



Catalogue no. 89-597-XIE

# A Portrait of Aboriginal Children Living in Non-reserve Areas: Results from the 2001 Aboriginal Peoples Survey



◀ [BACK TO REFERRING PAGE](#)

◀ [FRANÇAIS](#)

## **How to obtain more information**

Specific inquiries about this product and related statistics or services should be directed to: Housing, Family and Social Statistics Division, Statistics Canada, Ottawa, Ontario, K1A 0T6 (telephone: (613) 951-5979).

For information on the wide range of data available from Statistics Canada, you can contact us by calling one of our toll-free numbers. You can also contact us by e-mail or by visiting our Web site.

<b>National inquiries line</b>	<b>1 800 263-1136</b>
<b>National telecommunications device for the hearing impaired</b>	<b>1 800 363-7629</b>
<b>Depository Services Program inquiries</b>	<b>1 800 700-1033</b>
<b>Fax line for Depository Services Program</b>	<b>1 800 889-9734</b>
<b>E-mail inquiries</b>	<b>infostats@statcan.ca</b>
<b>Web site</b>	<b>www.statcan.ca</b>

## **Ordering and subscription information**

This product, Catalogue no. 89-597-XIE, is available on Internet free. Users can obtain single issues at <http://www.statcan.ca/cgi-bin/downpub/freepub.cgi>.

## **Standards of service to the public**

Statistics Canada is committed to serving its clients in a prompt, reliable and courteous manner and in the official language of their choice. To this end, the Agency has developed standards of service which its employees observe in serving its clients. To obtain a copy of these service standards, please contact Statistics Canada toll free at 1 800 263-1136.



Statistics Canada  
Housing, Family and Social Statistics Division

# A Portrait of Aboriginal Children Living in Non-reserve Areas: Results from the 2001 Aboriginal Peoples Survey

Written by Martin Turcotte and John Zhao, Housing, Family and Social Statistics Division.

Published by authority of the Minister responsible for Statistics Canada

© Minister of Industry, 2004

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without prior written permission from Licence Services, Marketing Division, Statistics Canada, Ottawa, Ontario, Canada K1A 0T6.

July 2004

Catalogue no. 89-597-XIE

Frequency: Occasional

ISBN: 0-662-37401-0

Ottawa

Cette publication est disponible en français (n° 89-597-XIF au catalogue)

## **Note of appreciation**

Canada owes the success of its statistical system to a long-standing partnership between Statistics Canada, the citizens of Canada, its businesses, governments and other institutions. Accurate and timely statistical information could not be produced without their continued cooperation and goodwill.

## Symbols

The following standard symbols are used in Statistics Canada publications:

- . not available for any reference period
- .. not available for a specific reference period
- ... not applicable
- 0 true zero or a value rounded to zero
- 0<sup>s</sup> value rounded to 0 (zero) where there is a meaningful distinction between true zero and the value that was rounded
- <sup>P</sup> preliminary
- <sup>r</sup> revised
- x suppressed to meet the confidentiality requirements of the *Statistics Act*
- <sup>E</sup> use with caution
- F too unreliable to be published

## Table of contents

	<b>Page</b>
Background.....	4
1. Health and well-being of Aboriginal children living in non-reserve areas .....	5
Self-rated health .....	5
Accidental injuries.....	7
Eating breakfast.....	8
Breast-feeding .....	9
Birth weight.....	11
2. Education and learning among Aboriginal children.....	11
Preschool programs or early childhood development programs .....	12
Reading or being read to .....	13
Extra-curricular activities .....	14
Getting along with other children, classmates and teachers .....	16
Factors related to family socio-economic background.....	16
3. Aboriginal children and Aboriginal languages .....	17
Conclusion .....	21
References.....	22

## **A Portrait of Aboriginal Children Living in Non-reserve Areas: Results from the 2001 Aboriginal Peoples Survey (APS)**

### **Background**

Following the 2001 Census, Statistics Canada, in collaboration with national Aboriginal organizations, conducted the Aboriginal Peoples Survey (APS). This report examines data from the component of the survey that covers children and young people aged 14 and under who were identified as Aboriginal by a parent<sup>1</sup> and who live in non-reserve areas. A future study will look at Aboriginal people who live on reserves, with some attention paid to Aboriginal children living on reserves.

In the 2001 Census, some 713,000 people who were living in non-reserve areas identified as Aboriginal<sup>2</sup>. The census enumerated about 227,000 Aboriginal children aged 14 and under who lived in non-reserve areas. Children in this age group thus represent 32% of the non-reserve Aboriginal population in 2001, far higher than the corresponding share of 18% in the non-Aboriginal population. It is also noted that those children correspond to almost 70% of all Aboriginal children living in Canada.

This report paints a statistical portrait of the well-being of Aboriginal children living in non-reserve areas at the beginning of the 21<sup>st</sup> Century. In a previous report on the well-being of non-reserve Aboriginal people based on the adult component of the APS (Statistics Canada, 2003), an analytical framework was used. In this framework, a complex interaction exists between the key factors involved in human well-being, including the physical, mental and intellectual, spiritual and emotional aspects of life, as well as the land. Well-being stems from a balance among, and a harmony with, these interrelated factors.

Obviously, it is difficult to grasp every subtlety and illustrate all the complex interactions among these components of well-being using a quantitative survey such as the APS. Nevertheless, for purposes of analysis, this report selects certain indicators to enable readers to grasp the general situation of Aboriginal children living in non-reserve areas. It describes the current well-being of these children, as well as various facets of their lives that will play significant roles in their long-term well-being.

---

<sup>1</sup> In the Aboriginal Peoples Survey on children, the respondent is the person most knowledgeable about the child and usually not the child himself or herself. In the large majority of cases (93%), this person is a parent of the child, but may also be a grandparent (4%), other relatives, etc. To facilitate readability, we use the term “parent” in the presentation of data which, unless otherwise indicated, means the person most knowledgeable about the child.

<sup>2</sup> The Aboriginal population is defined in this report on the basis of “Identity”. In other words, Aboriginal individuals are those reported as: 1) being North American Indian, Métis and/or Inuit, and/or 2) having registered Indian status as defined by the *Indian Act*, and/or 3) having Band or First Nations membership. The report focuses on Aboriginal people living in non-reserve areas across Canada. Unlike the 2001 Census, however, for the Northwest Territories, Aboriginal people living in reserve areas are grouped together with those living in non-reserve areas and included in the current study. A few other communities in Québec, Saskatchewan, Alberta, and the Yukon Territory treated as reserve communities in the 2001 Census are also included in this report as non-reserve communities.

This report examines three main topics:

- The first section analyzes the **health and well-being** of Aboriginal children living in non-reserve areas using information on self-rated health<sup>3</sup>, injuries, breast-feeding and birth weight.
- The second section examines the issue of **education and learning**. It investigates factors such as attendance at a preschool program, reading activities (reading or being read to), extra-curricular activities, and so on. In terms of extra-curricular activities, it looks at time spent with Elders, helping out without pay in the community and school, participation in sports, art or music, youth groups and other group activities such as dance and drum.

The 2001 APS did not examine other important learning activities which may be happening in the homes and communities of Aboriginal children, such as story-telling. In terms of education outcomes, the 2001 APS allows an examination of strictly school outcomes, such as how children perform in school and repeating a grade. But it does not explore issues, such as the development of life skills, nor spiritual and emotional development.

- The third section considers abilities of Aboriginal children living in non-reserve areas in **Aboriginal languages**, and the importance that parents place on their child's knowledge of these languages.

## 1. Health and well-being of Aboriginal children living in non-reserve areas

### Self-rated health

Many Aboriginal peoples have a holistic concept of well-being in which mental, spiritual and emotional aspects of well-being are just as important as physical health. Researchers in the fields of health and epidemiology also acknowledge that it is no longer appropriate to assume that someone is in good health merely because he or she is free of illness or physical problems (Idler and Benyamini, 1997; Shields and Shooshtari, 2001); a "positive" assessment of general health and overall well-being is of much greater value.

