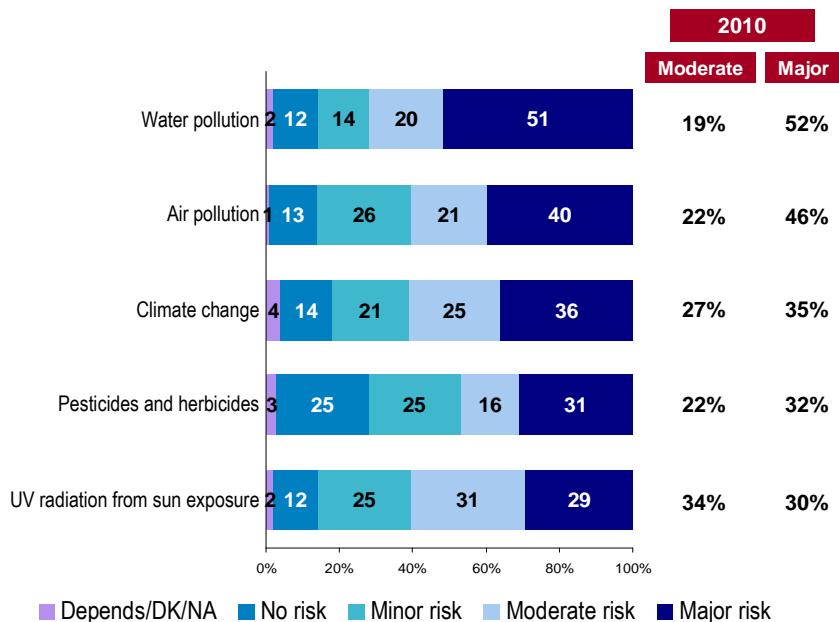
d) Perceived Risk to Health from Outdoor Environmental Issues

Between six in ten and seven in ten First Nations people living on reserves say that all of the outdoor environmental risks they were asked about in the survey present a moderate or major risk to health, with the exception of pesticides and herbicides, where it is just under half. The greatest concern is with water pollution (which is of concern to nearly as many that are concerned about the risk of mould). More than half say that water pollution poses a major risk to health (51 per cent) and a further one in five say this poses a moderate risk (20 per cent), consistent with the level of concern that was measured in 2010. Just one in four (26 per cent) say that water pollution poses a low risk or no risk.

Four in ten First Nations living on reserves feel that a major risk is associated with air pollution (40 per cent, which is not significantly different from 46 per cent in 2010). More than three in ten associate a major risk with climate change (36 per cent) and pesticides and herbicides (31 per cent), figures which remain mostly unchanged from 2010. Three in ten think there is a major risk posed by UV radiation from sun exposure (29 per cent), consistent with the 2010 figure.

Health Risk from Outdoor Environmental Issues

“Do you think the health risk to you and your family from this environmental issue is a major risk, moderate risk, minor risk, or no risk?”



n=401

Follow-Up Survey, First Nations 2013
Baseline Survey, First Nations 2010, n=400

Water pollution is felt to be an issue of major risk to health by almost every subgroup, and especially by First Nations people between ages 30 and 49 (81 per cent), as well as by those who think that their health is affected a great deal by environmental factors (79 per cent).

First Nations people ages 30 to 49 are generally more likely to be concerned about the risks of outdoor environmental factors including climate change (75 per cent), UV radiation (74 per cent), and pesticides and herbicides (54 per cent), while those under age 30 are much less likely to be concerned about these factors (30 to 42 per cent). First Nations people living alone or with just one other person are more likely to be concerned about climate change (74 per cent say it is a major or moderate concern) and pesticides and herbicides (57 per cent). First Nations people with incomes under \$40,000 but more than \$20,000 are more likely to be concerned about air pollution (70 per cent). People who think that the environment impacts health a great deal and who have taken action to protect their health from environmental factors are more likely to associate major risk with all of the outdoor environmental issues that were tested by this question.

Regionally, majorities in every region feel that water pollution and UV radiation present major or moderate risks to health, but this concern is less likely to be held by First Nations people in Quebec (57 per cent say water pollution and 41 per cent say UV radiation are high risk factors). Similarly, majorities in most regions see air pollution as a major or moderate risk, except in Manitoba (41 per cent). First Nations people in Ontario are more likely to be concerned that air pollution (81 per cent) and pesticides and herbicides (59 per cent) present a major or moderate risk to their health. The latter is also of greater concern to residents of Alberta (63 per cent). Residents of Manitoba and BC are least concerned about pesticides and herbicides (29 and 33 per cent, respectively).

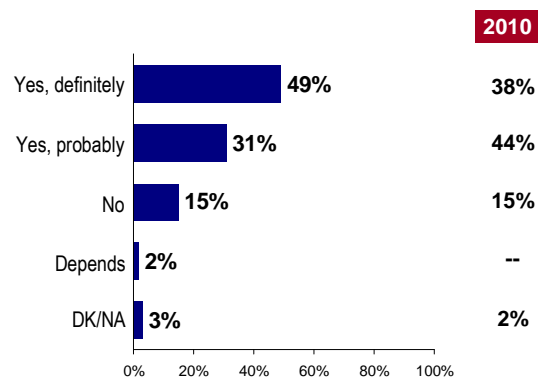
3.2 PROTECTIVE BEHAVIOURS

a) Confidence in Ability to Protect Self/Family

Most First Nations people living on reserves feel confident that they can take steps to prevent or lower the health risk to them and their family from environmental issues. Almost half (49 per cent) are confident that they can definitely take steps, and three in ten (31 per cent) feel they can probably take steps. While the overall level of confidence has remained the same, more First Nations people now say they definitely can take action, up from 38 per cent in 2010. As in 2010, just 15 per cent say they do not believe they can do anything to prevent health risks.

Confidence in Ability to Protect Self and Family

“Do you believe that you can take steps to prevent or lower the health risk to you and your family from environmental issues?”



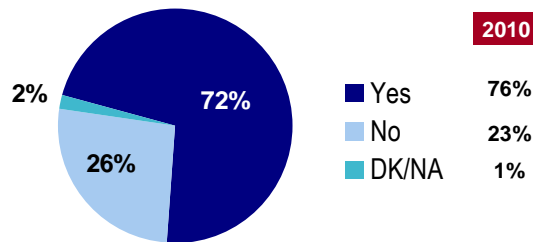
Confidence in one's ability to definitely take steps to protect against environmental factors is lowest in Manitoba (28 per cent) relative to the rest of the country. Those with high school or less education are also somewhat less likely to rate their own confidence as high (i.e., 41 per cent said they definitely could take preventative steps). Naturally, confidence is highest among those who have already taken action to protect themselves/their family (56 per cent).

b) Incidence of Taking Protective Measures

More than seven in ten First Nations people living on reserves (72 per cent) have taken steps in the past year to protect their health and the health of their family from environmental risks, which is largely similar to the proportion that reported having taken action in 2010 (76 per cent). One-quarter (26 per cent) have not taken any action (compared to 23 per cent in 2010).

Incidence of Taking Protective Measures

“And have you personally taken steps in the past year to protect your health and the health of your family from environmental issues?”



The likelihood of having taken some protective measures is highest for First Nations people living in Atlantic Canada (90 per cent) and 30 to 49 year olds (78 per cent) relative to those in other parts of the country and younger and older age cohorts. While majorities of all groups have taken some protective measures, this is least likely among those with less than a high school diploma (62 per cent), along with residents of Manitoba (60 per cent), and those who do not think environmental issues have a great impact on health (59 per cent), compared with other First Nations reserve residents.

c) Protective Measures Taken

Those who say they have taken steps to protect their own health and their family's health were asked to specify what steps they have taken. The most commonly reported actions are related to reducing exposure to problems, especially chemicals; changing smoking habits; changes to food handling, diet, and water; and home improvements.

A frequently cited strategy is removing the source of the problem, which has increased in popularity over time (23 per cent, an increase from 13 per cent in 2010). A further 12 per cent are using cleaning products with fewer chemicals (compared to 16 per cent in 2010) and another two per cent say they are avoiding dangerous products. More than one in five (22 per cent) say they smoke only outside the home, and a further four per cent say they have quit or reduced smoking. These proportions are largely unchanged from 2010. Eight per cent have made changes to their diet or have adjusted what they eat (compared to seven per cent in 2010). Some have made changes related to their water source, such as buying bottled drinking water or using only treated water (16 per cent), and some use filtered or boiled water (three per cent), similar to proportions citing these actions in 2010. Five per cent are practicing safer food handling. Some people report they have made changes to their home, such as conducting renovations (five per cent), installing an air filtration system (five per cent), reducing energy use in the home (four per cent), using other energy alternatives (three per cent), and installing detectors for carbon monoxide (two per cent). One in ten (11 per cent) has reduced time spent in problem areas in their home (up from three per cent in 2010).

Between one in ten and two in ten First Nations people are taking actions such as increasing the frequency of vacuuming and cleaning (12 per cent, unchanged from 2010), recycling and composting (11 per cent, down from 16 per cent in 2010), and using sun protection (10 per cent, compared to eight per cent in 2010). Four per cent have talked to friends, family or neighbours (compared to two per cent in 2010). Many other actions were cited, each by five per cent or fewer. As well, a small proportion is not able to report the specific things they have done (four per cent), a proportion that is higher among First Nations people without a high school diploma (11 per cent) and people living in large households with six or more people (nine per cent). It must be cautioned that while an array of protective measures are cited, many respondents report only one or two actions.

Table 3.2: Steps taken to protect health

	2013 n=290 (Those who have taken steps)	2010 n=305 (Those who have taken steps)
<i>What steps have you taken?</i>		
Removed source of problem (e.g., mould, chemical products)	23%	13%
Smoke cigarettes outside only	22%	19%
Use cleaning products with fewer chemicals	12%	16%
Increase frequency of cleaning/vacuuming	12%	11%
Reduce time spent in problem location/area	11%	3%
Recycle/composting	11%	16%
Use sun screen/block, protection from sun	10%	8%
Buy drinking/bottled water / use only treated/tested water	16%	9%
Practicing better diet/healthy eating	8%	7%
Conducted renovations to protect home/property/family	5%	3%
Practice safer food handling	5%	--
Air filtration/exchange system	5%	3%
Talked to family/friends/neighbours	4%	2%
Cutting down on energy use	4%	2%
Quit/reduce smoking	4%	6%
Active in the community/cause	4%	--
Use water filtration system / Boil water	3%	5%
Ceased/altered using certain energy sources	3%	--
Altered to vehicle/boat practices use	3%	5%
Do research/Internet research	3%	--
Went to health clinic/nursing station	3%	1%
Healthier lifestyle, exercise	2%	3%
Open windows	2%	1%
Brought to attention of Band council/Housing manager	2%	1%
Installed carbon monoxide detectors	2%	1%
Avoid harmful chemicals/dangerous products	2%	--
Other	4%	7%
DK/NR	4%	4%

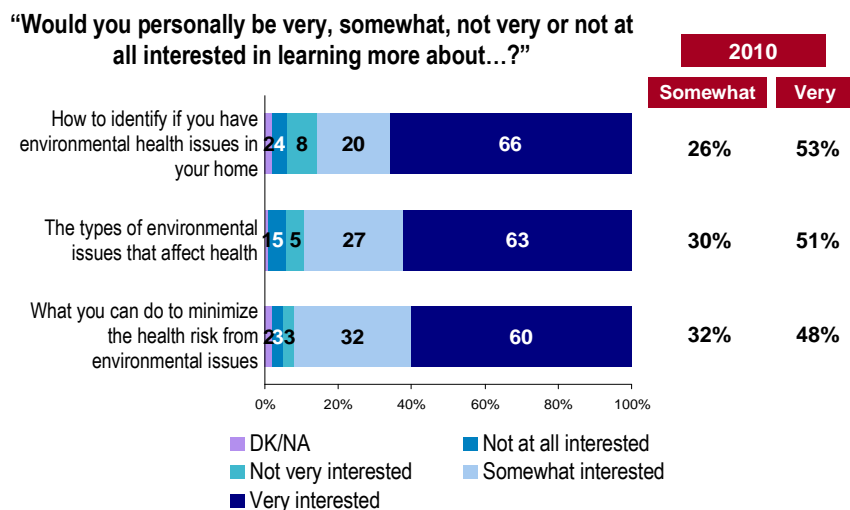
Removing the problem or reducing time spent around a problem area are more likely to be protective measures used by First Nations people in BC (34 and 29 per cent, respectively) compared with others across the country. People in Ontario are more apt to clean/vacuum more often (25 per cent) compared with others. Residents of Quebec are more likely than others to have improved air quality at home such as by installing an air filtration system (22 per cent). First Nations people living in larger households containing six or more people are also more apt to say they smoke only outdoors (37 per cent) and they removed the source of the problem (32 per cent). Residents of Saskatchewan are more likely than others to buy bottled water or use only tested water (31 per cent). This is also more common among First Nations reporting household incomes of \$40,000 to \$60,000 (29 per cent). Protective measures that are more commonly taken by women than by men are smoking outside only (28 per cent) and using cleaning products with fewer chemicals (20 per cent). Recycling tactics are more likely to be adopted by First Nations people with a high school education than those with less or more education (26 per cent). University graduates are more likely than others to have made changes to their diet (19 per cent). First Nations people with incomes of \$20,000 to \$40,000 are more likely than others to have removed the source of the problem (42 per cent). Those earning less than \$20,000 are more likely than their counterparts to say they have started cleaning/vacuuming more frequently (23 per cent).

3.3 INFORMATION NEEDS

a) Interest in Information about Environmental Issues and Health

Interest among First Nations people living on reserves in information about health and environmental issues is high and has increased significantly since 2010. Nearly 90 per cent are interested in information about how to identify health risks around their home, including 66 per cent who are very interested (up from 53 per cent in 2010) and 20 per cent who are somewhat interested (26 per cent in 2010). Most are interested in learning about the types of environmental issues that can affect their health, including 63 per cent who are very interested (up from 51 per cent in 2010) and 27 per cent who are somewhat interested (compared to 30 per cent in 2010). Most are also interested in ways they can minimize their health risks caused by environmental factors, including 60 per cent who are very interested in this (up from 48 per cent in 2010) and 32 per cent who are somewhat interested (unchanged from 2010).

