



RESETTING NORMAL: THE IMPACTS OF COVID-19 ON FIRST NATIONS, MÉTIS AND INUIT YOUTH

A Report based on the Findings of the Canadian Women's
Foundation 2021 Survey



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The work of the Canadian Women's Foundation and the organizations we support takes place on traditional First Nations, Métis, and Inuit territories. We are grateful for the opportunity to meet and work on this land. However, we recognize that land acknowledgments are not enough. We need to pursue truth, reconciliation, decolonization, and allyship in an ongoing effort to make right with all our relations.

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INTRODUCTION

Since the onset of the COVID-19 pandemic, Indigenous youth across “Canada” have handled a public health emergency, compounded by social and racial inequities, with immense strength and resiliency. This is not the first crisis faced by Indigenous youth, though it is perhaps the most far reaching, impacting urban, rural, reserve, and remote communities across every province and territory in the country. Many communities in which Indigenous youth live are faced with food scarcity, overcrowded housing, dirty water, climate catastrophes and substandard health care as a direct result of colonization. These inequalities are amplified in emergency situationsⁱ, which result in the most devastating social, health and economic impacts of the COVID-19 virus being borne disproportionately by Indigenous peoples².

Amidst these challenges, Indigenous youth continue to resist settler colonialism in remarkable ways: by advocating for their rights to be upheld, by revering the matriarch, Two-Spirit and elder leadership of their communities, and by protecting the lands and waters we call home. The contributions made by Indigenous youth to building a more equitable and sustainable society must be given due recognition.

In the wake of COVID-19, we cannot accept a “new normal” that continues to leave Indigenous youth behind; rather, it is our collective responsibility to redefine normal in a way that thoroughly recognizes settler colonialism in what is now known as “Canada” and commits to the processes of reconciliation, decolonization and Indigenization. Our aim is to do so through this report by:

- 1. Sharing truth about the unique ways in which COVID-19 has impacted Indigenous youth (including women, gender-diverse, Two-Spirit and LGBTQQIA+ individuals)**
- 2. Proposing recommendations to build a gender-equal “Canada” as we rebuild from the pandemic.**

The Impacts of COVID-19 on First Nations, Métis, and Inuit Youth is a report on how COVID-19 has impacted First Nations, Métis and Inuit youth in what is now known as “Canada”. More specifically, this report sheds light on the realities of women, Two-Spirit, and gender diverse youth with over 80% of survey respondents identifying as such. Thus, it explores the impact of the pandemic on Indigenous youth and gender-based violence and shares recommendations for how to better serve First Nations, Métis and Inuit youth moving forward. The report is divided into two sections: Part 1 - Contextualizing the Report, and Part 2 - Report Findings.

ⁱ Throughout this report, we are referring to the land that is now known as Canada in quotation marks: “Canada”. This signifies that the land has not always been known as “Canada”, but is a title given to it by settler-colonial governments. Any references to Canadians or to organizations with “Canada” or “Canadian” in their titles will not use quotations, for example, Indigenous Services Canada.

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Background of the Report

The Canadian Women's Foundation embarked on a three-year national collective action strategy titled "Building the Field of Teen Healthy Relationships" with the Department of Women and Gender Equality in 2015. This strategy aimed to bring young people, community programs, academics, policymakers, and funders together to share successes and challenges, as well as to discuss the future of teen healthy relationships programming.

Between 2015 and 2018, the Canadian Women's Foundation and the National Association of Friendship centers co-created a First Nations, Métis, and Inuit national working group. This group's key activities included mapping Indigenous "Teen Healthy Relationships" programs across the country, convening nationally to build strategies in this field, identifying resource gaps, creating skills-based tools, and developing regional action plans.

The Canadian Women's Foundation received funding from the Public Health Agency of Canada for a five-year term (from April 2019 to March 2024) as part of "Canada's Strategy to Prevent and Address Gender-Based Violence". The funding was dedicated to supporting programs that assist youth in learning strategies to develop and maintain healthy interpersonal relationships.

The Impacts of COVID-19 on First Nations, Métis, and Inuit Youth report, one of five Canadian Women's Foundation Resetting Normal reports, is a part of the next phase of this pilot project and collective action strategy.

Report Goals and Objectives

The principal goal is to understand the impact of the pandemic on Indigenous youth and gender-based violence and share recommendations for how to better serve First Nations, Métis and Inuit

youth moving forward. The need for this project arose from a meeting in November 2020 with the National First Nations, Métis, and Inuit (FNMI) Hub, which is coordinated in partnership with the National Association of Friendship Centres. Members of the FNMI Hub continue to emphasize the importance of understanding how the pandemic has affected urban and rural Indigenous youth.

In line with the Foundation's other Resetting Normal reports, the goal of this project is to help understand the impacts and provide recommendations as we rebuild from the pandemic. The series of reports explores risks to human rights exposed by the pandemic. This report does so through an online survey that examined the impact that COVID 19 has had on Indigenous youth throughout "Canada". It also proposes new ways to build a gender-equal "Canada" in pandemic recovery efforts.

The following shares the guiding principles of the report:

- Written by and for Indigenous youth
- Grounding our work using an intersectional feminist approach
- Centring women, Two-Spirit, trans, and non-binary identified peoples
- Ensuring good regional representation by including rural, remote, and northern communities in our survey data
- Understanding the many compounding factors beyond this health pandemic which impact Indigenous youth
- Advancing gender equity through policies and action plans that are receptive to the experiences of First Nations, Métis, and Inuit youth.

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Authors of the Report

This report was co-written by Taylor Arnt and Courtney Vaughan. As co-writers for this report, it is our ethical duty to state our relationships to the research; this is because our ontological and epistemological beliefs influence our understanding of the data extracted from the survey, as well as the conclusions we draw and the policy solutions we offer.

Taylor Arnt (she/they) is of mixed Anishinaabe-Ojibwe and European settler heritage. She is a member of Tootinaowaziibeeng Treaty Reserve, and grew up off-reserve on Treaty 1 territory, near Winnipeg, Manitoba. They work, live and play as an uninvited guest on the traditional territory of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and Selílwitlh (Tsleil-Waututh) Nations. Taylor currently works as a Policy Analyst for the British Columbia Assembly of First Nations. This is their first time writing a report on behalf of the Canadian Women's Foundation.

According to a 2010 Environmental scan by United Way Canada, youth serving government departments and non-profit organizations in “Canada” have defined Canadian youth as ranging from fifteen to thirty years of age. Taylor fits squarely in this range, which makes her a researcher with “lived familiarity’ with and a prior knowledge of the group being researched” for this report. Additionally, Taylor’s professional and volunteer experience in the gender justice activism space has equipped them with a deep understanding of gender equity and intersectional feminism.

Courtney Vaughan (she/her) is a young Métis woman of Métis, Anishinaabe, and settler descent. She is a citizen of the Métis Nation of Ontario, with her roots primarily being along the north shore of Lake Huron. She finds herself fortunate

enough to live on the north shore of Gitchi Gami (Lake Superior), just outside of Bawaating (Sault Ste Marie, Ontario) and is empowered each day by the gifts of the lake. Courtney is currently employed by Archipel Research and Consulting Inc., an Indigenous-owned and -led research and consulting company. Her fields of interest and expertise emphasize Indigenous governance and legal orders, Indigenous-led conservation, women’s knowledge, and reconciliation. Courtney has been a long-time beneficiary of youth-specific programming, giving her a unique and pertinent perspective throughout this report. It is likewise her first time writing a report on behalf of the Canadian Women’s Foundation.

Both Taylor’s and Courtney’s positionalities aim to be intersectional, decolonial, and self-reflective. Their hope in conducting this research is to propose recommendations that will lead to a more equitable future for Indigenous youth living in what we presently call “Canada”.

Key Terminology Used Throughout the Report

Indigenous Peoples: The original inhabitants of any land. The Indigenous peoples of what is now known as “Canada” are the First Nations, the Métis, and the Inuit.

First Nations: Legally defined under the Indian Act (1876) to describe the First Peoples who are living in “Canada”.³

Métis: A French word meaning “mixed ancestry”, used to describe some people with both Indigenous and European ancestry.⁴ To be considered Métis, one must self-identify as Métis, be distinct from other Aboriginal peoples, be of historic Métis Nation Ancestry and be accepted by the Métis Nation.⁵

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Inuit: Indigenous peoples of the Arctic, who have a distinct language, culture and traditions. Canadian Inuit live primarily in Inuit Nunangat, which is made up of four regions: the Inuvialuit Settlement Region (northern Northwest Territories), Nunavut, Nunavik (northern Quebec) and Nunatsiavut (northern Labrador).⁶

Indian Act (1876): An Act concerning ‘Indians’ (First Nations people under the *Indian* registrar), ‘Indian’ bands (First Nations communities), Band Councils (elected leadership) and reserve lands. Created with the intent to assimilate First Nations people into the rest of what is now known as “Canada”, the *Indian Act* remains an overarching form of colonially imposed governance over the affairs of First Nations peoples today.

