# FIRST NATIONS AND INUIT COMPONENT OF THE FEDERAL TOBACCO CONTROL STRATEGY

Smoking prevalence for Aboriginal Canadians is almost triple that of Non-Aboriginal Canadians. According to the 2008/10 Regional Health Survey (RHS), 57% of First Nations adults living on-reserve and in northern First Nations communities smoke daily or occasionally. The 2012 Aboriginal Peoples Survey reports that 63.3% of Inuit adults are daily or occasional smokers.

Health Canada is concerned about the high rates of smoking within Aboriginal communities. It is working with First Nations and Inuit partners to take steps to reduce smoking and increase smoke-free environments to support healthy First Nations and Inuit individuals, families and communities.

Santé

Canada

The current Federal Tobacco Control Strategy includes \$22 million (2012–2017) for a First Nations and Inuit Component. This component supports First Nations and Inuit communities in implementing evidence-based tobacco control strategies.

# PROMOTING KNOWLEDGE **SHARING**

The First Nations and Inuit Component of the Federal Tobacco Control Strategy (FTCS) aims to promote information and knowledge sharing. It supports the development and implementation of comprehensive tobacco control projects that are holistic, and socially and culturally appropriate. It also strives to reduce non-traditional tobacco use, while

maintaining respect and recognition for traditional forms and uses of tobacco within communities.

A call for proposals for project funding under the First Nations and Inuit Component of the FTCS was issued in June 2014 which resulted in sixteen projects being funded across all Health Canada First Nations and Inuit Health Branch (FNIHB) Regions to March 2017.

All of the First Nations and Inuit communities and/or organizations selected for funding through the First Nations and Inuit Component of the FTCS will:

- establish comprehensive tobacco control strategies and interventions that reduce and prevent tobacco misuse, and reduce smoking rates; and
- share successes and knowledge from the projects to inform other strategies addressing tobacco misuse.



Projects activities include:

- reducing youth access to tobacco products
- enhancing no-smoking policies and by-laws
- promoting smoke-free homes, public spaces and workplaces through community and partner collaboration
- promoting awareness of the dangers of smoking and second hand smoke
- engaging and encouraging youth to adopt healthy lifestyles

- offering tobacco cessation training for community workers
- delivering cessation programs to pregnant women and young mothers
- tracking success through indicators and share best practices

Lessons learned through the selected projects will be shared with other First Nations and Inuit communities to help inform their tobacco control strategies.

# PROJECT LOCATIONS

# **ALBERTA**

- → Beaver First Nation
- → Siksika Health Services
- → Samson Community Wellness
- → Nunee Health Board Society

# **SASKATCHEWAN**

- → Battle River Treaty 6 Health Centre
- → File Hills Qu'Appelle Tribal Council
- → Northern Inter-Tribal Health Authority

### **MANITOBA**

- → Chemawawin Cree Nation
- → Keewatin Tribal Council
- → Southeast Resource Development Council

#### **ONTARIO**

→ Grand Council Treaty 3

# **QUEBEC**

- → Nunavik Regional Board of Health and Social Services
- → Cree Board of Health and Social Services of the James Bay
- → First Nations of Quebec and Labrador Health and Social Services Commission (FNQLHSSC)

### ATLANTIC REGION

- → Mawiw Council Inc., New Brunswick
- → Department of Health and Social Development, Nunatsiavut Government

Funding is also being provided to the **BC First Nations Health Authority**, and the **Governments of Nunavut and the Northwest Territories** to enhance tobacco control programming for First Nations and Inuit within these jurisdictions.

In addition, the **National Aboriginal Diabetes Association** is being funded to support the establishment of a "Community of Practice" on First Nations and Inuit tobacco control, and will play a lead role in gathering and disseminating the knowledge gained through this initiative.

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