Interest in Information - Environmental Health Issues



n=325 (76 cases missing due to change in skip logic in early stages of collection)

Follow-Up Survey, First Nations 2013
Baseline Survey, First Nations 2010, n=400

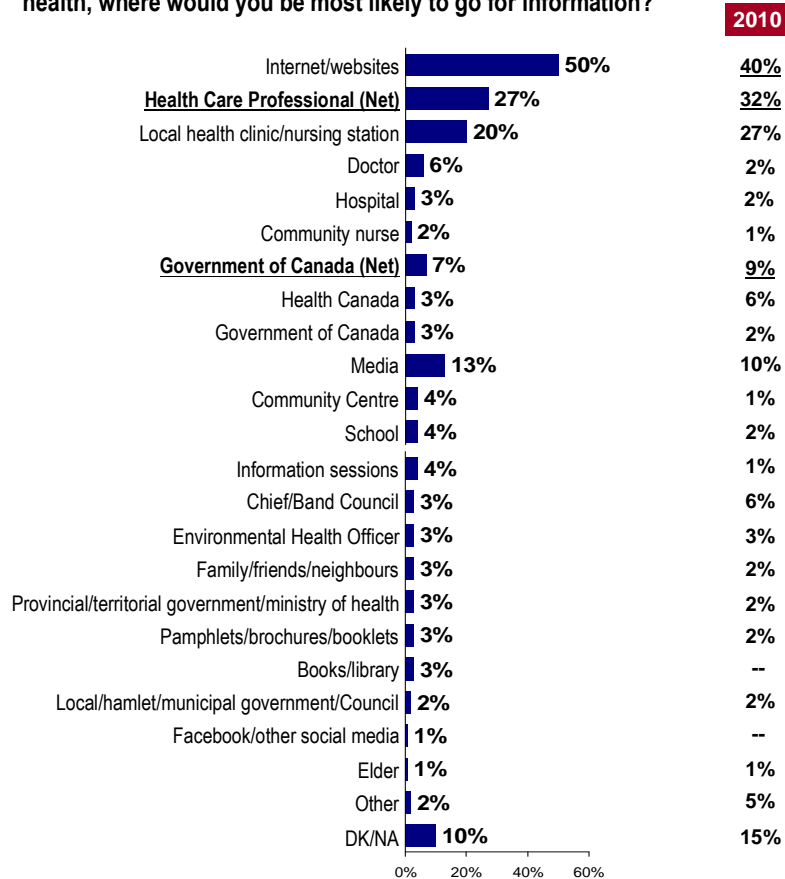
Information on the types of environmental issues that affect health is of greatest interest to First Nations people with a college or university education (95 per cent) and to First Nations people 30 years and older (93 per cent). In contrast, this is of least interest to First Nations people under 30 years old (77 per cent). Information on how to identify environmental factors that might pose a health risk is of most interest to people with incomes of \$40,000 to \$60,000 (97 per cent), but is of less interest to those who feel that environmental factors generally do not impact their health a great deal (68 per cent). Information on how to minimize their health risks is of most interest to people with a university education (98 per cent), but less likely to be of interest to people with a high school diploma (83 per cent).

b) Preferred Information Sources

Without prompting, half of First Nations people living on reserves say they would prefer to learn about environmental issues that can affect health through the Internet and websites (50 per cent). This has increased somewhat from 40 per cent in 2010. Collectively, health care professionals are the next most popular source of information, as was also the case in 2010. In particular, one in five would go to a local clinic or nursing station (20 per cent compared with 27 per cent in 2010). Some would also like to get information from a doctor (six per cent), an environmental health officer (three per cent), a hospital (three per cent), or a community nurse (two per cent) with roughly the same proportions citing these as in 2010. Also commonly cited as a preferred source are media (13 per cent, compared to 10 per cent in 2010). Health Canada is a preferred source for three per cent, as is the Government of Canada (generally) for three per cent and provincial governments (three per cent). Overall, Government of Canada sources are cited by fewer than one in ten, as was also largely the case in 2010. Other information sources are cited by no more than four per cent each.

Preferred Sources for Information

“If you wanted to learn more about environmental issues that can affect health, where would you be most likely to go for information?”



EKOS Research
Associates Inc.

n=401

Follow-Up Survey, First Nations 2013
Baseline Survey, First Nations 2010, n=400

First Nations people with incomes of \$60,000 and greater prefer to get their information from the Internet and websites (68 per cent), along with residents of Saskatchewan (64 per cent) and those with a university level of education (62 per cent), those between the ages of 30 and 49 (59 per cent), those with three to five people living in their household (58 per cent), and English-speaking residents (57 per cent). On the other hand, First Nations people ages 50 and older are less likely to be interested in getting information on the Internet (41 per cent), as well as residents of Manitoba (39 per cent) and those with high school or less education (38 per cent). First Nations people in B.C. (39 per cent) are more likely to prefer getting information from health care professionals compared with others across the country, as is also true of women (33 per cent) compared with men. The Government of Canada is a preferred information source for First Nations people with a university education (14 per cent) compared with those with less education.

3.4 MARKETING CAMPAIGN RECALL

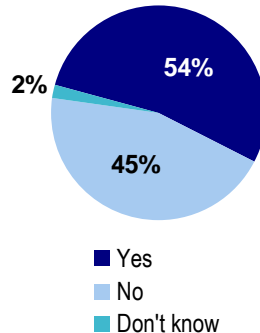
Survey respondents were asked specific questions to test whether they were aware of any of the materials created for the Environmental Health Awareness Marketing Campaign for First Nations people. Questions assessed both unprompted and prompted recall of the campaign.

a) Unprompted Recall

Respondents were asked a general question about whether they had seen, heard or read anything in the previous 12 months that discussed the impacts of the environment (outdoors and indoors) on their health. More than half of First Nations people living on reserves (54 per cent) say, unprompted, that they recall something of this nature from the previous 12 months. Just over two in five (45 per cent) say they did not see, hear, or read anything like this.

Unprompted Campaign Recall

“Over the past 12 months, have you seen, heard or read any materials that discussed the impacts of your environment, at home or in the outdoors, on your health?”



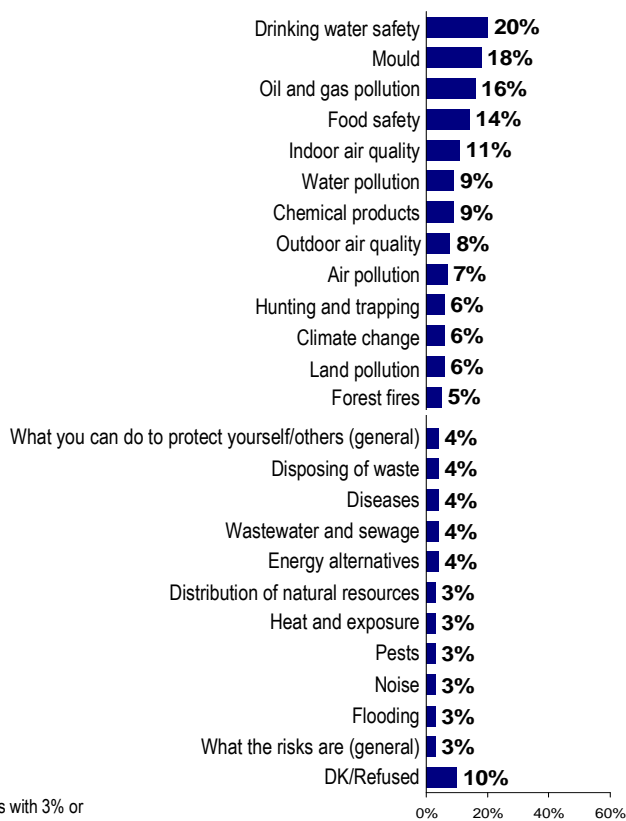
First Nations people living in B.C. are considerably more likely to recall having seen, heard, or read something related to the environment and health (74 per cent), while people in Manitoba are least likely to recall this (39 per cent). First Nations people with a college education (66 per cent) and people living alone or with one other person (63 per cent) are also more likely than their counterparts to recall this information. Recall is also greater among people who feel that the environment impacts their health a great deal and who have already taken measures to protect their health (66 and 60 per cent, respectively).

b) Topics Recalled

A follow-up question was asked of those with unprompted recall of environment and health issues to discern what messages or topics people remembered from the material they saw, heard or read. The largest proportions of First Nations people recall information about drinking water safety (20 per cent) and mould (18 per cent). Some First Nations people recall a host of topics related to indoor risks, including food safety (14 per cent), chemical products (nine per cent), and indoor air quality (eight per cent). Some recall specific outdoor environmental issues such as oil and gas pollution (16 per cent); water, air, and land pollution (nine, seven, and six per cent, respectively); outdoor air quality (eight per cent); climate change (six per cent); hunting/trapping (six per cent); forest fires (five per cent); and flooding (three per cent). A few recall specific information about waste, including disposal and wastewater/sewage (four per cent each). There is also recall about discussion of disease and energy alternatives (four per cent each); and what the risks are in general and what people can do to protect themselves (three and four per cent). Other topics were recalled by no more than two per cent each.

Topics Recalled

“What can you remember about what this material talked about? What were some of the topics that it talked about? Anything else?”



Only items with 3% or more shown in chart



n=211 (Those who recall campaign)

Follow-Up Survey, First Nations 2013

First Nations people who are university educated are more likely to remember these messages being about pollution from oil and gas (38 per cent) and water pollution (20 per cent), while First Nations people without a high school diploma are more likely to recall a message about forest fires (13 per cent). People living in households with two or fewer members (27 per cent) and First Nations people age 50 and older (23 per cent) are more likely than their counterparts to recall messages about oil and gas. People living with two to four others more often recall a message about drinking water safety (26 per cent). Those whose first language is English are more likely than others to recall a message about mould (24 per cent). Recall of food safety messages is higher for those living alone or with one other person (22 per cent) than it is for others.

Regionally, First Nations living in B.C. are more likely to recall messages about food safety (28 per cent). First Nations living in Alberta are more likely to recall messages that were about air pollution (23 per cent), chemical products (21 per cent), outdoor air quality (20 per cent), and land pollution (19 per cent).

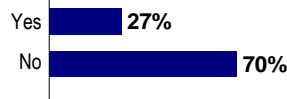
c) Prompted Recall

First Nations respondents were asked whether they recalled seeing three specific campaign materials: the indoor Environmental Health Guide (EHG) for First Nations, the outdoor Environmental Health Guide (EHG) for First Nations, and an activity book for First Nations kids and teens. Just over one-quarter recall seeing the indoor EHG for First Nations (27 per cent). Fewer (16 per cent) recall seeing the outdoor EHG for First Nations. One-quarter (25 per cent) recall seeing an activity book for kids/teens about environmental health issues. Overall, almost two in five First Nations people recall at least one of the three campaign materials (39 per cent).

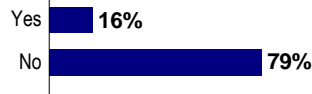
Prompted Recall

“Do you remember seeing...?”

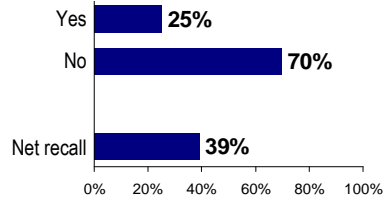
A printed brochure about environmental health issues, incl. useful tips on changes you can make in your home to reduce the harmful effects on some contaminants such as tobacco, dust and mould (n=401)



A printed brochure about environmental health issues, related to outdoor activities, incl. cold weather, hunting and trapping, ice fishing and the impact of environmental contaminants on health (n=401)



An activity book for kids or teens that talked about the environment indoors and outdoors and impacts on health (n=399)

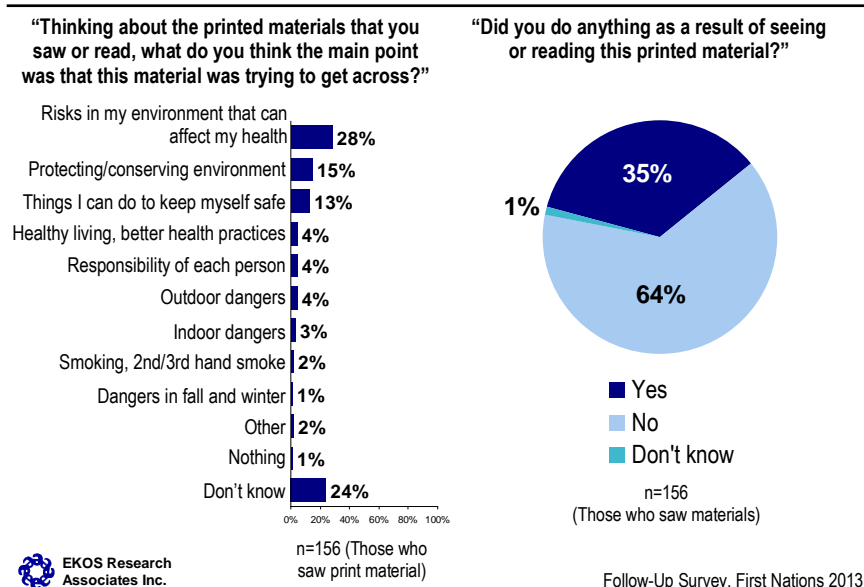


Awareness is consistently higher among First Nations people living in large households of six or more people (activity book for kids/teens, 40 per cent; indoor EHG, 39 per cent; outdoor EHG, 24 per cent). Overall, recall of any of these products is more likely to be lower in Ontario (activity book for kids and teens, 13 per cent; indoor EHG, 12 per cent; outdoor EHG, eight per cent) and among First Nations people with a university education (indoor EHG, 16 per cent; activity book for kids and teens, 14 per cent; outdoor EHG, five per cent). Additionally, those most likely to have seen the indoor EHG are First Nations people in B.C. (36 per cent), those with less than a high school education (36 per cent), and men (34 per cent). Recall of the outdoor EHG for fall and winter is more likely to be higher among people who say that environmental issues do not greatly impact their health (37 per cent) as well as First Nations living in Quebec (29 per cent), and men (22 per cent), compared with others. Recall of the activity book for kids and teens is higher among people who say that environmental issues do not greatly impact their health (42 per cent), younger First Nations people under age 30 (38 per cent), and those with less than a high school education (34 per cent) compared with their counterparts.

d) Message Recall and Call to Action

Those who recall any of the print material related to the marketing campaign were asked what they believe to be the main point of the material. More than one-quarter (28 per cent) say the point of the material is to address risks in the environment that can affect one's own health. The other main things First Nations people thought this material was about are conserving and protecting the environment (15 per cent) and knowing the things that can be done to stay safe (13 per cent). Other possible messages, each recalled by fewer than five per cent, are healthy living and better health practices, individual responsibilities, outdoor and indoor dangers, second-hand smoke, and seasonal dangers (fall and winter). Nearly one-quarter of First Nations people who saw the materials (24 per cent) were not able to distinguish or recall the main message. Nearly two in five First Nations people who saw any of the three campaign materials (35 per cent) say they took some action based on the information provided.

Recall of Message



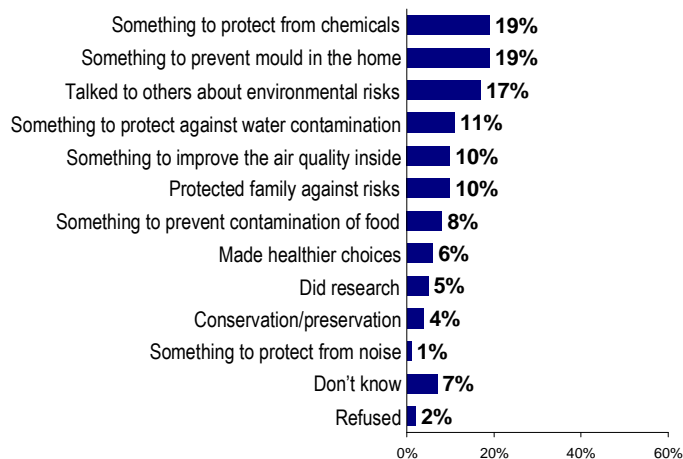
Those more likely to say the main message of the materials was about risks in the environment are people age 50 and older (47 per cent) and those with at most a college education (44 per cent). Those who recalled the materials being about the things people can do to protect themselves are also more likely to have at most a high school diploma (29 per cent), and be between ages 30 to 49 (20 per cent). First Nations people who have already taken measures to protect their health are more likely to say they also did something in response to seeing the marketing campaign materials (40 per cent).

e) Actions Taken

First Nations people who say they did something based on the marketing campaign materials they saw say they took action to protect themselves from chemicals (19 per cent), protected against mould in their home (19 per cent), and talked to others about environmental risks (17 per cent). Around one in ten did things to protect against water contamination (11 per cent), improve their indoor air quality (10 per cent), or protect their family against risks in general (10 per cent). Other actions taken, each by fewer than one in ten, include protecting against food contamination (eight per cent), making healthier lifestyle choices (six per cent), doing research (five per cent), choosing to do things to conserve or preserve the environment (four per cent), and protecting against noise (one per cent). The relatively small size of the sample for this question should be noted and caution used in interpreting the numbers given the much wider margin of error associated with this size of sample (i.e., 12.5 per cent).