Rural Community: An area that has less than 1,000 people and a population density of fewer than 400 persons per square kilometer.⁷

Remote Community: A community located over 350km from the nearest service center, having year-round access by land or water routes in all-weather conditions.⁸

Isolated Community: A community that has scheduled flights and telephone service but does not have year-round access by land or water routes.⁹

Remote-Isolated Community: A community that does not have scheduled flights or year-round access by land or water routes. It may or may not have a telephone service.¹⁰

Urban Indigenous Peoples: Indigenous peoples who reside in urban centers, sometimes because they are seeking education or career opportunities. Examples of cities with large urban Indigenous populations include Winnipeg, Edmonton, Calgary, Vancouver and Toronto.¹¹

Re/conciliation: An ongoing process of establishing and maintaining respectful relationships. This process includes repairing damaged trust by making apologies, providing individual and collective reparations, and following through with concrete actions that demonstrate real societal change. Since the “re” in “reconciliation” suggests a return to a previously amicable state of relations, some Indigenous peoples prefer using the term “conciliation”, which recognizes that no amicable state of relations ever existed with European colonizers.^{12,13}

Indigenization: The process of increasing the presence of Indigenous peoples and knowledges in traditionally Euro-Western institutions. This process involves robust institutional transformation guided by Indigenous leadership with a goal of fostering widespread institutional respect for the diversity of Indigenous peoples, knowledges, and methodologies.¹⁴

Decolonization: A process that dismantles colonial power structures and brings about “the repatriation of Indigenous land and life”.¹⁵ While many countries decolonized by asserting their political independence throughout the twentieth century, some settler colonies such as “Canada” have never decolonized and continue to impose themselves on unceded Indigenous land.¹⁶

Matriarchy: Prior to settler colonization, Indigenous women were revered as matriarchs, and roles were balanced across genders. Many Indigenous communities across “Canada” were matrilineal, meaning that “descent – wealth, power, and inheritance – were passed down through the mother”.¹⁷ “Canada” imposed a patriarchal (male-led) governance system onto Indigenous communities through the *Indian Act*, which continues to marginalize Indigenous women today. However, many Indigenous communities and

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organizations are connecting with their traditions and reinstating women to their rightful roles in community leadership and governance.

Intersectionality: Originally coined by Kimberlé Crenshaw to discuss the unique experiences of discrimination experienced by Black women, the term has since expanded to understand other overlapping impacts of discrimination, including gender, race, physical ability, ethnicity, nationality, citizenship, socio-economic status.¹⁸ In the Indigenous context, we recognize that some Indigenous folks face overlapping areas of discrimination, such as racism *and* sexism.

Gender Equity: The process of being fair to women and men. To ensure fairness, strategies and measures must often be available to compensate for women's historical and social disadvantages that prevent women and men from otherwise operating on a level playing field. Equity leads to equality.¹⁹

Gender-Based Violence: The types of abuse that women, girls, and Two-Spirit, trans and non-binary people are at the highest risk of experiencing. It can take physical and emotional forms, such as

name-calling, hitting, pushing, blocking, stalking/criminal harassment, rape, sexual assault, control, and manipulation. Many forms of these types of abuse are against the law.²⁰

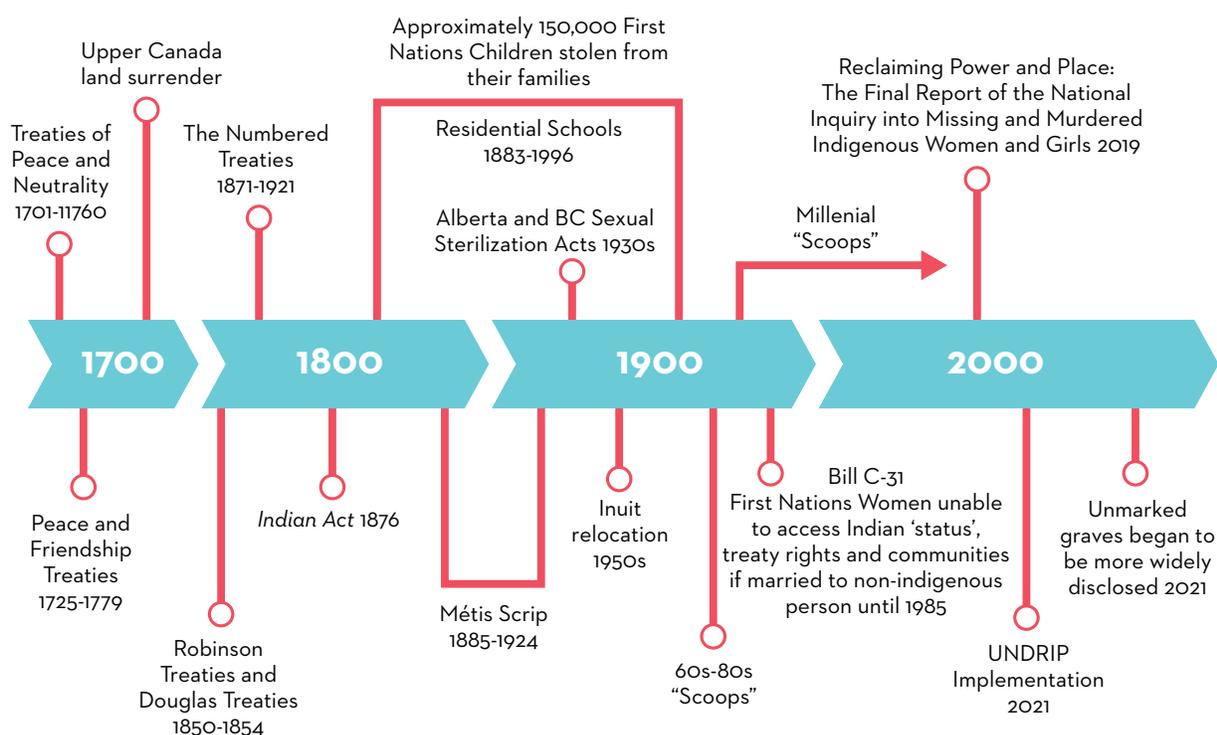
Two-Spirit: Coined at the 1994 Annual Native American Gay and Lesbian Gathering, the term describes a broad range of gender and sexual identities in Indigenous communities across North America. It is used to refer to Indigenous people who embody both male and female spirits, LGBTQQIA+ Indigenous people, and/or culturally specific non-binary Indigenous identities. Many Indigenous communities have terms in their languages to describe this concept.²¹

LGBTQQIA+: An umbrella acronym encompassing a wide range of gender/sexual identities and sexualities, including lesbian, gay, bisexual, transgender, queer, questioning, intersex, asexual, pansexual, and others. Anyone who does not identify as cisgender (the gender assigned to them at birth) and/or heterosexual (attracted only to the opposite sex) would fall under this term.²²

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Background on Indigenous Resistance and Colonialism in “Canada”

Timeline of Indigenous-Colonial Relations in “Canada”



For millennia prior to European contact, the Indigenous peoples of “Canada” lived free from the constraints of the *Indian Act* and other harmful settler-imposed policies and practices. Indigenous communities were diverse in both their cultures and forms of social organization.²³ Individual nations, not an overarching government, made decisions in areas of life such as spirituality, land ownership, commerce, legal enforcement and education.²⁴ However, patterns and similarities also existed across Indigenous communities, in areas such as spirituality, forms of governance and deep respect for the natural world.²⁵

The arrival of European settlers disarranged this. European settlers had the intention to seize land and territory since they began settling in “Canada” in the 1400s. They did so under the dubious doctrine of *Terra Nullius*: the idea that because the land was not yet developed for agriculture, it belonged to ‘no one’ and was, therefore, theirs to claim.²⁶ Though it was a construct that has been proven to be legally invalid,²⁷ the intent of *Terra Nullius* to “dehumanize, exploit and subjugate Indigenous peoples”²⁸ to make way for colonial settler expansion still affects the laws, policies and practices that impact the lives of Indigenous peoples today.

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The sections below will provide a brief background on:

- Historical harms imposed by the Crown and Canadian governments on Indigenous peoples
- “Canada’s” issued apologies to Indigenous peoples, as well as steps towards re/conciliation
- Examples of Indigenous movements and colonial resistance across “Canada”.

