



Our Health Counts Inuit Winnipeg

Respectful Health Survey Results

by Inuit Community, for Inuit Community



Tunngasugit

Welcoming Winnipeg's Urban Inuit

Community Report



Well Living House



Tunngasugit



CIHR IRSC
Canadian Institutes of Health Research
Instituts de recherche en santé du Canada



Tunngasugit

Welcoming Winnipeg's Urban Inuit

Written by: Marcie Snyder, Maxine Angoo, Lisa Avery, Aleatra Sammurtok, Genevieve Blais, & Janet Smylie on behalf of Tunngasugit Inuit Resource Centre, Inc. 2026.

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WHO WE ARE

The OHC Inuit Winnipeg project is built on a research partnership with Tunngasugit Inuit Resource Centre Inc., the Well Living House Action Research Centre at Unity Health Toronto, and the Aboriginal Health and Wellness Centre of Winnipeg, Inc. (AHWC).

Well Living House (WLH) is an action research centre that aims to nurture places and spaces where Inuit, Metis, and First Nations children, youth, adults, and elders can find peace, love, and joy. We do this by enhancing health services for Indigenous Peoples in three priority areas: increasing the availability of high quality Indigenous-governed population health data; interrupting anti-Indigenous racism in health services; and advancing Indigenous health and wellbeing knowledge and practices using culturally-rooted research, KT and evaluation processes.

Tunngasugit Inuit Resource Centre, Inc. has played a significant and impactful role in supporting the Inuit community. Founded in 2017 in response to a request from the Inuit community in Winnipeg, who highlighted the need for more support to help overcome challenges and assist Inuit in transitioning to urban life. The centre and its dedicated team are committed to advocating for change and removing barriers for urban Inuit. The mission is to help Inuit stay connected to their community and culture while providing essential support as they adjust to life in the south.

Committed to breaking down barriers for the community, the centre strives to ensure that Inuit in Winnipeg thrive by creating a space where culture and presence are celebrated. The Inuit Resource Centre will always remain dedicated to fostering the Inuit community in Winnipeg and will continue to serve with love, support and inclusivity.



Well Living House



OUR HEALTH COUNTS INUIT WINNIPEG

The Our Health Counts (OHC) Inuit Winnipeg journey began in 2021, when Tunngasugit learned about the critical work OHC was doing in other Indigenous communities to collect meaningful health data that reflects lived experiences—something often missing in mainstream health systems.

Tunngasugit, Inc. was created to serve and support Inuit in Winnipeg, and the OHC project reflects that mission—to ensure Inuit voices are heard, and that services are shaped based on real needs, not assumptions.

For these reasons, Tunngasugit immediately saw the potential for OHC to support our Inuit-specific resource centre in Winnipeg. Given the lack of Inuit-specific health data, we recognized that this collaboration could help us better understand the challenges Inuit face in accessing care in the city.

Our goal with OHC Inuit Winnipeg was to gather real experiences from Inuit to inform and improve services. **The OHC Inuit survey ran from April 2024-2025. During this time, we successfully completed 171 adult surveys and 88 family/child surveys.** All community interviewers spoke Inuktitut and English.

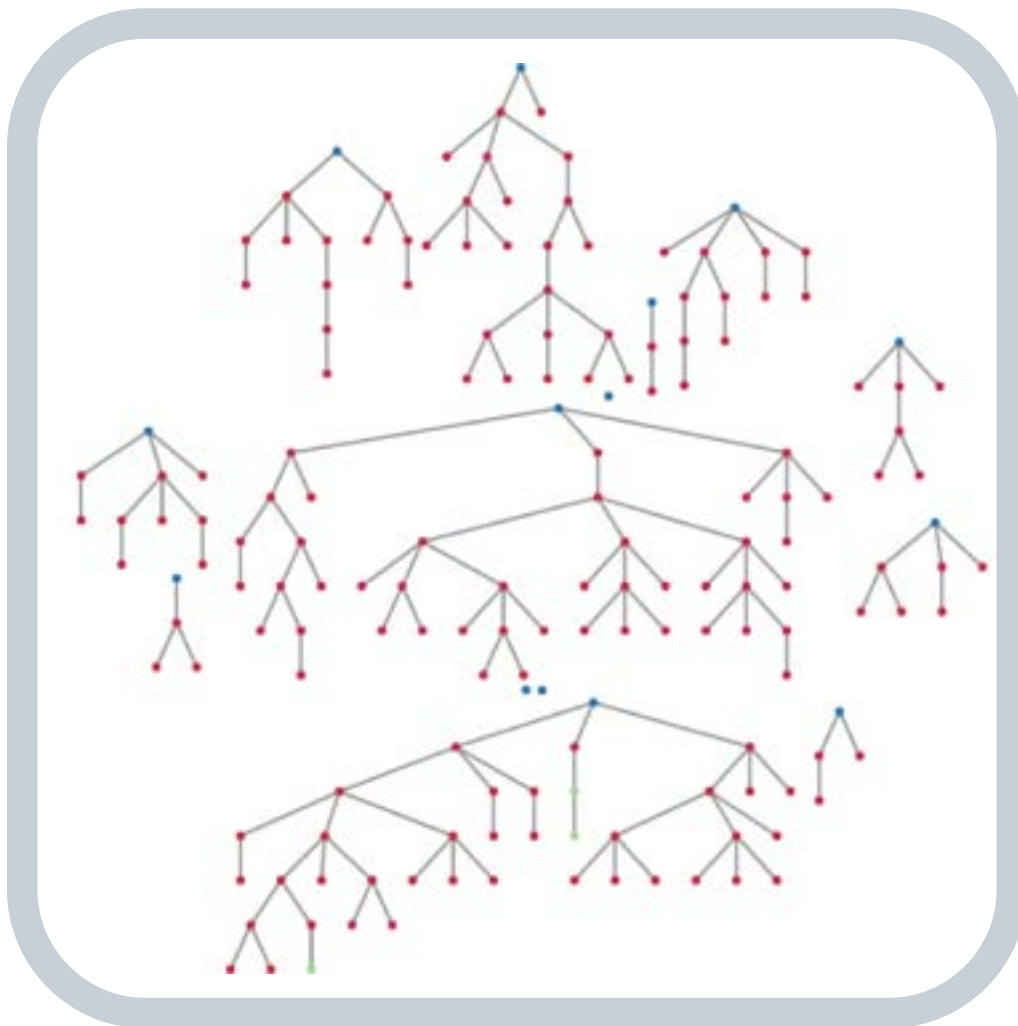
Inuit 15 years of age and older completed the adult survey. Parents/guardians of children 14 years of age and under completed the child surveys. The population surveyed show the strength and cohesion of our networks and the data collected offers valuable insights into both the gaps and strengths within our current systems.

This Community Report shares the key findings from our OHC Inuit Winnipeg adult survey and provides recommendations to the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit organizations to address health and socio-economic inequities experienced by Inuit in Winnipeg.

We acknowledge and honour the Inuit community members who generously shared their time and stories with us during the OHC Inuit Winnipeg study.

HOW DID WE GATHER OUR DATA? RESPONDENT DRIVEN SAMPLING

To recruit survey participants, we use a method called Respondent-Driven Sampling (RDS) for all Our Health Counts (OHC) projects. With RDS, Inuit recruit other Inuit they know to participate in the study. RDS builds on the strengths of our social networks and kin systems in cities. It is a respected method that is used to represent the overall Inuit population in Winnipeg.



Our referral networks are shown in the OHC Inuit Winnipeg network map above. This map shows the strength of our connections as Inuit living in Winnipeg. 13 “seeds” participated in the OHC Inuit Winnipeg study. They are the people who started the recruitment of other Inuit to the study. They are the blue circles at the top of each network. Their referrals are the red circles that grow outward from each seed. 171 referrals came in to complete the adult survey.

HOW DID WE GATHER OUR DATA? RESPONDENT DRIVEN SAMPLING

With RDS, Inuit recruit other Inuit they know to participate in the study. This process starts with community partners inviting “seeds” to complete the first OHC surveys. Seeds are the people who start the recruitment of other Inuit to the study. The seeds receive 3 OHC coupons which they share with Inuit relatives and friends in Winnipeg. Family and friends who complete the survey are then also given 3 coupons to share. This process continues until the end of the study. Below is an example of the OHC Inuit Winnipeg coupon.

Someone you know has completed a survey
Our Health Counts Winnipeg
if you self-identify as Inuk and live, work, attend school, and/or access services in Winnipeg, you can earn up to \$55 to complete a survey.
Take this coupon to the location detailed on the back and/or
Call 204-416-8910 Email OHC@tunngasugit.ca
EARN UP TO \$55
EARN UP TO \$55

A friend or family member finished a survey and wants you to also participate to ensure your health needs are considered.
Your voice matters. Our community health counts.


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COUPON # T2500



618 Selkirk Avenue
Winnipeg, Manitoba
R2W 2N1
Open Monday to Friday
8:30 am-4:30 pm

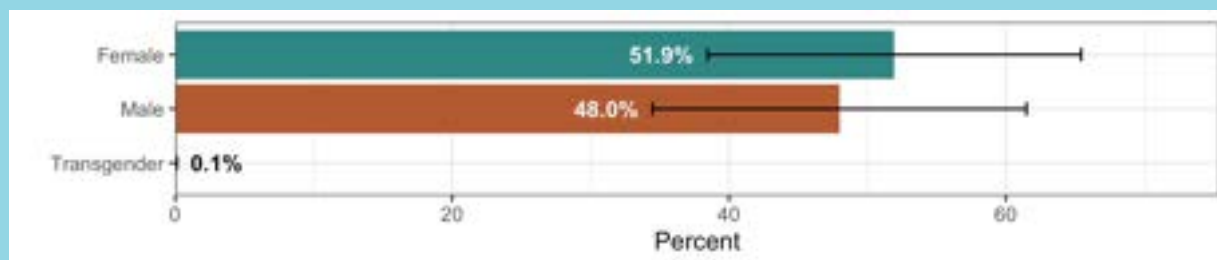


The coupon is an invitation to complete the survey. Coupons are needed to complete the survey. This method allows us to show the strength of our networks and ensure that the study represents the Inuit community in Winnipeg.

READING THE GRAPHS IN THE REPORT

Throughout this report, you'll see a number of bar graphs.

Here is an example:



What Do the Whiskers on the Bar Graphs Represent?

Each graph has “whiskers” on it. The whiskers are the black lines running through each coloured rectangle on the bar graphs.

The whiskers represent the 95% confidence interval (CI). The right side of the whisker represents the “upper bound” of the confidence interval and the left whisker represents the “lower bound”. At the end of the report, you'll see Survey Reference Tables that provide the values of the upper bound and lower bound for each bar graph.

When the whiskers overlap, this means there is no statistically significant difference across the groups in the population.

Using gender as an example above, the whiskers in the graph overlap. This means that we cannot conclude that there is a significant difference in the proportion (%) of females and males among Inuit in Winnipeg.

READING THE GRAPHS IN THE REPORT

What is a 95% CI?