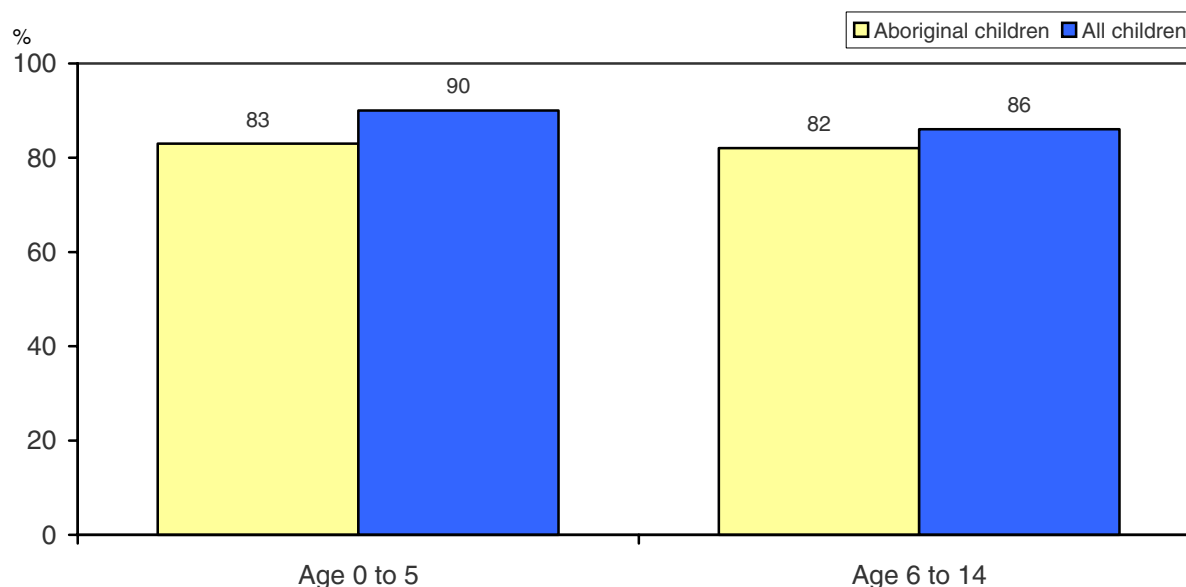
Subjective self-evaluation of one's health and well-being or a subjective evaluation of a child's health and well-being by a parent are found to be highly correlated to the presence of chronic diseases, psychological well-being and even mortality (See Shields and Shooshtari, 2001 for a review of literature).

The self-rated level of health of Aboriginal children living in non-reserve areas is slightly lower than that of all Canadian children living in non-reserve areas. As shown in Chart 1, for the Canadian population as a whole, parents of 90% of children aged five and under ranked the health of their children as either very good or excellent<sup>4</sup>. This compares with 83% for Aboriginal children living in non-reserve areas.

---

3. For the sake of convenience, it is called self-rated health of a child even though the information is provided by the respondent, that is, the person most knowledgeable about the child.

4. The results for Canadian children are estimated using the National Longitudinal Survey of Children and Youth (NLSCY), cycle 4 (2000/2001). The National Longitudinal Survey of Children and Youth (NLSCY), a long-term study of Canadian children, follows their development and well-being from birth to early adulthood. The NLSCY began in 1994 and is jointly conducted by Statistics Canada and Human Resources and Skills Development Canada. This survey was conducted only in non-reserve areas. In this report, all comparisons between Aboriginal and all

**Chart 1****Excellent or very good self-rated health, children in non-reserve areas, Canada, 2001**

Source: Statistics Canada, Aboriginal Peoples Survey, 2001 and National Longitudinal Survey of Children and Youth, Cycle 4, 2000/2001.

This gap between the health of the non-reserve Aboriginal population and that of the Canadian population as a whole becomes narrower with each age group as children grow older. Among all Canadian children aged 6 to 14, 86% were reported as in very good or excellent health. This was four percentage points below the proportion for the group aged five and under. In contrast, 82% of Aboriginal children living in non-reserve areas aged between 6 and 14 were in very good or excellent health, almost identical to the proportion for the younger age group. According to the recently published analytical report (Statistics Canada, 2003) on the well-being of the non-reserve adult Aboriginal population, 69% of Aboriginal people aged 15 to 24 reported having excellent or very good health. This is virtually identical to the proportion of 71% for the general population.

A significant difference exists between Inuit and Métis children with respect to self-rated health. For children aged 14 and under, the percentage of Inuit children who reported very good or excellent health was lower at 79% than among Métis children (84%). Among North American Indian children living in non-reserve areas, 81% were reported in excellent or very good health. This was not significantly different from the other two groups.

As numerous prior studies have observed, the general health of children is linked with parental socio-economic background (Statistics Canada, 1999a). Our results show that this holds true for Aboriginal children living in non-reserve areas.

For example, the educational attainment of a child's parent plays a crucial role in the child's health. Barely three-quarters (73%) of Aboriginal children aged 14 and under in non-reserve areas whose parent had only completed primary school or less as the highest level of educational attainment were reported to have

---

Canadian children are based on the results from the 2001 APS and the 2000/2001 NLSCY respectively (unless otherwise mentioned in the text).



good or excellent health. This contrasts with 89% among Aboriginal children in non-reserve areas whose parent had completed university studies.

### **Accidental injuries**

One of the most frequent causes of health problems, hospitalization and even mortality among young children is injuries sustained in situations such as falls and car or bicycle accidents (Government of Canada, 2002). How common are such injuries among Aboriginal children living in non-reserve areas?

The 2001 APS asked respondents if the child had been injured in the 12-month period prior to the survey. Respondents were asked to consider only injuries serious enough to require the attention of a doctor, a nurse, a dentist or a traditional healer<sup>5</sup>. Based on these definitions, about 13% of Aboriginal children in non-reserve areas aged 14 and under had been accidentally injured in the previous year, which is slightly higher than the 11% figure for the Canadian children population as a whole<sup>6</sup>.

Falls and sports-related accidents, two leading causes of accidental injuries, accounted for more than 68% of all injuries among Aboriginal children living in non-reserve areas. The results show that with respect to the most common causes of injuries, there were no significant differences between Aboriginal children in non-reserve areas and Canadian children as a whole. Furthermore, as in the general population, Aboriginal boys were more likely to be injured than girls (see Chart 2).

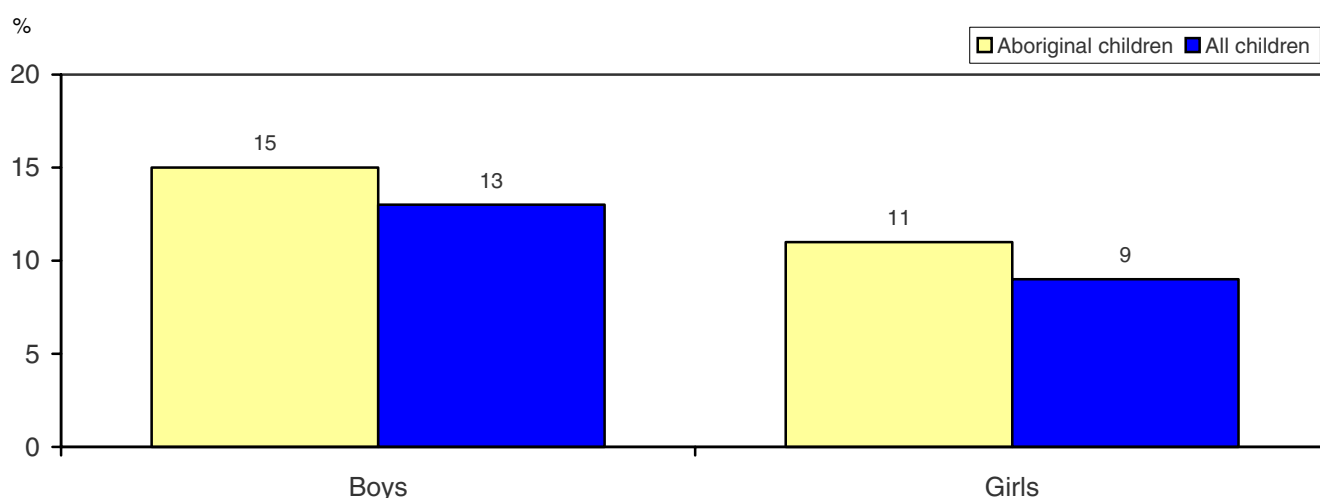
---

5. Excluded from this analysis are self-inflicted injuries and injuries resulting from assaults. Two percent of Aboriginal children who were injured over the course of the previous year suffered from self-inflicted wounds, while 2% were assault victims.

6. Only non-fatal injuries are examined here. Indeed, the differences between Canadian children overall and Aboriginal children are much greater with respect to deaths caused by accidentally inflicted traumas. It is estimated that the accidental death rate is three to four times higher for Aboriginal children than for other children in Canada (Health Canada, 2002).

**Chart 2**

**Children aged 0 to 14 in non-reserve areas who were accidentally injured in the 12 previous months\*, Canada, 2001**



\* Twelve months preceding the survey.

Source: Statistics Canada, Aboriginal Peoples Survey, 2001 and National Longitudinal Survey of Children and Youth, Cycle 4, 2000/2001.