Action Taken

“What did you do? Anything else?”



EKOS Research
Associates Inc.

n=62 (Those who reported doing something)

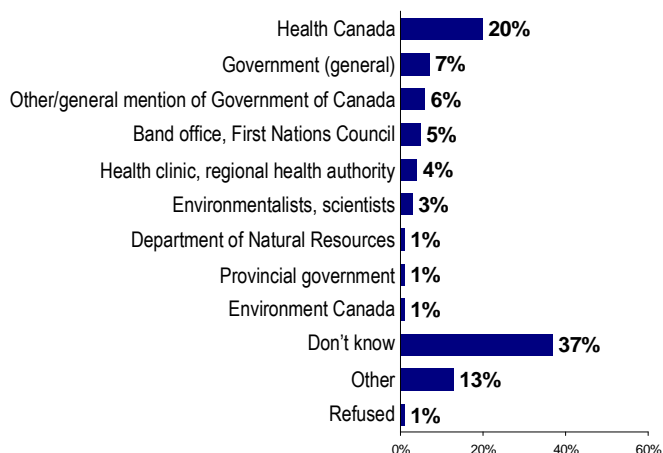
Follow-Up Survey, First Nations 2013

f) Awareness of Marketing Campaign Sponsor

One in five First Nations people who saw the marketing campaign materials (20 per cent) correctly identify Health Canada as the sponsor. An additional seven per cent say government in general is the sponsor, and six per cent name the Government of Canada (generally) as the sponsor of the materials. First Nations people identify other organizations as the sponsor of the materials such as a First Nations band office or council (five per cent), a health clinic or health authority (four per cent), an environmental or science group (three per cent), Environment Canada or Department of Natural Resources (one per cent each), or a provincial government (one per cent). More than one in ten First Nations people name some other sponsor, each representing fewer than one per cent of responses. Nearly two in five (37 per cent) do not know who is responsible for the materials.

Awareness of Marketing Campaign Sponsor

“Thinking about the printed material you saw, who do you think produced it?”



n=156 (Those who saw materials)

Follow-Up Survey, First Nations 2013

The likelihood of recognizing Health Canada as the sponsor of the materials is higher among those who believe that environmental issues can affect their health a fair amount (37 per cent), individuals with between three and five people in their household (29 per cent), and those whose mother tongue is an Aboriginal language (27 per cent).

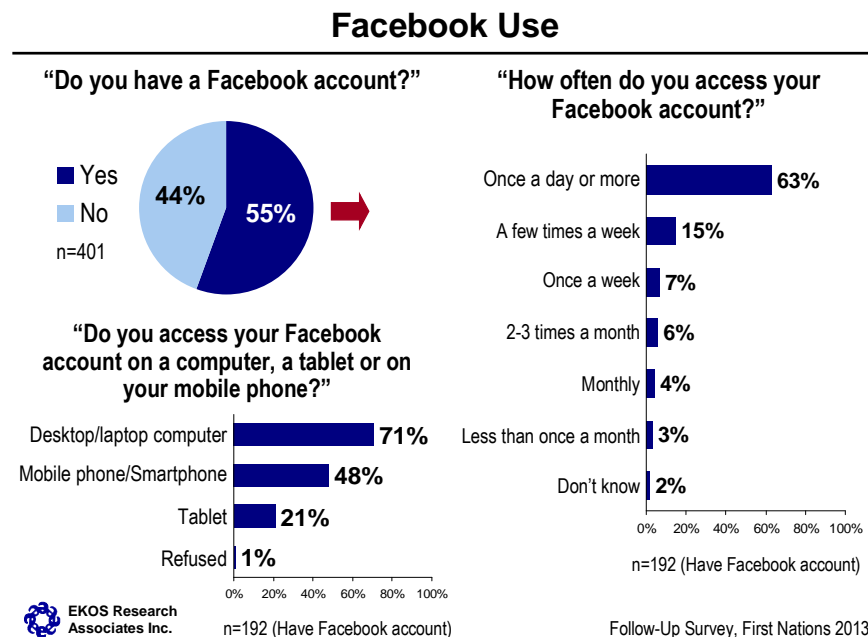
3.5 SOCIAL MEDIA

The campaign to raise awareness on environmental health issues for First Nations and Inuit involved some use of social media. Survey respondents were asked some questions regarding their use of Facebook and their awareness of the Healthy First Nations and Inuit page on Facebook.

a) Facebook Use

Just over half of First Nations people (55 per cent) have a Facebook account. The majority of these people access their Facebook accounts every day, including some who access their account more than once per day (27 per cent) and those who access it once a day (36 per cent). More than one in five access their account once a week (seven per cent) to a few times a week (15 per cent). Thirteen per cent access Facebook two to three times a month or less often.

The majority of First Nations people using Facebook access their Facebook account using a desktop or laptop computer (71 per cent), although large minorities are using mobile phones or Smartphones (48 per cent) or a tablet device (21 per cent) to access Facebook.



The likelihood of having a Facebook account is higher for First Nations people with incomes of \$40,000 to \$60,000 (74 per cent), those under 30 years old (70 per cent), and among people who have not taken steps to protect their health from environmental factors (69 per cent), as well as among women (62 per cent) compared with their counterparts. Incidence of having a Facebook account is less likely for men (48 per cent), people who live alone or with one other person (41 per cent), and First Nations people age 50 and older (40 per cent). Regionally, First Nations people living in Quebec (73 per cent) or Saskatchewan (68 per cent) are more likely to have Facebook accounts than those in other regions, especially compared to those in Alberta (30 per cent).

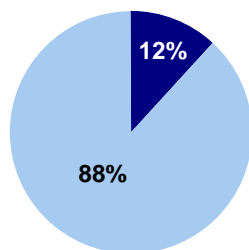
First Nations people under the age of 30 are more apt to access Facebook on a daily or more frequent basis (74 per cent). The next most frequent users are 30 to 49, among whom, 32 per cent go to Facebook once to a few times per week. First Nations people age 50 and older are more likely to be using a desktop or laptop computer for Facebook (89 per cent), as are those who live with two to four other people (79 per cent). Use of a mobile/Smartphone to access Facebook is more likely among those in Saskatchewan (69 per cent) and First Nations people who speak English as their first language (62 per cent).

b) Recall of Facebook Messages on Environmental Health

A small proportion of First Nations people who have a Facebook account (12 per cent) are familiar with Health Canada's Healthy First Nations and Inuit Facebook page. Half who are aware of it (50 per cent; n=14) recall having seen some messages about environmental issues and effects on health. More than half (52 per cent) do not recall the topic of the message they saw, but others recall messages about issues such as climate change (18 per cent), mould (12 per cent), toxic chemicals (seven per cent), contaminated food (seven per cent), and air pollution (five per cent). Most of these people say they found the information to be helpful for them to be able to take action to protect their health (including 48 per cent who found it very helpful and 36 per cent who found it somewhat helpful).

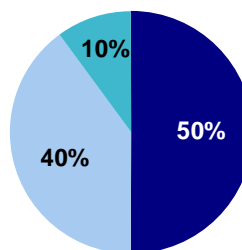
Awareness of Facebook Messages on Environmental Health

"Are you familiar with the Healthy First Nations and Inuit Facebook page?"



n=192
(Have Facebook account)

"Do you recall seeing any messages related to environmental health issues posted on the Healthy First Nations and Inuit Facebook page?"



n=28
(Those familiar with Facebook page)

■ Yes
■ No
■ Don't know

4. INUIT LIVING IN THE NORTH

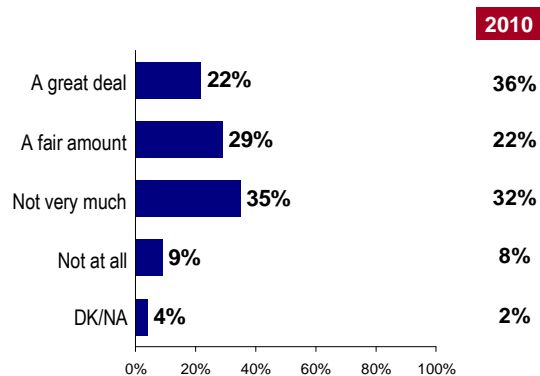
4.1 PERCEPTIONS OF ENVIRONMENTAL HEALTH ISSUES

a) Impact of Environmental Issues on Health

Consistent with findings from 2010, a slim majority of Inuit believe that environmental issues can affect the health of themselves and their families at least to some extent. One in five say that environmental issues affect their health and the health of their family a great deal (22 per cent; 36 per cent in 2010), and three in ten say that their/their family's health is affected a fair amount by environmental issues (29 per cent; 22 per cent in 2010). That said, as in 2010 around one-third think that environmental issues do not affect health very much (35 per cent, 32 per cent in 2010). Only nine per cent say that environmental issues do not at all affect their/their family's health (consistent with eight per cent saying this in 2010). Four per cent of Inuit (two per cent in 2010) do not know whether their or their family's health is affected by the environment.

Impact of Environmental Issues on Health

“How much, if at all, do you believe environmental issues affect your health and your family's health? Would you say...?”



Within subgroups, there are no significant differences between those who feel their/their family's health is affected at least a fair amount by their environment, versus those who do not.

b) Unaided Awareness of Environmental Issues

Inuit respondents were asked to identify (without prompting) which environmental issue(s) they feel pose the greatest risk to their health and the health of their family. Top-of-mind responses indicate increasing concern about outdoor environmental issues and the potential impact on their health.

Outdoor environmental issues were identified by six in ten respondents (59 per cent), representing a sharp increase from the 39 per cent measured in 2010. As was the case in 2010, air pollution is mentioned most often (one in five each year). Municipal landfills and garbage was cited by 13 per cent (compared to five per cent in 2010). One in ten (ten per cent) pointed to each of pollution in general and global warming/climate change, unchanged from 2010. Fewer than one in ten cited other sources, including industrial pollution (four per cent) and ozone depletion/UV radiation (one per cent), largely in line with results from 2010.

Just under half (45 per cent) cited indoor environmental issues top of mind, up marginally from 2010 (38 per cent). As in 2010, smoking/second-hand smoke was cited most often as a key risk (17 per cent and 12 per cent in 2010). Sewage/wastewater was cited by 15 per cent (up from five per cent in 2010), followed by dust cited by twelve per cent (up from only three per cent in 2010). Five per cent or fewer pointed to other indoor sources of health risk.

Table 4.1: Environmental Issues that Pose the Greatest Health Risk

	2013 n=102	2010 n=101
<i>In your view, what environmental issue(s) would you say poses the greatest risk to the health of your and your family?</i>		
Outdoor – Net	59%	39%
Air pollution/smog	20%	19%
Municipal garbage/landfills	13%	5%
Pollution (general)	10%	3%
Global warming/climate change	10%	6%
Water pollution	9%	9%
Industrial pollution	4%	5%
Ozone depletion/UV radiation	1%	--
Indoor – Net	45%	38%
Smoking/second hand smoke	17%	12%
Sewage/wastewater	15%	5%
Dust/dust mites	12%	3%
Indoor air quality/indoor air pollution	5%	7%
Toxic chemicals	5%	2%
Drinking water contamination	3%	3%
Food safety/contaminated food	2%	7%
Housing quality, poor housing conditions	2%	--

	2013 n=102	2010 n=101
Mould	2%	10%
Smoke from wood burning stove	1%	--
Carbon monoxide	1%	--
Other	7%	3%
DK/NA	28%	43%

Inuit who report incomes of \$40,000 or greater are more apt to cite outdoor sources of risk (78 per cent relative to 43 per cent of their counterparts). Men (70 per cent) are more likely than women (48 per cent) to name outdoor environmental issues.

With regard to indoor sources, results follow a similar income pattern (62 per cent among higher income households versus 34 per cent in lower income households).

c) Perceived Risk to Health from Indoor Environmental Issues

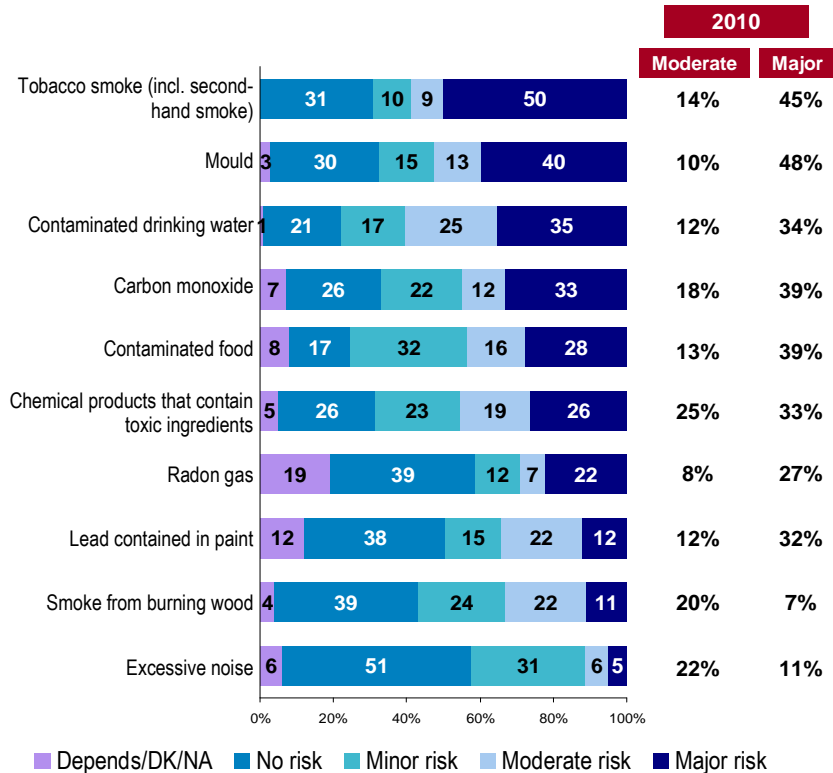
Inuit respondents were asked to specify the relative risk associated with ten indoor environmental issues. Concern remains generally the same as was found in 2010 for the top two indoor environmental issues. Majorities still hold the perception that the biggest environmental risks to their or their family's health are tobacco smoke (50 per cent say this is a major risk; another nine per cent say it is a moderate risk) and mould (40 per cent say major risk; 13 per cent say moderate risk). However, compared to 2010, more are moderately concerned about contaminated drinking water: 35 per cent say this is a major risk, on par with 34 per cent in 2010, while 25 per cent say this is a moderate risk, compared to 12 per cent in 2010.

