

# UBC study shows increased risk of infectious disease in children of residential school survivors

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(PhysOrg.com) -- For the first time ever, research has revealed a statistical connection between residential schools and infectious disease rates. New findings from a University of British Columbia study on at-risk Aboriginal young people in British Columbia point to alarming patterns of historical trauma, injection drug use and Hepatitis C (HCV) infection.

The findings were released by the Cedar Project—a Canadian Institutes of Health Research (CIHR)-funded longitudinal study that monitors HIV and HCV among Aboriginal young people who use drugs in British Columbia.

The paper, published in the medical journal *Open Medicine*, reveals that young at-risk Aboriginal people in two BC cities who use injection drugs, especially females, are extremely vulnerable to HCV infection. The study looked at a group of 512 young Aboriginal people in Vancouver and Prince George. Two hundred eighty-six participants reported injection drug use when they enrolled in the study. Of those reporting using injection drug use, 59 per cent were infected with HCV.

According to the findings, major risk factors for HCV infection include daily injection drug use (2.7 times more likely to be HCV positive), having at least one parent who attended residential school (1.9 times more likely), being a young women (1.9 times more likely) and reusing

syringes (2.4 times more likely).

Previous research identified a relationship between having a parent who attended residential school and was involved in the child welfare system with sexual abuse among Aboriginal young people who use drugs in British Columbia. This is the first study that reveals a statistical connection between residential schooling of parents and the rates of HCV in their children.

“These findings emphasize the importance of acknowledging the role of historical trauma in the health outcomes among Aboriginal peoples, including HCV infection and drug use,” says Chief Wayne Christian, one of the study’s investigators. “To create meaningful strategies to help improve the health outcomes of our young people we need to better understand the relationship between having a parent who attended residential school and increased risk of HCV infection. I am particularly concerned about the safety and protection of our young women surviving on BC’s streets.”

The prevalence of [HCV infection](#) in the Aboriginal young people living in Prince George nearly mirrored the prevalence among young people using injection drugs in Vancouver’s Downtown Eastside, with Prince George having higher rates of prevalence and incidence.

“Given that Vancouver has consistently been described as an epicentre of the HIV and HCV epidemics in British Columbia and in Canada since the early 1980s, these findings indicate that the faces of these epidemics are changing,” says Patricia Spittal, principal investigator of the Cedar Project and an associate professor at UBC’s School of Population and Public Health. “The similar rate of [Hepatitis C](#) infections in Vancouver and Prince George is very concerning and may be a warning of a larger epidemic in the North in the future.”

The study also found that:

- Among participants who reported injection drug use, the incidence density estimate was 23 per cent: every year 23 people out of 100 will develop HCV;
- For every one-year increase in injection drug use, the likelihood of HCV positivity increased by 140 per cent;
- 62 per cent of young women who reported injecting drugs were HCV positive.

“This study confirms the devastating impact that the trauma experienced through residential schools continues to impact our young people today,” says Chief Wayne Christian of the Splatshin Secwepemc Nation. “We honour our elders who endured this trauma, and their struggle to cope and survive. However, we know that concrete strategies and resources are needed to address the multigenerational trauma that has resulted from years of abuse in residential schools.”

Our young people who use injection drugs are often coping with unresolved historical and lifetime trauma, including the impact of the residential school system, and more effective community driven interventions are needed to help them heal, says Chief Christian, who points to the urgent need for action.

“Canada’s refusal to vote in favor of the United Nations Declaration on the Rights of Indigenous People (Sept.13, 2007) is a clear sign that the residential school apology offered by Prime Minister Harper may be insincere. The time is now to take action, to do whatever it takes to create a healing environment founded on our culture and traditions. We can no longer wait for governments to do what we know to be right for our Children and Grandchildren. We must act. If we truly believe that

the Children are our Future, then the Future is right now,” says Chief Christian.

Provided by University of British Columbia

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