The 95% CI is the “confidence interval” used in sampling statistics.

We use a 95% CI because it is difficult, and often impossible, to study every single person in a population. Instead, we use what is called a “sample”.

In OHC Inuit Winnipeg, we surveyed a “sample”, rather than find every single Inuk in Winnipeg. **The OHC Inuit Winnipeg data should be representative of the entire population we are surveying.**

We use the 95% CI to help us understand how well we did in understanding the entire Inuit population in Winnipeg. The upper and lower values of the 95% CI mean that if the study was repeated multiple times, the true estimate would be somewhere in this range.

For example, on page 9, we see that 46% of of Inuit adults in Winnipeg speak Inuktitut and English at home, with a 95% CI: 32.5, 59.6 (see Appendix, page 39). That means that if the OHC Inuit Winnipeg study was repeated multiple times, the true estimate of Inuit in Winnipeg who speak Inuktitut and English at home would be somewhere between 32.5% and 59.6%. This example shows moderate variance (-13.5,+13.6).

What Do We Mean by Variance?

If there is a difference of less than +10/-10 in the 95% CI, we consider this “low variance”. If there is a difference of less than +15/-15, we consider this “moderate variance”. If there is a difference greater than +15/-15, we consider this “high variance”.

Low to moderate variance means that we have a more precise estimate of the Inuit population in Winnipeg, while high variance means that there is more uncertainty about our population estimate, and it might not be representative of the entire Inuit population in Winnipeg. Smaller sample sizes (fewer surveys completed) can result in higher variance.

Our Health Counts Inuit Winnipeg

OUR POPULATION: DEMOGRAPHICS

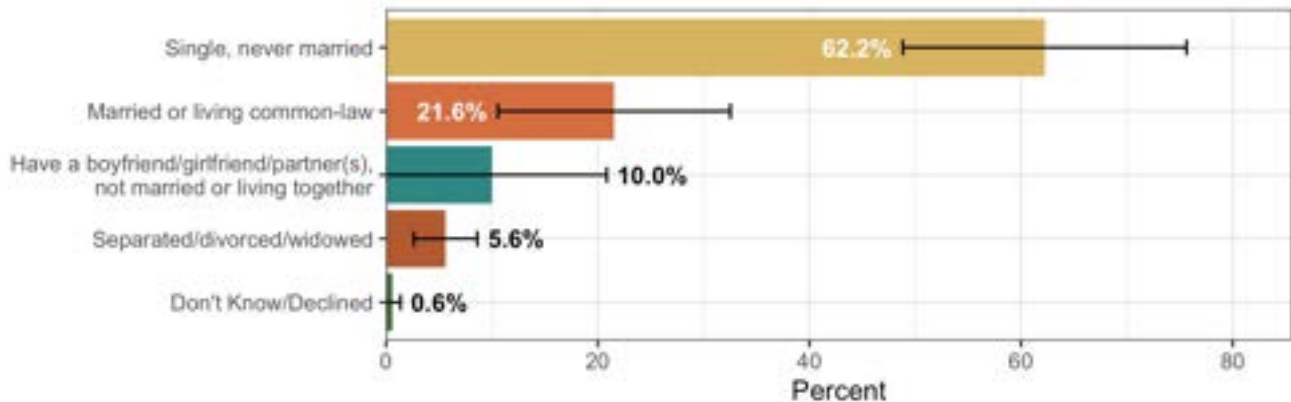
52% of Inuit adults in Winnipeg identify as **female** and **48%** identify as **male**

8% of Inuit adults in Winnipeg identify as **Two-Spirit**

4% of Inuit adults in Winnipeg identify as **2SLGBTQIA+**

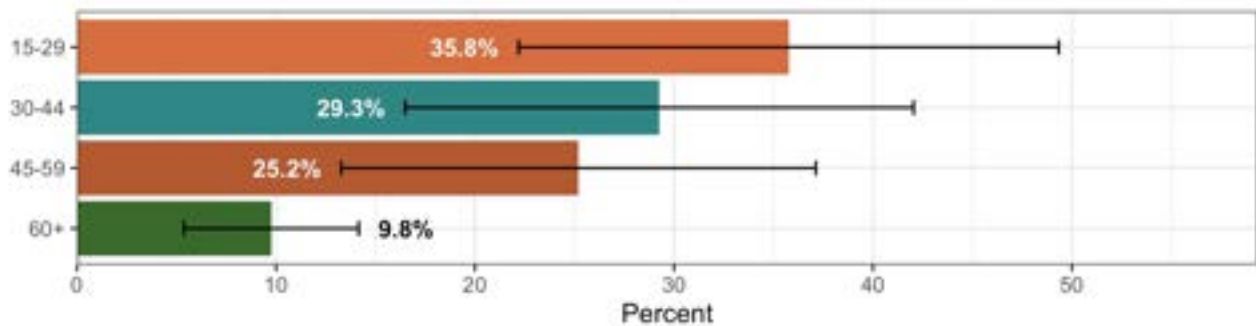
62% of Inuit adults in Winnipeg are **single/never married**

Relationship Status among Inuit in Winnipeg



36% of Inuit adults in Winnipeg are **15-29 years of age**

Age Range of Inuit in Winnipeg



Our Health Counts Inuit Winnipeg

RECOMMENDATIONS MOVING FORWARD



The Inuit adult population in Winnipeg is youthful. Almost 4 out of 10 adults are 29 years of age or younger.

- In accordance with the **MMIWG Call for Justice 16.42¹**, we call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit organizations to **ensure the long-term, sustainable, and equitable funding of Inuit women's, youths', and 2SLGBTQIA+ peoples' groups.**
- Funding must meet the capacity needs and respect Inuit self-determination, and must not be tied to government priorities and agenda.
- **More than half (56%) the Inuit population in Winnipeg speak Inuktitut as their primary language at home.** Building on the **MMIWG Call for Justice 16.3**, we call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit organizations to **allocate appropriate funding to sustain and increase access to culturally appropriate, Inuit language programs in the City of Winnipeg, to ensure access to services in Inuktitut, and to invest in the capacity to do so.**



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INCOME INSECURITY & EMPLOYMENT BARRIERS

Far too many Inuit in our community are living in poverty.

Inuit adults in Winnipeg face much higher levels of poverty than others in the city.

71% of the Inuit population in Winnipeg live at or below the before tax low-income cut-off (BT-LICO).*

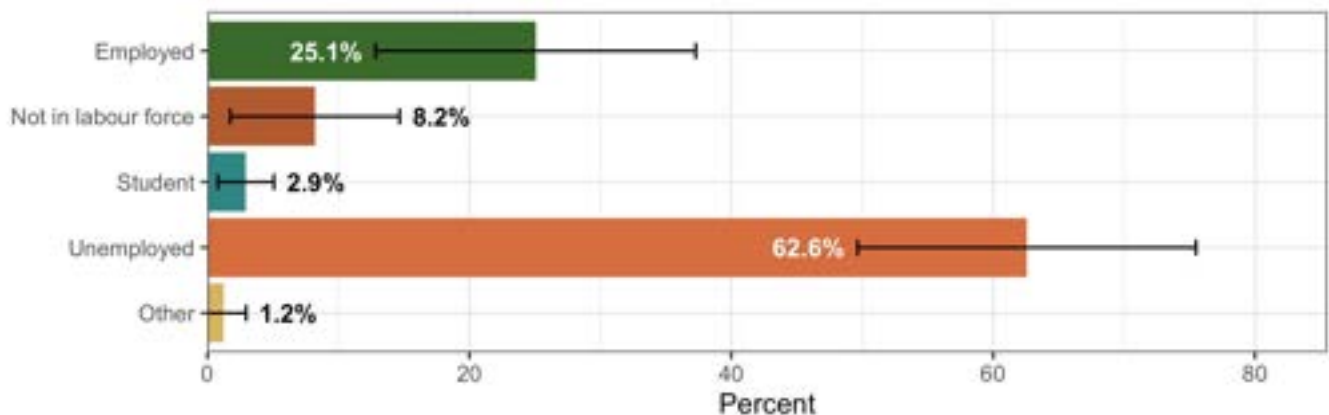
For comparison, 11% of the overall population in Winnipeg lives in poverty (at or below the BT-LICO).²

Many Inuit in Winnipeg also face challenges finding employment.

41% of Inuit in Winnipeg identify employment as a challenge their community is facing.

63% of Inuit in Winnipeg are unemployed. The city's overall unemployment rate is 7%.³

Employment among Inuit adults in Winnipeg



***What is the Below Tax Low-Income Tax Cut-Off (BT-LICO)?**

LICO is used to measure poverty in Canada. LICO can be calculated before tax (BT) or after tax (AT). Families or individuals who spend 70% or more of their income on necessities like food, shelter, and clothing live at or below LICO.¹ BT-LICO is calculated using population size and household size.⁹ We used 2021 income categories for cities with a population of 500,000 or more. 2021 categories match the most recent Canadian census at the time we carried out the OHC Inuit Winnipeg survey.

COMPLETING MAINSTREAM EDUCATION

Many Inuit adults in Winnipeg have not completed mainstream education.

44% of Inuit in Winnipeg identify education & training opportunities as a challenge their community is facing.

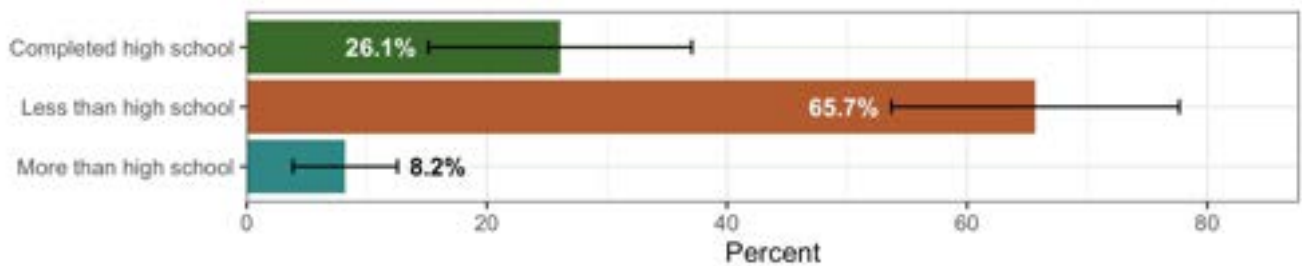
66% of Inuit adults in Winnipeg have not finished high school.

For comparison, 15% of the overall population in Winnipeg have not finished high school.⁵

8% of Inuit adults in Winnipeg have attended college, university, or specialized training (more than high school)

In comparison, 56% of the overall population in Winnipeg have attended college, university, or specialized training.⁵

Highest Level of Schooling among Inuit in Winnipeg



Research and lived experience show that economic, education, and housing injustices have a negative impact on the health and wellbeing of Inuit relatives living in cities.⁵

Our Health Counts Inuit Winnipeg

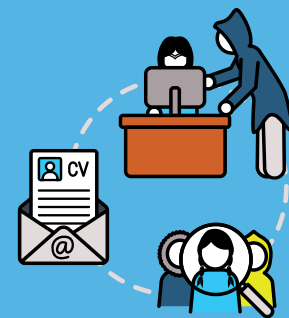
RECOMMENDATIONS MOVING FORWARD

OHC findings show an urgent need to address socio-economic injustices for Inuit community members living in Winnipeg.

