



Gambling Problems in First Nations and Inuit Communities of Québec

A BRIEF STATUS REPORT

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Direction du développement
des individus et des communautés

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1 INTRODUCTION

This report presents an overview of the data on gambling habits and problems in First Nations and Inuit communities of Québec. We will look at international research data on gambling and aboriginal populations, explore gambling opportunities available to First Nations and Inuit communities of Québec, and lastly examine prevalence data specific to Québec.

1.1 ABORIGINAL GAMBLING: RESEARCH CONTEXT

Aboriginal gambling is a sensitive subject in many respects, and gathering prevalence data poses a number of challenges.

According to the National Collaborating Centre for Aboriginal Health, scientific summaries, prevalence studies, systematic reviews, and traditional epidemiological investigations pay little heed to actual aboriginal experience and knowledge systems.¹ However, there is an increasing tendency to incorporate a community's traditional knowledge and world views in investigating and seeking possible solutions to the gambling problems it faces.² Yet the studies that do so do not provide prevalence data on problems, strictly speaking.

Second, a "pan-aboriginal" approach is not possible, as aboriginal people live both on and off reserve, inside and outside communities, in urban and rural settings.³ They live in a variety of regions with diverse characteristics and gambling options.

Moreover, Québec data is scarce and partial, and communities are difficult to compare due to disparate methods that make it impossible to monitor the development of problems over time. According to Greenwood, researchers are so focused on chronic disease that addiction has been overlooked.⁴ This has delayed research and the implementation of prevention, screening, and treatment services as well as efforts to change gambling options.

Furthermore, aboriginal gambling problems have been widely covered by the media in recent years. In 2005 CBC/Radio-Canada revealed that in certain towns where aboriginal people were the majority, there were three to four times more video lottery terminals than the national average.⁵ It reported on the huge impact gambling had on the community, which wagered \$4 million through the terminals annually. It noted how poor the population was, with 8 out of 10 people unemployed, as well as all the cases of parental negligence and the

¹ National Collaborating Centre for Aboriginal Health (2007). *Exploring Evidence in Aboriginal Health*. University of Northern British Columbia.

² McGowan, V. & Nixon, G. (2004). "Blackfoot Traditional Knowledge in Resolution of Problem Gambling: Getting Gambled and Seeking Wholeness." *Canadian Journal of Native Studies*, Vol. 24, No. 1, pp. 7–35; Couchees, F. (2005). *Gambling in Eeyou Istchee: Preliminary Fact-Finding*. Montréal: Cree Board of Health and Social Services of James Bay; Aboriginal Health & Medical Research Council of NSW (2008). *Processing problems: Gambling issues and responses for NSW Aboriginal communities*.

³ Greenwood, M. (2006). *Landscapes of Indigenous Health: An Environmental Scan by the National Collaborating Centre for Aboriginal Health*.

⁴ *Idem*.

⁵ http://www.radio-canada.ca/actualite/v2/enjeux/niveau2_2295.shtml. Today four terminals remain in Schefferville, which is above the national average. In 2007 Fondation Mise sur toi launched a program to prevent gambling problems in these communities: <http://misesurtoi.ca/2008/06/02/fondation-kanatha>.

fact that 75 individuals had attempted suicide in the previous year. After a band council resolution called for the removal of video lottery terminals (VLTs),⁶ Loto-Québec announced that some would be withdrawn. Given extensive media coverage, there is still a risk of stigmatization when addressing this issue.

1.2 CURRENT KNOWLEDGE

In many jurisdictions around the world, gambling problems among aboriginal⁷ or First Nations people are receiving researcher attention, though relatively little attention compared to other health and social problems, as we have seen.

Yet studies in the U.S., Australia, and New Zealand concur that aboriginal peoples are proportionally underrepresented among problem and pathological gamblers. As a whole, eleven studies show that the aboriginal population has a problem gambling rate 2 to 16 times higher than the non-aboriginal population.⁸

In Canada, four studies on gambling problems among Alberta First Nations have been conducted to date. Chevalier notes that according to Adebayo's study,⁹ 98% of grade 7 and 8 students in the Northern Lights School Board (Division 69) had taken part in games of chance in the twelve months preceding the study. Hewitt and Auger¹⁰ showed that 89% of aboriginal high school students living inside or outside communities had wagered money in the preceding 12 months and 49% had or were at risk of developing a gambling problem.¹¹ As regards adults, Auger and Hewitt¹² showed that 88% of a sample of Alberta aboriginal people living inside or outside communities had bet money in the preceding year and 24% had a gambling problem. Smith and Wynne¹³ estimated that 84% of aboriginals and Metis in Alberta had wagered money in the preceding 12 months and 17% had a gambling problem.¹⁴

Risk factors identified include the availability and relative danger of gambling options, poverty and unemployment, social marginalization, the presence of other addictions, cultural beliefs

⁶ Gagnon, K. (May 3, 2009). "Fini la loterie vidéo chez les Innus à Scherfferville." *La Presse*, p. A17.

