Together, with provincial and federal partners, our Mi’kmaq communities in Nova Scotia created the **Nova Scotia First Nations Client Linkage Registry**

This is an update to the communities about our health information, produced by the *Strength in Numbers Project (2018)*.

*At this time, our Registry does not include Acadia and Sipekne’katik First Nations’ population numbers.*

between 2004 – 2013
80% of all deaths in our communities were premature, compared to 38% in NS overall.

6 out of every 10 deaths in our communities could potentially have been avoided with prevention or treatment.

Let’s take a look at our leading causes of death to see what we can do to help people in our communities live longer.

We know what to do. We have the information to back it up.

Data for this bulletin were obtained from:
- Cardiovascular Health Nova Scotia
- NS Trauma Program
- NSDHW, Investment and Decision Support
Rates of smoking, high blood pressure, high cholesterol & diabetes were higher among our community members who had a heart attack or heart failure.

Our data is telling us that we can live longer by tackling these risks head on. That includes better screening for and management of health problems such as high blood pressure and diabetes.
INJURY IS THE #2 CAUSE OF DEATH FOR MEN & #3 FOR WOMEN IN OUR COMMUNITIES.

Our RATES OF INTENDED INJURY tell us that:
- we need a community-based approach to mental health and addictions services
- we need to make sure that people in our communities get the help they need, especially men between the ages of 20-39.

Many intentional and unintentional injuries resulted in deaths that could have been prevented.

Here are a few causes of major trauma injuries (2004-2014), some of which resulted in death:

- ASSAULT:
  - FNs: 36%
  - NS: 8.5%

- MOTOR VEHICLES CRASHES:
  - FNs: 23%
  - NS: 36%

- FALLS:
  - FNs: 20%
  - NS: 31%

Between 2004-2013 suicide was the cause of death for about 800 people among the NS population as a whole, and less than 30 within our communities.

Even so, this equals a rate of suicide that is much higher for First Nations compared to Nova Scotia – particularly for males aged 20-39, where the rate in our communities is 9x higher.

Let’s talk about how to make our First Nations safer, including how mental health & addictions is affecting our communities.
Talk to your Community Health Nurse about living longer.

Overall …
Our data shows that 69% of avoidable deaths in our communities were preventable and 31% were treatable. That’s good news, because it means that there are ways to change things for the better.

This raises some questions. What are the barriers to the services we have? Do we need different services altogether? Is part of the problem a lack of cultural safety in the provincial health care system?

There are 3 things to take away from our health data about how we can improve the odds of living longer.

1. We need to do more to **PREVENT** the things that are causing our people to die young.

2. We can be doing better at **DETECTING AND MANAGING** illness before it takes a major toll.

3. We need the right **TREATMENT** at the right time in the right place.

We know all the risk factors. We also know that a healthy outside starts from the inside.

Screening is an important way to beat the conditions that are harming us.

Having access to culturally safe programs and services is key to living longer.

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