Inuit adults in Winnipeg face higher levels of poverty and unemployment than the overall population in the city.

Inuit adults in Winnipeg also report lower levels of mainstream education completion.

Over 4 out of 10 Inuit in Winnipeg identify access to employment and education as two of the key challenges their community is facing.



We call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit organizations to achieve the following:

- In accordance with the MMIWG Report Call to Justice 4.5,¹ work to **immediately establish a guaranteed annual liveable income for all Canadians, including Indigenous peoples, to meet all their social and economic needs.**
- In accordance with the Truth and Reconciliation Commission's Calls to Action,⁷ develop a joint strategy to **eliminate educational and employment gaps between Inuit and non-Indigenous Canadians.**
- All educators and employment services must undergo extensive anti-racism and Inuit-specific cultural safety training.



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THE RIGHT TO ACCESS SAFE, AFFORDABLE HOUSING

75% of Inuit adults in Winnipeg identify
housing as a challenge their community is facing

Almost 3 in 10 Inuit in Winnipeg are precariously housed or in transition
(precarious housing refers to unstable, unsafe, and/or temporary housing conditions)

8% are living homeless



Among Inuit in Winnipeg who are stably housed (62%), many still face housing inequities.

Almost 5 out of 10 live in overcrowded conditions

Overcrowded dwellings are where there is more than 1 person per room (not including bathrooms, hallways, and rooms used exclusively for business purposes)

42% live in homes in need of major repairs

These are homes that have defective plumbing or electrical wiring and/or that need structural repairs to walls, floors or ceilings

In the past 2 years, **almost half (45%) have had a problem with pests in their home**
(like bedbugs, centipedes, ants, wasps, bees, mice, rats, cockroaches, and/or other bugs)

31% are concerned about poor air quality in their home.

MOVING TO WINNIPEG, MOVING FROM NORTH TO SOUTH

17% of Inuit adults who live in Winnipeg have lived in the city all their lives

59% of Inuit adults who live in Winnipeg moved from an Inuit community or land claim territory

12% moved from a small town or rural community

10% moved from another city in Canada

Inuit adults who moved to Winnipeg (have not lived in Winnipeg all their lives), have lived in the city for an average of **11 years**.

Reasons for Moving to Winnipeg

For Inuit in Winnipeg, the most common reasons for moving to the city include

Employment (45%)*

Family/friends/social networks (36%)*

Healthcare (30%)*



“Winnipeg is home to many Inuit and serves as a medical hub for people from the Kivalliq region. Each year, around 20,000 medical trips are made from the North to Winnipeg—many of which result in Inuit staying long-term to access lifesaving treatment.

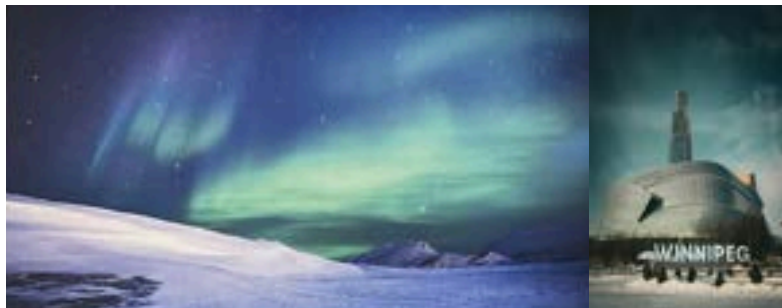
Despite this, Inuit often encounter barriers in the healthcare system, including racism, dismissal, and a lack of culturally safe care.” - *OHC Inuit Winnipeg Survey Lead*

Our Health Counts Inuit Winnipeg

MOVING TO WINNIPEG, MOVING IN THE CITY

The most common challenges for Inuit moving from the North to Winnipeg include

- Obtaining Identification (34%)***
- Access to Transportation (34%)**
- Access to Housing (23%)**
- Communication/Language (21%)**
- Obtaining a Manitoba Health Card (13%)**



76% of Inuit adults currently reside in the City of Winnipeg

24% of Inuit adults are in Winnipeg to access services and/or employment

65% of Inuit adults who reside in Winnipeg **moved 1 OR MORE times in the past year**

This is 4½ times higher than the overall population in Winnipeg, where 14% moved 1 or more times in the past year⁸

For Inuit movers, **51%** of these moves were **within Winnipeg*** and **46%** were **between Winnipeg and an Inuit Community**

84% of Inuit adults who reside in Winnipeg **moved 1 OR MORE times in the past 5 years**

This is 2x higher than the overall population in Winnipeg, where 41% moved 1 or more times in the past 5 years.⁸

** high variance*

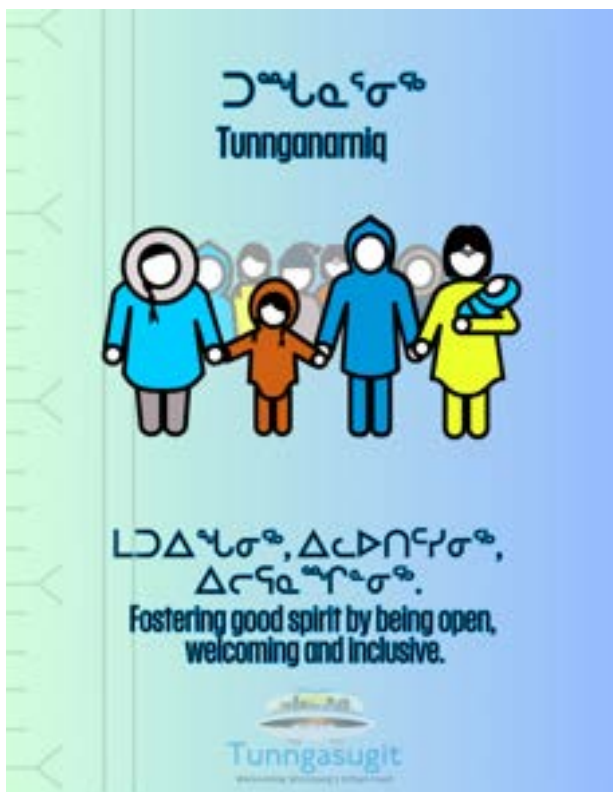
Our Health Counts Inuit Winnipeg

RECOMMENDATIONS MOVING FORWARD

A lack of safe, affordable housing - and racism in the Winnipeg housing market - mean that **Inuit families in Winnipeg face unsafe living conditions, higher rates of mobility, and increased risk of homelessness.**

To address the urgent need for housing, we call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit communities and organizations to:

- **Support Inuit and settler housing organizations to address Inuit housing needs in culturally appropriate ways.** One way to do so is to **ensure that housing responses are led by Inuit and grounded in Inuit Qaujimajatuqangit values.**
- Implement Inuit-specific **Cultural Safety training** for housing agency staff and leadership.
- Scale **affordable, sustainable, and culturally appropriate Inuit housing, shelter, and related programs so they are matched to Inuit needs.**



A barrier that we're seeing with our community members is that lack of housing support, the lack of housing. We have a number of Inuit who are staying in hotels and in Airbnbs [for up to a year] trying to look for housing. And the majority of the time we're hearing from our community members that it's discrimination, it's racism..."
Nikki Komaksiutiksak, Founding Board Member



Our Health Counts Inuit Winnipeg

THE LEGACY OF COLONIZATION

The impacts of colonialism are deep. They include racism and family disruption through residential schools and inappropriate child and family services (CFS) involvement. **26% of Inuit in Winnipeg have identified racism as a key challenge their community is facing.** Despite this legacy of colonization, OHC Inuit Winnipeg findings also show the strengths of Inuit community, language, and in the sharing of traditional country foods (*see Our Population: Demographics, Access to Country Foods, and Community Strengths of this report*).

Sensitive Content: The following section shares sensitive information related to forced relocation, Child & Family Services (CFS), mental wellness, and suicide. Support is available 24 hours a day for anyone affected by this content. The Hope for Wellness line is available at 1-855-242-3310. The national MMIWG support line is available at 1-844-413-6649.

FORCED RELOCATION

27%* of Inuit in Winnipeg were forced by the federal government to move from their community to a new location chosen by the government - or had family members who were forced to do so.

51% of those who experienced forced relocation indicated that this had a negative impact on their overall health and well-being.

CHILD & FAMILY SERVICES (CFS) INVOLVEMENT

Almost 1 in 4 Inuit adults in Winnipeg reported that CFS **had been involved in their care as a child.**

13% of Inuit parents reported that **CFS had been involved in the care of one or more of their children.**

23% of Inuit adults who had CFS involved in the care of their family, said their **overall health and wellbeing was negatively impacted.***

** high variance*

Our Health Counts Inuit Winnipeg

MENTAL WELLNESS & SUICIDE PREVENTION

60% of Inuit adults in Winnipeg have had a **close friend or family member** die by suicide.

31% of Inuit adults in Winnipeg have thought about dying by suicide.

More than **7 out of 10** Inuit in Winnipeg **have attempted to die by suicide.**

Research shows that these factors reduce the risk of suicide for Inuit in Winnipeg and Inuit Nunangat:

- Equitable access to employment, education, and housing
- Safe, timely access to health care
- Connection to Inuit culture and language
- Family and social connections

The factors in this list are also **COMMUNITY STRENGTHS identified by Inuit in Winnipeg.** These strengths create a community of support and hope.



Many participants shared deeply personal experiences regarding their mental wellness. These conversations made it clear that our Inuit community in Winnipeg has a strong need for increased mental health support.
-OHC Inuit Winnipeg Coordinator

Our Health Counts Inuit Winnipeg

MENTAL WELLNESS & SUBSTANCE USE

More than 3 in 10* Inuit adults in Winnipeg have experienced an overdose

More than 1 in 4 Inuit adults have had a close friend or family member die by overdose

The Kessler Psychological Distress Scale (K-10) was used to assess depression among Inuit adults in Winnipeg. K-10 is a validated 10-item scale used to measure a person's psychological distress, depression, and anxiety symptoms. Adults are asked 10 questions about how often they experienced anxiety or depression in the previous month. Answers range from 1 ("none of the time") to 5 ("all of the time"). The scores from each response are then added up. The total will range between 10 and 50.