⁷ In this paper we have retained the names used in the original studies, which vary considerably from one jurisdiction to another: native people, Indians, aboriginals, First Nations. In Québec data, the term *autochtones* includes the First Nations (Abenaki, Algonquin, Attikamek, Cree, Huron-Wendat, Innu [Montagnais], Malecite, Micmac, Mohawk, Naskapi), Metis, and Inuit communities. See table in the appendix, page 27.

⁸ Wardman, D., El-Guebaly, N. & Hodgins, D. (2001). "Problem and pathological gambling in North American aboriginal populations: A review of the empirical literature." *Journal of Gambling Studies*, 17(2), pp. 81–100.

⁹ Adebayo, B. (1998). "Gambling behaviour of students in grades seven and eight in Alberta, Canada," *Journal of School Health*, 68 (1), pp. 7–11.

¹⁰ Hewitt, D. & Auger, D. (1995). *Firewatch on Aboriginal Adolescent Gambling*. Edmonton: Nechi Training, Research & Health Promotions Institute.

¹¹ Wardman (op.cit.) notes that the studies conducted in schools are only partially valid due to the high dropout and low education rate in aboriginal communities.

¹² Auger, D. & Hewitt, D. (2000). *Dream Chaser: Alberta Aboriginal Adult Gambling Prevalence Study*. Edmonton: Nechi Training, Research & Health Promotions Institute.

¹³ Smith, G. & Wynne, H. (2002). *Measuring Gambling and Problem Gambling in Alberta Using the Canadian Problem Gambling Index (CPGI): Final Report*. Edmonton, AB: Alberta Gaming Research Institute.

¹⁴ Chevalier, S. (2008). "Les jeux de hasard et d'argent" in Anctil, M. & Chevalier, S. (2008). *Habitudes de vie en matière de consommation d'alcool, de drogues et de pratiques des jeux de hasard et d'argent. Enquête de santé auprès des Cris 2003, Cycle 2.1 (Enquête sur la santé dans les collectivités canadiennes Ilijiu Aschii)*. Institut national de santé publique du Québec and Cree Board of Health and Social Services of James Bay.

and practices, and the state of prevention programs and health care systems in the communities.¹⁵ A lack of recreational, job, and educational opportunities caused individuals to turn to gambling to pass the time or try to improve their financial situation.¹⁶ This increased risk is tied to a sense of powerlessness arising from the sense of cultural, social, and economic marginalization.¹⁷ A number of these studies mention the absence or inadequacy of community resources or a lack of awareness of them.¹⁸

¹⁵ Productivity Commission (1999a). *Australia's Gambling Industries*, Report No. 10, Volume 3, Appendix E. *Gambling in Indigenous Communities*. Canberra (AU): AusInfo; National Research Council (1999). *Pathological Gambling: A Critical Review*. Washington, D.C.: National Academy Press; Zitzow, D. (1996). "Comparative Study of Problematic Gambling Behaviors between American Indian and Non-Indian Adults in a Northern Plains reservation." *American Indian and Alaska Native Mental Health Research*, 7(2), pp. 27–41; Volberg, R. & Abbott, M. (1994). "Lifetime Prevalence Estimates of Pathological Gambling in New Zealand." *International Journal of Epidemiology*, 23(5), pp. 976–983; Volberg, R. (1994). "The prevalence and demographics of pathological gamblers: Implications for public health." *American Journal of Public Health*, 84(2), pp. 237–241; Wardman, D., El-Guebaly, N. & Hodgins, D. (2001). "Problem and Pathological Gambling in North American Aboriginal Populations: A Review of the Empirical Literature." *Journal of Gambling Studies*, 17(2), pp. 81–100; Aboriginal Health & Medical Research Council of NSW (2007). *Pressing Problems. Gambling Issues and Responses for NSW Aboriginal Communities*. New South Wales; Centre for Social and Health Outcomes Research and Evaluation & Te Ropu Whariki (2008). *Assessment of the Social Impacts of Gambling in New Zealand. Report to Ministry of Health*. New Zealand.

¹⁶ Wardman, op.cit.

¹⁷ McGowan, op.cit.

¹⁸ Wynne, H. & McReady, J. (2005). *Examining Gambling and Problem Gambling In Ontario Aboriginal Communities. Five Community Final Research Reports*. Submitted on behalf of Ontario Federation of Indian Friendship Centres and the Metis Nation of Ontario; Wardman, op.cit.; Aboriginal Health & Medical Research Council of NSW (2008). *Gambling Issues and Responses for NSW Aboriginal Communities*. Community report, May 2008.