On the other hand, fewer today think contaminated food is a major risk, though generally the same proportion feels it is a moderate risk (28 per cent say major risk; 16 per cent moderate) compared to 2010 (39 per cent said major risk; 13 per cent said moderate risk). Fewer Inuit today are as concerned about carbon monoxide (33 per cent say major risk; 12 per cent say moderate risk), compared to 2010 (39 per cent said major risk; 18 per cent said moderate risk). Also, fewer Inuit today are as concerned about chemical products that contain toxic ingredients (26 per cent say major risk; 19 per cent moderate risk) compared to 2010 (33 per cent said major risk; 25 per cent said moderate risk). There is also less widespread concern among Inuit over other indoor environmental issues that can affect health. While three in ten view radon gas as potentially risky (22 per cent say major risk; seven per cent moderate risk), almost one in five Inuit (19 per cent) say they do not know whether this issue poses any risk to them. One in ten Inuit believe there is a major risk posed by lead contained in paint (12 per cent), a proportion which has fallen from 32 per cent in 2010 (22 per cent say this poses a moderate risk, compared to 12 per cent in 2010). Smoke from burning wood remains perceived as a low risk issue, as it was in 2010, with 11 per cent saying this is a major risk and 22 per cent saying it poses a moderate risk. Few overall are concerned about

excessive noise as a health issue: five per cent see this as a major risk (down slightly from 11 per cent in 2010) and another six per cent view this as a moderate risk (down from 22 per cent in 2010).

Health Risk from Indoor Environmental Issues

“Do you think the health risk to you and your family from this environmental issue is a major risk, moderate risk, minor risk, or no risk?”



n=102

Follow-Up Survey, Inuit 2013
Baseline Survey, Inuit 2010 (n=101)

Inuit with incomes over \$40,000 are less likely to associate major or moderate risk with a variety of indoor factors, including tobacco smoke (45 per cent), chemical products with toxic ingredients (32 per cent), contaminated food (30 per cent), radon gas (25 per cent), lead-based paint (24 per cent), and smoke from burning wood (16 per cent), compared to those with lower incomes. Compared to women, men are less likely to feel that tobacco smoke (47 per cent), and smoke from burning wood (25 per cent) pose a major or moderate risk to health. Inuit age 40 and older are less apt to be concerned about the health risks of tobacco smoke (44 per cent), mould (35 per cent), chemical products with toxic ingredients (29 per cent), contaminated food (27 per cent), carbon monoxide (25 per cent), lead (21 per cent), and radon gas (12 per cent). Inuit who do not think their health is greatly affected by environmental issues (43 per cent) are less likely to think that contaminated drinking water poses a major or moderate health risk. People in households

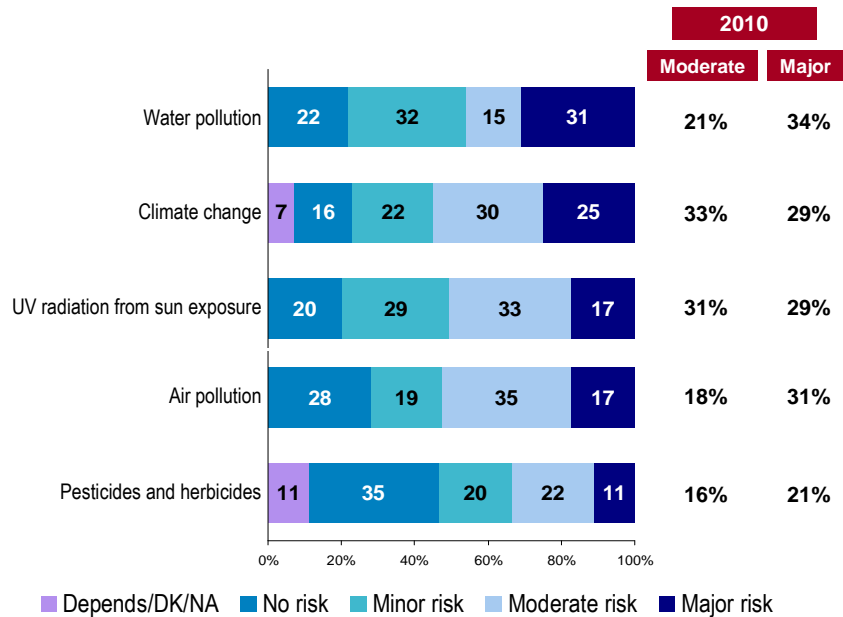
of five or more people are more likely to be concerned about mould (73 per cent), as well as chemical products with toxic ingredients (66 per cent).

d) Perceived Risk to Health from Outdoor Environmental Issues

Consistent with 2010 figures, around three in ten Inuit feel that water pollution poses a major risk to health (31 per cent) and another 15 per cent feel it poses a moderate risk (compared to 34 and 21 per cent respectively in 2010). Almost one in five (17 per cent) feel that UV radiation poses a major risk, (down from 29 in 2010), and an additional 33 per cent feel it is a moderate risk (on par with 31 per cent in 2010). The same proportion feels that climate change presents as major (25 per cent, 29 per cent in 2010) and moderate (30 per cent, 33 per cent in 2010) risk to health as it did in 2010. The perception of air pollution as posing a major risk to health has declined from 31 per cent in 2010 to 17 per cent in 2013, while more now deem that this factor presents a moderate health risk (35 per cent, versus 18 per cent in 2010). The same trend is evident among perceptions toward the risk of pesticides and herbicides: 11 per cent now see this as a major risk, compared to 21 per cent in 2010, while 22 per cent see it as posing a moderate risk (versus 16 per cent in 2010).

Health Risk from Outdoor Environmental Issues

“Do you think the health risk to you and your family from this environmental issue is a major risk, moderate risk, minor risk, or no risk?”



UV radiation from sun exposure (75 per cent) and climate change (73 per cent) are issues more likely to be viewed as posing a major or moderate health risk by Inuit who believe their health is affected to a fair degree by the environment. These two issues are also more likely to be rated as a major health risk by Inuit who are age 40 and older (76 and 66 per cent, respectively). Those with incomes \$40,000 or greater are more apt to be concerned about UV radiation (70 per cent) than those with lower incomes. Air pollution and UV radiation are more often seen as a moderate to major risk among men (64 and 62 per cent respectively) compared with women. Pesticides and herbicides are more apt to be viewed as a major risk by people with incomes under \$40,000 (48 per cent) and by Inuit under 40 years old (47 per cent).

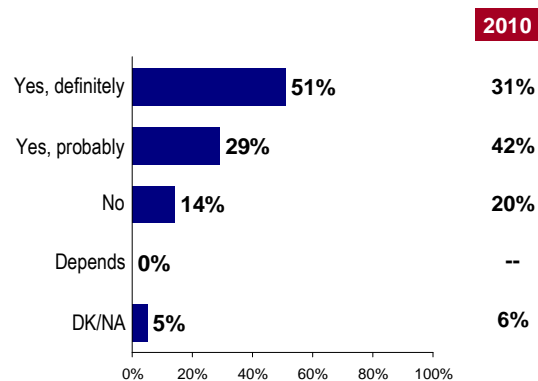
4.2 PROTECTIVE BEHAVIOURS

a) Confidence in Ability to Protect Self/Family

Most Inuit believe they can take steps to lower the health risk posed by environmental factors. In fact, more than half (51 per cent) say they can definitely take action to protect themselves and their families. This confidence has strengthened from “probably” to “definitely” take steps to reduce their risks, compared to 2010 (51 per cent saying definitely up from 31 per cent in 2010). A further 29 per cent say they can probably take action. Around one in ten (14 per cent) do not believe they can take steps to protect themselves, compared to 20 per cent in 2010.

Confidence in Ability to Protect Self and Family

“Do you believe that you can take steps to prevent or lower the health risk to you and your family from environmental issues?”



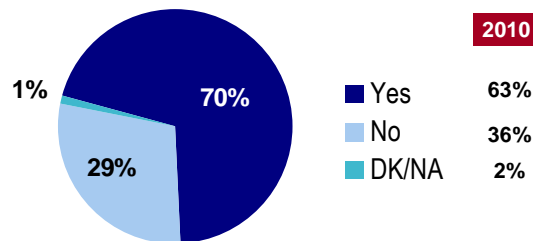
As expected, Inuit who have already taken steps to protect their health from the environment (62 per cent) are more likely to be confident that they can definitely do this compared to those who have not (26 per cent). Inuit with incomes greater than \$40,000 (63 per cent) are more likely they can definitely take action, compared to those with lower incomes (45 per cent). Younger Inuit (46 per cent) are also more confident they can probably take action than Inuit age 40 and older (eight per cent).

b) Incidence of Taking Protective Measures

Seven in ten Inuit have taken steps to protect their health and the health of their families from environmental issues (70 per cent), which is largely consistent with the findings from 2010 (63 per cent).

Incidence of Taking Protective Measures

“And have you personally taken steps in the past year to protect your health and the health of your family from environmental issues?”



Results are largely similar between subgroups.

c) Protective Measures Taken

Inuit saying they have taken steps to protect the health of themselves and their family from environmental issues were asked, unprompted, what steps they have taken. One in four say they have increased vacuuming and cleaning (26 per cent, up from seven per cent in 2010). As was the case in 2010, other commonly reported actions are related to changing smoking habits, with 19 per cent saying they now smoke cigarettes outside only (18 per cent in 2010), and an additional three per cent say they have quit or cut back on smoking (five per cent in 2010). Also frequently cited are behaviour changes related to contaminated drinking water issues: 11 per cent say they are now buying bottled drinking water or using only treated or tested water, and five per cent are using a filtration system or boiling their water.

Other steps taken reflect changes around the home as well as some lifestyle changes. One in four has decreased their energy use (25 per cent, up from seven per cent in 2010) and another one per cent has switched to alternative energy sources (unchanged from 2010). Safer food handling is now practiced by 15 per cent. Fewer than one in ten have altered their use of vehicles (e.g. carpooling, no idling – eight per cent, unchanged from 2010), have removed the source of the problem (seven per cent, compared to 11 per cent in 2010), are recycling/composting (six per cent, seven per cent in 2010), are using cleaning products with fewer chemicals (five per cent, down from 18 per cent in 2010), have conducted renovations to their home (five per cent, not mentioned in 2010), or use an air filtration system (three per cent, compared to one per cent in 2010). A few say they are now eating better (nine per cent, six per cent in 2010) or are exercising more (four per cent, not mentioned in 2010). Four per cent say they have talked to family, friends or neighbours about the issues (seven per cent in 2010). Several other specific measures are mentioned by no more than three per cent each. As well, a small proportion – seven per cent – is unable to identify exactly what steps they have taken.

Table 4.2: Protective Measures Taken

	2013 n=59 (Those who have taken steps)	2010 n=65 (Those who have taken steps)
<i>What steps have you taken?</i>		
Increase frequency of cleaning/vacuuming	26%	7%
Cutting down on energy use	25%	7%
Smoke cigarettes outside only	19%	18%
Practice safer food handling	15%	--
Buy drinking water/bottled water / only treated/tested water	11%	5%
Practicing better diet/healthy eating	9%	6%
Altered vehicle/boat practices use	8%	8%
Removed source of problem (e.g., mould, chemical products)	7%	11%
Recycle/composting	6%	7%
Use water filtration system / Boil water	5%	*
Use cleaning products with fewer chemicals	5%	18%
Conducted renovations to protect home/property/family	5%	--

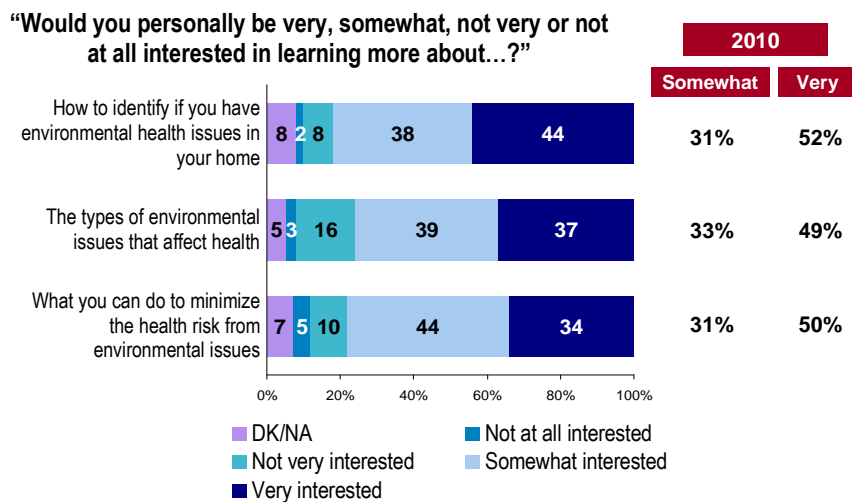
	2013 n=59 (Those who have taken steps)	2010 n=65 (Those who have taken steps)
<i>What steps have you taken?</i>		
Talked to family/friends/neighbours	4%	7%
Healthier lifestyle, exercise	4%	--
Air filtration/exchange system	3%	1%
Brought to attention of Band council/Housing manager	3%	--
Quit/reduce smoking	3%	5%
Installed gas/carbon monoxide detectors	3%	2%
Use sun screen/block, protection from sun	2%	10%
Reduce time spent in problem location/area	1%	7%
Active in the community/cause	1%	--
Ceased/altered using certain energy sources	1%	--
Other	3%	10%
DK/NR	7%	17%

4.3 INFORMATION NEEDS

a) Interest in Information about Environmental Health Issues

Inuit were asked about their level of interest in information about environmental health issues. Although overall interest in some topics related to environmental health is still widespread, strong interest appears to have declined from 2010. Interest in information that helps Inuit identify environmental health issues in their home appears to have declined somewhat over time. Just under half are very interested in this topic (44 per cent, down marginally from 52 per cent in 2010) and 38 per cent who are somewhat interested (31 per cent in 2010). Eight in ten Inuit are interested in learning about the types of environmental issues that affect health, including 37 per cent who are very interested (down from 49 per cent in 2010) and 39 per cent who are somewhat interested (33 per cent in 2010). One-third is very interested in learning how to minimize their health risks from environmental issues (34 per cent, down from 50 per cent in 2010), though more than two in five (44 per cent) are somewhat interested in this topic (31 per cent in 2010).

Interest in Information - Environmental Health Issues



n=84 (18 cases missing due to change in skip logic in early stages of collection)

Follow-Up Survey, Inuit 2013
Baseline Survey, Inuit 2010 (n=101)

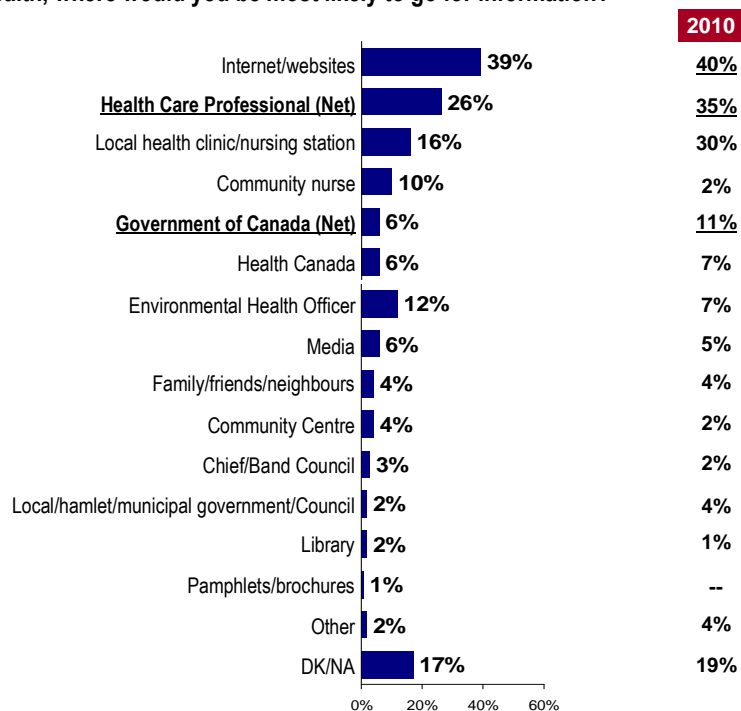
Men are less likely than women to be interested in information on the types of environmental issues that can affect health (67 per cent very or somewhat interested compared to 87 per cent of women). Information on the types of environmental issues that affect health is more likely to be of interest to Inuit under age 40 (93 per cent are at least somewhat interested) and people with incomes under \$40,000 (87 per cent). Inuit who think that environmental issues affect their or their family's health at least somewhat are more likely to be interested in information on what they can do to minimize their health risks (89 per cent very or somewhat interested).

b) Preferred Information Sources

Reflecting the global trend, the information source most preferred by Inuit for information on environmental issues is the Internet and websites, with two in five (39 per cent) indicating, unprompted, that this is where they would likely go for this sort of information (40 per cent in 2010). Health professionals are the second most commonly cited sources (26 per cent) as was also the case in 2010 (35 per cent). Within this category, sixteen per cent would go to a local health clinic or nursing station, a decline from 30 per cent in 2010 and ten per cent would get this information from a community nurse (compared to two per cent in 2010). Twelve per cent would get information from an environmental health officer (seven per cent in 2010). Other information sources were each mentioned by six per cent or fewer (unchanged from 2010), including government sources like Health Canada (six per cent); media (six per cent); family, friends and neighbours (four per cent); community centres and local governments (four and two per cent each), Chief/Band councils (three per cent), libraries (two per cent), and pamphlets (one per cent). Notably, 17 per cent of Inuit acknowledged not knowing where they would go to find this type of information.