Among Inuit children aged 14 and under, 9% were injured at least once in the year prior to the survey. This was somewhat below the corresponding proportions of 12% for North American Indian children and 15% for Métis children. This may partly reflect the definition for injuries used in the 2001 APS. Respondents were instructed to report only injuries serious enough to require medical attention. Residents of the North, of which a very large proportion are Inuit, are less likely to have access to medical attention.

For example, in the 12 months prior to the survey, parents of 71% of Aboriginal children living in the North had obtained medical attention (including over the phone) from doctors, including pediatricians and specialists, nurses, or traditional healers, for their children compared with parents of 84% of Aboriginal children living in the rest of Canada. Therefore, the injury rates of Inuit children may have been underestimated.

## Eating breakfast

Parents of four out of every five (80%) Aboriginal children in non-reserve areas aged between 6 and 14 reported that their children ate breakfast every day. This proportion rose to 86% for children whose parents reported that their children ate breakfast at least five times per week. It is important to note that the APS does not ask where these children ate breakfast. For example, breakfasts may have been provided at home, school, or by a care-giver. This may also partly explain another APS finding – there was no significant difference in how often Aboriginal children in non-reserve areas reported eating breakfast whether they lived in households below the low income cut-off, or in those at or above the low income cut-off<sup>7</sup>.

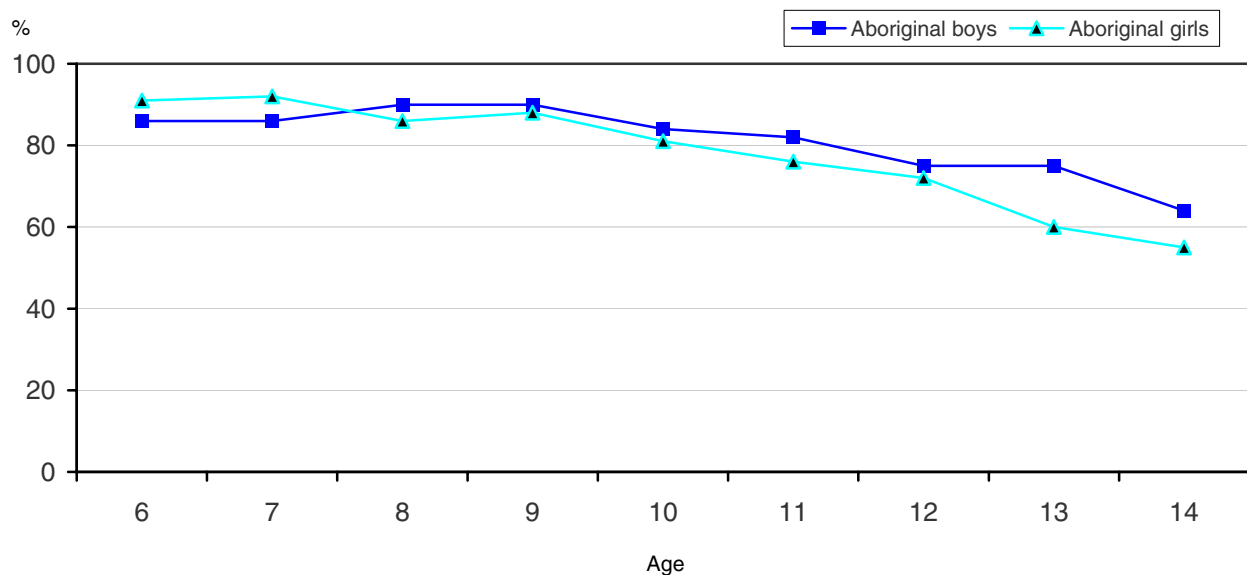
7. It must be noticed that the low income cut-off is not calculated in the three Territories (Northwest Territories, Yukon and Nunavut). Aboriginal children living in these areas are therefore excluded from this calculation.

Aboriginal children living in non-reserve areas appear to be less and less likely to eat breakfast every day as they grow older. As shown in Chart 3, parents of 86% of six-year-old Aboriginal boys reported that their sons ate breakfast every day, while at the age of 14, that proportion was only 64%.

Similarly, parents of 91% of six-year-old girls reported that their daughters ate breakfast every day, compared with only 55% at the age of 14. Generally speaking, however, the difference between Aboriginal boys and girls at each age was not significant. The only exception was at the age of 13 – parents of 75% of Aboriginal boys this age reported that their sons ate breakfast every day, compared with only 60% of Aboriginal girls.

Parents of Inuit children aged 6 to 14 were less likely to report that their children ate breakfast every day. About 72% of these Inuit children ate breakfast every day, compared with 82% of North American Indian children and 78% of Métis children.

**Chart 3**  
**Proportion of Aboriginal children in non-reserve areas who ate breakfast every day, Canada, 2001**



Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

## Breast-feeding

Breast-feeding has for some time been considered by public health authorities to be the most nutritious choice for newborns (Canadian Paediatric Society, Dieticians of Canada and Health Canada, 1998). The APS results reveal that 67% of Aboriginal children in non-reserve areas were breast-fed by their mothers at one time or another when they were young<sup>8</sup>. A trend appears to exist for increased breast-feeding among Aboriginal children living in non-reserve areas over time in recent years. About 72% of children aged five and under were breast-fed when they were young, compared with 63% of children aged between 6 and 14.

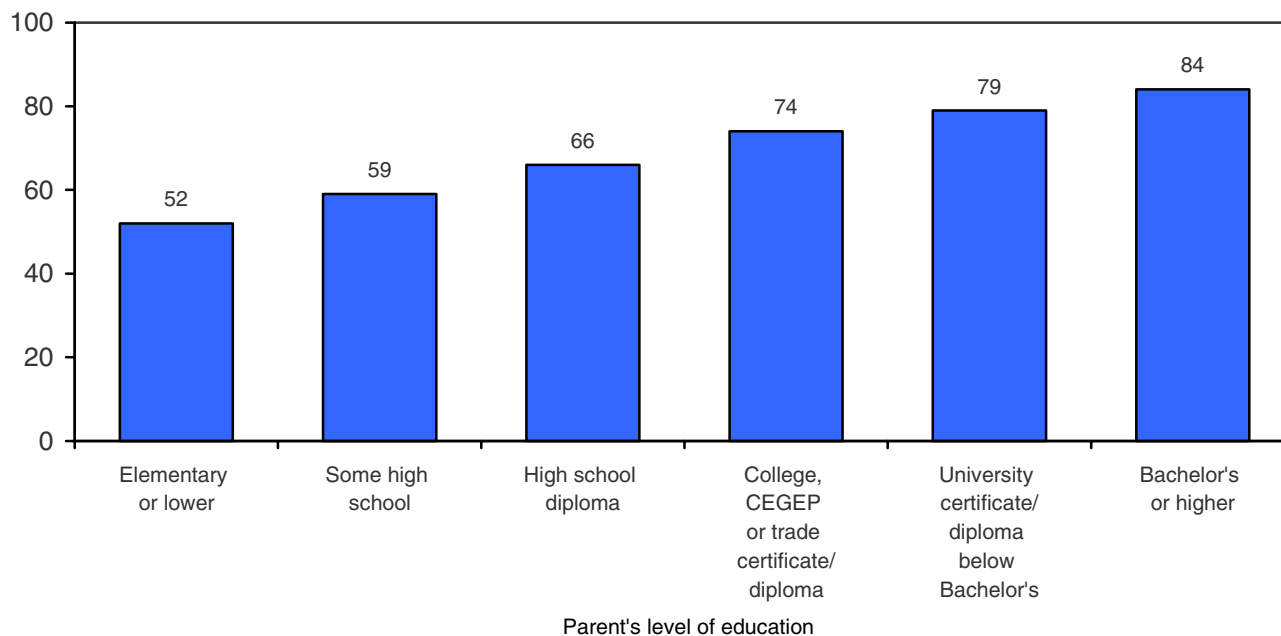
8. Only the answers reported by biological parents are included in this section on breast-feeding. For 87% of children, the person most knowledgeable about them was their biological parent.

It is only possible to compare the incidence of breast-feeding between Aboriginal and all Canadian children aged three and under. In this age group, 73% of Aboriginal children in non-reserve areas were being breast-fed, or were at some point, somewhat lower than the proportion of 82% among all Canadian children.

#### Chart 4

#### Proportion of Aboriginal children in non-reserve areas who were breast-fed\*, by parent's\*\* level of education, Canada, 2001

Percentage of children breast-fed



\* Children who were being breast-fed at the time of the survey and children who had ever been breast-fed.

