

Times Colonist (Victoria)

Illness attacks first peoples; The median age of aboriginal Canadians is lower, but arthritis rates are much higher

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Illustrations: Colour Photo: Darren Stone, Times Colonist / Saanich resident Annie Smith of the Tsartlip nation says she was only 21 when she was first incapacitated by arthritis.

Severe forms of arthritis are five times more common among aboriginal people than among the rest of Canada's population.

According to age-adjusted figures from Statistics Canada's 2000 Canadian Community Health Survey, five per cent of off-reserve aboriginal people are affected by severe auto-immune arthritis that restricts their ability to work or participate in the community, compared to one per cent for non- aboriginal people.

Cheryl Koehn of Vancouver-based Arthritis Consumer Experts, a national advocacy and educational group, says these numbers are even more surprising considering the median age of the aboriginal population is younger (27 years) than the general population (38 years), according to the Statistics Canada 2001 census.

These data refer only to aboriginals living off-reserve. Other studies suggest the prevalence is higher on reserves. The rates for all types of the disease range between two and 2.5 aboriginal arthritis-sufferers for every one non-aboriginal.

Dr. Dianne Mosher, rheumatologist at Dalhousie University, says genetics are at the core of the high rate. As many as 70 per cent of the aboriginal population carry a gene that is associated with rheumatoid arthritis.

The news comes as no surprise to Shelley Henderson, health director at Campbell River's Kwakiutl District Council health centre.

The centre, which serves 10 tribal communities making up a population of about 3,000, assessed chronic conditions in the community in 1998 and found that arthritis topped the list.

"I thought diabetes and heart disease would have been way up there," Henderson says, "but those are second and third."

Many think of arthritis as an older person's disease, but Henderson says many of the afflicted in her community are struck early in their prime.

Judith Atkin, home-care nurse with the Saanich First Nations Adult Care Society, describes the impact of arthritis as "huge." "We deal with it all the time," Atkin says of the community of about 2,000.

Annie Smith, a member of the Tsartlip nation in Saanich, was only 21 years old in 1982 when she

woke up to find her fingers swollen, sore and unable to close.

"I couldn't get a grip on things," Smith recalls. She had to leave her work as a cook at the Cheanuh Marina and rely on her husband to mind their then two-year-old son.

Her form of osteoarthritis travels around her body, randomly affecting her ankles, neck, knees and lower back. Two decades of pain medication took its toll on her health, and she developed ulcers, so that now she's unable to take any drugs to control the inflammation and pain.

Smith is stoic. She bore her disease without complaining and only learned in February that she was eligible for support services that include domestic help, and modifying her home with grab bars to make it easier for her to move around.

"Doctors didn't tell me, but then I didn't think to ask," Smith says.

Both Atkin and Henderson note aboriginal people face an added layer of challenges when it comes to coping with their condition.

Transportation to doctors and services is a major barrier, obviously for those living in more remote communities, but even for those closer to the city, especially when poverty and disability create challenges.

Atkin, whose clients live in Saanich, says, "Here we are on the verge of suburbia and all of my issues so often revolve around transportation."

Henderson says the after-effects of residential schools resonate with infirm aboriginal people.

"If you were a little girl and taken away at five to residential schools from where you didn't return home until you were 12 or 14, how keen would you be to access another institution," Henderson says. "You've got great fears of accessing another level of colonialism."

The formality of doctor visits intimidate aboriginal patients, Henderson says, although she adds this is common to all Canadians. "How many have gone to see a doctor and not understood a word he said?" Henderson asks.

A new study is now underway to address arthritis

research, education and care in aboriginal communities. Campbell River's Kwakiutl District Council health centre is participating in the \$100,000 project that is expected to be completed over 18 months. It is funded equally by the Canadian Arthritis Network under the National Aboriginal Arthritis Research Initiative, and the Arthritis Society of B.C./Yukon.

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