Historical Harms

Early Expansion and Fur Trade:

Some Indigenous communities responded to European arrival by retreating further inland, while others established commercial trade relationships.²⁹ Since Indigenous peoples initially had “the upper hand in population and in terms of their knowledge of the land and how to survive in it”,³⁰ Europeans sought them as allies during times of conflict, and as amicable trading partners and knowledge keepers in times of peace.³¹ As more Europeans settled and exploited the land, Indigenous populations were drastically reduced by disease, armed hostilities and starvation. This shifted the dynamic between the groups.³²

Historical Treaties:

Starting in the early 1700s, the British Crown signed treaties with Indigenous groups to define ongoing rights and obligations on both sides.³³

Seventy historic treaties were signed in “Canada” between 1701 and 1923, representing over 600,000 First Nations people in what is now called “Canada”. These treaties include:

- [Treaties of Peace and Neutrality \(1701-1760\)](#)

- [Peace and Friendship Treaties \(1725-1779\)](#)
- [Upper Canada Land Surrenders and the Williams Treaties \(1764-1862/1923\)](#)
- [Robinson Treaties and Douglas Treaties \(1850-1854\)](#)
- [The Numbered Treaties \(1871-1921\)](#)

The Crown, which later became the Canadian government, and First Nations often held different interpretations of the Treaties’ meanings; whereas Indigenous peoples saw them as nation-to-nation agreements to share the lands and resources they lived upon, the Crown interpreted Treaties as a “set of ceding and surrender documents”.³⁴

The Canadian government continues to face criticism today for not upholding the Treaties in good faith. As Chief Dean Owen of Pikangikum First Nation shares:

“We were told we would continue to live in accordance with our laws. That promise was broken. Being forced to adopt the ways of others was not what our ancestors intended when they entered into a Treaty with the Queen.”³⁵

Disease:

Settlers’ introduction of diseases such as smallpox, influenza, measles and whooping cough all strained the traditional healing systems of Indigenous peoples, resulting in deaths as high as 90% of populations.³⁶ Colonizers used disease to their advantage; for example, the British use of blankets exposed to smallpox was a means of germ warfare against the Odawa peoples.³⁷ The First Nations Health Authority shares the colonial intent of doing so:

“The myth of the dying First Nation society was used to justify political action that benefited non-aboriginals at the expense of First Nations.”³⁸

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Furthermore, colonizers also denigrated the use of traditional Indigenous health care practices, such as the Potlatch, by outlawing them in the *Indian Act*.³⁹ Indigenous children attending residential schools also suffered from medical experimentation, malnourishment, and contagious diseases such as tuberculosis.⁴⁰ Through colonially imposed policies and practices, European settlers compromised the holistic wellbeing of Indigenous peoples.

This has resulted in Indigenous peoples today experiencing significant and unjust health disparities compared to their non-Indigenous counterparts,⁴¹ including an underfunded healthcare system,⁴² inadequate healthcare service delivery,⁴³ and widespread systemic racism.⁴⁴

Indian Act (1876):

The *Indian Act* was a piece of legislation created and “based unashamedly on the notion that Indian cultures and societies were inferior to settler society”.⁴⁵ This *Act* was extremely paternalistic in nature and gave the government overarching power over every facet of Indigenous life. Indigenous identity was even more restricted than in prior legislation. For example, those who were:

- “Illegitimate children”
- Living outside the country for five or more years
- Women who had married non-Indigenous or non-status Indians
- “Half breeds”, or
- Those enfranchised,

all became excluded from obtaining status.⁴⁶ Not having or losing status meant no longer being considered Indian or being able to pass one’s status to their children, effectively severing one’s

ties to Indigenous communities and ancestry.

While some of the *Indian Act*’s worst clauses have been revoked (cultural prohibitions and gender inequality with regards to passing on ‘status’, for example), the *Indian Act* remains largely intact.

The relationship between Indigenous peoples and the *Indian Act* remains complex today. As Harold Cardinal explains:

“We do not want the Indian Act retained because it is a good piece of legislation. It isn’t. It is discriminatory from start to finish. But it is a lever in our hands and an embarrassment to the government, as it should be. No just society and no society with even pretensions to being just can long tolerate such a piece of legislation, but we would rather continue to live in bondage under the inequitable Indian Act than surrender our sacred rights.”⁴⁷

Indian Residential School System:

Sections 114-122 of the *Indian Act* provided the government with the jurisdiction to allow European religious denominations to provide an education to Indigenous children, even though it was not wanted by Indigenous communities themselves. The residential school system was a genocidal tactic that aimed to assimilate Indigenous children into “mainstream Canadian” culture; Duncan Campbell Scott, deputy superintendent of the Department of Indian Affairs from 1913 to 1932, once stated “I want to get rid of the Indian problem”.⁴⁸

Residential schools stole Indigenous children for over one hundred years, taking approximately 150,000 First Nations children from their families and communities between 1883 and 1996.⁴⁹ These schools stripped Indigenous children of their identity and subjected them to appalling

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physical, psychological and sexual abuse. At least 2,800 Indigenous children died in the residential school system,⁵⁰ and those who survived were left permanently damaged.⁵¹ As the Truth and Reconciliation Commission reports:

“The legacy of the schools continues to this day. It is reflected in the significant educational, income, and health disparities between Aboriginal people and other Canadians—disparities that condemn many Aboriginal people to shorter, poorer, and more troubled lives. The legacy is also reflected in the intense racism some people harbour against Aboriginal people and the systemic and other forms of discrimination Aboriginal people regularly experience in “Canada”. Over a century of cultural genocide has left most Aboriginal languages on the verge of extinction. The disproportionate apprehension of Aboriginal children by child welfare agencies and the disproportionate imprisonment and victimization of Aboriginal people are all part of the legacy.”⁵²

Métis Scrip:

The Canadian government policy of Indigenous segregation through the *Indian Act* left the Métis suspended: “Without the Status Indian designation, the Métis remained isolated from First Nations and Euro-Canadian societies and were often discriminated against by both.”⁵³

The colonial government took advantage of this reality by mandating a bureaucratically complex land scrip process separate from the allocation of lands reserved for ‘Indians’. Between 1885 and 1924, “scrip commissions served to extinguish title to Métis land in the West so that the government could use the land for commercial development and white settlement.”⁵⁴

Many issues have been identified with the scrip process, including:

- Legal complexities and disorganization of the process
- Restrictions placed on which lands Métis people could homestead, forcing relocation for many families from their traditional territories
- Pressure on Métis people to sell their scrip, ultimately losing value on their allotment
- Land speculators taking advantage of Métis scrip for less than its worth
- Devaluation of scrip when land prices rose
- Fraudulent redemption of scrip by non-Métis people
- Many Métis not receiving the lands they were promised in the *Manitoba Act* of 1870⁵⁵
- In northwest Saskatchewan, the Métis were left with only 1% of the land scrip they were issued.⁵⁶

The injustice of the Métis scrip commission is still being settled with the Canadian government today.

Inuit Relocation:

In the 1950s, the Canadian government lured Inuit people to move to communities more than 2000 kilometers away from their ancestral territory, as part of a Cold War defense against American and Soviet imposition.⁵⁷ During this relocation, RCMP officers, interpreters and Inuit Special Constables recruited Inuit families for resettlement in the High Arctic, an area previously devoid of humans. Often, the Inuit were misled, and falsely promised improved living conditions and plentiful wildlife in their new home, as well as an opportunity to return after two years.⁵⁸

The conditions in Qausuittuq and Grise Fjord were abysmal. The land was continually dark in the

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wintertime and remained frozen in the summer. Furthermore, the Inuit were criminalized for hunting and scavenging food, even though they were suffering from starvation.⁵⁹

In the 1970s and 1980s, many Inuit returned to their home communities, paying for their own travel. The federal government took responsibility for paying for Inuit returns home in 1988. Some chose to stay in Qausuittuq and Grise Fjord; currently, 371 people live between the two communities.^{60,61}

Those affected by the Inuit Relocation received an apology from the Canadian government in 2010.⁶²

Sixties and Millennial ‘Scoops’:

The federal government began phasing out residential schools in the 1950s, though the last remaining school did not close until 1996. Many residential schools remained standing because they housed children whose families the Canadian government had deemed ‘unsuitable’ to care for them.⁶³ Thus, the practice of removing Indigenous children from their families and putting them into state care skyrocketed.