2 GAMBLING OPPORTUNITIES SPECIFIC TO FIRST NATIONS AND INUIT COMMUNITIES OF QUÉBEC

Gambling habits and problems are directly related to the number and availability of various forms of gambling.¹⁹ A brief description of the gambling opportunities available to aboriginals puts their gambling practices and problems in context.

Games are deeply rooted in aboriginal cultural traditions and have been the subject of several ethnographic reports, which describe various types involving dice, hands, or riddles.²⁰ Other sources mention skill-testing activities (Bola, bilboquet, archery) or those involving physical force, endurance, or teamwork.²¹ According to Bélanger, games were originally a source of entertainment and were common at various social events, but could also be associated with important religious rites, notably funeral or healing ceremonies, or used for divination purposes. Games served to replay heroic exploits, interact with the cosmos, and share wealth.²²

First Nations and Inuit people in Québec, like the rest of the population, have been exposed to gambling opportunities provided by the government corporation Loto-Québec for several decades now.²³ Added to this are various gambling operations run by the communities themselves. In 2004, the Secretariat of the Special Assembly of First Nations Chiefs unanimously adopted a resolution requesting that the Assembly actively work with the federal government to amend section 207 of the Criminal Code of Canada, which makes all activities related to games of chance illegal for all organizations other than a provincial government, its agents, and license holders. This initiative aimed to give First Nations the same powers and responsibilities with respect to games of chance that provincial governments had had for the previous two decades.²⁴ These demands were part of a broader context where nearly 400 casinos²⁵ were managed by First Nations in the United States, compared to 15 in Canada.

¹⁹ National Research Council. (1999). *Pathological Gambling: A Critical Review*. Washington, D.C.: National Academy Press; Chevalier, S. and Papineau, É. (2007). *Analyse des effets sur la santé des populations des projets d'implantation de salons de jeux et d'hippodromes au Québec. Rapport déposé aux directeurs régionaux de santé publique*. Direction de santé publique de Montréal and INSPQ.

²⁰ Culin, S. (1992). *Games of the North American Indians, Volume 1: Games of Chance*. University of Nebraska Press, 1992. Originally published as the 24th Annual Report of the Smithsonian Institution's Bureau of American Ethnology in 1907; Zaslavsky, Claudia. "Native American Games and Activities." In Hankes, Judith Elaine & Fast, Gerald R. (eds.) *Perspectives on Indigenous People of North America*. NCTM, Reston VA, 2002.

²¹ Therrien-Pinette, J.-C. (2007). "Le jeu chez les Premières Nations." Symposium: Les multiples facettes du jeu. Université Laval, Québec City.

²² Bélanger, Y. (2008). "First Nations Gaming as Self-government Imperative: Ensuring the Health of First Nations Problem Gamblers." Presentation at the 7th Annual Alberta Conference on Gambling Research. Consulted January 2009, http://gaming.uleth.ca/agri_downloads/4330/Belanger_AGRI_Conference_2008.ppt.

²³ In Nunavik, Loto Québec has been selling instant lottery tickets for about two years in certain communities, and 6/49 type ordinary lottery terminals have been available for about a year in Kuujuaq.

²⁴ Special Chiefs Assembly (2004). Resolution No. 94: Gaming Jurisdiction and the Criminal Code. Ottawa (Ontario). Consulted January 2009, <http://www.afn.ca/article.asp?id=254>.

²⁵ National Indian Gaming Commission (2004). *Annual Report 2004*. Consulted January 2009, http://www.nigc.gov/LinkClick.aspx?link=reading_room%2fbiennial_reports%2fnigc_2004_annual_report.pdf&t abid=118&mid=753.

Gambling operations were seen as a major economic lever²⁶ and a tool²⁷ for reinforcing the identity of poor and marginalized populations. At the same time, they could lead to the undesirable consequences of gambling and an increase in gambling problems.²⁸ Although aboriginal gambling operations are illegal in Québec, they are tolerated to some extent, as the following examples illustrate.

2.1 VIDEO LOTTERY TERMINALS (VLTs)

All villages in Iiyiyiu Aschii and Nunavik (except Kuujjuarapik and Kuujjuak) are “dry communities,” where the sale and consumption of alcohol are banned by band council and municipal bylaws. Consequently, no video lottery machine can be operated in these communities because licenses to operate VLTs are tied to alcohol permits. According to Couchees, one of the communities in Iiyiyiu Aschii has ten video lottery terminals run by a band-owned entity, based on a 50/50 partnership with an outside company. The machines have been there since about 1994.²⁹

2.2 BINGO

Bingo is one of the most popular games with the Inuit and Cree. Some communities organize bingo games in halls, others through local radio, and all communities have access to the weekly bingo games broadcast on regional radio. Income from the bingo games is usually earmarked for sports and community events as well as funding for local organizations. The Mohawks operate the Mohawk Super Bingo in Kahnawake and the Mohawk Bingo Palace in Akwesasne.