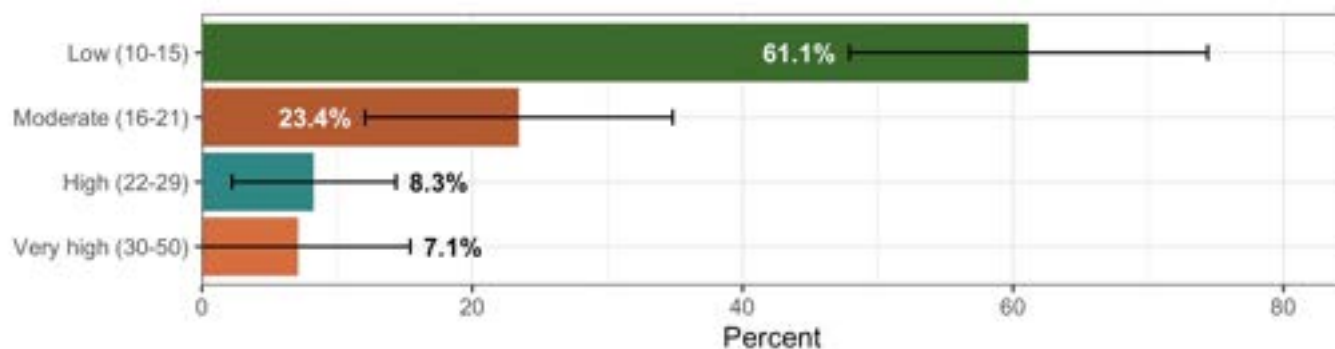
A score of 10 indicates no distress and a score of 50 indicates severe distress. Scores are categorized as low (10–15), moderate (16–21), high (22–29), and very high (30–50).⁹

Most Inuit in Winnipeg (85%) have low to moderate Kessler scores indicating that they have low to moderate symptoms of depression and/or anxiety.

15% scored high or very high indicating they experience more severe symptoms of depression and/or anxiety.

While Inuit in Winnipeg show strength and resilience, high rates of suicide, overdose from substance use, and a legacy of colonization indicate that there is an urgent need to address and nurture Inuit mental wellness.

Kessler Distress Categories, among Inuit Adults in Winnipeg



** high variance*

Our Health Counts Inuit Winnipeg

RECOMMENDATIONS MOVING FORWARD

Inuit in Winnipeg - and across Inuit Nunangat - face some of the highest suicide rates in Canada. Inequities rooted in **colonialism and social and economic injustices** (such as lack of housing, food insecurity, and everyday racism) increase the risk of suicide. Addressing these inequities is critical to suicide prevention.¹⁰



Connection to language, culture, and country foods have been shown to reduce substance use, decrease the risk of death by suicide, build self-esteem, and support mental health and connection among Inuit.

In accordance with the **MMIWG Calls for Justice 7.3 and 16.13**,¹ we call on the City of Winnipeg, provincial, and federal governments, and health service providers to work in partnership with Inuit communities and organizations to:

- **Implement the National Inuit Suicide Prevention Strategy**
- **Provide sustainable funding for Inuit-led prevention initiatives to ensure culturally safe, trauma-informed mental health and suicide prevention services are available to Inuit adults, youth, and families living in Winnipeg.** This includes an adequately funded and accessible Inuit-led help line and related programming.
- Ensure service providers are culturally competent and educated in Inuit culture, laws, and values, as well as the history of colonial violence perpetuated by the Canadian state against Inuit.

In alignment with the Truth and Reconciliation Commission's Calls to Action⁷

- **Provide sustainable funding** for existing and new Inuit healing spaces **to address the physical, mental, emotional, and spiritual harms caused by colonial injustices** such as forced relocation and CFS-related family disruptions.

Our Health Counts Inuit Winnipeg

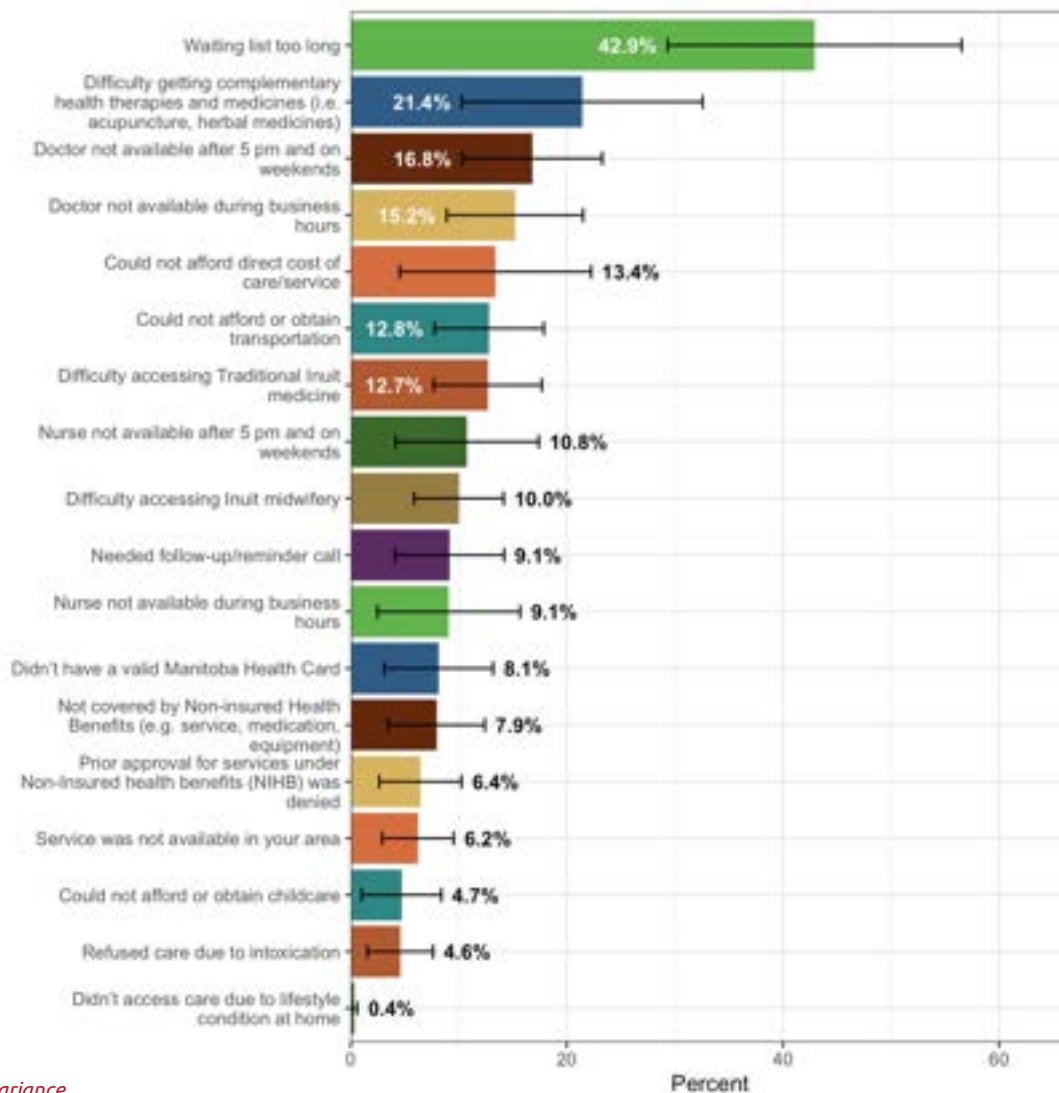
THE RIGHT TO ACCESSIBLE HEALTH CARE

Far too many Inuit in Winnipeg face **BARRIERS TO SAFE, TIMELY HEALTH CARE.**

Common barriers include **long waiting lists (43%), difficulty getting complimentary health therapies (21%), doctor availability (15%), transportation (13%), and access to traditional Inuit medicine (13%).**

Obtaining a valid **Manitoba Health Card (8%)** is another barrier to care. **43%** of Inuit who applied for a Manitoba Health Card **have been waiting longer than the standard processing time**, which is 2-4 weeks.

During the past 12 months, have you experienced any barriers to receiving health care?



** high variance*

Our Health Counts Inuit Winnipeg

PREVENTATIVE HEALTH CARE

66% of Inuit in Winnipeg have **NOT** had a full health review/check up with a doctor, nurse, or complementary health practitioner in the past 12 months

26% of Inuit in Winnipeg have been tested for HIV

45% of Inuit in Winnipeg have **NOT** had a health care professional check their blood pressure in the past 12 months

ACTIVITY LIMITATIONS

About **1 in 3 Inuit** adults in Winnipeg are limited in the amount of activity - or kinds of activities - that they can do in their daily lives.

26% are limited due physical health (including injury)

36% are limited due to mental health



Tunnganarniq
(fostering good spirit by being open, welcoming and inclusive)

Tunnganarniq emphasizes the role that being open, welcoming and inclusive plays in fostering positive relationships.



CROSS-CULTURAL BARRIERS TO HEALTH CARE

Inuit in Winnipeg identified the following barriers to care:

15%

have **trouble understanding what their health care provider is saying**
(for example, technical language that is hard to understand)

10%

need an interpreter and there is not one available, some or all of the time

7%

are **misunderstood by their health care provider**

6%

don't trust their health care provider

6%

feel uncomfortable with the health care provider because they are
not culturally understanding of Inuit

4%

feel uncomfortable with the health service because it is
not culturally appropriate for Inuit



Inuuqatigiitsiarniq (Respecting others, relationship, and caring for people)

Inuuqatigiitsiarniq guides us to respect and care for other people and our relationships so that we can all live together in harmony.

Tunggasugit is committed to addressing issues facing Inuit in Winnipeg and related homelands in a way that respects all.

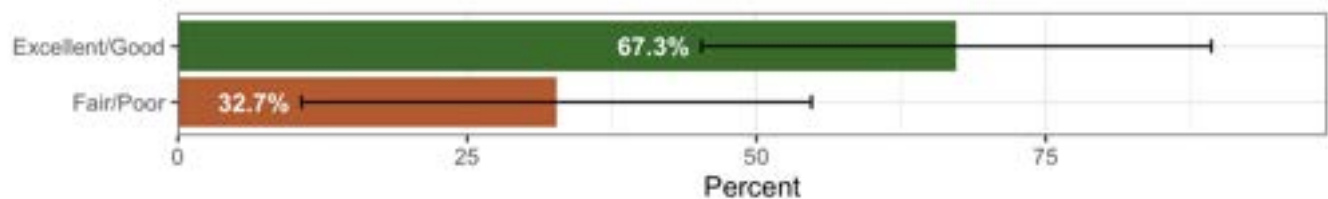
Our Health Counts Inuit Winnipeg

THE RIGHT TO HEALTH CARE



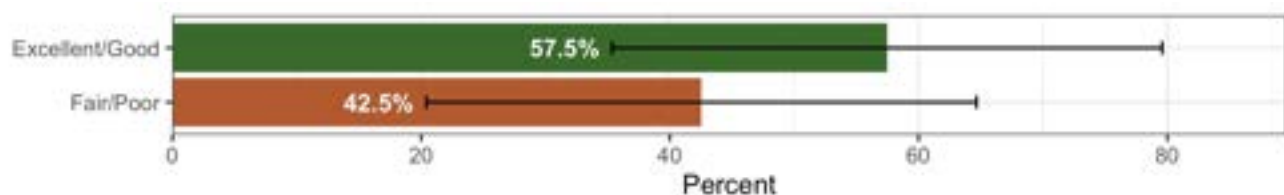
17% of Inuit adults in Winnipeg accessed emergency or urgent care at a hospital in the past 12 months. **33%** reported that the quality of care they received was fair or poor.*

Thinking about your most recent visit to the hospital emergency room or urgent care centre, how would you rate the quality of care you received at that time?