From the 1960s through the 1980s, Children were primarily put into upper-middle class white families, some of whom denied their cultural identity, or worse, physically, emotionally, and/or sexually abused them.⁶⁴ Many social workers unfamiliar with the culture and history of Indigenous communities exacerbated the apprehensions “under the colonialist assumption that native people were culturally inferior and unable to adequately provide for the needs of the children”.⁶⁵ In some cases, Indigenous children were apprehended at birth,⁶⁶ or taken from their families because of inequities, such as poverty, mental health issues, domestic violence and addictions.⁶⁷

Some purport that the Sixties and Millennial

‘Scoops’ were merely a thinly veiled continuation of government interference into Indigenous families.⁶⁸ Overrepresentation of Indigenous children in care persists today; though Indigenous children make up only 7% of children in “Canada”, they represent 52% of children in the foster care system.⁶⁹

Violence Against Indigenous Women, Girls and Two-Spirit People:

As many Indigenous feminist scholars have argued, “settler colonialism has been and continues to be a gendered process”.⁷⁰ Settler colonialism has not affected all Indigenous peoples the same; those at the intersections of multiple forms of oppression are often more negatively impacted. Such is the case for Indigenous women, who experience disproportionately more violence compared to both Indigenous men and non-Indigenous women. For example:

- 6 in 10 Indigenous women report having been physically or sexually assaulted at some point during their lifetime, compared to four in 10 in non-Indigenous women.⁷¹
- Indigenous women are more likely to experience severe violence: between 1980 and 2012, Indigenous women experienced homicide 4.5 times more frequently than other Canadian women.⁷² A lack of disaggregated data, improper racial identification, and harmful police bias means that Indigenous families are less likely to receive justice: 53% of murder cases for Indigenous women and girls have been solved, compared to 84% of all murder cases across the country.⁷³

Though Indigenous activists and human rights organizations have long drawn attention to these appalling disparities, the policies, practices and laws which enable them have only marginally

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changed. Following the publication of “Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls”, the Native Women’s Association of “Canada” has continued to hand “Canada” failing grades across the board on its implementation of the 231 Calls to Justice.⁷⁴

Other forms of harm which continue to impact Indigenous women, girls and two-spirit individuals include:

Forced sterilization: Medical practitioners have coercively and forcibly sterilized Indigenous women under a racist assumption that Indigenous women were unfit to be mothers.⁷⁵ Alberta and British Columbia passed Sexual Sterilization Acts in the 1930s, leading to more than 3000 sterilizations in these provinces alone.⁷⁶ While these Acts have since been repealed, the practice of sterilization continues: incidents of coerced and forced sterilization have occurred as recently as 2018,⁷⁷ and though the United Nations has established forced sterilization as a form of torture,⁷⁸ the practice is still not illegal under the Canadian Criminal Code.⁷⁹

Discrimination against 2SLGBTQQIA+ Indigenous people: Prior to colonization, Indigenous Two-Spirit and LGBTQQIA+ people were revered as visionaries, healers, and medicine people.⁸⁰ With colonization came the marginalization of these populations’ unique perspectives, and today homophobia and transphobia remain prevalent in Indigenous communities,⁸¹ as well as Canadian society more generally.⁸²

Issues faced by Indigenous women and girls with disabilities: Indigenous women and girls experience life with a disability more often (22%) than their non-Indigenous counterparts (15%); this fact, compounded with the reality that women

and girls experience violence four times the national average means that Indigenous women and girls with disabilities are rendered particularly vulnerable to harm.⁸³

Gender-based discrimination under the Indian Act:

Until 1985, the *Indian Act* deprived First Nations women of access to their Indian ‘status’, treaty rights, and communities if they married a non-Indigenous person or an enfranchised individual.⁸⁴ Due to Indigenous and international pressure, “Canada” revised the *Indian Act* to remove these discriminations under Bill C-31; however, in doing so they created a new issue referred to as the “second generation cut-off” for Indigenous lineage traced maternally.⁸⁵ *Mclvor v. Canada* (2009) challenged these residual sex-based discriminations, leading to the creation of Bill S-3: Eliminating Known Sex-Based Inequities in Registration in 2017.⁸⁶ However, Indigenous Services Canada has continued to delay the processing of Indian status applications since then, with some cases taking two years to be approved.⁸⁷

Safety and industrial work camps: Industrial projects come with disproportionately negative economic, cultural, social and environmental impacts on Indigenous women and girls.⁸⁸ Visible minority women, including Indigenous women, are severely underrepresented in mining, quarrying, oil and gas extraction industries (2.8%).⁸⁹ High wages paid to resource sector workers drive up the costs of living in industry areas, and Indigenous women who are not a part of the industry workforce are often forced into economically precarious situations as a result.⁹⁰ Furthermore, an influx of the mostly young, male, transient workers that fuel these industries increases the risk of racially-motivated violence, sexual violence, sex trafficking, teen pregnancies and STI transmission rates for

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Indigenous women and girls.^{91,92} Finally, there are associated damages to the environment: Amnesty International reports that “oil and gas wells, pipelines, industry roads, and other development have fragmented the landscape, destroyed habitat crucial to culturally important species such as moose and caribou, and contaminated rivers and streams”.⁹³

Contextualizing Life Pre-pandemic

As True North Living said, “Indigenous youth are the key to strong, healthy, Indigenous nations and a better future for everyone”.⁹⁴ The Indigenous population is young; youth aged 15-24 make up a larger proportion of the Indigenous population (17%) than the non-Indigenous population (12%).⁹⁵ And with a growth rate four times that of their non-Indigenous counterparts,⁹⁶ we know Indigenous youth aren’t going anywhere.

Indigenous youth in “Canada” today are proud to be themselves: The majority of First Nations (91%), Métis (93%) and Inuit youth (97%) feel good about their Indigenous identity.⁹⁷ Furthermore, most Indigenous youth are making an effort to find out more about their history, traditions and culture; the figures were 71.4% for First Nations youth, 64.6% for Métis and 74.4% for Inuit.⁹⁸ However, many gaps in socioeconomic indicators between Indigenous and non-Indigenous youth still need to be closed so that Indigenous youth can enjoy *Mino Bimaadiziwin* – the good life.

Geography

Indigenous youth are more likely to live in rural, reserve and remote areas than non-Indigenous youth. The majority of Indigenous youth (62.8%) live in urban areas, compared to 84.8% of non-Indigenous youth.⁹⁹ The share of youth living in

an urban area is highest among Métis (72.8%), followed by First Nations (57.7%) and Inuit (49.2%).¹⁰⁰

Education for Indigenous Youth

The gap between Indigenous and non-Indigenous high school graduation rates is closing: Among Indigenous youth aged 20 to 24, 70% had completed high school in 2016, up from 57% in 2006.¹⁰¹ The high school graduation rate ranges for First Nations (64.0%) Métis (82.7%) and Inuit youth (47.0%).¹⁰² While this improvement is promising, there remains a gap between Indigenous and non-Indigenous youth; 91.0% of non-Indigenous youth graduate from high school.¹⁰³

Gaps also remain between Indigenous and non-Indigenous youth receiving a post-secondary education. While First Nations have higher attainment rates than non-Indigenous Canadians in college and the trades, the 22% university attainment gap between Indigenous and non-Indigenous youth has remained.¹⁰⁴ Persistent barriers such as a lack of funding, prevent Indigenous youth from accessing a post-secondary education.¹⁰⁵ To close this gap, funding for 78,000 First Nations graduates is needed.¹⁰⁶

Indigenous Youth in the Workforce

Indigenous youth are more likely than their non-Indigenous counterparts to be unemployed. In 2016, among Indigenous people aged 15 to 24, the employment rate was 39.3% and the unemployment rate was 23.0% (the corresponding figures for non-Indigenous youth were 52.8% and 15.1%).¹⁰⁷ The employment rate of First Nations youth was 32.1%, while it was 52.3% for Métis and 36.2% for Inuit.¹⁰⁸ Several youth do not enter the labour market because they are attending school.