Preferred Sources for Information

“If you wanted to learn more about environmental issues that can affect health, where would you be most likely to go for information?”



Inuit ages 40 and older are more likely to prefer getting information from health professionals (42 per cent). Men (38 per cent) are more likely than women (15 per cent) to prefer to get this information from health professionals.

4.4 MARKETING CAMPAIGN RECALL

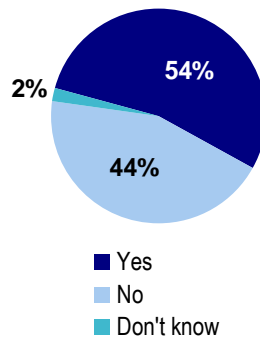
Survey respondents were asked specific questions to test whether they were aware of any of the materials created for the Environmental Health Awareness Marketing Campaign for Inuit. Questions assessed both unprompted and prompted recall of the marketing campaign.

a) Unprompted Recall

Respondents were asked a general question about whether they had seen, heard or read anything in the previous 12 months that discussed the impacts of the environment (outdoors and indoors) on their health. Over half of Inuit respondents (54 per cent) indicate, without prompting, that they recall something of this nature from the previous 12 months.

Unprompted Campaign Recall

“Over the past 12 months, have you seen, heard or read any materials that discussed the impacts of your environment, at home or in the outdoors, on your health?”



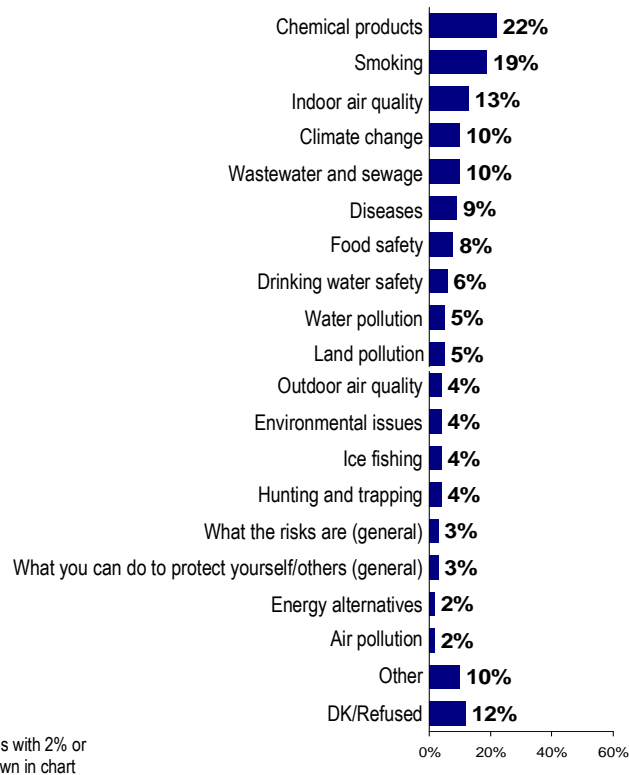
Those most apt to have seen, heard, or read anything about environmental health issues over the past 12 months are Inuit who think that their health is affected at least somewhat by environmental issues (69 per cent), and those who have taken steps to protect their health (67 per cent).

b) Topics Recalled

The largest proportions of Inuit recall information about chemical products (22 per cent), smoking (19 per cent), and indoor air quality (13 per cent). Proportions of around one in ten each recall messages about wastewater/sewage and climate change (10 per cent each), diseases (nine per cent), and food safety (eight per cent). A wide range of other topics are recalled by fewer than one in ten, including drinking water safety (six per cent); land and water pollution (five per cent each); outdoor air quality and air pollution (four and two per cent, respectively); hunting and trapping, ice fishing, and environmental issues in general (four per cent each); general information about what the risks are and what people can do to protect themselves and others (three per cent each); and energy alternatives (two per cent). One in ten (12 per cent) do not recall the topic of the material they saw, heard or read.

Topics Recalled

“Can you remember what this material talked about? What were some of the topics that it talked about? Anything else?”



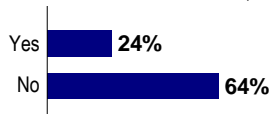
c) Prompted Recall

In terms of recall of three specific campaign materials, nearly one in four recall seeing the indoor EHG for Inuit (24 per cent) and 15 per cent recall seeing the outdoor EHG for Inuit. Over one-quarter (28 per cent) recall seeing an activity book for kids/teens about environmental health issues. Overall, four in ten Inuit (40 per cent) recall at least one of these campaign materials.

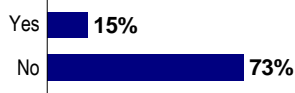
Prompted Recall

“Do you remember seeing...?”

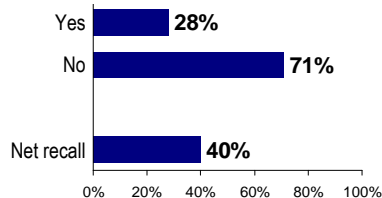
A printed brochure about environmental health issues, incl. useful tips on changes you can make in your home to reduce the harmful effects on some contaminants such as tobacco (n=102)



A printed brochure about environmental health issues, related to outdoor activities, incl. cold weather, hunting and trapping, ice fishing and the impact of environmental contaminants on health (n=102)



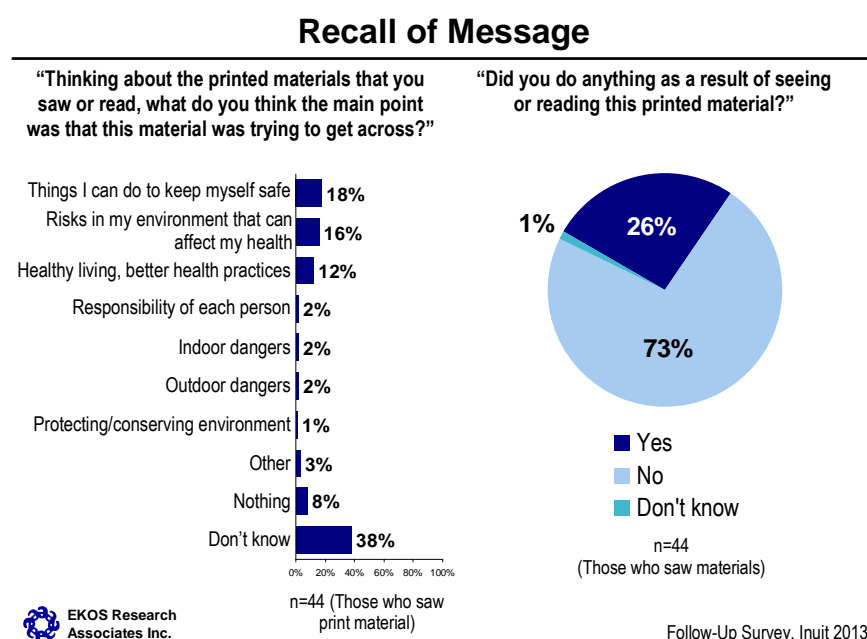
An activity book for kids or teens that talked about the environment indoors and outdoors and impacts on health (n=98)



Inuit with incomes under \$40,000 are more apt to recall both the indoor EHG (35 per cent) and the outdoor EHG (25 per cent). Inuit who believe the environment has an impact of their health (34 per cent, versus 15 per cent of those who do not) and those who are taking steps to protect their health (30 per cent, versus nine per cent of those who are not) are more likely to have seen the indoor EHG. Younger Inuit (24 per cent of those under 40 years old) are more likely to have seen the outdoor EHG than those who are 40 years and older (four per cent).

d) Message Recall and Call to Action

The main elements Inuit recall from this material are messages about what things Inuit can do to keep themselves safe (18 per cent), what the risks are in the environment that can affect health (16 per cent), and how to live healthily (12 per cent). One to two per cent each recall messages about individual responsibility, indoor dangers, outdoor dangers, and how to protect/conservate the environment. Almost two in five Inuit who saw the materials were not able to distinguish or recall the main message (38 per cent). One in four Inuit who saw any of the three campaign materials say they took some action based on the information provided (26 per cent).



e) Actions Taken

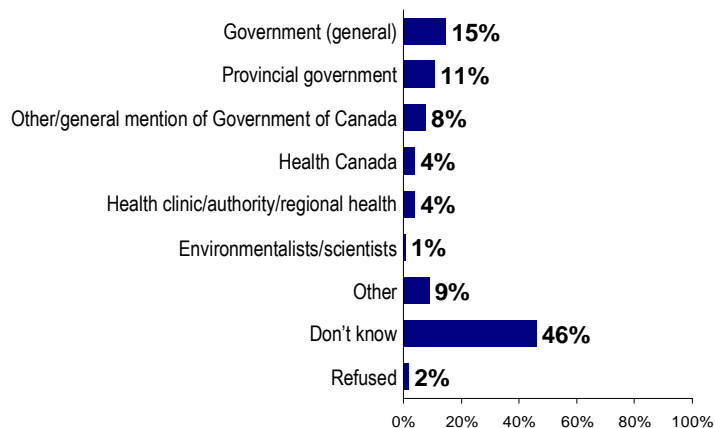
The small number of Inuit who did something based on the EHG materials they saw (n=13) most often say they did something to improve their indoor air quality, something to protect against harmful chemicals, and something to protect from water contamination, although this represents three or fewer individuals in each case. Fewer took measures to prevent mould in the home or to conserve the environment. Notably, 45 per cent were unable to or refused to say what action they took.

f) Awareness of Marketing Campaign Sponsor

Few Inuit who recall any of the campaign materials correctly identify Health Canada as the sponsor of the printed material they saw (four per cent). An additional 15 per cent say government (generally) is the sponsor of the materials, and eight per cent say the Government of Canada is the sponsor. Some believe the campaign to be sponsored by a provincial government (11 per cent), a health clinic or health authority (four per cent), or an environmental or science group (one per cent). Nearly half (46 per cent) do not know who is responsible for the materials.

Awareness of Marketing Campaign Sponsor

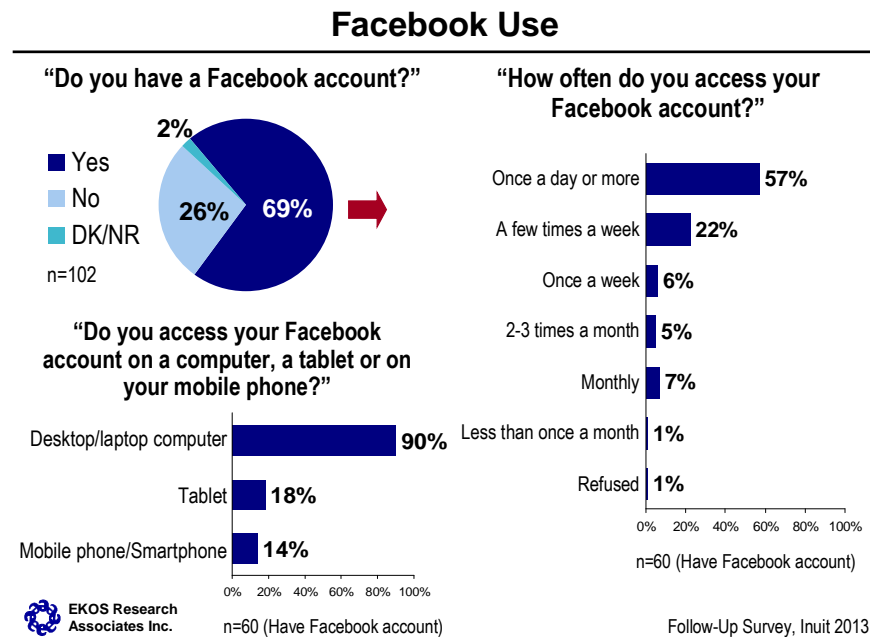
“Thinking about the printed material you saw, who do you think produced it?”



4.5 SOCIAL MEDIA

a) Facebook Use

Nearly seven in ten Inuit have a Facebook account (69 per cent). The majority of this group (57 per cent) access Facebook at least once a day, including 21 per cent who access it more than once a day. Three in ten access Facebook at least once a week (28 per cent). Thirteen per cent access Facebook a few times a month or less frequently. The vast majority (90 per cent) use a desktop or laptop computer to access their Facebook account. Some use a tablet (18 per cent) or a mobile phone or Smartphone (14 per cent).



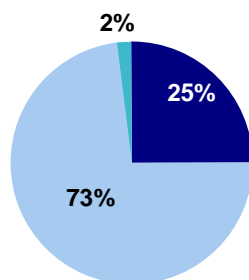
Consistent with the typical profile of Internet and social media users, Inuit under age 40 (85 per cent) and those with incomes of \$40,000 and higher (81 per cent) are more likely to have a Facebook account. This is also more common for those saying environmental issues impact their health (79 per cent) and people who have taken steps to protect their health (78 per cent).

b) Recall of Facebook Messages on Environmental Health

One-quarter of Inuit with a Facebook account (25 per cent) are familiar with Health Canada's Healthy First Nations and Inuit Facebook page. Of those aware of the page (n=20), just two individuals (i.e., 13 per cent) recall seeing any messages related to environmental health issues that were posted on the Facebook page. Half (51 per cent, or 12 individuals) indicate they do not know or do not remember seeing environmental health messages. Nine respondents provided responses when asked what the content of the message was that they saw. Almost half could not remember, while the others say they read about contaminated food, tobacco smoke, and mould. Most found this information to be somewhat useful in helping them take action to protect their health.