According to a source in Nunavik, poker games and tournaments are increasingly popular and are even gradually replacing bingo.³⁰

2.3 POKER

Due to poker's growing popularity, First Nations have recently developed poker operations in various areas. Gambling is quite prevalent in Kahnawake, despite the fact that residents voted against the establishment of a casino in a 2003 referendum. Unlike elsewhere in Québec, the Mohawk Band Council does not enforce the *Tobacco Act*, which is an additional attraction for poker players who smoke. Gambling operations are overseen by the Kahnawake Gaming Commission and are available on three gambling sites. The Snakes Club boasts 14 tables with croupiers for a total of about 100 seats. Plaza 138 provides six tables for ten players (60 seats) and two high-stakes tables (16 seats), all with croupiers. Additional tables are available for tournaments for a total of over 76 seats. Alcohol and meals are served free-of-charge. The Okwari Poker Palace has ten electronic tables for 10 players

²⁶ Belanger, Y. (2006). *Gambling with the Future: the Evolution of Aboriginal Gaming in Canada*. Purich Publishing Ltd. Canada.

²⁷ Pastinelli, M. (forthcoming). *Représentation des identités autochtones et 'contacts' au casino: ethnographie des pratiques du soi et de l'autre dans les casinos autochtones de la Saskatchewan*. Research report.

²⁸ Bélanger, op.cit.

²⁹ Couchees, F. (2004), op.cit. Couchees, F. (2005). *Gambling in Eeyou Istchee: Preliminary Fact-Finding*. Montréal: Cree Board of Health and Social Services of James Bay.

³⁰ Personal communication during the *Qanuippitaa?* Inuit Health Survey.

each (100 seats) and one VIP lounge with two tables for eight players (16 seats), for a total of 116 seats. According to various journalists, a number of clandestine poker joints operate on the reserves without band council approval.³¹

Until quite recently, First Nations have operated poker games and tournaments. The organization “First Nations Poker Trail” started running poker tournaments in 2004, including in Kahnawake and Pessamit, as well as Uashat mak Mani-Utenam, near Sept-Îles.³²

2.4 ONLINE GAMBLING

The Kahnawake Gaming Commission also supervises Mohawk Internet Technologies (MIT), whose servers host nearly 500 international online casinos and poker sites.

2.5 LOTTERIES

In Iiyiyiu Aschii and Nunavik, the list of gambling opportunities available to aboriginals also includes Nevada—instant pull-tab lottery tickets. These lotteries must be run by religious or community organizations to fund charity or community activities.^{33,34}

³¹ Gravel, S. (2007). “Texas Hold'em chez les Mohawks.” *La Presse*, 11-11-2007; Duddin, J.-M. (2006). “D'autres salons existent.” *Journal de Montréal*, 06-09-2006.

³² M. André Boyer, president of the Quebec Association of Poker Tournament Players, told us in January 2009 that the First Nations Poker Trail had recently ceased its activities.

³³ Couchees, F. (2005). *Community Patterns of Gambling in Eeyou Istchee: Preliminary Fact-Finding*. Montréal: Cree Board of Health and Social Services of James Bay.

³⁴ Kiedrowski & Associates Inc. (2001). *Native Gaming and Gambling in Canada*. Consulted January 2009, <https://dspace.ucalgary.ca/bitstream/1880/238/1/Final%20Native%20Gaming5.pdf>.

3 GAMBLING HABITS AND PROBLEMS IN QUÉBEC

3.1 HEALTH AND SOCIAL SERVICES REGION FOR THE JAMES BAY CREE (IYYIYU ASCHII)

Two studies present data on the James Bay population. The first analyzes data from the Canadian Community Health Survey in Iiyiyiu Aschii,³⁵ and the second is a qualitative study on gambling in these communities.³⁶

According to the first study, two-thirds (65%) of people age 12 and over living in Iiyiyiu Aschii gamble. As many women (67%) participate as men (62%). Young people play proportionally much less than their elders: 25% of people age 12–17, 76% of those age 18–29, and 69% of people age 30 and over gamble, regardless of where they live.

Bingo, instant and regular lotteries, and video lottery terminals are the most popular forms of gambling. It is worrying that 16% of minors (age 12 to 17) play bingo and 11% play regular lotteries. Adults in these communities play video lottery terminals more than in the south and they play in casinos as much as their southern counterparts, despite the distance. Bingo is still popular.