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However, when only those who were not attending school were considered, Indigenous youth are still less likely to be employed than their non-Indigenous counterparts (47.8% versus 72.0%).¹⁰⁹

Unemployment is especially prevalent in rural, reserve, and remote communities. Among First Nations youth, the employment rate was 17.1% for status First Nations youth on reserve, 35.2% for status First Nations youth off-reserve and 48.5% for non-status First Nations youth.¹¹⁰ The employment rate was 33.8% for Inuit youth living in Inuit Nunangat and 44.0% for those outside.¹¹¹ This is because “access to employment opportunities for Aboriginal workers living in remote, rural, or non-urban areas is generally limited to industries and organizations with local operations close to Aboriginal communities”.¹¹²

Arts & Culture

Indigenous and traditional art practices are embedded in the culture and lands from which youth emerge.¹¹³ Forms of art such as music, dance, carving, weaving, and regalia have been used as educational tools, public records, political documents, spiritual resources and as a means of maintaining Indigenous cultural systems.¹¹⁴ The systematic banning and subjugation of Indigenous cultures, languages and arts through the residential school system, potlatch bans, land theft and destruction of cultural artifacts was a form of cultural genocide.¹¹⁵

Today, 56.4% of First Nations, 37.9% of Métis and 83.1% of Inuit youth believe that speaking an Indigenous language was either important or very important.¹¹⁶ However, only 13.0% of Indigenous youth could speak an Indigenous language well enough to conduct a conversation.¹¹⁷ This speaks to the necessity for increased funding towards

initiatives that reconnect Indigenous youth with their cultural traditions, in order to heal the intergenerational effects of forced assimilation policies.¹¹⁸

Sports & Recreation

Participation in sports and recreation has holistic benefits for Indigenous youth in “Canada”,¹¹⁹ including “cognitive (e.g., increased confidence, concentration), physical (e.g., more energy, better sleep), emotional (e.g., more happiness, enjoyment, satisfaction), and spiritual (e.g., wellbeing, identity) dimensions”.¹²⁰ Furthermore, sports and recreation allow Indigenous youth to connect “with family, community, friends, peers, culture, land, and their ancestors” and stay away from unhealthy choices, such as misusing substances.¹²¹ Finally, there are positive correlations between sports and recreation and the long-term health of Indigenous peoples.¹²²

The Truth and Reconciliation Commission Call to Action 89 outlines the need for more support and better policies to promote physical activity to build healthier Indigenous communities and to increase Indigenous athletic excellence. Unfortunately, this call continues to go unmet. Barriers to sports and recreation programs still exist in many Indigenous communities, including:

- A lack of time
- Costs associated with participation and equipment
- Limited opportunities
- Lateral violence and racism
- Lack of transportation
- Limited access to information.^{123,124}

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Physical Health

Indigenous peoples in “Canada” “suffer from disproportionate increases in diabetes, hypertension, substance abuse, mental health concerns, and overall morbidity and mortality in addition to having significantly reduced life expectancy”.¹²⁵ To explain these health disparities, we must look at the impacts of social determinants of health on Indigenous peoples. Some attendees of residential schools (the parents, grandparents, and great-grandparents of Indigenous youth today) experienced trauma, abuse, cultural inhibition and racism in their formative years; having developed negative relationships they, in turn, reproduced these environments for their children, causing a vicious cycle of health disadvantages.¹²⁶ Today, Indigenous peoples whose families have a history of attending residential school are more likely to experience increased stress and decreased overall wellbeing, even if they did not attend the schools - this is called “intergenerational trauma”.¹²⁷

Furthermore, low socioeconomic status can lead to negative impacts on the health and wellbeing of Indigenous youth. When Indigenous youth have been raised in less-than-optimal physical environments (such as overcrowded housing), they are more likely to engage in unhealthy behaviors, such as violence and misusing substances.¹²⁸ Overall, 43.7% of Indigenous youth have a diagnosed chronic health condition.¹²⁹ This is doubly alarming since “the likelihood of mental illness rises with the severity of symptoms from chronic conditions”.¹³⁰ One condition worth noting is tuberculosis. While Indigenous peoples make up 4% of the Canadian population, they make up 21% of recorded cases of tuberculosis, and this rate is nearly 50 times higher for the Inuit population compared to the Canadian population overall.¹³¹

Mental Health and Substance Use

The mental health statistics for Indigenous youth are as follows:

- 64.8% of First Nations youth living on-reserve felt their mental health status was very good or excellent¹³²
- 61% of First Nations youth living off-reserve 15 to 24 years of age reported excellent or very good mental health¹³³
- 67% of Métis people reported excellent or very good mental health (no youth-specific data available)¹³⁴
- 65% of Inuit people reported excellent or very good mental health (no youth-specific data available)¹³⁵
- Close to one in five Indigenous youth have been diagnosed with a mood disorder (19.3%) and nearly one in four have been diagnosed with an anxiety disorder (24.3%)¹³⁶
- Young Indigenous women are also more likely than men to be diagnosed with a mood disorder; this reflects a greater likelihood for women to seek help or expertise for mental health care¹³⁷
- Indigenous students were five times more likely to have used tobacco, 50% more likely to have used alcohol and almost twice as likely to have used marijuana than non-Indigenous students. They also drank alcohol and used marijuana at younger ages, especially males¹³⁸
- Rates of suicide are reported to be 5 to 7 times higher for First Nations youth living on reserve, and 5 to 25 times higher for Inuit youth respectively than the national average (Métis-specific data unavailable).¹³⁹

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Social factors that potentially contribute to mental health disparities between Indigenous and non-Indigenous youth include marginalization, the experience of discrimination, intergenerational trauma, financial hardships, and familial separation.¹⁴⁰ Therefore, access to culturally safe, strengths-based, family and community-oriented mental health promotion programs and services is crucial to the mental wellbeing and resilience of Indigenous youth.¹⁴¹

Sexual Health and Family Planning

Pre-colonialism, Indigenous sexuality was not perceived as shameful. Children were taught openly about their bodies, sexual and reproductive passages, and moontime. Sex was considered a gift from Creator, an expression of life-creating force, and the most sacred ceremony in Indigenous cultures.¹⁴² However, a “loss of traditional knowledge, language, land, ceremonies and cultural practices, including gender roles and birthing ceremonies”, has had negative impacts on sexuality for Indigenous youth.¹⁴³

Today, Indigenous people in “Canada” have higher rates of HIV infection than the non-Aboriginal population; these rates are particularly pronounced for people younger than 30, women, two-spirited people, and injection drug users.¹⁴⁴ However, as the National Indigenous Youth Council on Sexual Health and HIV & AIDS asserted “Being an Indigenous Youth is not a Risk Factor”; rather, it is colonialism and vulnerabilities associated with the social determinants of health that make Indigenous youth at risk of exposure to HIV and AIDS.¹⁴⁵

Indigenous youth are also more likely to become parents than their non-Indigenous counterparts. In 2016, one in ten (10.5%) Indigenous youth

were a parent to a child living within their home compared with 2.9% of non-Indigenous youth.¹⁴⁶ Teen and youth pregnancies can be risky for Indigenous youth; Indigenous women bear a disproportionately high rate of sexually transmitted infections, reproductive tract infections, high-risk pregnancies, complicated and pre-term deliveries, maternal mortality, teenage pregnancies, and sexual violence.¹⁴⁷ Those in rural, reserve and remote communities often have to leave them in order to give birth, which is costly for communities and emotionally disruptive to families, particularly teenage mothers.¹⁴⁸ Furthermore, Indigenous babies are more likely to be born with low- and high-birth weights, as well as fetal alcohol spectrum disorder and other developmental disorders.¹⁴⁹ Comprehensive, coordinated policies and practices that engage Indigenous youth, protect their sexual and reproductive health rights and promote their well-being are urgently needed.¹⁵⁰

Two-Spirit and LGBTQQIA+ Youth

Two-Spirit identifying is one way for Indigenous Peoples to reconnect with their traditional languages, ways, and cultures within a pre-colonial setting. Since it contains diverse gender and sexuality meanings which pertain to each individual nation, the term is effective at calling Western, binary notions of sexual orientation into question.¹⁵¹ Many Indigenous peoples today see the restoration of Two-Spirit identity within Indigenous cultures as a means of cultural resurgence, a restoration of pre-contact gender equality, and an opportunity to “close the sacred hoop that was torn open by colonization”.^{152,153}

However, there is a long way to go in terms of ensuring the safety, wellbeing, and representation of Indigenous Two-Spirit and LGBTQQIA+ youth.

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For example, we know that:

- Two-Spirit and Indigenous LGBTQQIA+ youth experience unique barriers to culturally safe health care; as a result, they suffer from high rates of depression, anxiety, and substance use.¹⁵⁴
- Two-Spirit youth are much more likely to contract HIV than other Indigenous youth or other queer youth.¹⁵⁵
- Two-Spirit youth are often at risk of high rates of homelessness, violence, and sexual assault due to systemic prejudice.¹⁵⁶

More disaggregated data about this demographic is needed in order to propose inclusive policy solutions.