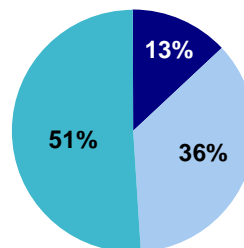
Awareness of Facebook Messages on Environmental Health

"Are you familiar with the Healthy First Nations and Inuit Facebook page?"



n=60
(Have Facebook account)

"Do you recall seeing any messages related to environmental health issues posted on the Healthy First Nations and Inuit Facebook page?"



n=20
(Those familiar with Facebook page)

■ Yes
■ No
■ Don't know

APPENDIX A RESPONSE RATE

Call disposition table			
	Final disposition	#	Totals
A	Invalid numbers		835
	BC - Blocked by Bell	107	
	BU - Business/Fax /Modem	516	
	DU - Duplicate Number	39	
	NF - Invalid Number	173	
B	Unresolved		15610
	AM - Callback in 2 hrs	8010	
	AP - Callback - Specific time/date	218	
	LN - French/Inuktitut Household (call-back)	125	
	NA - Callback in 12 hrs	7257	
C	Non-responding, eligible		7610
	IR - Incomplete Refusals	106	
	LN - Language Barrier	169	
	RF - Refusal	7310	
	UN - Unavailable within Project Timeframe	25	
D	Ineligible		2904
	IG - Ineligible	2903	
	QF - Quota Filled	1	
E	Completed interviews		503
	Complete	503	
TOTALS		3645	3645
Empirical method (D+E/B+C+D+E)		Response rate	12.8 %

APPENDIX B

SURVEY INSTRUMENT (ENGLISH)

PINTRO

PHONE INTRO

Hello, my name is... and I work for Ekos Research Associates. We are conducting a survey for the Government of Canada to obtain the views of Canadians on important health related issues. The survey is voluntary and completely confidential. The survey is registered with the National Survey Registration System. Can I ask if you are at least 18 years old and a permanent resident of Canada?

** IF NO: Is there someone at home now that I could speak to who is 18 years of age or older? ** IF YES: The questionnaire takes about 15 minutes to complete, but it provides you with a unique opportunity to let the federal government know how you feel about things that affect us all. May I begin? All of your responses to the survey are completely confidential. (IF RESPONDENT DOES NOT SEEM COMFORTABLE IN ENGLISH/FRENCH, OFFER THE SURVEY IN INUKTITUT - CODE ICR)

PRIV

This call may be recorded for quality control or training purposes.

Q1

NOT INUIT NUNAAT

Which of the following best describes you? Are you...?

READ LIST

First Nations	1
Métis.....	2
Inuk.....	3
or, a non-Aboriginal person.....	4
(DO NOT READ) Inuit.....	5
(DO NOT READ) Inuvialuit	6
(DO NOT READ) Other (specify)	77
(DO NOT READ) Refuse	99

Q1A

INUIT NUNAAT

Which of the following best describes you? Are you...?

READ LIST

Inuk.....	3
First Nations	1
Métis.....	2
or, a non-Aboriginal person.....	4
(DO NOT READ) Inuit.....	5
(DO NOT READ) Inuvialuit	6
(DO NOT READ) Other (specify)	77
(DO NOT READ) Refuse	99

Q1B

NOT INUIT NUNAAT, NOT FIRST NATIONS

This particular survey is for First Nations. Is there anyone else living in this household who is a First Nations person aged 18 and older?

If yes, ask to speak to the person

- Yes..... 1 ->PINTRO
- No..... 2 ->THNK2

Q1C

NOT FIRST NATIONS, NOT INUIT NUNAAT

This particular survey is for Inuit. Is there anyone else living in this household who is an Inuk aged 18 and older

If yes, ask to speak to the person

- Yes..... 1 ->PINTRO
- No..... 2 ->THNK2

Q2

FIRST NATIONS

Do you live on a First Nations reserve for at least six months of the year?

- Yes..... 1
- No..... 2 ->THNK2
- Don't know/No answer 9 ->THNK2

Q3

And to confirm that you are 18 years of age or older, could you please tell me in what year were you born?

NOTE: ANSWER THE FULL YEAR, I.E. 1977 as "1977"

- Year 1
- Under 18 (ASK TO SPEAK TO SOMEONE IN HOUSEHOLD 18 AND OVER) .. 2 ->PINTRO
- (DO NOT READ) Refuse 9

Q4

RECORD (DO NOT ASK)

- Male..... 1
- Female 2

Q5

To start... How much, if at all, do you believe environmental issues affect your health and your family's health? Would you say...?

READ

A great deal	1
A fair amount.....	2
Not very much.....	3
Not at all	4
(DO NOT READ) Don't know/No answer.....	9

PQ6

The next question is about things in the environment inside your home or in the outdoors that can cause health problems.

Q6A

In your view, what environmental issue would you say poses the greatest risk to the health of you and your family?

DO NOT READ

Air pollution/smog	1
Indoor air quality/Indoor air pollution.....	2
Water pollution.....	3
Pollution – general (PROBE FOR AIR POLLUTION OR WATER POLLUTION)	4
Industrial pollution	5
Global warming/climate change.....	6
Drinking water contamination	7
Food safety/contaminated food	8
Municipal garbage/landfills.....	9
Sewage/wastewater.....	10
Toxic chemicals.....	11
Radon	12
Mould	13
Carbon monoxide	14
Lead.....	15
Smoking/second-hand smoke	16
Dust/dust mites	17
Noise.....	18
Smoke from burning wood.....	19
Ozone depletion/UV radiation.....	20
Other (specify).....	77
(DO NOT READ) Don't know/No answer.....	99

X

Q6B

What other environmental issues, either indoors or outdoors, do you think pose a significant risk to the health of you and your family?

DO NOT READ – CODE UP TO TWO

Air pollution/smog	1	
Indoor air quality/Indoor air pollution	2	
Water pollution.....	3	
Pollution – general (PROBE FOR AIR POLLUTION OR WATER POLLUTION)	4	
Industrial pollution	5	
Global warming/climate change.....	6	
Drinking water contamination	7	
Food safety/contaminated food	8	
Municipal garbage/landfills.....	9	
Sewage/wastewater.....	10	
Toxic chemicals.....	11	
Radon	12	
Mould	13	
Carbon monoxide	14	
Lead.....	15	
Smoking/second-hand smoke	16	
Dust/dust mites	17	
Noise.....	18	
Smoke from burning wood.....	19	
Ozone depletion/UV radiation.....	20	
Other (specify).....	77	
(DO NOT READ) Don't know/No answer	99	X

PQ7

I will now read you a list of environmental issues that exist indoors that can potentially affect health. In each case please tell me whether you think the health risk to you and your family from this environmental issue is major, moderate, minor, or there is no risk.

READ

Q7A

Tobacco smoke, including second-hand smoke	
No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q7B

Smoke from burning wood

No risk 1
Minor risk 2
Moderate risk 3
Major risk 4
(DO NOT READ) Depends 5
(DO NOT READ) Health is already affected 6
(DO NOT READ) Don't know/ No answer 9

Q7C

Mould that can grow on walls, ceilings or window sills

No risk 1
Minor risk 2
Moderate risk 3
Major risk 4
(DO NOT READ) Depends 5
(DO NOT READ) Health is already affected 6
(DO NOT READ) Don't know/ No answer 9

Q7D

Radon gas

No risk 1
Minor risk 2
Moderate risk 3
Major risk 4
(DO NOT READ) Depends 5
(DO NOT READ) Health is already affected 6
(DO NOT READ) Don't know/ No answer 9

Q7E

Lead contained in paint

No risk 1
Minor risk 2
Moderate risk 3
Major risk 4
(DO NOT READ) Depends 5
(DO NOT READ) Health is already affected 6
(DO NOT READ) Don't know/ No answer 9

Q7F

Chemical products that contain toxic ingredients

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected	6
(DO NOT READ) Don't know/ No answer	9

Q7G

Carbon monoxide

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected	6
(DO NOT READ) Don't know/ No answer	9

Q7H

Contaminated drinking water

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected	6
(DO NOT READ) Don't know/ No answer	9

Q7I

Contaminated food

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected	6
(DO NOT READ) Don't know/ No answer	9

Q7J

Excessive noise

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

PQ8

I will now read you a list of environmental issues that exist outdoors that can potentially affect health. In each case please tell me whether you think the health risk to you and your family from this environmental issue is major, moderate, minor, or there is no risk.

READ

Q8A

Climate change

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q8B

Air pollution

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q8C

Pesticides and herbicides

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q8D

Water pollution

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q8E

UV radiation from sun exposure

No risk	1
Minor risk	2
Moderate risk	3
Major risk	4
(DO NOT READ) Depends	5
(DO NOT READ) Health is already affected.....	6
(DO NOT READ) Don't know/ No answer	9

Q10

For the next few questions, please think about all of the kinds of environmental issues that can affect your health that we have discussed so far. Do you believe that you can take steps to prevent or lower the health risk to you and your family from environmental issues?

IF YES, PROBE: Would you say you can definitely take steps, or probably take steps?

Yes, definitely	1
Yes, probably.....	2
No.....	3
(DO NOT READ) Depends.....	4
(DO NOT READ) Have already taken steps	5
(DO NOT READ) Don't know/No answer	9

->PQ13

Q11

And have you personally taken steps in the past year to protect your health and the health of your family from environmental issues?

Yes.....	1	
No.....	2	->Q14
Don't know/No answer	9	->Q14

Q12

What steps have you taken?

DO NOT READ – CODE ALL THAT APPLY: PROBE: Anything else?

Removed source of problem (e.g. carpeting, mould, chemical products).....	1	
Smoke cigarettes outside only	2	
Use cleaning products with fewer chemicals.....	3	
Open windows	4	
Increase frequency of cleaning/vacuuming/minimize dust.....	5	
Reduce time spent in problem location/area.....	6	
Do research/Internet research	7	
Brought to attention of Band Council/Housing Manager/local government	8	
Called in Environmental Health Officer.....	9	
Talked to family/friends/neighbours	10	
Went to health clinic/nursing station/doctor/nurse for information.....	11	
Other (specify).....	77	
Don't know/No answer	99	X

PQ13

I would now like to ask you about topics related to environmental health issues that some people might want to know more about. Would you personally be very, somewhat, not very or not at all interested in learning more about...?

READ

Q13A

The types of environmental issues that affect health

Very interested	1
Somewhat interested.....	2
Not very interested	3
Not at all interested.....	4
(DO NOT READ) Don't know/ No answer.....	9

Q13C

How to identify if you have environmental health issues in your home	
Very interested	1
Somewhat interested.....	2
Not very interested	3
Not at all interested.....	4
(DO NOT READ) Don't know/ No answer.....	9

Q13D

What you can do to minimize the health risk from environmental issues	
Very interested	1
Somewhat interested.....	2
Not very interested	3
Not at all interested.....	4
(DO NOT READ) Don't know/ No answer.....	9

Q14

If you wanted to learn more about environmental issues that can affect health, where would you be most likely to go for information?

DO NOT READ – CODE ALL THAT APPLY: PROBE: Anything else?	
Family/friends/neighbours.....	1
Media (TV, radio, newspaper, magazines).....	2
Internet/websites (PROBE FOR SPECIFIC WEBSITES).....	3
Chief/Band Council.....	4
Local/hamlet/municipal government/Council	5
Community centre.....	6
Local health clinic/nursing station.....	7
Doctor (e.g. family doctor).....	8
Community nurse	9
Elder	10
School.....	11
Health Canada	12
DIAND/INAC/AANDC.....	13
Government of Canada (PROBE FOR SPECIFIC DEPARTMENT).....	14
Provincial/territorial government/ministry of health	15
Environmental Health Officer	16
Information sessions.....	17
Pamphlets/brochures/booklets	18
Facebook	19
Other social media (e.g., Twitter)	20
Other (specify).....	77
Don't know/No answer	99

X

QC1A

The next questions are about information materials you may have seen over the past year or so. Over the past 12 months, have you seen, heard or read any materials that discussed the impacts of your environment, at home or in the outdoors, on your health?

Yes.....	1
No.....	2
Don't know	98
Refused.....	99

QC1B

YES

What can you remember about what this material talked about? What were some of the topics that it talked about? Anything else?

ACCEPT MULTIPLE RESPONSES

Mould	1
Indoor air quality	2
Drinking water safety	3
Food safety	4
Chemical products.....	5
Noise.....	6
Indoor air quality (Smoke, radon, dust and dust mites, Carbon monoxide)	7
Lead.....	8
Wastewater and sewage.....	9
Artistry and hobbies	10
Safety when out in the bush.....	11
Cold weather.....	12
Hunting and trapping	13
Ice fishing	14
Climate change (how it can affect environment, food).....	15
Heat and sun exposure.....	16
Outdoor air quality (smoke, fumes).....	17
Disposing of waste	18
Diseases.....	19
Pests.....	20
What the risks are (general).....	21
What you can do to protect yourself/others (general).....	22
Specify.....	77
Don't know/Refused	99

X

PQC2

More specifically...

QC2A

Do you remember seeing a printed brochure about environmental health issues, including useful tips on changes you can make in your home to reduce the harmful effects on some contaminants such as tobacco, dust and mould? It also talked about noise, drinking water, and food safety. The title of the brochure is Your Health at Home: What you can do! It was described as an Environmental Health Guide for < First Nations / Inuit>

Yes.....	1
No.....	2
Don't know	98
Refused.....	99
(DO NOT READ) Not applicable do not watch TV	97

QC2B

Do you remember seeing a printed brochure about environmental health issues related to outdoor activities, including cold weather, hunting and trapping, ice fishing and the impact of environmental contaminants on health? The title of the brochure is Your Health Outdoors : What You Can Do During Fall and Winter. It was described as an Environmental Health Guide for < First Nations / Inuit>

Yes.....	1
No.....	2
Don't know	98
Refused.....	99
(DO NOT READ) Not applicable do not use the Internet.....	97

QC2C

USES INTERNET

Do you remember seeing an activity book for kids or teens that talked about the environment indoors and outdoors and impacts on health? It included things like crossword puzzles, word searches, mazes, and quizzes, etc.

Yes.....	1
No.....	2
Don't know	98
Refused.....	99
(DO NOT READ) Not applicable do not use the Internet.....	97

QC3

SAW MATERIALS

Thinking about the printed materials that you saw or read, what do you think the main point was that this material was trying to get across?

OPEN-ENDED. DO NOT READ. ACCEPT ONE RESPONSE

There are risks in my environment that can affect my health.....	1	
There are things I can do to keep myself safe.....	2	
Indoor dangers.....	3	
Outdoor dangers.....	4	
Dangers in the spring and summer.....	5	
Dangers in the fall and winter.....	6	
Specify.....	77	
Nothing.....	98	
Don't know.....	99	X

QC4A

SAW MATERIALS

Did you do anything as a result of seeing or reading this printed material?

Yes.....	1	
No.....	2	
Don't know.....	98	
Refused.....	99	

QC4B

SAW MATERIALS

What did you do? Anything else?

DO NOT READ LIST; ACCEPT MULTIPLE RESPONSES NOTE TO INTERVIEWER: IF UNCLEAR WHAT REASON THE ACTION WAS TAKEN FOR, PROMPT e.g. "Was this to prevent mould?"

Something to prevent mould in the home (such as : hanging up clothes, using a fan to reduce humidity).....	1	
Something to improve the air quality inside (such as : dusting and vacuuming, not smoking, ventilating a room when there is smoke, chemicals).....	2	
Something to protect against water contamination (such as : boiling water during a water advisory).....	3	
Something to prevent contamination of food (such as: washing hands, freezing/refrigerating perishable food).....	4	
Something to protect from chemicals (such as : learning about warning labels).....	5	
Something to protect from noise (such as : turning down volume, leaving noisy areas).....	6	
Specify.....	77	
Don't know.....	98	X
Refused.....	99	X

QC5A

SAW MATERIALS

Thinking about the printed material you saw, who do you think produced it?