\*\* Biological mother or father only.

Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

There is a strong relationship between the parent's level of education and incidence of breast-feeding of children. As Chart 4 illustrates, of those Aboriginal children who were living in non-reserve areas and whose biological parent had received a university degree, 84% were breast-fed during their childhood. This compares with just 52% of those whose parent did not continue beyond elementary school. This relationship is consistent with that which has been previously observed for the Canadian population as a whole (Statistics Canada, 1999b : 198).

That said, the relationship between a parent's level of education and the incidence of breast-feeding was not found within the Inuit population: Inuit children whose parent had higher levels of education were not more likely to be breast-fed or to have been breast-fed than those whose parent had lower levels of education.

There were no significant differences in the incidence of breast-feeding between Inuit, North American Indian and Métis children. However, marked differences may be observed between the three major Aboriginal groups with respect to the average duration of breast-feeding. Inuit children have traditionally been (and continue to be) breast-fed for longer periods than other Canadian children (Pauktuutit, 1991).

According to the APS, the average duration of breast-feeding for Inuit children was estimated at 15 months, compared with eight months for North American Indian children and seven months for Métis children.

## **Birth weight**

Low birth weight has a crucial impact on a child's likelihood of survival at birth and during the first year of life (Silins et al., 1985). Birth weight may also be a factor that plays a role in a child's future health and life (Chen and Millar, 1999). It is known, for example, that children who are born at term but with low birth weights are more likely to develop diabetes, high blood pressure and heart disease during adulthood (Wadsworth, 1997). In addition to such health risks, low birth weight is likely to have a negative impact on the development of a child's cognitive abilities right up to the time of adulthood (Jefferis et al., 2002).

The World Health Organization standard for low birth weight is a weight of less than 2,500 grams. According to the APS, 8% of Aboriginal children in non-reserve areas had low birth weights, compared with 6% of all Canadian children<sup>9</sup>. There were no significant differences in the proportions of children with low birth weights among the three major Aboriginal groups: Inuit, North American Indian and Métis.

## **2. Education and learning among Aboriginal children**

In Aboriginal societies, the family, Elders and the community play key roles in children's learning and education. In this context, the socialization of children includes not only the development of cognitive capacities, but also the learning of ways to behave in society. Ultimately, the child needs to develop fully "intellectually, spiritually, emotionally and physically" to become an "Aboriginal citizen" capable of taking up the responsibilities for societies and communities (RCAP, 1996: 434).

The 2001 APS includes information on extra-curricular activities, including time spent with Elders, helping out in school and communities, participation in art or music, or group activities such as dance, drum and youth groups. It also includes information on preschool programs, especially those designed specifically for Aboriginal children, and their Aboriginal language abilities.

However, there is still a lot of information about learning outside of the school system which this survey was not able to capture. For example, there is no information on story-telling which may be happening both within the family and the Aboriginal community. Nor does the survey ask questions on life skills unique and/or essential to Aboriginal societies.

Finally, education outcomes are confined to school outcomes, such as repeating a grade, rather than to a fuller spectrum of measures which may include other aspects, such as spiritual and emotional development. The 2001 APS does not have any direct measures on education outcomes, such as tests administered to children as part of the survey.

That said, the importance of a sound formal education is increasing with time. With the advent of the knowledge-based economy, jobs are becoming increasingly scarce for individuals without a diploma or a degree from a high school, college or university.

---

9. The proportion of babies with low birth weights is generally estimated on the basis of administrative, rather than survey data, as is the case here. Based on vital statistics, it is estimated that 5.6% of children born in 1999 had low birth weights (CANSIM, table 102-4005). Caution should thus be applied when using the percentages appearing in this report.

According to the 2001 Census, the unemployment rate for Aboriginal adults aged 25 to 34 with university degrees was 8%, while that for those who had completed grade 9 but not high school was 28%. For those who had not completed grade 9 the unemployment rate was 40%. Researchers have also found that post-secondary educational attainment has some major positive influences on employment and earnings for Aboriginal peoples (Hull, 2000; Maxim et al., 2000).

Many authors (e.g., Cairns, Cairns and Neckerman, 1989; Astone and McLanahan, 1991) have traced the path toward dropping out of school to a child's first years at school. It is obvious that education and learning, especially in an individual's early years, are crucial to individual success and community prosperity.

Education attainment among the Aboriginal population in Canada has increased over the past few years (Siggner, 2003; Statistics Canada, 2003). In 1996, just over half (52%) of the Aboriginal population aged 20 to 24 living in non-reserve areas had not completed secondary school. By 2001, this proportion had dropped to 48%<sup>10</sup>. Nevertheless, there was still a huge gap in comparison with the Canadian population as a whole. By 2001, only 26% of the general population aged 20 to 24 had not completed secondary school.

Given the importance of education and learning in the early years and the fact that children today represent the future tomorrow, it is imperative to ask: How well do Aboriginal children between 6 and 14 years of age perform in school? What factors contribute to their success at school?

### **Preschool programs or early childhood development programs**

Attendance at a quality early childhood development or preschool program is often considered to be a factor facilitating a child's cognitive and social development. This is particularly the case among children from economically disadvantaged families (Palacio-Quintin, 2000; Cleveland and Krashinsky, 2003).

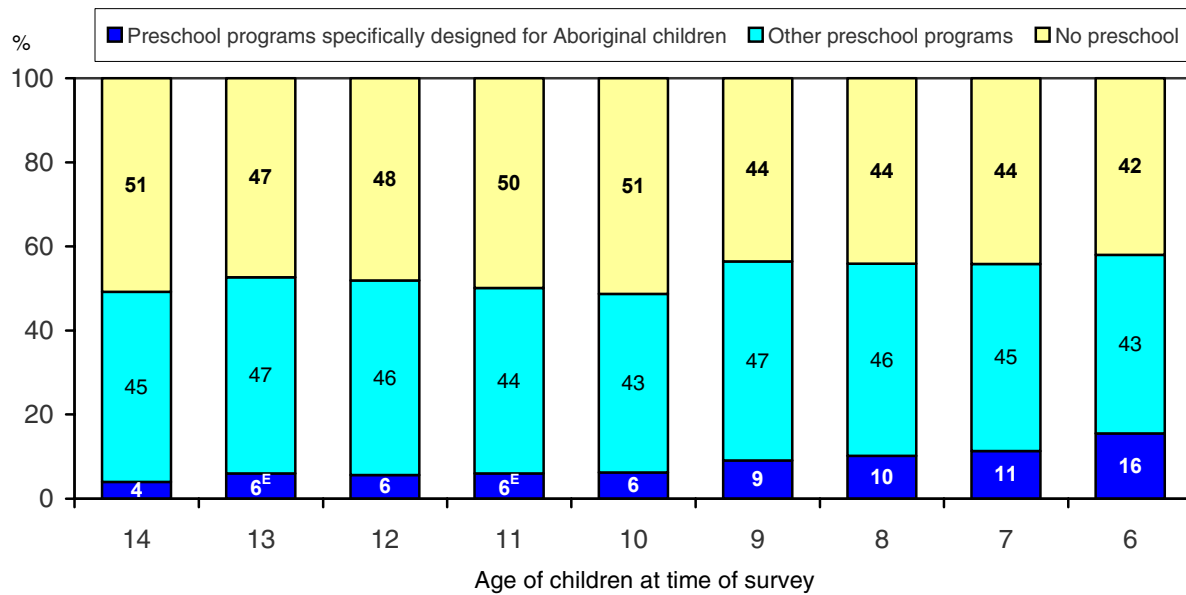
According to the 2001 APS, just over half (53%) of Aboriginal children aged 6 to 14 living in non-reserve areas had attended an early childhood development program when they were younger<sup>11</sup>. Again, Inuit children were far less likely to have done so. Only 35% of Inuit children had attended a preschool program when they were younger, compared with 54% of North American Indian children, and 57% of Métis children.

---

10. Only individuals who were not attending school at the time of the censuses are included in the calculation of these percentages.

11. Note this question was asked for children over preschool age and this does not capture information for children currently attending preschool programs.

**Chart 5**  
**Aboriginal children in non-reserve areas who ever attended preschool programs, Canada, 2001**



Note: Percentages in this chart may not add up to 100% due to rounding.

Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

As shown in Chart 5, over the past few years, more Aboriginal children living in non-reserve areas were attending preschool programs that were specifically designed for them. Among the 14-year-olds, only 4% had attended preschool programs specifically designed for Aboriginal children when they were preschoolers. At the time of survey in 2001, 16% of six-year-old Aboriginal children in non-reserve areas had attended preschool programs specifically designed for them.