24% of Inuit adults in Winnipeg spent 1+ nights as a hospital patient in the past 5 years. **43%** reported that the quality of care they received was fair or poor during their hospital stay.*

Thinking of your most recent hospital stay, how would you rate the quality of care you received at that time?



19% of Inuit adults in Winnipeg have been treated unfairly by a health or social service provider because they are an Inuk

21% of Inuit adults in Winnipeg feel that their overall health and wellbeing has been affected by racism

* high variance

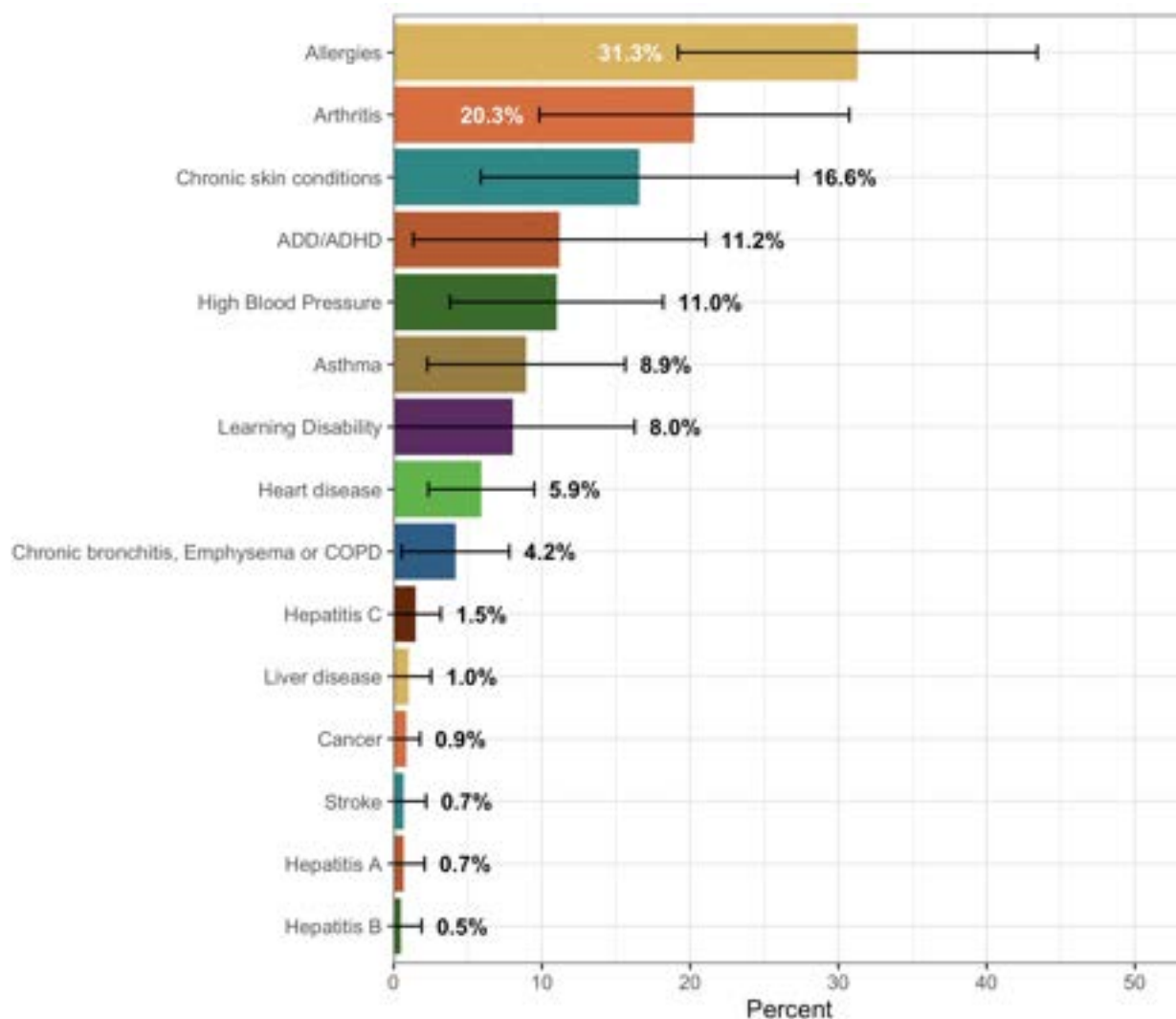
Our Health Counts Inuit Winnipeg

CHRONIC HEALTH CONDITIONS

Chronic health conditions are conditions expected to last 6 months or more.

The most commonly diagnosed chronic health conditions among Inuit in Winnipeg include

- Allergies (31%)**
- Arthritis (20%)**
- Chronic skin conditions (17%)**
- ADHD (11%)**
- High blood pressure (11%)**
- Asthma (9%)**



Our Health Counts Inuit Winnipeg

RECOMMENDATIONS MOVING FORWARD

Health services available to Inuit in Winnipeg are inadequate. OHC Inuit Winnipeg findings show critical barriers and gaps in access to timely, appropriate health care. Health care systems - and the health care providers within these systems - should be held accountable, and work together with Inuit leadership to address gaps in access to health care for all.¹¹

We call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit communities and organizations to

- **Increase equitable access to primary care providers and health care services.**
- Support culturally safe and Inuit specific processes so that Inuit who have moved to Winnipeg can receive their Manitoba Health card in a timely manner.
- **Mandate anti-Indigenous racism policies** at a systems level and Indigenous Cultural Safety training in health care settings, **with a focus on Inuit-specific policies.**
- Develop and implement programs and services to **improve access to Inuit country foods, ceremonies, and medicines.**
- Create **dedicated spaces in hospitals and clinics** for **Inuit-specific cultural practices and ceremonies.**
- Actively work to recruit and retain Inuit health care providers and professionals in the City of Winnipeg.
- Actively recruit Inuit to senior positions to oversee and promote necessary system change.



Well Living House



Our Health Counts Inuit Winnipeg

FOOD SECURITY & NUTRITION

FOOD SECURITY

64% of Inuit adults in Winnipeg are food insecure.

44% have enough to eat, but not always the kinds of foods that they want

20% sometimes or often do not have enough to eat.

In Winnipeg, **27%*** of Inuit who are food insecure **do not have a place to go if they or their families don't have enough to eat.**

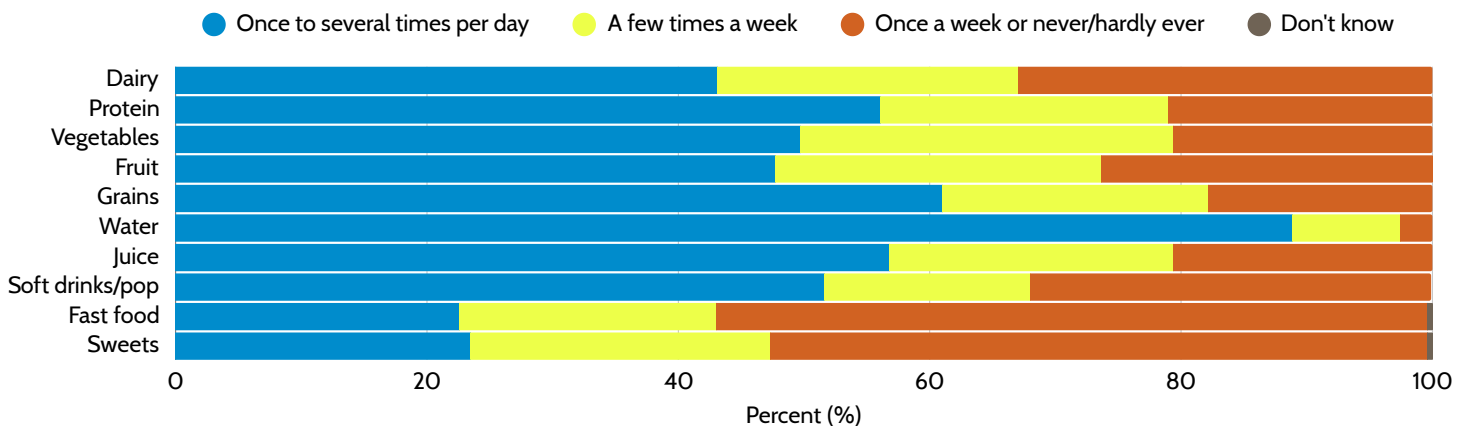


NUTRITION

Despite these barriers to food security, Inuit adults in Winnipeg drink water (89%), and eat protein (56%), vegetables (50%), and fruit (48%) one or more times a day.

Many have pop (68%), fast food (43%) and sweets (48%) a few times a week or more.

Thinking about the past week, how often do you eat or drink the following foods?



* high variance

Our Health Counts Inuit Winnipeg

ACCESS TO COUNTRY FOODS

77% of Inuit adults in Winnipeg had country foods often or a few times in the past year

25% had no country foods in the past year

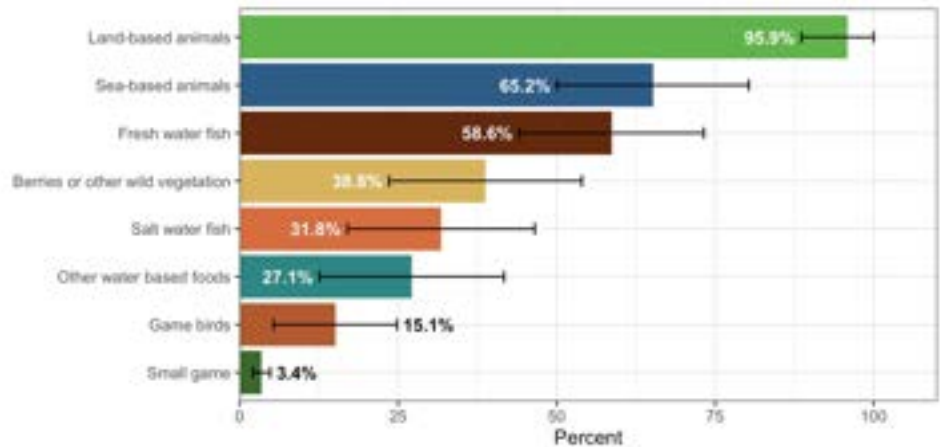
87% would prefer to eat more country foods

The most eaten country foods by Inuit in Winnipeg include

Land-based animals (96%)

Sea-based animals (65%)

Fresh water fish (59%)



One of the issues with country foods in the South is that they cause more problems when people from the North come South and can't get them fresh. These foods are often processed in a plant and then shipped South, making it harder to share them with others due to these barriers.