DO NOT READ LIST. ACCEPT ONE RESPONSE

Health Canada	1
Other/ general mention of Government of Canada/Federal Government.....	2
Provincial Government	3
Municipal Government	4
Government (General)	5
Taxpayers	6
Other (specify).....	77
Don't know	98
Refused.....	99

QD1

Do you have a Facebook account?

Yes.....	1	
No.....	2	->DENIM
Don't know	98	->DENIM
Refused.....	99	->DENIM

QD2

How often do you access your Facebook account?

More than once a day	1
Daily	2
A few times a week	3
Once a week	4
2-3 times a month	5
Monthly	6
Less than once a month	7
Don't know	98
Refused.....	99

QD3

Do you access your Facebook account on a computer, a tablet or on your mobile phone?

READ LIST; ACCEPT MULTIPLE RESPONSES

Desktop/laptop computer.....	1	
Tablet	2	
Mobile phone/ Smartphone	3	
Don't know	98	X
Refused.....	99	X

QD5

Are you familiar with the Healthy First Nations and Inuit Facebook page?

Yes.....	1
No.....	2
Don't know	98
Refused.....	99

QD6

YES

Do you recall seeing any messages related to environmental health issues posted on the Healthy First Nations and Inuit Facebook page?

Yes.....	1
No.....	2
Don't know	98
Refused.....	99

QD7

YES

What was the topic of the message?

DO NOT READ LIST; ACCEPT MULTIPLE RESPONSES

Tobacco smoke, including second-hand smoke	1	
Smoke from burning wood.....	2	
Mould that can grow on walls, ceilings or window sills.....	3	
Radon gas	4	
Lead contained in paint	5	
Chemical products that contain toxic ingredients	6	
Carbon monoxide	7	
Contaminated drinking water	8	
Contaminated food	9	
Excessive noise.....	10	
Climate change	11	
Air pollution	12	
Pesticides and herbicides	13	
Water pollution.....	14	
UV radiation from sun exposure	15	
Don't know	98	X
Refused.....	99	X

QD8

YES

To what extent did you find this information helpful to be able to take action to protect your health?

READ SCALE

Very helpful.....	1
Somewhat helpful.....	2
Not very helpful.....	3
Not at all helpful.....	4
Don't know	98
Refused.....	99

DENIM

Finally, I would like to ask you a few questions about you and your household that will help us analyze the results of this survey. Your answers will be kept anonymous and confidential.

Q15

Including yourself, how many people live in your household?

RECORD NUMBER.....	1
Don't know / No answer	99

Q16

What is the language you first learned at home as a child and still understand?

DO NOT READ - CODE ONE ONLY IF MORE THAN ONE AT THE SAME TIME, PUT IN OTHER

English.....	1
French.....	2
Inuktitut	3
Other (specify).....	77
Don't know / No answer	99

Q17

What is the highest level of education that you have reached?

DO NOT READ - CODE ONE ONLY

Some elementary (Grades 1-6).....	1
Completed elementary (Grade 7 or 8).....	2
Some high school (Grades 9-11).....	3
Completed high school (Grades 12 or 13 or OAC).....	4
Some community college, vocational, trade school (or some CEGEP).....	5
Completed community college, vocational, trade school (or complete CEGEP).....	6
Some university (no degree).....	7
Completed university (Bachelor's Degree).....	8
Post graduate/professional school (Master's Degree, Ph.D., etc.).....	9
No schooling.....	10
Don't know / No answer.....	99

Q18

For statistical purposes only, we'd like to have a general idea of people's annual household income. Which of the following categories best describes the total income of all the people living in your household for 2012?

READ – STOP AS SOON AS CATEGORY IS IDENTIFIED

Under \$20,000.....	1
\$20,000 to just under \$40,000.....	2
\$40,000 to just under \$60,000.....	3
\$60,000 to just under \$80,000.....	4
\$80,000 to just under \$100,000.....	5
\$100,000 to just under \$150,000.....	6
\$150,000 and above.....	7
Refuse.....	98
Don't know.....	99

THNK

This completes the survey. On behalf of Health Canada, thank you very much for your participation.

THNK2

Thank you for your cooperation! Based on the information you have provided, unfortunately you are not eligible to complete the remainder of this survey.

APPENDIX C

SURVEY INSTRUMENT (FRENCH)

PINTRO [0,0]

PHONE INTRO

Bonjour. Je m'appelle... et je travaille pour les Associés de recherche Ekos. Nous effectuons pour le gouvernement du Canada un sondage pour connaître l'opinion des Canadiens sur d'importantes questions touchant la santé. La participation au sondage est volontaire et toutes vos réponses seront traitées de façon absolument confidentielle. Ce sondage est enregistré auprès du Système national d'enregistrement des sondages. Pourrais-je savoir si vous avez au moins 18 ans et si vous êtes un résident permanent du Canada?

** SI C'EST NON: Y a-t-il une personne de 18 ans ou plus à la maison avec qui je pourrais m'entretenir?

** SI C'EST OUI: Il faut environ 15 minutes pour répondre au questionnaire mais ce sera une occasion toute spéciale de faire savoir au gouvernement fédéral ce que vous pensez de certaines choses qui nous concernent tous. Puis-je commencer? Toutes vos réponses au sondage sont absolument confidentielles. (SI LE RÉPONDANT APPARAÎT INCONFORTABLE AVEC L'ANGLAIS/FRANCAIS, OFFREZ-LUI LE SONDRAGE EN INUKTITUT - ENCODER ICR)

PRIV [0,0]

If... { \$contexte{ip} =~ /192.168.0.*/ }

Cet appel peut être enregistré pour contrôle de la qualité ou formation.

Q1

If... INUNAAT.NE.1

Laquelle des affirmations suivantes vous décrit le mieux?

LIRE LA LISTE

Premières nations	1
Métis	2
Inuk.....	3
ou, non autochtone.....	4
(NE PAS LIRE) Inuit	5
(NE PAS LIRE) Inuvialuit	6
(NE PAS LIRE) Autre réponse (préciser) -> AQ1; C150 L1 C75	77
(NE PAS LIRE) Refuse.....	99

Q1A

If... INUNAAT.EQ.1

Laquelle des affirmations suivantes vous décrit le mieux?

LIRE LA LISTE

Inuk.....	3
Premières nations	1
Métis.....	2
ou, non autochtone.....	4
(NE PAS LIRE) Inuit	5
(NE PAS LIRE) Inuvialuit	6
(NE PAS LIRE) Autre réponse (préciser) -> AQ1A; C150 L1 C75	77
(NE PAS LIRE) Refuse.....	99

Q1B

If... INUNAAT.NE.1.AND.Q1.EQ.2,4,99

Ce sondage s'adresse particulièrement aux membres des Premières nations sur une réserve ou Inuits. Y a-t-il dans votre foyer une personne qui fait partie des Premières nations ou un membre de la nation Inuit et qui a 18 ans ou plus?

SI OUI, DEMANDER À LUI PARLER

Oui.....	1	->PINTRO
Non.....	2	->THNK2

Q1C

If... INUNAAT.EQ.1.AND.Q1A.EQ.1,2,4,77,99

Ce sondage s'adresse particulièrement aux INUITS. Y a-t-il un membre de la nation INUIT de 18 ans ou plus dans votre foyer?

SI OUI, DEMANDER À LUI PARLER

Oui.....	1	->PINTRO
Non.....	2	->THNK2

Q2

If... Q1.EQ.1,77

Vivez-vous sur une réserve des Premières Nations pendant une période d'au moins six mois par année?

Oui.....	1	
Non.....	2	->THNK2
NSP/PDR.....	9	->THNK2

Q3

Et pour confirmer que vous êtes âgé(e) de 18 ans ou plus, pourriez-vous me dire en quelle année vous êtes né(e)?

NOTE : INSCRIRE L'ANNÉE AU COMPLET, P. EX., "1977"

Année -> AQ3; N4.0 [1900-1995]	1	
Moins de 18 ans (Y a-t-il une personne de 18 ans ou plus à la maison avec qui je pourrais m'entretenir?).....	2	->PINTRO
(NE PAS LIRE) Refuse.....	9	

Q4

INSCRIRE (NE PAS DEMANDER)

Homme	1
Femme	2

Q5

D'abord.....

Dans quelle mesure, selon vous, les enjeux environnementaux affectent-ils votre santé et la santé de votre famille? Direz-vous ...?

LIRE

Beaucoup	1
Passablement	2
Pas beaucoup	3
Pas du tout	4
(NE PAS LIRE) NSP/PR.....	9

PQ6 [0,0]

La question suivante porte sur l'environnement à l'intérieur ou à l'extérieur de votre résidence qui pourrait causer des problèmes de santé.

Q6A

Selon vous, quels sont les enjeux environnementaux qui posent le plus grand risque pour votre santé et la santé de votre famille?

NE PAS LIRE

Pollution de l'air/smog.....	1	
Qualité de l'air à l'intérieur / pollution à l'intérieur	2	
Pollution des eaux	3	
Pollution – en général (SONDER POUR POLLUTION DE L'AIR OU DES EAUX)	4	
Pollution industrielle	5	
Réchauffement de la planète / changements climatiques	6	
Contamination de l'eau potable	7	
Sécurité alimentaire/aliments contaminés	8	
Ordures municipales / enfouissement	9	
Eaux usées/eaux d'égout	10	
Produits chimiques toxiques.....	11	
Radon	12	
Moisissure	13	
Monoxyde de carbone	14	
Plomb	15	
Tabagisme / fumée secondaire	16	
Poussière / acariens.....	17	
Bruit.....	18	
Fumée de bois.....	19	
Destruction de la couche d'ozone/rayons ultraviolets.....	20	
Autre (PRÉCISER) -> AQ6A; C150 L1 C75.....	77	
NSP/PR.....	99	X
21.....	21	I
22.....	22	I
23.....	23	I
24.....	24	I
25.....	25	I
26.....	26	I
27.....	27	I

Q6B [0,2]

Q6B1: [CALCQ6.EQ.1] Voir ci-dessous

[ELSE] Quels sont les autres enjeux environnementaux, soit à l'intérieur ou à l'extérieur de votre résidence, qui posent le plus grand risque pour votre santé et la santé de votre famille?
Q6B2: [CALCQ6.EQ.1]

NE PAS LIRE - CODER JUSQU'À 2

Pollution de l'air/smog.....	1
Qualité de l'air à l'intérieur / pollution à l'intérieur	2
Pollution des eaux	3
Pollution – en général (SONDER POUR POLLUTION DE L'AIR OU DES EAUX)	4
Pollution industrielle	5
Réchauffement de la planète / changements climatiques	6
Contamination de l'eau potable	7
Sécurité alimentaire/aliments contaminés	8
Ordures municipales / enfouissement	9
Eaux usées/eaux d'égout	10
Produits chimiques toxiques	11
Radon	12
Moisissure	13
Monoxyde de carbone	14
Plomb	15
Tabagisme / fumée secondaire	16
Poussière / acariens.....	17
Bruit.....	18
Fumée de bois.....	19
Destruction de la couche d'ozone/rayons ultraviolets.....	20
Autre (PRÉCISER) -> AQ6B; C150 L1 C75	77
NSP/PR.....	99 X

PQ7 [0,0]

Je vais maintenant vous lire une liste d'enjeux environnementaux qui existent à l'intérieur des maisons qui pourraient éventuellement avoir un effet sur la santé. Pour chacun, veuillez me dire si, selon vous, il s'agit d'un risque majeur, modéré ou mineur pour votre santé et pour celle de votre famille ou si cela ne constitue pas un risque du tout

LIRE

Q7A

La fumée du tabac, y compris fumée secondaire	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7B

La fumée de bois	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7C

Moisissure qui peut pousser sur les murs, les plafonds ou sur les appuis de fenêtres	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7D

Radon	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7E

Plomb dans la peinture	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7F

Produits chimiques qui contiennent des ingrédients toxiques	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7G

Monoxyde de carbone	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7H

Eau potable contaminée	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7I

Aliments contaminés	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q7J

Bruit excessif	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

PQ8 [0,0]

Je vais maintenant vous lire une liste d'enjeux environnementaux qui existent à l'extérieur qui pourraient éventuellement avoir un effet sur la santé. Pour chacun, veuillez me dire si, selon vous, il s'agit d'un risque majeur, modéré ou mineur pour votre santé et pour celle de votre famille ou si cela ne constitue pas un risque du tout

LIRE

Q8A

Changements climatiques	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q8B

Pollution de l'air	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q8C

Pesticides et herbicides	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q8D

Pollution des eaux	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q8E

Rayons ultraviolets suite à l'exposition au soleil	
Risque majeur	1
Risque modéré	2
Risque mineur	3
Aucun risque	4
(NE PAS LIRE) Cela dépend	5
(NE PAS LIRE) Santé déjà affectée.....	6
(NE PAS LIRE) NSP/PR.....	9

Q10

Pour les prochaines questions, veuillez penser à tous les types d'enjeux environnementaux dont il a déjà été question et qui pourraient affecter votre santé.

Croyez-vous pouvoir prendre des mesures pour prévenir ou diminuer les risques pour vous et pour votre famille que posent ces enjeux environnementaux ?

SI OUI, EXPLORER : Diriez-vous que vous pouvez assurément prendre des mesures ou que vous pouvez probablement prendre des mesures?

Oui, assurément	1	
Oui, probablement	2	
Non	3	
(NE PAS LIRE) Cela dépend	4	
(NE PAS LIRE) Ai déjà pris des mesures	5	->PQ13
(NE PAS LIRE) NSP/PR.....	9	

Q11

Et avez-vous personnellement déjà pris des mesures au cours de la dernière année pour protéger votre santé et celle de votre famille contre ces enjeux environnementaux ?

Oui.....	1	
Non.....	2	->Q14
NSP/PR.....	9	->Q14

Q12 [1,14]

Quelles mesures avez-vous prises?

NE PAS LIRE -- CODER TOUT CE QUI S'APPLIQUE : SONDER : Autre chose?