Therefore, in eight years, the proportion of Aboriginal children in non-reserve areas going to preschool programs designed for them increased almost four-fold. It is equally clear, however, that while one in two Aboriginal children in non-reserve areas attended preschool programs, only one in six attended programs specifically designed for them<sup>12</sup>.

There was no statistically significant change over the last few years in the proportions of Aboriginal children attending other preschool programs, that is, those programs not specifically designed for Aboriginal children.

### Reading or being read to

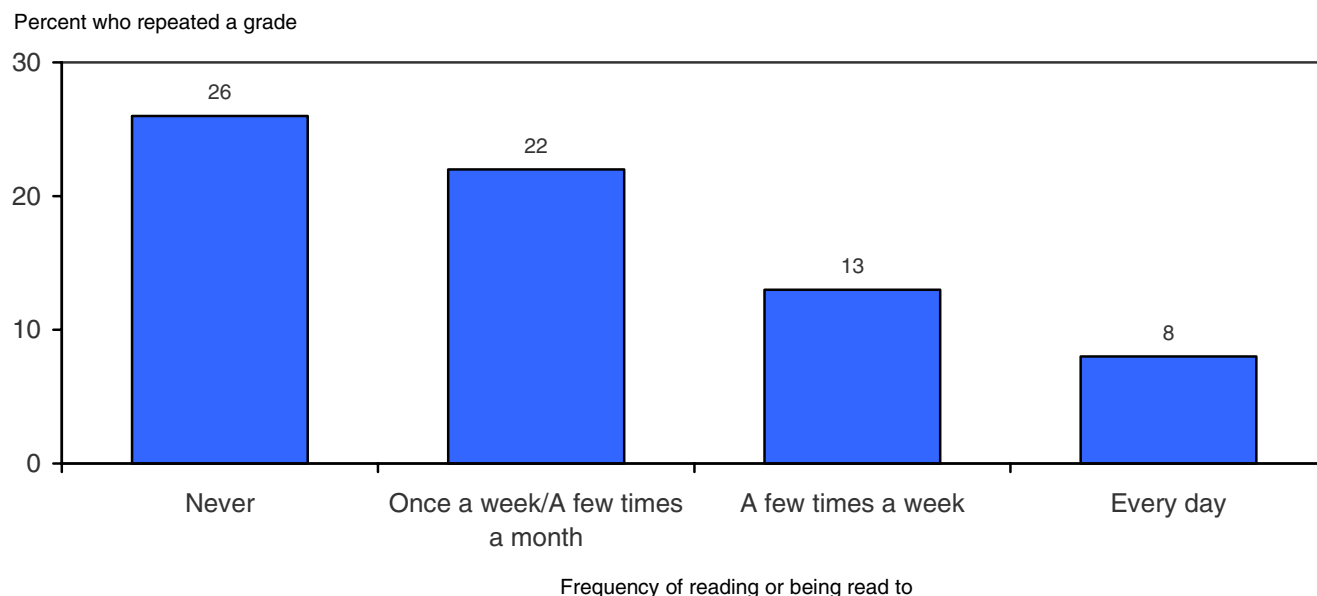
In general, researchers have found that reading, or being read to, (apart from as required by school) can have a positive impact on a child's education outcomes, particularly his or her reading skills (e.g., Sénéchal and LeFevre, 2002, Cooks and Willms, 2002). This section examines the relationship between reading, or being read to, and the school outcomes of Aboriginal children, such as repeating a grade.

12. It is important to remember that this report focuses only on Aboriginal children in non-reserve areas. More preschool programs specifically designed for Aboriginal children may be available on-reserve.

As illustrated in Chart 6, the more Aboriginal children in non-reserve areas read or were read to, the less likely they were to repeat a grade. Some 26% of these children who didn't read or were never read to, repeated a grade, twice the proportion of those who participated in this activity just a few times a week.

**Chart 6**

**Proportion of Aboriginal children aged 6 to 14 in non-reserve areas who repeated a grade by how often they read or are read to, Canada, 2001**



Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

Gender differences exist among Aboriginal children in non-reserve areas aged 6 to 14 concerning reading or being read to. About 56% of girls read, or were read to, on a daily basis, compared with 43% of boys. Conversely, while 9% of boys never read or were never read to, only 4% of girls were in the same situation.

There were also differences among the three Aboriginal groups. While 27% of Inuit children aged 6 to 14 read or were read to every day, the comparable figures were 51% for North American Indian children and 52% for Métis children.

### Extra-curricular activities

Analysis based on the National Longitudinal Survey of Children and Youth (NLSCY) revealed a correlation between participation in extra-curricular activities and a number of other measures. Children who participate in organized extra-curricular activities (sports, art, music, clubs and so on) are more likely to possess greater self-esteem, to enjoy better social interactions with their friends and to achieve relatively higher scholastic results (Statistics Canada, 2001).



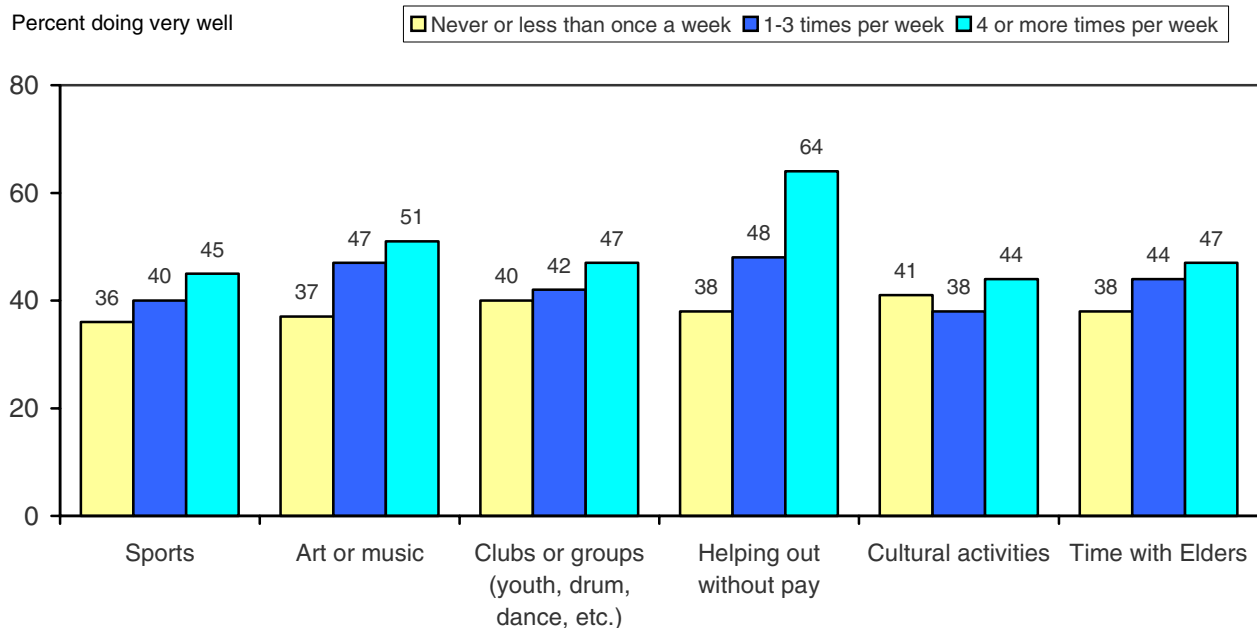
The 2001 APS allows an examination of the participation in extra-curricular activities by Aboriginal children living in non-reserve areas, as well as any correlation between such participation and school outcomes. However, it is not possible to establish any causal relationship.

Sports are the most popular activity among Aboriginal children in non-reserve areas aged between 6 and 14. About 71% of Aboriginal children in non-reserve areas participated in sports activities at least once per week. Time spent with Elders (34%) ranked second, followed by art and music (31%) and clubs or youth, drum and dance groups (30%). About 21% of Aboriginal children in non-reserve areas helped out in the community or school at least once a week without pay.

The survey found significant differences in school performance between Aboriginal children in non-reserve areas who engaged frequently in extra-curricular activities, compared with those who rarely or never did so. Parents were asked to rate how well their child did in school, based on their knowledge of the child’s school work, including report cards.

As shown in Chart 7, 64% of Aboriginal children in non-reserve areas who helped without pay in the community or school four times or more a week did very well in school, as reported by their parents. At the same time, among those who rarely or never helped out, only 38% were reported as doing very well.

**Chart 7**  
**Proportion of Aboriginal children aged 6 to 14 in non-reserve areas who were doing very well at school, by frequency of participation in selected extra-curricular activities, Canada, 2001**



Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

Similarly, 47% of Aboriginal children in non-reserve areas who spent time with Elders four times or more a week were reported doing very well in school. But among those who rarely or never spent time with Elders, only 38% did very well.