-OHC Inuit Winnipeg survey participant



Our Health Counts Inuit Winnipeg

RECOMMENDATIONS MOVING FORWARD

Country foods are connected with Inuit culture, wellness, and community.¹²

We call on the City of Winnipeg, provincial, and federal governments to work in partnership with Inuit communities and organizations to

- **Support and address pathways to increase access to country foods.**
- **Increase funding and availability of urban-based Inuit food strategies that address the distinct needs of Inuit relatives in urban areas like Winnipeg.**
- **Increase support and funding for the provision of country foods to Inuit patients in hospital and the implementation of Inuit-led food skill workshops.**



Well Living House



Our Health Counts Inuit Winnipeg

COMMUNITY STRENGTHS

The main community strengths among Inuit in Winnipeg include

Family values (80%)

Use of Inuktitut (59%)

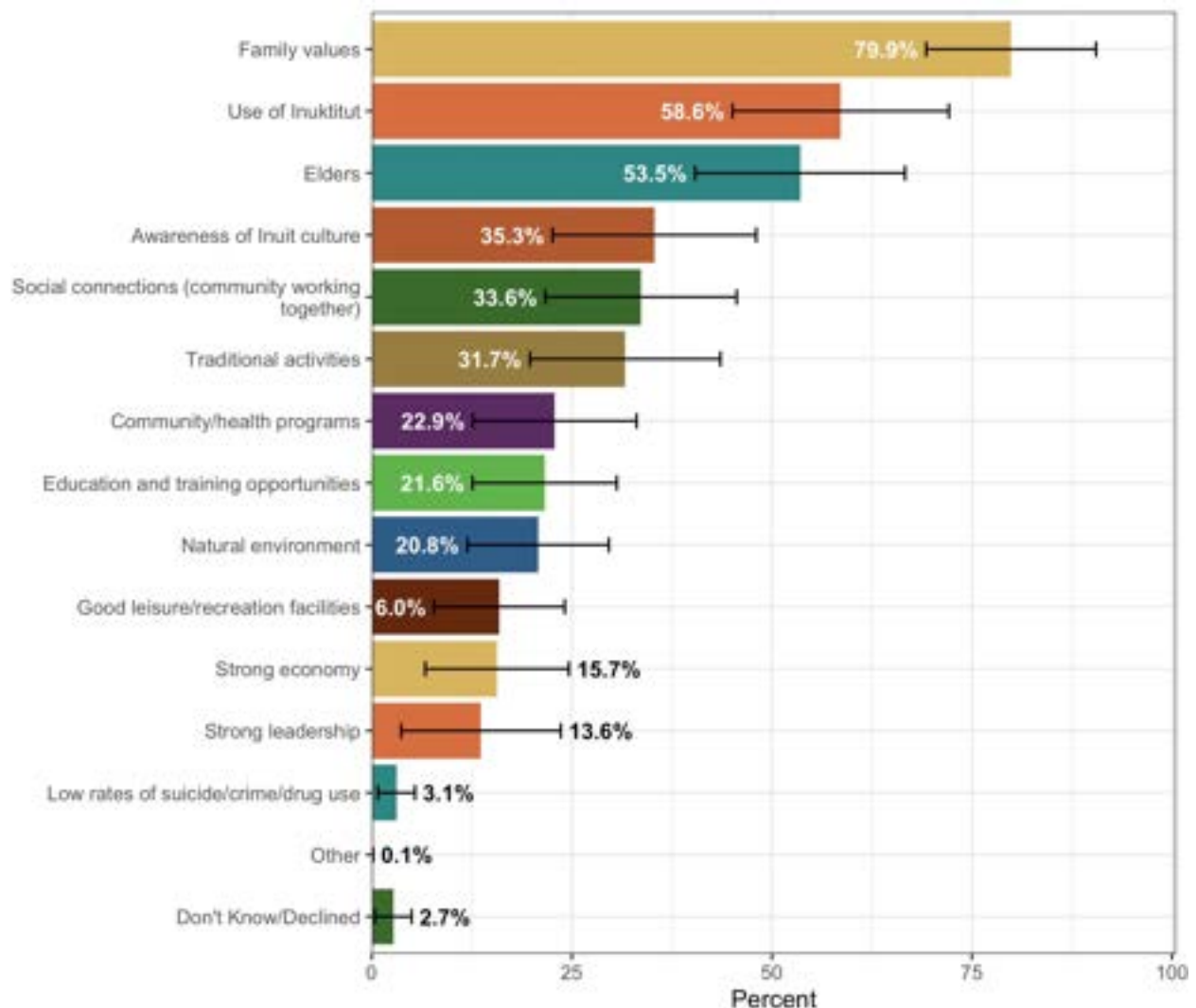
Elders (54%)

Awareness of Inuit culture (35%)

Social connections/community working together (34%)



What are the Main Strengths of your Community?



Our Health Counts Inuit Winnipeg

COMMUNITY CHALLENGES

The main community challenges faced by Inuit in Winnipeg include

Housing (75%)

Poverty (44%)

Education & Training Opportunities (44%)

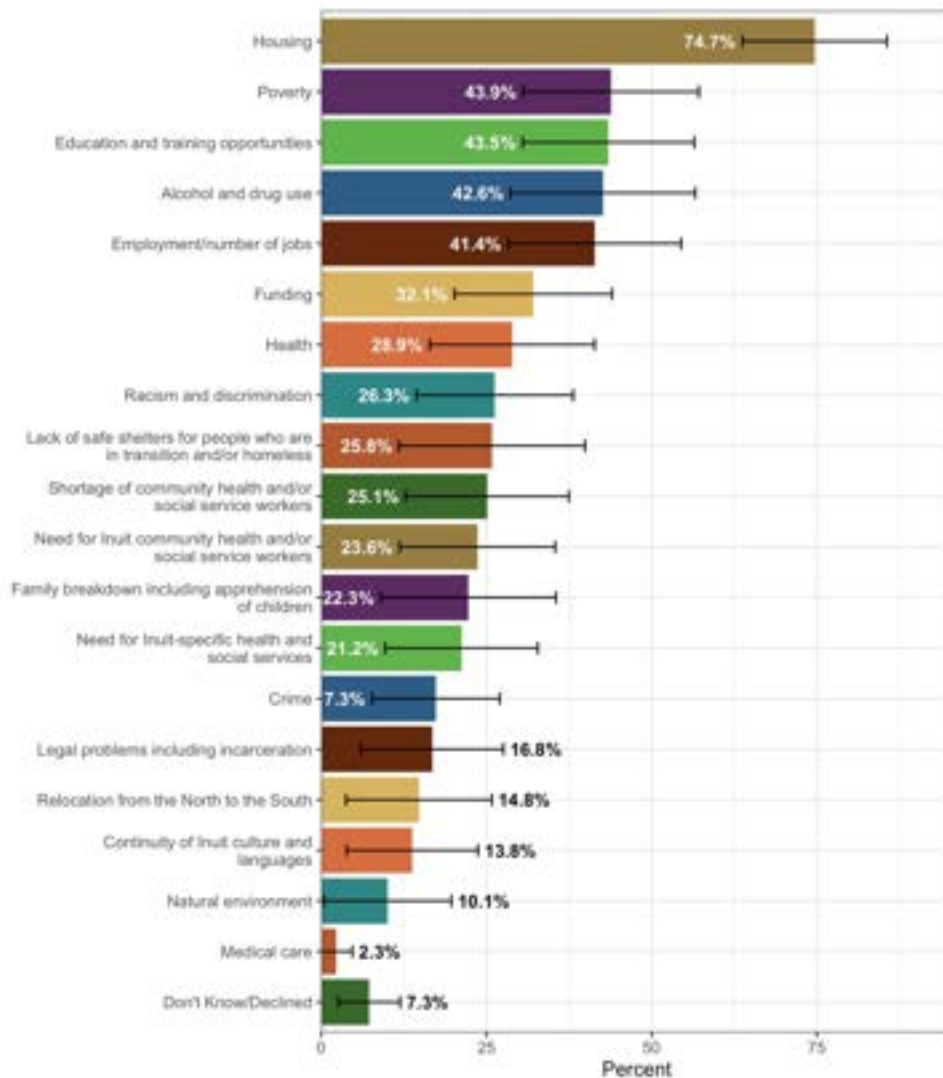
Alcohol and Drug Use (43%)

Employment/Number of Jobs (42%)

The need for Inuit-specific health and social services (22%)



What are the Main Challenges your Community is Currently Facing?



Our Health Counts Inuit Winnipeg

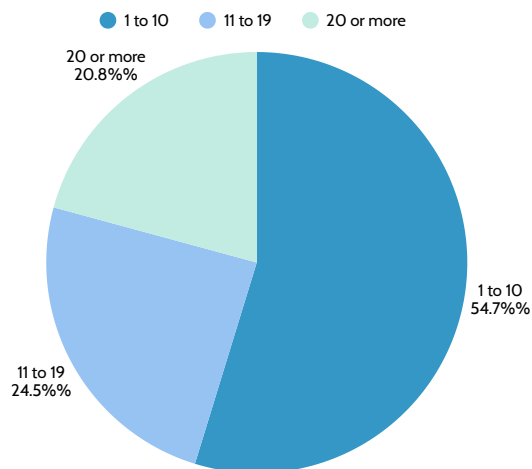
CIGARETTE SMOKING

71% of Inuit adults in Winnipeg smoke cigarettes

In comparison, 14% of Manitobans are cigarette smokers

Most Inuit in Winnipeg (55%) smoke 1-10 cigarettes a day.

On average, how many cigarettes do you smoke a day?

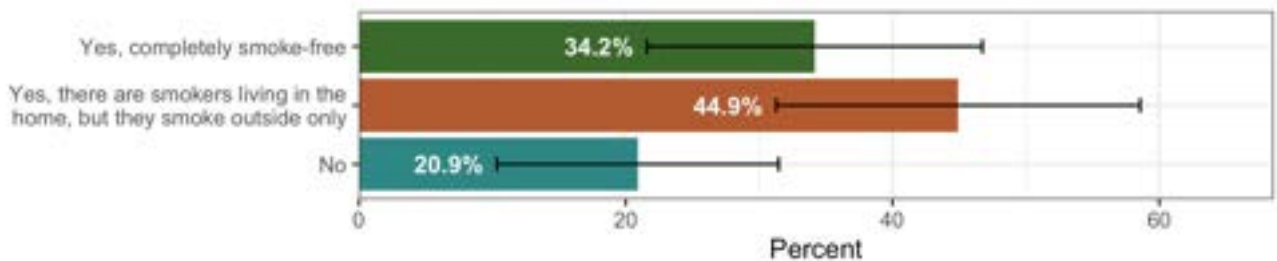


46% of Inuit adults in Winnipeg have tried to quit 1 or more times in the past 12 months

34% live in a completely smoke-free home

21% do not live live in a smoke-free home

Do you have a smoke free home?



Recommended citation: Snyder, M., Avery, L., Angoo, M., Sammurtok, A., Blais, G., & Smylie, J. (2026). Our Health Counts Inuit Winnipeg Respectful Health Survey Results. Community Report. Tunngasugit Inuit Resource Centre, Inc. Winnipeg, Manitoba.

Dr. Janet Smylie is funded as a Tier 1 Canada Research Chair in Advancing Generative Health Services for Indigenous Populations in Canada.