Table 1. Prevalence of Gambling (%) in People Age 18 and Over in Iiyiyiu Aschii (2003) and in Québec as a Whole (2002)³⁷

Adults	Iiyiyiu Aschii	Québec as a Whole
Bingo	45	9.01
Instant Lotteries	43	37.0
Regular Lotteries	39	65.31
Video Lottery Terminals	25	7.81
Slot Machines	16	16.3
Cards	6	10.5

While adults in Iiyiyiu Aschii play proportionally less than the Québec population as a whole (72% vs. 81%), 9% have a gambling problem, or the risk of developing one (compared to 2% of the population in the rest of Québec). Data from the current study shows that 82% of players presenting a moderate or pathological gambling habit are also “current drinkers.”³⁸ Although the sample size does not permit a precise estimate of the prevalence of gambling

³⁵ Chevalier, S. (2008). *Gambling*. In Anctil, M., Chevalier, S. (2008). *Lifestyles Related to Alcohol Consumption, Drugs and Gambling. Cree Health Survey 2003, Cycle 2.1* (Canadian Community Health Survey, Iiyiyiu Aschii). Institut national de santé publique du Québec and the Cree Board of Health and Social Services of James Bay.

³⁶ Couchees, F. (2005). *Gambling in Eeyou Istchee: Preliminary Fact-Finding*. Montréal: Cree Board of Health and Social Services of James Bay.

³⁷ All comparative data on Québec come from a provincial prevalence survey in 2002: Chevalier, S., Hamel, D., Ladouceur, R., Jacques, C., Allard, D., and Sévigny, S. (2003). *Comportements de jeu et jeu pathologique selon le type de jeu au Québec en 2002*. Montréal and Québec City: Institut national de santé publique du Québec and Centre québécois d'excellence sur la prévention et le traitement du jeu.

³⁸ Current drinkers are defined as persons who regularly or occasionally had a glass of alcohol during the twelve months preceding the survey.

problems in minors, they play half as much as secondary school students in Québec as a whole.

The second, more qualitative study surveyed 44 key people working in health and social services and in the Cree community at large. It mainly recorded the nature and function of the various forms of gambling available in the Iiyiyiu Aschii region.

Bingo games, instant lotteries, various types of draws, the Loto-Québec lotteries, and VLTs are the main forms of gambling available. Some Cree gamble at casinos and on VLTs outside their communities (Montréal, Radisson, Chibougamau, Matagami, and Val-d'Or). The first three types of gambling are operated by community organizations, such as sports and recreational associations, fundraising committees, and local radio stations. They are seen as playing a social, money redistribution role in the community, funding food banks, health care services in the south,³⁹ and aid to the needy, in particular. The profits from these forms of gambling also subsidize associations and sports tournaments, school trips, and daycare centers, etc. Community-run gambling is considered to be beneficial in that the money is redistributed among community residents, in contrast to VLTs and Loto-Québec, which represent a net loss (except for bar owners who house the VLTs and keep a percentage of the profits).

The study reported a pernicious aspect of this type of gambling: The cohabitation of state-run and community-run gambling significantly boosts the number of opportunities to gamble, sanctions gambling, and makes it a dominant leisure activity to the point of causing numerous social problems. The fact that local gambling bankrolls charitable and community activities legitimizes gambling in a way. Furthermore, the tradition of community solidarity results in gambling debts being shouldered by the entire family and perpetuates gambling problems.

As for the health and social consequences, community leaders and health officials in Iiyiyiu Aschii worry that paychecks are being used for gambling rather than buying food. They are also deeply concerned about child neglect, the decline in attendance at citizens meetings, and family breakups caused by gambling. According to some, alcohol addiction is being replaced by gambling addiction or by a combination of the two.

Organizations that run local gambling (radio stations and sports and recreational centers) had nothing negative to say about the impact of gambling on their communities. Others will say that some individuals and organizations are in a state of denial about the problem.

The data from this survey on the gambling preferences of the Cree and the presence of gambling (and alcohol) problems generally confirm the quantitative data collected by Chevalier.

³⁹ Sometimes members of the community must travel to cities in the south for medical treatment, which is expensive for them and their families.

3.2 NUNAVIK HEALTH AND SOCIAL SERVICES REGION⁴⁰

As a part of his far-reaching health survey in Nunavik, the Institut national de santé publique du Québec collated data on gambling habits. In Nunavik, 60% of the Inuit population gamble at least once a year, while 31% do so on a weekly basis. Women (67%) gamble significantly more than men (53%).

Lotteries are the favorite form of gambling (42%), followed by bingo (36%). Women are more attracted by bingo and instant lotteries than men, while the latter prefer card and dice games.

Although the Inuit play proportionately less than the Québec population as a whole, they play more bingo and dice and card games.