About one-half (51%) of Aboriginal children in non-reserve areas who participated in art or music activities four times or more a week were doing very well in school, compared with only 37% of those who never, or rarely, participated.

Finally, 45% of Aboriginal children in non-reserve areas who participated in sports four times or more a week were reported doing very well in school, compared with only 36% who never, or rarely, participated in sports.

### **Getting along with other children, classmates and teachers**

In general, children who have problems interacting with their classmates and their teachers are more likely than others to drop out of school and/or experience difficulties. That is, they are less motivated to attend school, suffer a loss of self-confidence, and so on (Cairns, Cairns and Neckerman, 1989).

A vast majority of Aboriginal children maintained harmonious relationships with those they met daily in their school settings. Nearly all Aboriginal children in non-reserve areas aged 6 to 14 (97%) got along fairly well, well or very well with other children. The majority (58%) of them got along “very well, with no problems” with other children.

Generally speaking, Aboriginal children in non-reserve areas also got along well with their teachers. Frequent or constant problems with teachers were only reported for a very small percentage of Aboriginal children, although older children seemed to be more likely to have such problems – about 7% of 13-year-olds did so. Boys were generally more likely to have problems with teachers than girls.

In the six-to-nine age group, 81% of Aboriginal children in non-reserve areas reported a positive relationship with other children, as did 91% of Canadian children in general.

### **Factors related to family socio-economic background**

De Broucker and Lavallée (1998) found that the higher the parental education, the higher the eventual educational attainment of children. Many factors may explain this phenomenon.

For example, parents with higher levels of educational attainment tend to take a greater interest in their child’s academic performance and encourage activities that are likely to facilitate school success, such as reading (Stevenson and Baker, 1987; Bianchi and Robinson, 1997). They generally have higher expectations for their children when it comes to education, a key factor in school success of children (Teachman and Paasch, 1998; Teachman, 1987; Astone and McLanahan, 1991; Hill, 2001).

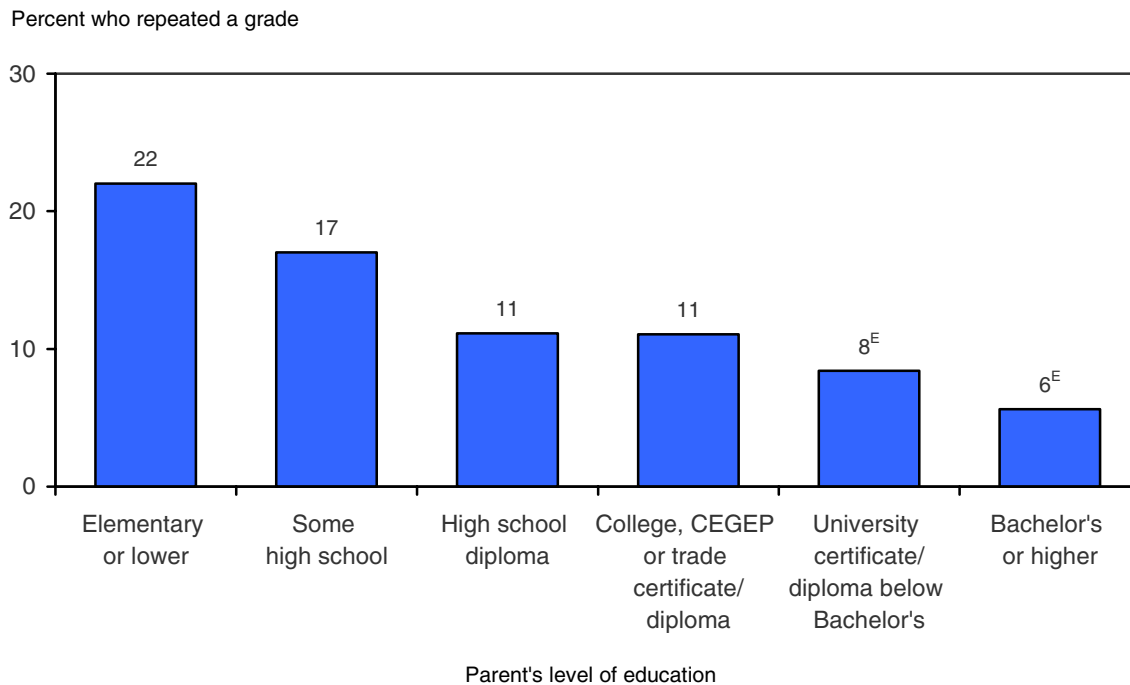
As shown in Chart 8, among Aboriginal children living in non-reserve areas, there is a clear association between the parent’s level of education and the likelihood of children ever repeating a grade. Just over one-fifth of Aboriginal children in non-reserve areas aged 6 to 14 whose parent had not gone beyond elementary school had repeated a grade at some point in their life. As the parent’s education level increases, the proportion of children having ever repeated a grade decreases. Among Aboriginal children in non-reserve areas whose parent had a bachelor’s degree or higher education, only 6% had repeated a grade at some point in their life.

Another factor having an impact on children’s school success is family or household income. A vast number of studies have demonstrated that children from economically disadvantaged families experience

greater difficulties in learning and more problems in school (Duncan and Brooks-Gunn, 1997; Smith et al., 1997; Petterson and Albers, 2001; Chao and Willms, 2002; Ross, Roberts and Scott, 2000).

This appears to be true also for the Aboriginal children living in non-reserve areas. About 16% of children in families with income below the low income cut-off had repeated a school year at some point, compared with only 10% of children in families at or above the low income cut-off.

**Chart 8**  
**Proportion of Aboriginal children aged 6 to 14 in non-reserve areas who repeated a grade by parent's level of education, Canada, 2001**



Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

### 3. Aboriginal children and Aboriginal languages

Language is often considered both an instrument and an essential part of culture. In many Aboriginal societies, “the fundamental teachings are preserved in sacred stories, ceremonies and symbols,” which are “the symbols of the ideas, concepts, and beliefs of a society which has an oral tradition” (Svenson and Lafontaine, 1999: 190).

In this context, mastery by children of the language of their ancestors greatly aids in ensuring the transmission from generation to generation of values and beliefs (as well as the ability for a child to communicate with “Elders” with whom many Aboriginal children maintain special ties).

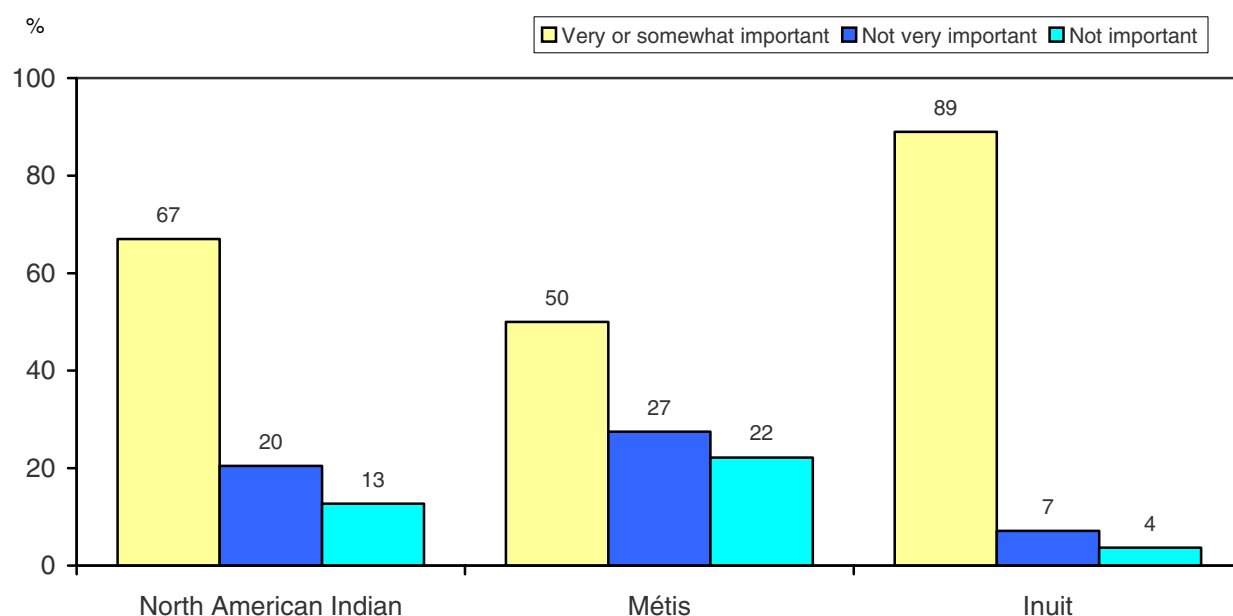
This study excludes reserves where the majority of North American Indian language speakers live. The comparisons are between Inuit children and North American Indian and Métis children living in non-reserve areas.