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Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
What is your gender?	
Male	48.0% (34.5, 61.5)
Female	51.9% (38.4, 65.4)
Trans/Gender Diverse	0.1 (0.0, 0.1)
Do you identify as a Two-Spirit person?	
Yes	7.8% (2.6, 13.1)
No	90.5% (83.0, 97.9)
Don't Know/Declined	1.7% (0.0, 7.5)
How do you identify your sexual orientation?	
Straight/Heterosexual	94.0% (86.3, 100.0)
2SLGBTQIA+	4.2% (0.0, 11.8)
Don' Know/Declined	1.8% (0.4, 3.3)
Age Group	
15-29	35.8% (22.2, 49.3)
30-44	29.3% (16.5, 42.0)
45-59	25.2% (13.3, 37.1)
60+	9.8% (5.4, 14.2)
What is your current relationship status?	
Single, never married	62.2% (48.8, 75.6)
Married or living common-law	21.6% (10.6, 32.5)
Have a boyfriend/girlfriend/partner(s), not married or living together	10% (0.0, 20.9)
Separated/divorced/widowed	5.6% (2.6, 8.6)
Don't Know/Declined	0.6% (0.0, 1.4)
Are you a beneficiary of an Inuit land claim?	
Yes	92.4% (88.3, 96.5)
No	6.7% (3.2, 10.1)
Don't Know/Declined	1.0% (0.0, 3.2)
Do you identify as having mixed Indigenous ancestry?	
Yes, First Nations	8.1% (3.3, 12.9)
Yes, First Nations & Metis	0.4% (0.0, 1.0)
Yes, Metis	3.9% (0.0, 10.1)
No	86.1% (78.5, 93.8)
Don't Know/Declined	1.5% (0.2, 2.7)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
What language(s) do you speak most often at home?	
Inuktitut and English	46.0% (32.5, 59.6)
English	44.5% (30.9, 58.2)
Inuktitut	9.5% (2.8, 16.1)
LICO-BT (Low Income Cut-off, Before Tax)	
Above LICO-BT	29.5% (17.5, 41.6)
Below LICO-BT	70.5% (58.4, 82.5)
Employment	
Unemployed	62.6% (49.6, 75.5)
Employed	25.1% (12.8, 37.3)
Not in labour force	8.2% (1.7, 14.7)
Student	2.9% (0.8, 5.1)
Other	1.2% (0.0, 3.0)
Education	
Less than high school	65.7% (53.7, 77.7)
Completed high school	26.1% (15.1, 37.1)
More than high school	8.2% (3.9, 12.6)
Which of the following best describes the type of dwelling you live in?	
Stably housed	61.9% (47.7, 76.1)
Precariously housed/in transition	28.4% (15.4, 41.5)
Homeless/houseless	8.2% (0.0, 19.5)
Don't Know/Declined	1.5% (0.0, 5.9)
Overcrowding	
Enough space	52.7% (37.1, 68.2)
Overcrowded	47.3% (31.8, 62.9)
Is your dwelling in need of any major repairs?	
Yes	41.5% (26.1, 57.0)
No	58.3% (42.8, 73.8)
Don't Know/Declined	0.1% (0.0, 0.2)
In the last 2 years, have you had a problem in your home with pests?	
Yes	45.4% (29.9, 60.9)
No	54.1% (38.6, 69.7)
Don't Know/Declined	0.4% (0.0, 1.5)
Are you concerned about poor air quality in your home ?	
Yes	30.5% (16.1, 44.8)
No	69.4% (55.1, 83.8)
Don't Know/Declined	0.1% (0.0, 0.4)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Do you live in Winnipeg?	
Yes	75.9% (61.8, 90.1)
No	24.1% (9.9, 38.2)
If no, do you currently use health or social services/programs in the City of Winnipeg?	
Yes	95.9% (91.3, 100.0)
No	4.1% (0.0, 8.7)
If yes, where did you live before Winnipeg?	
I have lived in Winnipeg all my life	17.3% (7.8, 26.8)
Inuit community or land claim territory in Canada	58.6% (44.3, 72.9)
First Nation reserve in Canada	2.8% (0.0, 11.0)
Small town or rural area in Canada	11.5% (0.9, 22.2)
Canadian city	9.7% (2.8, 16.6)
International	0.1% (0.0, 0.2)
What were your reasons for moving to Winnipeg?	
Family/Friends/Social Networks	35.7% (4.8, 66.6)
Employment	44.5% (9.7, 79.4)
Education	4.4% (0.0, 11.6)
Housing	13.2% (0.0, 50.5)
Healthcare	30.4% (0.0, 70.1)
Safety	1.9% (0.0, 6.3)
Other	7.9% (0.0, 21.6)
Dont' Know/Declined	0.4% (0.0, 1.3)
Were there any challenges when you were moving from the north to Winnipeg? (check all that apply)	
Transportation	33.5% (17.4, 49.5)
Communication/Language	20.8% (8.9, 32.7)
Obtaining a Manitoba Health Card	13.4% (3.6, 23.3)
Obtaining identification (ID)	33.6% (13.4, 53.8)
Housing	23.2% (8.3, 38.1)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
How many times, if any, have you moved in the past 1 year?	
None	30.1% (18.6, 41.5)
Once	34.9% (21.5, 48.3)
2-4 times	28.4% (14.1, 42.7)
5 or more times	1.9% (0.0, 5.3)
Don't Know/Declined	4.8% (1.4, 8.1)
How many times, if any, have you moved in the past 5 years?	
None	15.2% (5.6, 24.7)
Once	27.0% (13.5, 40.6)
2-4 times	45.7% (31.9, 59.4)
5 or more times	12.1% (0.0, 24.9)
Where were these moves? (Check all that apply)	
Within the City of Winnipeg	50.6% (35.1, 66.2)
Between the City of Winnipeg and an Inuit community	45.9% (29.4, 62.4)
Between the City of Winnipeg and another city	13.1% (0.0, 27.6)
Between two Inuit communities	7.7% (0.0, 17.8)
Between the City of Winnipeg and another province	7.4% (1.3, 13.5)
Other	0.6% (0.0, 1.5)
Were you or your family members ever forced by the federal government to move from your respective community in the North to a new location chosen by the government?	
Yes	26.6% (17.2, 36.0)
No	69.3% (58.9, 79.3)
Don't Know/Declined	4.1% (0.0, 8.7)
If yes, has your overall health and well-being been affected by this forced relocation?	
Yes, negatively impacted	51.4% (28.4, 74.3)
Yes, positively impacted	1.5% (0.1, 3.0)
No impact	45.6% (21.6, 69.7)
Don't Know/Declined	1.5% (0.0, 3.4)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Was Child and Family Services (CFS) ever involved in your care as a child?	
Yes	22.9% (12.6, 33.2)
No	76.1% (65.7, 86.6)
Don't Know/Declined	1.0% (0.0, 2.9)
Has CFS ever been involved in the care of one or more of your children?	
Yes	12.9% (2.1, 23.7)
No	86.7% (76.0, 97.5)
Don't Know/Declined	0.4% (0.0, 0.9)
Do you believe that your overall health and wellbeing has been affected by the involvement of CFS in your family?	
Yes, negatively impacted	23.2% (7.5, 39.0)
Yes, postively impacted	12.6% (0.0, 36.0)
No impact	62.6% (40.2, 85.0)
Don't Know/Declined	1.5% (0.3, 2.7)
Has a close friend or family member ever died by suicide?	
Yes	60.2% (46.3, 74.0)
No	38.0% (24.3, 51.8)
Don't Know/Declined	1.8% (0.0, 5.7)
Have you ever thought about dying by suicide?	
Yes	31.4% (19.5, 43.2)
No	66.4% (54.4, 78.5)
Don't Know/Declined	2.2% (0.4, 4.0)
Have you ever attempted to die by suicide?	
Yes	72.7% (58.1, 87.4)
No	25.7% (11.4, 40.0)
Don't Know/Declined	1.6% (0.4, 2.7)
Have you ever experienced an overdose?	
Yes	33.5% (15.6, 51.4)
No	66.5% (48.6, 84.4)
Has a close friend or family member ever died by overdose?	
Yes	26.1% (14.9, 37.3)
No	71.9% (60.5, 83.3)
Don't Know/Declined	2.0% (0.7, 3.4)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Kessler Psychological Distress Scale (K10) Category	
Low (10-15)	61.1% (47.9, 74.4)
Moderate (16-21)	23.4% (12.1, 34.8)
High (22-29)	8.3% (2.2, 14.4)
Very high (30-50)	7.1% (0.0, 15.4)
During the past 12 months, have you experienced any of the following barriers to receiving health care?	
Waiting list too long	42.9% (29.3, 56.5)
Difficulty getting complementary health therapies and medicines (i.e. acupuncture, herbal medicines)	21.4% (10.3, 32.6)
Doctor not available after 5 pm and on weekends	16.8% (10.3, 23.3)
Doctor not available during business hours	15.2% (8.9, 21.5)
Could not afford direct cost of care/service	13.4% (4.5, 22.2)
Could not afford or obtain transportation	12.8% (7.7, 17.9)
Difficulty accessing Traditional Inuit medicine	12.7% (7.7, 17.7)
Nurse not available after 5pm and on weekends	10.8% (4.1, 17.4)
Difficulty accessing Inuit midwifery	10.0% (5.9, 14.1)
Needed follow-up/reminder call	9.1% (4.1, 14.2)
Nurse not available during business hours	9.1% (2.5, 15.7)
Didn't have a valid Manitoba Health Card	8.1% (3.1, 13.2)
Not covered by Non-insured Health Benefits (e.g. service, medication, equipment)	7.9% (3.5, 12.4)
Prior approval for services under Non-insured health benefits (NIHB) was denied	6.4% (2.6, 10.2)
Service was not available in your area	6.2% (2.9, 9.5)
Could not afford or obtain childcare	4.7% (1.0, 8.4)
Refused care due to intoxication	4.6% (1.5, 7.6)
Didn't access care due to lifestyle condition at home	0.4% (0.1, 0.6)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Have you had a full health review/check up with a doctor, nurse, or complimentary health practitioner in the past 12 months?	
Yes	33.1% (22.1, 44.1)
No	66.1% (54.8, 77.4)
Don't Know/Declined	0.8% (0.0, 4.4)
Without revealing test results, have you ever been tested for HIV?	
Yes	25.5% (14.0, 36.9)
No	70.4% (58.4, 82.4)
Don't Know/Declined	4.1% (0.0, 9.0)
Has a health care professional checked your blood pressure in the past 12 months?	
Yes	55.5% (41.6, 69.5)
No	44.5% (30.5, 58.4)
Is your activity limited (in the kinds or amount of activity you can do at home, work or otherwise) due to physical health (including injury)?	
Yes	25.9% (13.7, 38.1)
No	73.5% (61.3, 85.7)
Don't Know/Declined	0.6% (0.0, 1.5)
Is your activity limited (in the kinds or amount of activity you can do at home, work or otherwise) due to mental health?	
Yes	35.8% (22.5, 49.1)
No	64.0% (50.7, 77.3)
Don't Know/Declined	0.2% (0.1, 0.3)
In the past 12 months have you experienced communication and/or cross-cultural barriers in accessing healthcare?	
You had trouble understanding what the health care provider was saying	14.8% (3.1, 26.4)
You were misunderstood by the health care provider	6.8% (0.0, 14.9)
You needed an interpreter and some of the time there was not one available	4.9% (0.7, 9.1)