Housing and Homelessness

More than a quarter of on-reserve First Nations live in crowded homes, a rate that is 7 times greater than that of non-Indigenous people.¹⁵⁷ Furthermore, 43% of First Nations houses on reserve need major repairs, compared to 7% of Canadian houses.¹⁵⁸ Almost half of homes on Canadian reserves have enough mould to cause serious respiratory problems. For example, Cat Lake First declared a state of emergency in 2019 after poor housing conditions led to the death of a community member.¹⁵⁹ These alarming statistics show the precarity of housing for Indigenous peoples. Inuit communities are especially affected by inadequate housing, with over half (51.7%) of Inuit in Inuit Nunangat living in crowded housing.¹⁶⁰ This is especially concerning, as more than 70% of communities in Inuit Nunangat do not have a safe shelter for women and children experiencing family violence.¹⁶¹

Precarious housing environments for Indigenous

youth are “both cause and effect of poverty, low educational attainment, high unemployment rates, poor health, and outcomes involving children in care and the justice system”.¹⁶² Indigenous youth today are overrepresented in homeless populations.¹⁶³ Once homeless, Indigenous youth become at risk of incarceration, engaging in survival sex, and becoming HIV positive.¹⁶⁴ Female and 2SLGBTQQIA+ Indigenous youth are at particular risk; they become homeless earlier, face more victimization in all contexts, and experience greater mental health and addiction challenges.¹⁶⁵

Water Quality

There are currently 36 long-term drinking water advisories and 26 short-term drinking water advisories in place in “Canada”.^{166,167} The federal government committed to lifting all drinking water advisories by 2021 back in 2015 but missed their self-imposed deadline and have not confirmed a new target.¹⁶⁸

Even when adequate water infrastructure is in place, gaps in water system operation and maintenance result in the drinking advisories resurfacing later. Oftentimes, the high-level certification needed to run water systems are unattainable to those tasked with their operation; as of 2016, only 68.5% of water plant operators that worked in First Nations reserves were certified.¹⁶⁹ This both contributes to the development of drinking water advisories and extends how long they last.¹⁷⁰

Some Indigenous youth have grown up with drinking water advisories their entire lives; for example, Neskantaga First Nation has had an advisory in place for 27 years.¹⁷¹ This entails a variety of health effects; cancer, stomach infections, bacterial contamination, skin conditions,

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birth defects and even deaths can be attributed to unsafe water.¹⁷² Other side effects include:

- Excessive water boiling leads to mold that deteriorates housing¹⁷³
- Buying water costs money that might have otherwise been used for food¹⁷⁴
- Water-related evacuations disrupt and separate Indigenous families and communities¹⁷⁵
- Undesired cultural and spiritual shifts, such as losing the ability to have water ceremonies¹⁷⁶
- Limited drinking water supplies are linked to increased stress and ongoing mental illness.¹⁷⁷

As Chief Water Commissioner and Indigenous youth Autumn Peltier said, “Water is a basic human right. Everyone deserves access to clean drinking water, no matter what our race or colour is or how rich or poor we are.”¹⁷⁸

Youth Climate Change Activism

Though Indigenous peoples contribute the least to greenhouse emissions, they are among the first to face the direct consequences of climate change because of their dependence upon, and close relationship, with the environment and its resources.¹⁷⁹ Indigenous peoples in the Arctic are particularly affected; changes in the availability of traditional food sources, decreased weather predictability and reduced safe travel conditions pose serious challenges to Inuit health and food security.¹⁸⁰ Reduced access to the land is also linked to negative impacts on the mental health and well-being of Inuit youth.¹⁸¹

Indigenous youth are at the forefront of climate change activism, both on global stages such as the United Nations Conference of Parties on Climate Change (COP24)¹⁸² and on the frontlines at Fairy Creek¹⁸³ and Wet’suwet’en.¹⁸⁴ Inuit youth activists are ensuring Inuit perspectives are present at climate change decision-making tables.¹⁸⁵ Finally, in a survey of Canadian youth, 40% said climate change was one of the most important issues facing their country, meaning Indigenous youth will not be taking on this fight alone.¹⁸⁶

Criminal Justice System

Indigenous youth who need help often find themselves caught in the criminal justice system.¹⁸⁷ The Truth and Reconciliation Commission explains the causes:

*Aboriginal children and youth live with the legacy of residential schools every day, as they struggle to deal with high rates of addictions, fetal alcohol disorder, mental health issues, family violence, incarceration of parents, and the intrusion of child-welfare authorities. All these factors place them at greater risk of involvement with crime.*¹⁸⁸

The percentage of both Indigenous youth and adults in correctional services significantly exceeds their representation in the general population; in some provinces, the rate is seven times that of their non-Indigenous counterparts.¹⁸⁹ In 2014-2015, about 35% of youth aged 12-17 admitted to correctional services were Indigenous.¹⁹⁰ This is the case even though the Gladue principles mandate courts to consider alternatives to custody for Indigenous youth.¹⁹¹ Indigenous people are also jailed younger, denied bail more frequently, granted parole less often, over-represented in segregation, overrepresented in demand custody,

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and more likely to be classified as higher risk offenders.¹⁹²

Indigenous youth who have been incarcerated view the criminal justice system as a non-rehabilitative and counterproductive structure.¹⁹³ The loss of power, hopelessness, cycles of violence and desperation increase their likelihood of coming into contact with the criminal justice system in the future.¹⁹⁴ Therefore, when custody is reduced or eliminated, when time spent in the youth criminal justice system is reduced, and when youth are prevented from moving to the adult system, Indigenous youth benefit. What would be most effective in reducing overrepresentation, however, is addressing the social inequities and intergenerational trauma that get youth involved with the criminal justice system in the first place.

Child Welfare System

As the Truth and Reconciliation Commission has commented, the child welfare system is often a thinly veiled continuation of the Indian Residential School system; this is substantiated by the fact that there are more children in care now than there were at the height of the residential school system.¹⁹⁵ The majority of Indigenous children are taken because of structural issues such as poverty, poor housing, and parental substance misuse, factors which can all be traced to the legacy of colonialism and residential schools.¹⁹⁶

Once taken from their families, Indigenous children face maltreatment, physical abuse, and neglect; there were at least 14,114 ongoing maltreatment incident investigations for Indigenous children in 2021.¹⁹⁷ These numbers do not capture the associated mental, emotional, and spiritual trauma of being taken from one's family, community, and culture.

Indigenous youth who are caught in the child welfare system are more likely to experience homelessness; children in the foster care system make up 60 percent of homeless youth and a third of homeless adults.¹⁹⁸ There are strong links between being in the child welfare system and becoming involved in the criminal justice system; two thirds of Indigenous adult inmates have been involved in foster care, group homes or adoption.¹⁹⁹ Indigenous youth in the foster care system are also less likely than other youth to graduate from high school.²⁰⁰ This points to the need for improving the determinants of health for Indigenous families, including adequate housing, poverty reduction, mental health support, and education, to prevent Indigenous child apprehensions.²⁰¹

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Current Pandemic Context: What We Heard

The purpose of this report is to better understand the realities of Indigenous youth and how they have been impacted by the COVID-19 pandemic. This section reviews the research methodology for the report, the project limitations, and the survey findings. Several themes emerged from the survey data: individual well-being, community well-being, community supports, employment and education, and infrastructure. These themes, alongside subsequent recommendations on how to address these themes, will also be discussed.

Methodology

The approach to this survey prioritized an intersectional feminist approach, emphasizing youth leadership and perspectives throughout. The analysis and preparation of this report are also based on Indigenous-specific research methodologies rooted in Indigenous ways of knowing (epistemologies) and ways of being (ontologies). A guiding principle for the report's analysis included Eduaptmunk, which is a Mi'kmaq methodology otherwise known as Two-Eyed Seeing. Two-Eyed Seeing was founded by Mi'kmaq Elders Murdena and Albert Marshall. It encourages seeing through both Western and Indigenous perspectives (two eyes) and in doing so, creating a more thorough understanding of a phenomenon.²⁰² For this report, this methodology allowed the researchers to use the quantitative data from the survey (a Western methodology) and apply the analysis through an Indigenous lens. This approach benefits from using the values of both Indigenous worldviews and Western academic principles.

Survey

The intention of the survey was to develop an understanding of the impacts the COVID-19 pandemic has had on Indigenous youth and gender-based violence. In addition, through the survey data, we aim to share recommendations for how to better serve First Nations, Métis and Inuit youth moving forward. This was done primarily through an online survey that examines the impact that COVID 19 has had on Indigenous youth throughout "Canada". The survey idea came from community practitioners who are part of the National FNMI (Indige-health) Hub,²⁰³ and was advanced after consulting with youth who participated in the FNMI Hub. The Canadian Women's Foundation developed a plan with the research and consulting firm and hub project evaluators, Prairie Research Associates (PRA), and hired three young people to lead the direction of the survey and any other further work. These young people were identified by the FNMI Hub and the Canadian Women's Foundation's senior associate of northern programs.