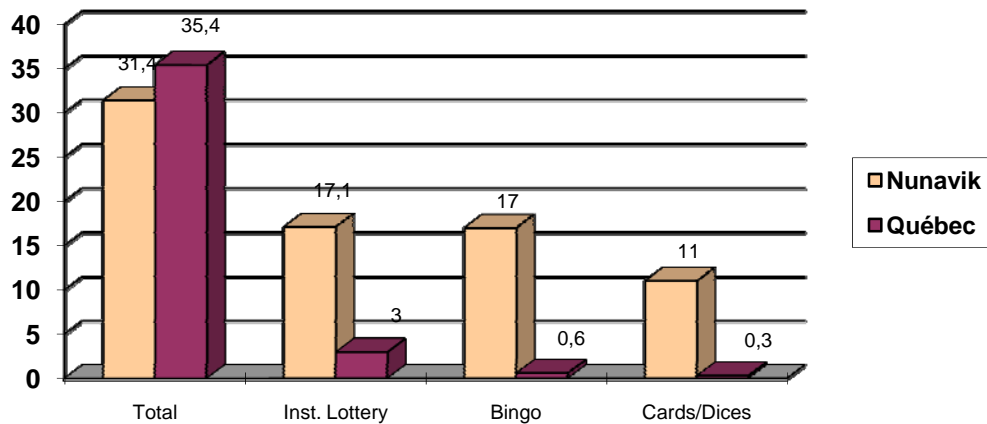


Figure 1. Weekly Gambling Participation Rates by Game (%) of People Age 18 and Over in Nunavik (2004) and Québec as a Whole (2002)

No questionnaire identifying gambling or pathological gaming problems was administered in the course of this survey. However, the average amount of money spent per year on gambling (\$900 by the general Québec population, but \$3,300 more per person in Nunavik⁴¹) is a good indicator of gambling problems. Card and dice players spend considerably more money than the average Inuit, namely \$4,650 a year. An alternative calculation method, which minimizes the effect of outliers, confirms this north/south gap. Sixty-two percent of the Inuit population spends over \$10 a week, or \$520 a year, compared to only 9% for the Québec population as a whole. The fact that women spend more than men is also a trait specific to Nunavik. Some 22% of Nunavimmiut consider that they spend too much money and time on gambling, regardless of gender, age, or type of gambling.

⁴⁰ Muckle, G., Boucher, O., Laflamme, D., Chevalier, S. (2007). *Qanuippitaa? How are we?: Alcohol, Drug Use and Gambling Among the Inuit of Nunavik: Epidemiological Profile* (Kuujjuaq): Nunavik Health and Social Services Region; Montréal: Institut national de santé publique du Québec.

⁴¹ Nechi Training and Research & Health Promotions Institute (1995). *Spirit of Bingoland: A Study of Problem Gambling Among Ontario Native People*. Edmonton, Alberta.

3.3 FIRST NATIONS OF QUÉBEC AND LABRADOR⁴²

In 2002 the First Nations of Québec and Labrador Health and Social Services Commission (FNQLHSSC) conducted a First Nations Regional Longitudinal Health Survey. Over the 12 months preceding the survey, 8.4%* of adults had gambled and lost more money than they could afford.⁴³ This proportion declines with age from 10.8% in people age 18 to 34 to 3.6% in those age 55 and over.

Figure 2 illustrates the types of gambling where respondents lost more money than they could afford, by gender. Except for bingo, a greater proportion of men lost more money than they could afford than women.

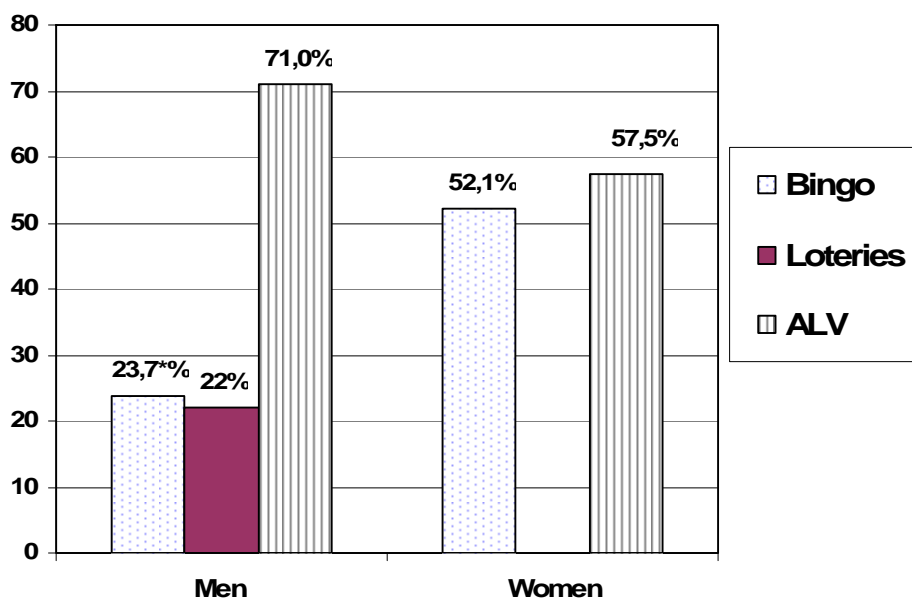


Figure 2. Percentage of Adults Having Gambled and Lost More Money Than They Could Afford, by Gender⁴⁴