You needed an interpreter and all of the time there was not one available	4.7% (0.5, 8.9)
You didn't trust the health care provider	5.8% (2.4, 9.2)
You were not comfortable with the health care provider because they were not culturally understanding of Inuit (descent)	5.7% (2.2, 9.2)
You were not comfortable with the health service because it was not culturally appropriate for Inuit (descent)	3.7% (1.0, 6.3)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Have you accessed emergency care at a hospital emergency department, or hospital urgent care centre, for yourself in the last 12 months?	
Yes	16.5% (9.2, 23.6)
No	83.2% (76.1, 90.3)
Don't Know/Declined	0.3% (0.0, 0.8)
Thinking about your most recent visit to the hospital emergency room, or hospital urgent care centre, how would you rate the quality of the care you received at that time?	
Excellent/Good	67.3% (45.2, 89.3)
Fair/Poor	32.7% (10.7, 54.8)
Have you spent one or more nights as a patient admitted in a hospital at any time in the past 5 years?	
Yes	24.2% (13.9, 34.5)
No	75.8% (65.5, 86.1)
Thinking of your most recent hospital stay, how would you rate the quality of the hospital care you received at that time?	
Excellent/Good	57.5% (35.3, 79.6)
Fair/Poor	42.5% (20.4, 64.7)
Have you ever been treated unfairly (e.g. treated differently, kept waiting) because you are Inuk by a healthcare or social service provider?	
Yes	20.0% (12.7, 27.2)
No	77.7% (69.7, 85.7)
Don't Know/Declined	2.3% (0.0, 5.4)
Has your overall health and wellbeing been affected by racism?	11.2% (1.3, 21.1)
Yes	20.7% (10.4, 31.0)
No	76.4% (65.7, 87.1)
Don't Know/Declined	2.9% (0.0, 6.4)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Health Conditions (expected to last or have already lasted 6 months or more and have been diagnosed by a health care provider)	
Allergies	31.3% (19.2, 43.4)
Arthritis	20.3% (9.8, 30.7)
Chronic skin conditions	16.6% (5.9, 27.3)
ADD/ADHD	11.2% (1.3, 21.1)
High blood pressure	11.0% (3.8, 18.2)
Asthma	8.9% (2.3, 15.6)
Learning disability	8.0% (0.0, 16.3)
Heart disease	5.9% (2.3, 9.5)
Chronic bronchitis, Emphysema or COPD	4.2% (0.5, 7.8)
Hepatitis C	1.5% (0.0, 3.2)
Liver disease	1.0% (0.0, 2.5)
Cancer	0.9% (0.0, 1.8)
Stroke	0.7% (0.0, 2.2)
Hepatitis A	0.7% (0.0, 2.1)
Hepatitis B	0.5% (0.0, 1.9)
Which of the following statements best describes the food eaten in your household in the past 12 months?	
You and others always had enough of the kinds of food you wanted to eat	35.7% (23.4, 48.0)
You and others had enough to eat, but not always the kinds of food you wanted	43.7% (30.1, 57.2)
Sometimes/often you or others did not have enough to eat	19.8% (9.2, 30.4)
Don't Know/Declined	0.8% (0.0, 2.4)
In the past 12 months, have you had a place to go if you or your family doesn't have enough to eat?	
Yes	58.6% (39.1, 78.1)
No	27.3% (6.6, 47.9)
I have never needed to go seek out food in this way	11.6% (2.1, 21.2)
Thinking about the past week (on average), how often do you eat or drink the following foods? Milk products (dairy)	
About once a week or never/hardly ever	32.9% (20.5, 45.3)
A few times a week	24.0% (12.7, 35.4)
Once to several times a day	43.1% (29.5, 56.6)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Thinking about the past week (on average), how often do you eat or drink the following foods? Protein (Beef, Chicken, Pork, Fish, Lamb, Eggs, Beans, Tofu)	
About once a week or never/hardly ever	21.0% (10.0, 32.0)
A few times a week	22.9% (11.8, 34.1)
Once to several times a day	56.1% (42.7, 69.4)
Thinking about the past week (on average), how often do you eat or drink the following foods? Vegetables (Green salad and other vegetables)	
About once a week or never/hardly ever	20.6% (10.2, 31.0)
A few times a week	29.7% (16.9, 42.5)
Once to several times a day	49.7% (36.1, 63.3)
Thinking about the past week (on average), how often do you eat or drink the following foods? Fruit (excluding fruit juice)	5.9% (2.3, 9.5)
About once a week or never/hardly ever	26.4% (14.3, 38.5)
A few times a week	26.0% (15.0, 36.9)
Once to several times a day	47.6% (34.1, 61.2)
Thinking about the past week (on average), how often do you eat or drink the following foods? Bread, Cereal, Rice, Pasta and Grains	
About once a week or never/hardly ever	17.8% (4.3, 31.3)
A few times a week	21.2% (12.8, 29.5)
Once to several times a day	61.0% (47.6, 74.4)
Thinking about the past week (on average), how often do you eat or drink the following foods? Water	
About once a week or never/hardly ever	2.5% (1.1, 3.9)
A few times a week	8.6% (3.0, 14.2)
Once to several times a day	88.9% (83.0, 94.8)
Thinking about the past week (on average), how often do you eat or drink the following foods? Juice	
About once a week or never/hardly ever	20.6% (12.7, 28.4)
A few times a week	22.6% (11.7, 33.6)
Once to several times a day	56.8% (43.9, 69.7)
Thinking about the past week (on average), how often do you eat or drink the following foods? Soft drinks/pop	
About once a week or never/hardly ever	31.9% (20.6, 43.2)
A few times a week	16.4% (8.8, 24.1)
Once to several times a day	51.6% (38.6, 64.6)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
Thinking about the past week (on average), how often do you eat or drink the following foods? Fast food (burgers, hotdogs, pizza, frozen pizzas, french fries, etc.)	
About once a week or never/hardly ever	56.6% (42.9, 70.3)
A few times a week	20.4% (9.3, 31.4)
Once to several times a day	22.6% (10.1, 35.2)
Thinking about the past week (on average), how often do you eat or drink the following foods? Sweets (candies, cookies, cake, etc)	
About once a week or never/hardly ever	52.3% (38.9, 65.7)
A few times a week	23.8% (12.9, 34.6)
Once to several times a day	23.5% (12.8, 34.3)
In the past 12 months, how often have you eaten traditionally hunted/gathered/grown and/or country foods?	
Often	22.5% (10.4, 34.6)
A few times	54.1% (40.4, 67.8)
Not at all	23.4% (11.4, 35.5)
Would you prefer eating more traditional/country foods than you can get?	
Yes	86.1% (76.1, 96.1)
No	3.8% (0.0, 8.3)
Neutral	9.3% (0.8, 17.9)
Dont' Know/Declined	0.8% (0.0, 4.4)
Which of the following traditional/country foods have you eaten?	
Land-based animals	95.9% (88.6, 100)
Sea-based animals	65.2% (50.0, 80.3)
Fresh water fish	58.6% (44.1, 73.2)
Berries or other wild vegetation	38.8% (23.6, 54.0)
Salt water fish	31.8% (17.0, 46.5)
Other water based foods	27.1% (12.6, 41.7)
Game birds	15.1% (5.3, 24.8)
Small game	3.4% (2.1, 4.8)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
What are the main strengths of your community?	
Family values	79.9% (69.3, 90.5)
Use of Inuktitut	58.6% (45.1, 72.1)
Elders	53.5% (40.4, 66.6)
Awareness of Inuit culture	35.3% (22.6, 48.0)
Social connections (community working together)	33.6% (21.7, 45.6)
Traditional activities	31.7% (19.8, 43.6)
Community/health programs	22.9% (12.6, 33.1)
Education and training opportunities	21.6% (12.6, 30.6)
Natural environment	20.8% (12.0, 29.6)
Good leisure/recreation facilities	16.0% (7.8, 24.1)
Strong economy	15.7% (6.7, 24.6)
Strong leadership	13.6% (3.7, 23.6)
Low rates of suicide/crime/drug use	3.1% (0.8, 5.4)
Other	0.1% (0.0, 0.2)
Don't know/ Declined	2.7% (0.4, 5.0)
What are the main challenges your community is currently facing?	
Housing	74.7% (63.7, 85.6)
Poverty	43.9% (30.9, 57.1)
Education and training opportunities	43.5% (30.5, 56.4)
Alcohol and drug use	42.6% (28.7, 56.6)
Employment/number of jobs	41.4% (28.3, 54.5)
Funding	32.1% (20.2, 44.0)
Health	28.9% (16.4, 41.4)
Racism and discrimination	26.3% (14.4, 38.1)
Lack of safe shelters for people who are in transition and/or homeless	25.8% (11.8, 39.9)
Shortage of community health and/or social service workers	25.1% (12.8, 37.5)
Need for Inuit community health and/or social service workers	23.6% (11.9, 35.4)
Family breakdown including apprehension of children	22.3% (9.0, 35.5)
Need for Inuit-specific health and social services	21.2% (9.7, 32.8)
Crime	17.3% (7.7, 27.0)
Legal problems including incarceration	16.8% (6.0, 27.6)
Relocation from the North to the South	14.8% (3.7, 25.8)
Continuity of Inuit culture and languages	13.8% (3.8, 23.7)
Natural environment	10.1% (0.4, 19.7)
Medical care	2.3% (0.0, 4.7)
Don't know/Declined	7.3% (2.6, 11.9)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)

Appendix: Survey Reference Tables

Survey Question	RDS Prevalence Estimate (95% Confidence Interval)
At the present time, do you smoke cigarettes?	
Yes	70.8% (58.8, 82.8)
No	28.4% (16.5, 40.4)
Don't Know/Declined	0.8% (0.0, 2.6)
On average, how many cigarettes do you currently smoke each day?	
1 to 10	54.8% (38.5, 71.1)
11 to 19	24.5% (10.2, 38.7)
20 or more	20.8% (8.0, 33.5)
In the past 12 months, how many times have you tried to quit smoking?	
I haven't tried to quit in the past 12 months	50.1% (33.7, 66.6)
I have tried to quit ≥ 1 times in the past 12 months	45.6% (29.2, 62.1)
Don't Know/Declined	4.2% (1.5, 7.0)
Do you have a smoke free home?	
Yes, there are smokers living in the home, but they smoke outside only	44.9% (31.3, 58.6)
Yes, completely smoke-free	34.2% (21.6, 46.7)
No	20% (10.3, 31.5)

Legend

Low variance (<+/-10)

Moderate variance (<+/-15)

High variance (>+/-15)