Parents of six in every 10 Aboriginal children in non-reserve areas (62%<sup>13</sup>) believed it was very important, or somewhat important, for their children to speak and understand an Aboriginal language. Parents of Inuit children were much more likely than parents of North American Indian and Métis children in non-reserve areas to believe so.

Specifically, parents of 89% of Inuit children said it was very important, or somewhat important, for their children to speak and understand an Aboriginal language. (See Chart 9.)

### Chart 9

**Proportion of Aboriginal children in non-reserve areas whose parents consider it very/somewhat important, not very important or not important to have them speak and understand an Aboriginal language, Canada, 2001**



Note: Percentages in this Chart may not add up to 100% due to rounding.

Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

Comparatively smaller proportions of parents of North American Indian and Métis children said it was important for their children to speak and understand an Aboriginal language. Parents of about one-half of Métis children and two-thirds of North American Indian children believed it was very important, or somewhat important.

There are marked differences in Aboriginal language skills between Inuit children and North American Indian and Métis children living in non-reserve areas. Among Inuit children aged 14 and under, and excluding those too young to speak, 76% could speak or understand an Aboriginal language. However, among North American Indian and Métis children, the percentages dropped to 25% and 12%, respectively.

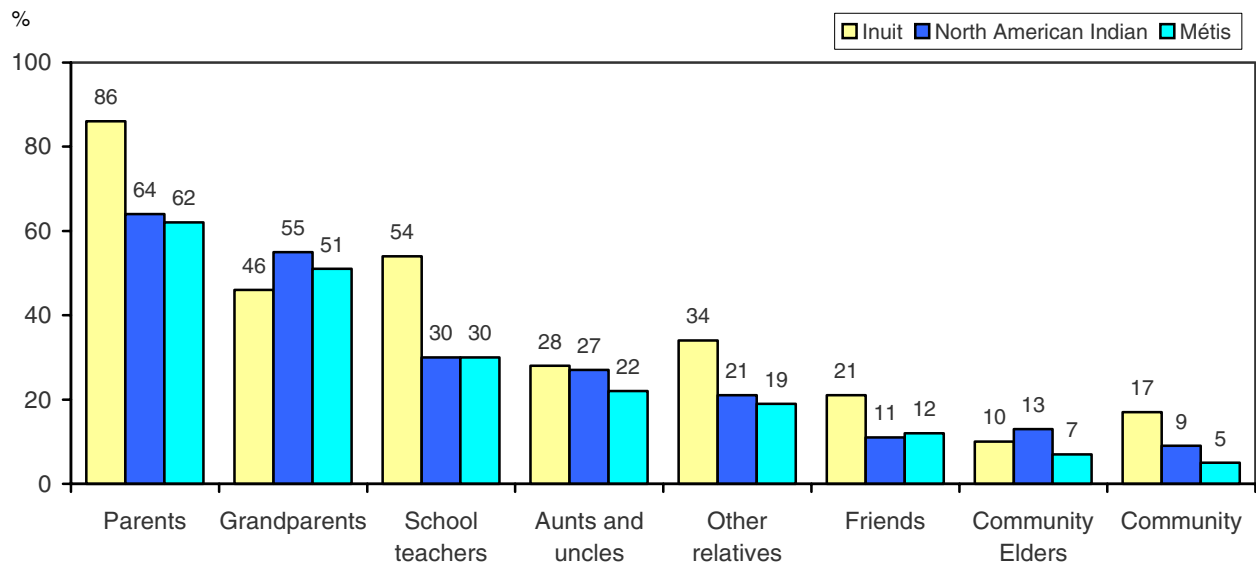
Again, the fact that this report concentrates on Aboriginal children in non-reserve areas may explain in part the marked differences in Aboriginal language capacities between Inuit children and other Aboriginal

13. Some percentages may differ slightly from those previously published due to different exclusion strategies.

children. The vast majority of Inuit children live in northern remote communities. For North American Indian children, Aboriginal languages are more likely to be spoken in First Nations communities than in non-reserve areas.

Who helps children to learn an Aboriginal language? As shown in Chart 10, there are some differences in the three main Aboriginal groups in terms of who teaches these languages to children who can speak or understand an Aboriginal language.

**Chart 10**  
**Who helps Aboriginal children\* in non-reserve areas learn an Aboriginal language (Canada, 2001)?**



\* Analysis restricted to only Aboriginal children in non-reserve areas who have any capacity in speaking or understanding an Aboriginal language.

Source: Statistics Canada, Aboriginal Peoples Survey, 2001.

About 86% of Inuit children got help from their parents, compared with only 64% of North American Indian children and 62% of Métis children. Inuit children are also more likely to be helped by school teachers. Just over half (54%) of Inuit children were helped by teachers, compared with only 30% of both North American Indian and Métis children.

The APS has also revealed that the more a child can rely on multiple sources for learning an Aboriginal language, the more likely they are to speak and understand well an Aboriginal language. For example, among Aboriginal children in non-reserve areas who can speak or understand an Aboriginal language, only 15% who can count on a single source of assistance for learning an Aboriginal language speak and understand the language very well, or relatively well. This proportion consistently rises based on the number of sources of help.

Accordingly, 38% of children who can rely on three sources of assistance are able to speak and understand an Aboriginal language well. This proportion rises to 54% for those benefiting from five different sources of assistance, and to 80% for those benefiting from seven sources or more of assistance. It is quite likely that children who can count on assistance from multiple agents live in communities in which the use of an Aboriginal language is not only very common, but the norm.

Parents with higher levels of education are less likely to have children who can speak or understand an Aboriginal language. About 44% of Aboriginal children in non-reserve areas whose parent had not gone beyond elementary school could speak or understand an Aboriginal language. This was more than twice the proportion of 17% among those whose parent had completed some type of post-secondary education.

This difference is apparent among all three major Aboriginal groups. About 92% of Inuit children whose parent had not gone beyond elementary school could speak or understand an Aboriginal language. On the other hand, about one-half (51%) of Inuit children whose parent had completed some type of post-secondary education could do so.

Among North American Indian children living in non-reserve areas, 33% whose parent had not gone beyond elementary school could speak or understand an Aboriginal language. In comparison, 21% of children whose parent had completed some type of post-secondary education could do so.

Similarly, 25% of Métis children whose parent had not gone beyond elementary school could speak or understand an Aboriginal language. This is more than twice the proportion of 9% among Métis children whose parent had completed some type of post-secondary education.

The Royal Commission on Aboriginal Peoples (RCAP) identified several factors contributing to the decline of Aboriginal languages in Canada. Just like other minority languages in the world, Aboriginal languages are constantly being “eclipsed” or overwhelmed by more dominant languages (RCAP, 1996: 609). In Canada, historical factors such as residential schools have also ruptured the transmission of Aboriginal languages from one generation to the next (RCAP, 1996: 603).

This study has identified a negative relationship between the parent’s level of education and children’s Aboriginal language abilities. However, to properly determine why such a relationship exists, further studies will need to examine many factors: location of post-secondary institutions, location of work, effect of residential schools, marriage between Aboriginal people and other Canadians, home language, among others. For example, post-secondary educational institutions are often located outside of communities where Aboriginal languages are spoken more frequently.

## Conclusion

The Aboriginal population is young and growing. Children represent a much higher proportion of the Aboriginal population compared to Canadian children overall. The 2001 Aboriginal Peoples Survey has filled an important data gap in looking at the well-being of Aboriginal children living in non-reserve areas.

There is a small difference in the self-rated health of Aboriginal children living in non-reserve areas and all Canadian children at younger ages. For the Aboriginal population living in non-reserve areas, parents of 83% of children aged five and under ranked the health of their children as either very good or excellent, compared with 90% for all Canadian children.

About half of Aboriginal children aged 6 to 14 read, or are read to, on a daily basis. Aboriginal girls are more engaged in reading activities than boys. The 2001 APS reveals that the more Aboriginal children read or are read to, the more likely they progress in school without having to repeat a grade.

Increasingly, Aboriginal children living in non-reserve areas are attending preschool programs specifically designed for Aboriginal children. Among those six years old at the time of the survey, 16% had attended a preschool program specifically designed for Aboriginal children, which is four times the proportion of the 14-year-olds. However, even among the six-year-olds, it is still only a small minority who had attended a preschool program specifically designed for Aboriginal children.