Individuals who lost more money than they could afford did so most frequently on video lottery terminals (65.1%).⁴⁵

The proportion of excessive gambling evaluated in this last section of the questionnaire has no clinical value, but it indicates that the problems caused by gambling are severe. Out of a list of social problems that adults had to evaluate as minor, major, or not causing a problem

⁴² First Nations of Québec and Labrador Health and Social Services Commission (2008). *First Nations Regional Longitudinal Health Survey 2002. Report on First Nations Living in the Communities*. Consulted January 2009, <http://www.cssspnql.com/eng/recherche/documents/RHS2002-InCommunities.pdf>.

Note: This data was collated from 23 communities in Québec and Labrador and excludes the Cree and Inuit. Part of the survey concerned First Nations people living in urban settings, but their gambling habits were not analyzed.

⁴³ Self-evaluation by respondents.

⁴⁴ Data followed by an asterisk (*) has a high sampling variability (coefficient of variance between 16.6% and 33.3%) and should be interpreted with caution. Data on lottery playing by women is not presented because the coefficient of variance was too high (33.3% or higher).

⁴⁵ Percentages for private card games and sports betting were not statistically valid.

in their family in the 12 months preceding the survey, gambling problems were ranked fourth after alcoholism, drug or medication abuse, and verbal or psychological abuse. The percentage of adults having experienced minor or major gambling-related problems in the family was 14% and 7%*, respectively.

We should point out that one part of the survey concerned First Nations people living in urban environments, but their gambling habits were not analyzed. Pan-Canadian data (which did not take into consideration aboriginals living on reserves) indicated, however, that aboriginal players (18%) outside reserves were more susceptible than non-aboriginals (6%) to be at-risk gamblers.⁴⁶

⁴⁶ Marshall, K., Wynne, H. (2003). *Fighting the Odds: Perspectives on Labour and Income*. Statistics Canada, No. 75-001-XIF in the catalogue, Vol. 4, No. 12, December 2003.

4 PUBLIC HEALTH ISSUES

The data on the prevalence of gambling problems in First Nations and Inuit communities is neither mutually comparable nor applicable to members living outside the community. But in general, data from Québec, Canada, and abroad consistently shows a significantly higher rate of problem gambling among aboriginal populations.

The research indicates that the gambling problems among aboriginals may be precipitated by specific risk factors such as access to gaming, the level of risk inherent in certain games (in particular electronic gambling devices), parental modeling of gambling, poverty, and higher rates of alcohol and drug consumption. Inversely, gambling problems can affect many quality-of-life factors such as financial situation, relationships with family, friends, and community, care of children and elderly persons, self-esteem, performance in school or training, employment, and overall quality of life.

In order to improve quality of life and reduce social inequalities in health, the public health approach should be to target overall improvement in housing, education, and job readiness as well as access to health care. As for the social health problems linked to addiction, the focus should be on prevention services and accessible, integrated treatment. FNQLHSSC maintains that services aimed at fighting violence, psychological distress, suicide, alcoholism, drug abuse, and pathological gambling cannot work without synergy and coordination and that a full range of services must be available in communities and treatment centers in order to fight the scourge of addiction, “including pathological gambling and synthetic drugs.”⁴⁷

Access to gambling is another prevention challenge. Despite the known hazards associated with games of chance and money, the data shows that gaming itself benefits both communities and individuals, since fundraising campaigns and activities provide benefits to communities, and games are an important means of socialization.⁴⁸ Traditional gaming activities provide cohesion and bring legitimacy to gaming in communities. Because such gaming is deeply rooted in aboriginal tradition, the notion of risk associated with certain types of gaming such as poker or video lottery terminals is new, minimized, or unknown. To mitigate the increased symbolic and physical accessibility, awareness campaigns on the hazards of excessive gambling and a greater balance between state- and aboriginal-run gaming may help communities grappling with high rates of problem gambling.

In terms of research, Québec data reveals a number of specific areas of concern that should be the focus of additional research: the amount of money gamblers spend on gambling, the exposure or general access of minors to gambling, the high proportion of women among gamblers, the link between alcohol and problem gambling, specific problems related to video lottery terminals, gambling problems among aboriginals living outside the community, and the increased normalization of gaming caused by the coexistence of Loto-Québec products and traditional gambling opportunities in aboriginal communities.