The recruitment of the youth survey organizers was intentional to include rural, urban, and northern representation. It was the youth leaders who identified the need for the survey to be offered in Inuktitut, in addition to English. They also emphasized the need to address other impacts faced by their communities, for example, accessibility to potable water, or racism in the health care sector. Their leadership also guided the survey to ensure the questions were accessible. Furthermore, the youth leaders identified the need to offer incentives for the survey, so prizes and gift cards were given to participants through a random draw.

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Survey Demographics

The survey was completed by 95 participants between the months of November October 2021 - January 2022. Respondents ranged from 18-30 years of age, with relatively equal distribution throughout. Approximately 52% of participants identified as being First Nations, while 11% identified as Métis and 37% identified as Inuit. The majority of respondents came from the

northern-most regions of “Canada”, with 69.5% of participants coming from one of the three territories (Nunavut, Northwest Territories, and the Yukon). Seventy percent of those who completed the survey identified as female, 15% as male, and 12% as Two-Spirit, non-binary, or as another gender identity. The remaining respondents (3%) preferred not to disclose their gender identity. Eight percent of participants identified as being a person with a disability.

Locations of Survey Respondents



3 survey respondents chose not to disclose their location. The map displays the general area of survey respondents with each red point representing one respondent.

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Survey Regional Representation

PROVINCE/TERRITORY	PERCENTAGE OF PARTICIPANTS
Alberta	5.3%
British Columbia	9.5%
Manitoba	4.2%
New Brunswick	1.1%
Newfoundland and Labrador	3.2%
Northwest Territories	27.4%
Nova Scotia	0%
Nunavut	29.5%
Ontario	2.1%
Prince Edward Island	0%
Quebec	1.1%
Saskatchewan	4.2%
Yukon	12.6%

Recruitment

Initially promotion of the survey was primarily done through grantees of the Foundation, many of whom work with Indigenous youth, and through the Foundation's networks. Unfortunately, this did not yield many respondents. However, responses rose significantly when the youth leaders and the hired youth Inuktitut translator promoted the survey within their community, social, and familial networks. Paid promotion through social media was especially effective for the efforts that targeted the northernmost regions.

Project Limitations

Certain limitations revealed themselves through the research process. Primarily, the issues pertained to resourcing and considerations that must be taken when working with youth. Alongside

the methodological barriers, limitations in the data are also presented in this section.

Resourcing Challenges

A few challenges emerged while resourcing the project. First and foremost, more of the budget should have been allocated for the youth leads to continue working on the project throughout the year. This was especially notable during recruitment, as promotion for the survey took more resources and time than initially anticipated. Additionally, the project timeline also had to be adapted on multiple occasions due to scheduling challenges. Lastly, this was the first time that the Foundation and PRA coordinated work to be done in Inuktitut. Although this is seen as an opportunity to build connections with Inuktitut speakers, it was initially a challenge to find translators and a company to do the layout and the design of the report in Inuktitut.

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Considerations for Working with Youth

Several barriers arose to working with youth, mostly pertaining to legal considerations. For example, all of the youth who helped to promote the survey were minors, which meant needing to establish additional safety protocols around the use of their personal emails and information. Access to a Foundation email address was given to the youth to do the promotion accordingly. This also meant that the Foundation needed to research and adhere to labour laws on minors. Another example was working with one youth who is in foster care. Though not a barrier, having flexible timelines to have additional check-ins with social workers should be considered in further such projects.

Furthermore, youth under 16 were not able to participate. At some institutions across Canada, those aged 16 to 17 do not require parental consent to participate in survey research. However, some of the research topics in our survey were of a sensitive nature regarding mental health, addictions and abuse, thus we made an ethical decision that we would require consent from parents for anyone under 18. As a result of excluding participants under 18, the opportunity arose to develop more tailored research objectives related to post-secondary schooling and employment, with which those 18+ are more likely to have had experiences.

Lastly, two-thirds of the youth survey promoters did not have bank accounts. This led to some challenges that were resolved by working in partnership with the finance department. As the Foundation is aware of the violence and racism Indigenous people can face within financial institutions, it was a priority to seek a resolution that did not restrict youth participation in promoting the survey.

Limitations in the Data

Some limitations in the data emerged throughout the analysis. First, it must be noted that the survey was released later into the pandemic, which may have hindered youth from responding to the survey. Indigenous youth may have been fatigued from the ongoing pandemic or may have been experiencing research fatigue from being surveyed for other reports from other organizations.

Though it is certainly a success that the project received so much input from the northern regions (with 69% of participants coming from the territories), especially considering the infrastructural challenges they often face (for example, low bandwidth), this does prove a significant limitation of the data. Consequently, the data for this report is largely demonstrative of the realities faced by Indigenous youth in the north and less indicative of their southern counterparts. Also of note, only 10% of participants were Métis, meaning that the data may not be indicative of the realities Métis youth have faced throughout the COVID-19 pandemic. Furthermore, the results of the survey are largely indicative of the experiences of young Indigenous women (70% of participants). This can be seen as a success, as the project aimed to be women-centered. However, developing a more fulsome understanding of COVID-19 impacts should emphasize the recruitment of young men, Two-Spirit people, non-binary people, and individuals with other gender identities. Lastly, as the definitions for rural and remote were subjective to participants, statistics demonstrating the differences of experiences for those in urban, rural, and remote settings may not be representative of the current realities of Indigenous youth in “Canada”.

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Survey Findings

Individual Well-being

Almost 28% of respondents have sought support from a professional therapist, counsellor, or spiritual guide. This is unsurprising as participants have noted lower energy and happiness levels since the beginning of the pandemic in March 2020. Forty percent of participants identified they had much less energy since March 2020, and 40% shared that they feel somewhat less happy than in their pre-pandemic. Twenty percent, unfortunately, reported that they are much less happy. An astounding 77% percent of Indigenous youth shared that they are more stressed, with 54% identifying as being significantly more stressed since March 2020. Irritability has also skyrocketed, with approximately three-quarters (73%) of respondents exhibiting higher rates of emotion. Concerningly, rates of feeling anxious (73%) and depressed (78%) have followed a similar trend. This is likely connected to higher rates of feelings of isolation and loneliness (82%). A concerning 84% of Indigenous youth shared that isolation because of the COVID-19 pandemic has had an impact on their overall mental health, with 74% identifying their mental health worsening. Physical wellness has worsened for 56% of Indigenous youth because of changed eating patterns during the pandemic, while only 8% experienced an improvement.

COVID-19 related restrictions largely contributed to these shifts in well-being. Limits on social gatherings were largely identified as the most difficult restriction (61%), followed by self-isolation (43%), travel limitations (43%), and physical distancing (33%). As one youth succinctly shared, “Quarantining alone was terrifying, isolating,

painful, and morbid. Not being permitted to leave a single residence property made me feel claustrophobic, alienated from nature and other humans, and overall distraught.” Another stated: “Since having to quarantine at the beginning of the pandemic, a lot of my past traumas have resurfaced, and I turned to addictions to cope. My mental health has worsened.”

As previously mentioned, these issues result in Indigenous youth finding measures to cope with these changes. One benefit to the pandemic seems to be a shift in sleep levels, with over half of the youth (56%) reporting more sleep than life pre-pandemic. Youth also coped through focusing on hobbies and virtual visits with friends and family (54%). Indigenous youth primarily gravitated toward the following hobbies: spending time in nature (52%), reading (40%), cooking and baking (63%), art (40%), and online shopping (54%). There is a need to create more opportunities for physical outdoor activities, as over half of the participants (54%) suggested that the lack thereof has impacted their mental health. Moreover, the data indicated that special consideration must also be afforded to the excess stress and pressures faced by new and young mothers, as they are responsible for not only themselves but also their children.

Community Well-being

Nearly 40% of respondents experienced a loss of a family member, friend, or colleague, causing fear and grief in youth. Although virtual visits were a common practice for individual well-being, only 33% of interviewees identified that they spend more time with family, whereas 43% experience less family time. Concerningly, 63% of Indigenous youth identified that they spend less time with their friends, and 58% identified that they feel

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less connected with their community. Often, mental illness, fear, depression, loneliness, physical distance (provincial and international borders and travel restrictions), lack of social events or gatherings (lockdowns), political differences (hostility between those with differing opinions about the vaccine) or excess work expectations exacerbated these challenges. One youth shared that “social distancing normalized me being alone”, and this sentiment was shared by many others. Another youth shared that they used to enjoy being in public, but now they “fear the public and rarely leave the house.” Events held online, on the radio, in the outdoors, or in person with limited capacity, social distancing, masks, and rapid testing were some ways communities mitigated the lack of social events in the community.