Éliminer la source du problème (p.ex. tapis, moisissure, produits chimiques).....	1
Fumer à l'extérieur seulement.....	2
Utiliser des produits nettoyants qui contiennent moins de produits chimiques	3
Ouvrir les fenêtres	4
Nettoyer plus souvent/passer l'aspirateur / minimiser quantité de poussière.....	5
Passer moins de temps dans l'endroit problématique.....	6
Effectuer de la recherche / recherche sur internet.....	7
Signaler le problème au Conseil de bande/Gestionnaire du logement/gouvernement local.....	8
Appeler hygiéniste du milieu.....	9
Parler à des membres de la famille / amis / voisins	10
Suis allé/e à une clinique / poste infirmier / médecin / infirmière pour obtenir information	11
Autre (PRÉCISER) -> AQ12; C150 L1 C75.....	77
NSP/PR.....	99

X

PQ13 [0,0]

Passons maintenant à des sujets reliés aux enjeux environnementaux relatifs à la santé sur lesquels certaines personnes pourraient vouloir se renseigner. Personnellement, est-ce que vous seriez très, assez, pas très ou pas du tout intéressé à en savoir davantage au sujet

LECTURE

Q13A

Des types d'enjeux environnementaux qui affectent la santé

Très intéressé	1
Assez intéressé	2
Pas très intéressé.....	3
Pas intéressé du tout	4
(NE PAS LIRE) NSP/PR.....	9

Q13C

Comment savoir s'il y a des problèmes environnementaux dans votre résidence

Très intéressé	1
Assez intéressé	2
Pas très intéressé.....	3
Pas intéressé du tout	4
(NE PAS LIRE) NSP/PR.....	9

Q13D

Ce que vous pouvez faire pour minimiser les risques pour la santé relatifs aux enjeux environnementaux

Très intéressé	1
Assez intéressé	2
Pas très intéressé.....	3
Pas intéressé du tout	4
(NE PAS LIRE) NSP/PR.....	9

Q14ABOX [0,3]

Famille / amis / voisins -> AQ14ABOX; C150 L1 C60.....	1
Médias (télévision, radio, journaux, magazines).....	2
Internet/sites Web (SONDER POUR DES SITES PARTICULIERS Q14ABOX)	3
Chef/Conseil de bande.....	4
Gouvernement local / municipal / Conseil	5
Centre communautaire.....	6
Clinique de santé locale / poste de soins infirmiers.....	7
Docteur (médecin de famille).....	8
Infirmière communautaire	9
Les aînés	10
L'école	11
Santé Canada	12
AINC	13
Gouvernement du Canada (SONDER POUR MINISTÈRE PARTICULIER Q14BBOX).....	14
Gouvernement provincial/territorial/ministère de la Santé.....	15
Hygiéniste du milieu.....	16
Sessions d'information.....	17
Brochures / dépliants / livrets	18
Facebook	19
Autres médias sociaux (par exemple, Twitter).....	20
Autre (PRÉCISER).....	77
NSP/PR.....	99

X

Q14 [1,23]

Si vous vouliez vous renseigner davantage au sujet des enjeux environnementaux qui peuvent affecter la santé, où vous adresseriez-vous probablement pour obtenir de l'information?

NE PAS LIRE -- CODER TOUT CE QUI S'APPLIQUE : SONDER : Autre chose?

Famille / amis / voisins.....	1
Médias (télévision, radio, journaux, magazines).....	2
Internet/sites Web (SONDER POUR DES SITES PARTICULIERS Q14ABOX)	3
Chef/Conseil de bande.....	4
Gouvernement local / municipal / Conseil	5
Centre communautaire.....	6
Clinique de santé locale / poste de soins infirmiers.....	7
Docteur (médecin de famille).....	8
Infirmière communautaire	9
Les aînés	10
L'école	11
Santé Canada	12
AINC	13
Gouvernement du Canada (SONDER POUR MINISTÈRE PARTICULIER Q14BBOX).....	14
Gouvernement provincial/territorial/ministère de la Santé.....	15
Hygiéniste du milieu.....	16
Sessions d'information.....	17
Brochures / dépliants / livrets	18
Facebook	19
Autres médias sociaux (par exemple, Twitter)	20
Autre (PRÉCISER) -> AQ14; C150 L1 C75.....	77
NSP/PR.....	99 X

QC1A

Les prochaines questions traitent de matériel informatif que vous pourriez avoir vu au cours de la dernière année.

Au cours des douze derniers mois, avez-vous vu, lu ou entendu du matériel qui traitaient des répercussions de votre environnement, à la maison ou dehors, sur votre santé?

Oui.....	1
Non.....	2
Ne sait pas	98
Refuse de répondre.....	99

QC1B [1,26]

If... QC1A.EQ.1

Vous rappelez-vous de quoi traitait ce matériel? Quels sont les sujets qui y étaient abordés? Autre chose?

ACCEPTER PLUSIEURS RÉPONSES

Moisissure	1	
Qualité de l'air à l'intérieur	2	
Qualité de l'eau potable	3	
Salubrité alimentaire.....	4	
Produits chimiques	5	
Bruit.....	6	
Qualité de l'air à l'intérieur (fumée, radon, poussière et acariens détriticoles, monoxyde de carbone)	7	
Plomb	8	
Eaux usées et eaux d'égout	9	
Talent artistique et passe-temps.....	10	
Sécurité dans les zones éloignées	11	
Temps froids.....	12	
Chasse et trappage	13	
Pêche sur glace	14	
] Changement climatique (incidence sur l'environnement, la nourriture).....	15	
Chaleur et exposition au soleil.....	16	
Qualité de l'air à l'extérieur (fumée, vapeurs).....	17	
Élimination des ordures	18	
Maladies	19	
Animaux nuisibles	20	
Ce que sont les risques (général)	21	
Ce que vous pouvez faire pour vous protéger ou protéger les autres (général)	22	
Veillez préciser -> AQC1B; C150 L1 C75.....	77	
Ne sait pas/Refuse de répondre	99	X

PQC2 [0,0]

Plus particulièrement...

QC2A

Vous rappelez-vous avoir vu une brochure imprimée sur des questions de santé environnementale qui contenait des conseils utiles sur des changements que vous pouviez apporter à votre maison pour réduire les effets néfastes de certains contaminants, comme le tabac, la poussière et la moisissure? Elle traitait également du bruit, de l'eau potable et de la salubrité alimentaire. Le titre de la brochure était Votre santé à la maison : Ce que vous pouvez faire! La brochure était décrite comme un guide de santé environnementale à l'intention des QC2NOTE: [Q1.EQ.1,77.OR.Q1A.EQ.1,77]First Nations[ELSE]Inuit.

Oui	1
Non	2
Ne sait pas	98
Refuse de répondre	99
(NE PAS LIRE) Sans objet – ne regarde pas la télévision	97

QC2B

Vous rappelez-vous avoir vu une brochure imprimée sur des questions de santé environnementale relatives aux activités en plein air, comme le temps froid, la chasse et le trappage, la pêche sur glace et les conséquences des contaminants environnementaux sur la santé? Le titre de la brochure était Votre santé à l'extérieur : Ce que vous pouvez faire en automne et en hiver! La brochure était décrite comme un guide de santé environnementale à l'intention des QC2NOTE: [Q1.EQ.1,77.OR.Q1A.EQ.1,77]First Nations[ELSE]Inuit.

Oui	1
Non	2
Ne sait pas	98
Refuse de répondre	99
(NE PAS LIRE) Sans objet – n'utilise pas l'Internet.....	97

QC2C

If... QC2B.NE.97

Vous rappelez-vous avoir vu un manuel d'activités pour enfants ou adolescents qui traitaient des environnements intérieur et extérieur et de leurs répercussions sur la santé? Il comprenait notamment des mots croisés, des casse-têtes, des mots cachés, des labyrinthes, des questionnaires, etc.

Oui.....	1
Non.....	2
Ne sait pas	98
Refuse de répondre.....	99
(NE PAS LIRE) Sans objet – n'utilise pas l'Internet.....	97

QC3

If... QC2A.EQ.1.OR.QC2B.EQ.1.OR.QC2C.EQ.1

En ce qui concerne le matériel imprimé que vous avez vu ou lu, quel était, selon vous, le sujet principal qu'il tentait d'aborder?

QUESTION OUVERTE. NE PAS LIRE. ACCEPTER UNE RÉPONSE

Il existe des risques dans mon environnement qui peuvent nuire à ma santé	1
Il y a des choses que je peux faire pour veiller à ma sécurité	2
Dangers intérieurs.....	3
Dangers extérieurs.....	4
Dangers au printemps et en été.....	5
Dangers en automne et en hiver	6
Veillez préciser -> AQC3; C150 L1 C75	77
Rien	98
Ne sait pas	99

X

QC4A

If... QC2A.EQ.1.OR.QC2B.EQ.1.OR.QC2C.EQ.1

Avez-vous fait quoi que ce soit parce que vous avez vu ou lu ce matériel imprimé?

Oui.....	1
Non.....	2
Ne sait pas	98
Refuse de répondre.....	99

QC4B [1,9]

If... QC4A.EQ.1

Qu'avez-vous fait? Autre chose?

NE PAS LIRE LA LISTE; ACCEPTER PLUSIEURS RÉPONSES

NOTE À L'ENQUÊTEUR : SI LA RAISON POUR LAQUELLE UN GESTE A ÉTÉ POSÉ N'EST PAS CLAIRE, GUIDER LE RÉPONDANT. P. ex., « Est-ce que c'était pour prévenir l'apparition de moisissure? »

Quelque chose pour prévenir l'apparition de moisissure dans la maison (comme tendre le linge, utiliser un ventilateur pour réduire l'humidité)	1	
Quelque chose pour améliorer la qualité de l'air à l'intérieur (comme épousseter et passer l'aspirateur, ne pas fumer, aérer une pièce lorsqu'il y a de la fumée, des produits chimiques)	2	
Quelque chose pour éviter la contamination de l'eau (comme faire bouillir l'eau lors d'un avis relatif à la qualité de l'eau potable est émis)	3	
Quelque chose pour éviter la contamination alimentaire (comme se laver les mains, congeler et réfrigérer les aliments périssables)	4	
Quelque chose pour se protéger contre les produits chimiques (comme apprendre à lire les étiquettes d'avertissement)	5	
Quelque chose pour se protéger contre le bruit (comme baisser le volume, ne pas rester dans des endroits bruyants)	6	
Veillez préciser -> AQC4B; C150 L1 C75.....	77	
Ne sait pas	98	X
Refuse de répondre	99	X

QC5A

If... QC2A.EQ.1.OR.QC2B.EQ.1.OR.QC2C.EQ.1

En ce qui concerne le matériel imprimé que vous avez vu, qui, selon vous, l'avait produit?

NE PAS LIRE LA LISTE. ACCEPTER UNE RÉPONSE

Santé Canada	1	
Autre/Mention générale du gouvernement du Canada/Gouvernement fédéral.....	2	
Gouvernement provincial	3	
Administration municipale	4	
Gouvernement (général)	5	
Contribuables.....	6	
Autre (veuillez préciser) -> AQC5A; C150 L1 C75.....	77	
Ne sait pas	98	
Refuse de répondre	99	

QD1

Avez-vous un compte Facebook?

Oui.....	1	
Non.....	2	->DENIM
Ne sait pas.....	98	->DENIM
Refuse de répondre.....	99	->DENIM

QD2

À quelle fréquence accédez-vous à votre compte Facebook?

Plus d'une fois par jour.....	1
Tous les jours.....	2
Quelques fois par semaine.....	3
Une fois par semaine.....	4
2-3 fois par mois.....	5
Une fois par mois.....	6
Moins d'une fois par mois.....	7
Ne sait pas.....	98
Refuse de répondre.....	99

QD3 [1,3]

Accédez-vous à votre compte Facebook sur un ordinateur, une tablette ou votre téléphone cellulaire?

LIRE LA LISTE;ACCEPTER PLUSIEURS RÉPONSES

Ordinateur de bureau ou portable.....	1	
Tablette.....	2	
Téléphone cellulaire/intelligent.....	3	
Ne sait pas.....	98	X
Refuse de répondre.....	99	X

QD5

Connaissez-vous la page Facebook Premières nations et Inuits en santé?

Le nom de la page Facebook est : Premières nations et Inuits en santé

Lien pour télécharger des guides ou obtenir des renseignements est :
canadiensensante.gc.ca/environnement

Oui.....	1
Non.....	2
Ne sait pas.....	98
Refuse de répondre.....	99

QD6

If... QD5.EQ.1

Vous rappelez-vous avoir vu des messages liés à des questions de santé environnementale publiés sur la page Premières nations et Inuits en santé?

Oui	1
Non	2
Ne sait pas	98
Refuse de répondre	99

QD7 [1,15]

If... QD6.EQ.1

Quel était le sujet du message?

NE PAS LIRE LA LISTE;ACCEPTER PLUSIEURS RÉPONSES

Fumée du tabac, y compris la fumée secondaire	1
Fumée de bois en combustion	2
Moisissure pouvant apparaître sur les murs, les plafonds ou les appuis de fenêtre	3
Gaz radon	4
Plomb se trouvant dans la peinture.....	5
Produits chimiques contenant des ingrédients toxiques.....	6
Monoxyde de carbone	7
Eau potable contaminée.....	8
Aliments contaminés	9
Bruit excessif	10
Changement climatique	11
Pollution de l'air.....	12
Pesticides et herbicides.....	13
Pollution de l'eau	14
Rayons UV d'une exposition au soleil	15
Ne sait pas	98
Refuse de répondre	99

X
X

QD8

If... QD6.EQ.1

À quel point avez-vous trouvé que ces renseignements étaient utiles pour vous permettre de prendre des mesures pour protéger votre santé?

LIRE L'ÉCHELLE

Très utiles	1
Plutôt utiles.....	2
Pas très utiles	3
Pas du tout utiles.....	4
Ne sait pas	98
Refuse de répondre	99

DENIM [0,0]

Pour terminer, j'aurais quelques questions portant sur vous et sur votre foyer qui nous aideront à analyser les données tirées de ce sondage. Vos réponses demeureront anonymes et confidentielles.

Q15

Incluant vous-même, combien de personnes y a-t-il dans votre ménage?

INSCRIRE NOMBRE -> AQ15; N2.0 [1-98].....	1
NSP / PR.....	99

Q16

Quelle est la première langue que vous avez apprise à la maison quand vous étiez jeune et que vous comprenez encore aujourd'hui?

NE PAS LIRE – UN CODE SEULEMENT

Anglais	1
Français	2
Inuktitut	3
Autre réponse (veuillez préciser) -> AQ16; C100 L1 C50.....	77
NSP/PR.....	99

Q17

Quel est le plus haut niveau académique vous avez atteint?

NE PAS LIRE – UN CODE SEULEMENT

Partie du niveau primaire (1re – 6e années)	1
Niveau primaire complété (7e ou 8e année)	2
Partie des études secondaires (9e – 11e années).....	3
Études secondaires complétées (12e ou 13e année ou OAC)	4
Une partie du cours collégial, professionnel, école de métier (une partie du CEGEP).....	5
Complété le cours collégial, professionnel, école de métier (terminé le CEGEP).....	6
Une partie du cours universitaire (sans diplôme)	7
Niveau universitaire complété (baccalauréat).....	8
Études supérieures /école de profession (Maîtrise, Doctorat, etc.).....	9
Aucune scolarité	10
NSP/PR.....	99

Q18

À des fins de classification seulement, nous aimerions avoir une idée générale du revenu annuel du foyer des répondants. Laquelle de ces catégories correspond le mieux au total des revenus de tous les membres de votre foyer en 2009?

LIRE -- VOUS ARRÊTEZ DÉS QU'UNE CATÉGORIE EST NOMMÉE

Moins de 20 000 \$	1
20 000 \$ à moins de 40 000 \$	2
40 000 \$ à moins de 60 ,000 \$	3
60 000 \$ à moins de 80 000 \$	4
80 000 \$ à moins de 100 000 \$	5
100 000 \$ à moins de 150 000 \$	6
150 000 \$ et plus	7
REFUSE	98
NSP/PR	99

Q19

Et finalement, pour nous aider à comprendre les différences entre les régions, est-ce que vous pourriez me donner votre code postal?

RQ19: [Q19.EQ.99.AND.(PREPOSTC.EQ.77).OR.Q19.EQ.99.AND.(SUFPOSTC.EQ.77)]Please clear your entered text if you wish to answer "Don't know".[ELSE]

ACCEPTER LES TROIS PREMIERS SI LE RÉPONDANT NE VEUT PAS EN DIVULGUER D'AVANTAGE
SELRESPONSE:

[isempty(Q19).AND.(PREPOSTC.EQ.77.OR.SUFPOSTC.EQ.77)] &1Arr;
Please select the response button which correspondes to your answer.

[ELSE] APREPOSTC ASUFPOSTC	1
Pas de réponse	99

THNK [0,0]

Ceci complète le sondage. Au nom de Santé Canda, je vous remercie de votre participation