⁴⁷ First Nations of Québec and Labrador Health and Social Services Commission (2008). *Québec First Nations Health and Social Services Blueprint 2007–2017*, consulted January 2009, www.cssspnql.com.

⁴⁸ McDonald, H. and Wombo, B. (2006). *Indigenous Gambling Scoping Study—Draft Report*. School for Social and Policy Research, Charles Darwin University, Darwin.

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APPENDIX

**FIRST NATIONS AND INUIT POPULATIONS
OF QUÉBEC AS OF 2007**

FIRST NATIONS AND INUIT POPULATIONS OF QUÉBEC AS OF 2007⁴⁹

The communities for which data is presented in this report are the Inuit, Cree, and First Nations of Labrador communities totaling around 80,000 people.

Nations	Total	Residents	Nonresidents
Abenaki			
Odanak	1,852	306	1,546
Wôlinak	222	70	152
Total	2,074	376	1,698
Algonquin			
Eagle Village-Kipawa	781	268	513
Hunter's Point	218	8	210
Kitcisakik	416	356	60
Kitigan Zibi	2,681	1,519	1,162
Lac-Simon	1,582	1,287	295
Pikogan	843	552	291
Rapid Lake	648	530	118
Timiskaming	1,624	601	1,023
Winneway	705	372	333
Total	9,498	5,493	4,005
Attikamek			
Coucouchache	n/a	n/a	n/a
Manawan	2,271	1,981	290
Obedjiwan	2,392	2,003	389
Wemotaci	1,500	1,218	282
Total	6,163	5,202	961
Cree			
Chisasibi	3,739	3,609	130
Eastmain	647	611	36
Mistissini	3,860	3,327	533
Nemiscau	610	596	14
Oujé-Bougoumou	n/a	n/a	n/a
Waskaganish	2,365	1,984	381
Waswanipi	1,749	1,337	412
Wemindji	1,335	1,221	114
Whapmagoostui	815	805	10
Total	15,120	13,490	1,630
Huron-Wendat			
Wendake	2,999	1,307	1,692
Total	2,999	1,307	1,692

⁴⁹ <http://www.ainc-inac.gc.ca/ai/scr/qc/aqc/pop-fra.aspv>.

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A Brief Status Report

Nations	Total	Residents	Nonresidents
Innu (Montagnais)			
Betsiamites	3,503	2,761	742
Essipit	416	182	234
La Romaine	1,037	978	59
Mashteuiatsh	4,836	2,060	2,776
Matimekosh and Lac-John	841	743	98
Mingan	522	507	15
Natashquan	917	861	56
Pakuashipi	299	298	1
Uashat and Maliotenam	3,544	2,885	659
Total	15,915	11,275	4,640
Malecite			
Cacouna and Whitworth	775	1	774
Total	775	1	774
Micmac			
Gaspé	503	0	503
Gesgapegiag	1,236	562	674
Listuguj	3,287	1,944	1,343
Total	5,026	2,506	2,520
Mohawk¹			
Doncaster	n/a	n/a	n/a
Kahnawake	9,455	7,389	2,066
Kanesatake	2,017	1,342	675
Total	11,472	8,731	2,741
Naskapi			
Kawawachikamach	637	593	44
Total	637	593	44
General list (Registered Indians not associated with a nation)	70	1	69
Registered Indians²	69,749	48,975	20,774

Nations	Total	Residents	Nonresidents
Inuit			
Akulivik	536	509	27
Aupaluk	163	162	1
Chisasibi	116	90	26
Inukjuak	1,404	1,326	78
Ivujivik	286	271	15
Kangiqsualujjuaq	781	758	23
Kangiqsujuaq	593	559	34
Kangirsuk	503	446	57
Killiniq	n/a	n/a	n/a
Kuujuuaq	1,742	1,602	140
Kuujuarapik	561	475	86
Puvirnituq	1,496	1,400	96
Quaqtaq	346	322	24
Salluit	1,249	1,169	80
Tasiujaq	243	236	7
Umiujaq	404	372	32
Inuit³	10,423	9,697	726
Grand Total	80,172	58,672	21,500

NOTES

¹ Only a part of the Akwesasne Mohawk reserve is in Québec. With regard to administration, this community falls under the regional Ontario office of Indian and Northern Affairs Canada (INAC).

² Registered Indians are recorded in accordance with the Indian Act. This way, the number of residents and nonresidents in each community can be determined. Source: INAC Indian Register as of December 31, 2007.

³ The Inuit are registered as beneficiaries of the James Bay and Northern Québec Agreement. This way, the number of residents and nonresidents in each municipality can be determined. Source: Ministère de la Santé et des Services sociaux du Québec as of December 31, 2007.