Community Supports

The youth respondents identified that they had varying access to community supports, with friends, family, and counseling services being utilized most often:

- 11% have used wellness centres
- 41% have used counseling services
- 20% have utilized ceremony. Unfortunately, participants have identified that many ceremonies have been canceled, have limited entry, or rely on Zoom.
- 28% have accessed Elders
- 23% have used food banks or hampers
- 23% have used land-based activities

- 46% have relied on family supports
- 51% have relied on friend supports
- Respondents were most aware of supports offered through wellness centres (63%) and foodbanks and hampers (57%)
- 56% of youth shared that they have access to safe spaces to engage in wellness activities.

Major barriers to accessing these supports include the availability of culturally appropriate resources (39% of respondents), length of wait time to access services (64% of respondents), and the stigma associated with accessing services (37% of respondents). Furthermore, only 28% of participants identified as being active members within their communities, with an additional 60% considering themselves as more passive members of their communities. Therefore, an increase in efforts to draw youth into becoming more active community members may lead to better use of support, and fewer feelings of isolation and loneliness, along with their accompanying effects on mental health.

Lastly, relationships with healthcare providers could be improved. Respondents demonstrated a general ambivalence to healthcare professionals. The majority of respondents had a moderate to complete trust of doctors, nurses, nurse practitioners, psychiatrists, physiotherapists, massage therapists, pharmacists, social workers, dieticians, dentists, and chiropractors. However, social workers remained the least trusted at (44%).

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Employment and Education

Eighteen percent of participants lost their job during the COVID-19 pandemic, and approximately 30% have been unable to find work. Moreover, 21% of youth suggested that limitations on business hours and closures of businesses were one of the top three COVID-19 related restrictions that have proved challenging for their well-being.

Over half (57%) of the respondents shared they took up a new hobby or activity. Some developed new technical skills (20%) or attended school or an educational program (42%). Some respondents suggested that this time was also helpful as it provided an opportunity to “self-reflect, slow down, and re-evaluate” their lives. In juxtaposition, however, approximately 16% of respondents dropped out of school or an educational program. This is unfortunately not a surprise, as approximately 70% of respondents identified they had trouble attending online classes. For half of the respondents, accessing technological resources for online learning proved a barrier. Two thirds of respondents shared that finding an appropriate quiet space to learn was also a challenge.

Infrastructure

Approximately 69% of participants have access to adequate transportation, with 18% having limited to no access. However, 88% of participants do have access to grocery stores in their community or nearby, with an approximate 4% having limited to no access. Over one fifth of participants identified that they and/or their families began

struggling with food security since March 2020, with an additional 10% continuing to struggle with food security issues present prior to the pandemic. Eighty-three percent (83%) of participants have access to clean water, with 7% having limited to no access, and the remaining participants preferring not to disclose.

Only 56% of participants identified that they had access to a reliable internet connection, with a concerning 31% having little to no access. This statistic is especially problematic considering many communities adapted to the COVID-19 pandemic through increasing online supports and events. If only half of the youth can easily access online supports, then programming cannot meet the needs of those for whom it is intended. Therefore, there needs to be an increase in infrastructural supports for bettering internet connectivity, which will likely, in turn, result in an increase in the use of virtual supports. An interim alternative would be for communities to increase supports over the telephone, as 79% of participants demonstrate access to a reliable telephone connection. However, given that approximately 72% of participants shared that they do have access to a computer in their home, increased internet connectivity should be prioritized.

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Recommendations

The following recommendations address the various challenges that emerged within the report. The suggestions are organized thematically into Policy, Infrastructure, Food Security, Education, Wellness Supports, and Distinctions-based Considerations. It must be noted however that these recommendations exist in relation to one another. Therefore, by addressing issues in education, one will likely also see improvements to general wellness. For example, by increasing access to land-based programming, youth will have access to culturally-specific education, will develop capacity and autonomy to resolve food security issues, and will increase health and well-being through physical activity and spending time with community.

Policy:

- There must be an increase on pressures for government at all levels, legislation, and other leading organizations to take action when it comes to youth and communities which face the disproportionate impacts of the COVID-19 pandemic.
- Any such effort must respond to the Truth and Reconciliation Commission's Calls to Action, and align with the United Nations Declaration on the Rights of Indigenous Peoples.

Infrastructure:

- There needs to be an increase in infrastructural supports for bettering internet connectivity, which will likely, in turn, result in an increase in the use of virtual supports. This is especially important for northern and remote communities.
- An interim alternative would be for communities to increase supports over the telephone.

Food Security:

- Food vouchers, hampers, and lunch programs at schools proved helpful solutions to food security issues experienced by participants.
- Increased emphasis on land-based programming and food sovereignty initiatives, especially for youth in remote and northern communities, is a crucial tool to developing long-term food security.

Education:

- There should be an increase in initiatives and awareness campaigns that address the socio-economic and cultural impacts that youth face, including housing issues, as well as access to education and mental health supports. These initiatives could include websites, podcasts, social media pages, and other such media.

PART 2: REPORT FINDINGS

Wellness Supports:

- There is a need to create more opportunities for physical outdoor activities, as over half of the participants (54%) suggested that the lack thereof has impacted their mental health.
- An increase in efforts to raise awareness and draw youth into becoming more active community members may lead to increased service delivery and decreased feelings of isolation and loneliness, along with their accompanying effects on mental health.
- Only 56% of youth shared that they have access to safe spaces to engage in wellness activities, so significant efforts must be put into increasing supports and access to safe spaces.
- Sponsorship or funding opportunities should be augmented for youth to take part in activities outside of their communities. This is especially important for those who have limited access to safe spaces within their community.

Distinctions-Based Considerations:

- Mental health issues and the suicide crisis in the north have been amplified by the pandemic. Targeted supports for Inuit communities and communities in the north must be prioritized.
- There is a general lack of data that is specific to the experiences of Métis youth, a problem which is exacerbated by a lack of clarity and knowledge of the distinct nature of the Métis Nation. More resourcing must go towards acquiring Métis-specific data.
- There is a lack of regional and nation-specific data to understand the distinct experiences of the various First Nations, as well as the urban Indigenous population. More resourcing must go directly to First Nations governments and organizations so that they may be able to develop data specific to their nation and according to their customs.
- More long-term resourcing must go directly to First Nations, Métis, and Inuit governments so that they may build capacity in their communities to not only develop their own data sets but also address the findings of their research. This largely contributes to the self-determination of nations. Furthermore, it ensures that any such efforts are pertinent and impactful for communities.

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Conclusion

The Canadian Women's Foundation's report, *The Impacts of COVID-19 on First Nations, Métis, and Inuit Youth*, has been developed to better understand the realities Indigenous youth are facing due to the COVID-19 pandemic. The report also aims to provide subsequent recommendations to those who work in government, education, and service provision, especially in sectors pertaining to Indigenous youth.

The findings of the report suggest that individual and community well-being have worsened during the pandemic. Although there are some community supports to mitigate these issues, they are often insufficient, under-funded, or inaccessible for the youth in their communities. Specific attention to employment, education, and infrastructure must be prioritized to address these issues.

This report also exhibits that the experiences of Indigenous youth during the COVID-19 pandemic are largely intensified by the pre-existing conditions of their nations and communities. Therefore, in addition to COVID-19-specific responses, appropriate resources must also be dedicated to ensuring that Indigenous people have equitable access to education, employment, and healthcare and wellness services, as well as clean drinking water, housing, food security and other basic standards of living. Furthermore, specialized approaches grounded in the distinct cultures, traditions and knowledge systems of Indigenous peoples are imperative to achieving equity.

Indigenous youth have demonstrated incredible resilience in the face of adversity, and continue to do so. They are made stronger when they are connected to each other, their communities, and with the lands, waters, and ice. The future is in the hands of youth, so we must do all in our collective power to uplift, support, and celebrate them.

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Canadian Women's Foundation

The Canadian Women's Foundation is a national leader in the movement for gender equality in Canada. Through funding, research, advocacy, and knowledge sharing, we work to achieve systemic change. We support women, girls, and gender-diverse people to move out of violence, out of poverty, and into confidence and leadership. Since 1991, our generous donors and supporters have contributed more than \$130 million to fund over 2,500 life-transforming programs throughout Canada.

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