Aboriginal children living in non-reserve areas are very active in extra-curricular activities. For example, 71% of children participate in sports at least once a week, 34% spend time with Elders at least once a week, 31% participate in art and music and 30% in clubs or youth, drum and dance groups at least once a week, and 21% help out without pay in the community or school at least once a week.

There is a correlation between frequent participation in extra-curricular activities and performance in school. Aboriginal children living in non-reserve areas who frequently participate in these extra-curricular activities are more likely to do very well in school, as reported by their parents based on the knowledge about children's school work, including report cards.

The more sources an Aboriginal child can rely on for help in learning an Aboriginal language, the more likely they are to speak and understand an Aboriginal language well. The help can come from parents, grandparents, school teachers, aunts and uncles, other relatives, friends, community Elders, and the community in general.

For example, among Aboriginal children in non-reserve areas who can speak or understand an Aboriginal language, only 15% who can count on a single source of assistance for learning an Aboriginal language are able to speak and understand the language very well or relatively well. In comparison, 38% of children who can rely on three sources of assistance are able to speak and understand an Aboriginal language well. This proportion rises to 54% for those benefiting from five different sources of assistance, and 80% for those benefiting from seven or more sources of assistance.

In summary, given that children represent a much higher proportion of the Aboriginal population compared to Canadian children overall, the health and well-being of Aboriginal children will define the future of Aboriginal communities. It is hoped that from this article new ideas may emerge as to how the current and future situations of Aboriginal children in non-reserve areas can be further improved.

## References

- Astone, N.M., S.S. McLanahan. 1991. "Family structure, parental practices and high school completion." *American Sociological Review* 56: 309-320.
- Bianchi, S. and J. Robinson. 1997. "What did you do today? Children's use of time, family composition, and the acquisition of social capital." *Journal of Marriage and the Family* 59: 332-344.
- Cairns, R.B., B.D. Cairns and H.J. Neckerman. 1989. "Early school dropout : configurations and determinants." *Child Development* 60: 1437-1452.
- Canadian Paediatric Society, Dieticians of Canada and Health Canada. 1998. *Nutrition for Healthy Term Infants*. Ottawa: Minister of Public Works and Government Services.
- Chao, R.K. and J.D. Willms. 2002. "The effect of parenting practices on children's outcomes." in J.D. Willms (ed.) *Vulnerable Children*. Edmonton: University of Alberta Press and Human Resources Development Canada: 149-165.
- Chen, Jiajian and Wayne J. Millar. 1999. "Birth outcome, the social environment and child health." *Health Reports* 10 (4): 59-68. Statistics Canada catalogue no. 82-003-XIE. Ottawa: Statistics Canada.
- Cleveland, G. and M. Krashinsky. 2003. "Facts and fantasy: eight myths about early childhood education and care." Childcare Resource and Research Unit, University of Toronto.
- Cooks, C. and J.D. Willms. 2002. "Balancing work and family life." in J.D. Willms (ed.) *Vulnerable Children*. Edmonton: University of Alberta Press and Human Resources Development Canada: 183-197.
- De Broucker, P. and L. Lavallée. 1998. "Intergenerational aspects of education and literacy skills acquisition." in M. Corak (ed.) *Labour Markets, Social Institutions, and the Future of Canada's Children* (Statistics Canada catalogue no. 89-553-XIB): 129-144.
- Duncan, G.J. and J. Brooks-Gunn (eds.) 1997. *Consequences of Growing Up Poor*. New York: Russell Sage Foundation.
- Government of Canada. 2002. *The Well-being of Canada's Young Children: Government of Canada Report*. Ottawa: SP-545-11-02.
- Health Canada. 2002. *Healthy Canadians – A Federal Report on Comparable Health Indicators 2002*. (Catalogue no. H21-206/2002) Ottawa.
- Hill, N.E. 2001. "Parenting and academic socialization as they relate to school readiness: The role of ethnicity and family income." *Journal of Educational Psychology* 93: 686-697.
- Hull, Jeremy. 2000. *Aboriginal Post-secondary Education and Labour Market Outcomes*. Ottawa: Indian and Northern Affairs Canada, Research & Analysis Directorate.
- Idler, E.L. and Y. Benyamini. 1997. "Self-rated health and mortality : A review of twenty-seven community studies." *Journal of Health and Social Behavior* 38 (1): 21-37.
- Jefferis, B., C. Power and C. Hertzman. 2002. "Birth weight, childhood socioeconomic environment, and cognitive development in the 1958 British cohort study." *British Medical Journal* 325: 305.



- Maxim, P.S., J.P. White, P.C. Whitehead and D. Beavon. 2000. "An analysis of wage and income inequality - Dispersion and polarization of income among Aboriginal and non-Aboriginal Canadians." Working paper. London: University of Western Ontario.
- Norris, M. J. and K. MacCon. 2000. "Aboriginal language transmission and maintenance in families: Results of an intergenerational and gender-based analysis for Canada, 1996." in J. White, P. Maxim and D. Beavon (eds.) *Aboriginal Conditions: The Research Foundations of Public Policy*. Vancouver: UBC Press.
- Palacio-Quintin, E. 2000. "Les services de garde et le développement de l'enfant." *ISUMA – Canadian Journal of Policy Research / Revue canadienne de recherche sur les politiques* 1 (2): 25-30.
- Pauktuutit. 1991. *The Inuit way: A guide to Inuit culture*. Ottawa: Pauktuutit and National Library.
- Petterson S.M. and A.B. Albers. 2001. "Effects of poverty and maternal depression on early child development." *Child Development* 72: 1794-1813.
- Ross, D., P. Roberts and K. Scott. 2000. "Family income and child well-being." *ISUMA - Canadian Journal of Policy Research / Revue canadienne de recherche sur les politiques* 1(2): 51-54.
- Royal Commission on Aboriginal Peoples. 1996. *Report of the Royal Commission on Aboriginal Peoples: Gathering Strength*. Vol. 3. Minister of Supply and Services Canada.
- Sénéchal, M. and J-A LeFevre. 2002. "Parental involvement in the development of children's reading skill: A five-year longitudinal study." *Child Development* 73: 445-460.
- Shields, M. and S. Shooshtari. 2001. "Determinants of self-perceived health." *Health Reports* 13 (1): 35-63. Statistics Canada catalogue no. 82-003-XIE. Ottawa: Statistics Canada.
- Siggner, A.J. 2003. "The challenge of measuring the demographic and socio-economic conditions of the urban Aboriginal population" in D. Newhouse and E. Peters (eds.) *Not Strangers in these Parts – Urban Aboriginal Peoples*. Ottawa: Policy Research Initiative.
- Silins, J., R.M. Smenciw, H.I. Morrison. 1985. "Risk factors for perinatal mortality in Canada." *Journal de l'Association médicale canadienne/Canadian Medical Association Journal* 133 : 1214-1219.
- Smith, J.R., J. Brooks-Gunn and P.K. Klebanov. 1997. "Consequences of living in poverty for young children's cognitive and verbal ability and early school achievement." in G. Duncan and J. Brooks-Gunn (eds.) *Consequences of Growing Up Poor*. New York: Russell Sage Foundation: 132-189.
- Statistics Canada. 2003. *Aboriginal Peoples Survey 2001 – initial findings: Well-being of the non-reserve Aboriginal Population*. Statistics Canada catalogue no. 89-589-XIE. Ottawa: Statistics Canada.
- Statistics Canada. 2001. "National Longitudinal Survey of Children and Youth : Participation in activities, 1998/99." *The Daily*, May 30.
- Statistics Canada. 1999a. "Health status of children." *Health Reports* 11(3) : 27-38. Statistics Canada catalogue no. 82-003-XIE. Ottawa: Statistics Canada.
- Statistics Canada. 1999b. "Breast-feeding." *Statistical Report on the Health of Canadians*. 82-570-XIE : 196-198. Ottawa: Statistics Canada.

Stevenson, D.L and D.P. Baker. 1987. "The family-school relationship and the child's school performance." *Child Development* 58: 1348-1357.

Svenson, Kenneth A. and Christopher Lafontaine. 1999. "The search for wellness." *First Nations and Inuit Regional Health Survey – National Report 1999*.

Teachman, J.D. and K. Paasch. 1998. "The family and educational aspirations." *Journal of Marriage and the Family* 60: 704-714.

Teachman, J.D. 1987. "Family background, educational resources, and educational attainment." *American Sociological Review* 52: 548-557.

Wadsworth, M.E.J. 1997. "Health inequalities in the life course perspective." *Social Science and Medicine* 44 (6): 859-869.