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The Potential Impacts of Religion and Spirituality on First Nation Teenage Fertility

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The Potential Impacts of Religion and Spirituality on First Nation Teenage Fertility

Abstract
After reviewing some American research on the impacts religion has on adolescent sexual decision making and teenage pregnancy, this article considered the few instances of Canadian research addressing this topic. With this contextual information in place, it then moves on to report on analysis comparing the 2001 Census figures on religions declared by Canadian First Nation communities to teen fertility rates and the Community Well-Being Index (CWB). It finds that First Nations teen fertility rates are related to relative socio-economic deprivation, but also that religion has impacts on sexual decision making at the individual level and those First Nations communities showing no major religious adherence have teenage fertility rates of up to 140 per 1000, as compared to those communities showing one major tradition whose fertility rates are closer to 109 per 1000 adolescent First Nation women.

French Abstract
LES RÉPERCUSSIONS POTENTIELLES DE LA RELIGION ET DE LA SPIRITUALITÉ SUR LA FÉCONDITÉ A L’ADOLESCENCE DES PREMIÈRES NATIONS

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Résumé
Après avoir examiné certaines recherches américaines sur les répercussions de la religion sur les décisions prises par les adolescents relativement à leur sexualité et sur la grossesse à l’adolescence, le présent article étudie les recherches canadiennes peu nombreuses portant sur ce sujet. Une fois le contexte fourni, l’article présente par la suite une analyse comparant les données du Recensement de 2001 sur les religions recueillies auprès des collectivités des Premières Nations canadiennes aux taux de fécondité chez les adolescentes et à l’indice du bien-être des collectivités. L’article révèle que les taux de fécondité chez les adolescentes des Premières Nations sont liés à la privation socioéconomique relative, mais également que la religion a des répercussions sur la prise de décisions individuelles touchant la sexualité et que les collectivités des Premières Nations n’adhérant à aucune religion en particulier ont des taux de fécondité à l’adolescence allant jusqu’à 140 p. 1000 comparativevment aux collectivités des Premières Nations respectant une grande tradition, dont les taux de fécondité à l’adolescence sont plus près de 109 p. 1000.

Spanish Abstract
REPERCUSIONES POTENCIALES DE LA RELIGIÓN Y DE LA ESPIRITUALIDAD EN LA FERTILIDAD DE LAS ADOLESCENTES DE LAS PRIMERAS NACIONES

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Resumen

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Tras examinar algunas investigaciones estadounidenses sobre las repercusiones de la religión en las decisiones de carácter sexual de los adolescentes y en los embarazos de adolescentes, este artículo analiza algunos ejemplos de estudios canadienses sobre esta cuestión. Teniendo en cuenta esta información contextual, el artículo informa sobre el análisis comparativo de las cifras del censo de 2001 en materia de religión declaradas por las comunidades de las Primeras Naciones con las tasas de fertilidad de las adolescentes y el Índice de bienestar de la comunidad. En el artículo se considera que las tasas de fertilidad de las adolescentes de las Primeras Naciones están relacionadas con las penurias socioeconómicas relativas y también que la religión tiene consecuencias en las decisiones de carácter sexual de los individuos y que las comunidades de las Primeras Naciones que no muestran una adhesión importante a las creencias religiosas tienen tasas de fertilidad de las adolescentes de hasta el 140 por 1000 en comparación con las comunidades que han mantenido una tradición importante y en las que las tasas de fertilidad se acercan a 109 por 1000 adolescentes de las Primeras Naciones.

**Keywords**
religion and spirituality, adolescent pregnancy, sexual decision-making, Community Well-Being Index

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Potential Impacts of Religion and Spirituality on First Nation Teenage Fertility

Why should one care about teen fertility? Many people will be able to tell you why from a normative viewpoint. That is, their arguments will focus on moral issues—birth out of wedlock is a sin. While one cannot ignore the power of moral arguments, they often do little to illuminate the outcomes of human behaviour. The typical moral argument regarding teen sex says little about the potential negative health, cultural, and socioeconomic outcomes.

With this in mind, we can begin to look at the religion question: Does religion influence teenage sexual decision making and decisions regarding fertility and, if so, how? Because this debate is just beginning in Canada when compared to the USA, this discussion will start with a look at American research to see to what degree it can be mapped to the Canadian Aboriginal situation. It will then fill the picture with what little relevant Canadian data and research is available. What then follows is a discussion of new research findings that compare census data on religious or spiritual affiliations in on-reserve communities to teen fertility rates and the well-being of these communities as measured by the Community Well-Being Index (CWB).

How Religion Can Influence Sexual Decision Making: The Case Made in the USA

One of the driving questions behind Mark Regnerus’ (2007) book, Forbidden Fruit, is to examine how religion can shape adolescent decision making related to sex. Religion can shape attitudes and beliefs regarding sexuality in terms of friendships, dating patterns, and how teenagers use their time. It also provides a cultural background of normative ideas that orient consciousness and actions; it provides social and organizational ties; and, it helps to develop extra-community skills. Parents in a religious community tend to enjoy a wider network of people to care for their children, which can result in better outcomes for youth (Regnerus, 2007; Regnerus, Smith, & Fritsch, 2003).

Regnerus’ (2007) primary data sources are the National Survey of Youth and Religion and the National Longitudinal Study of Adolescent Health (ADD Health). Both suffer from the same methodological weakness: they only surveyed adolescents in school—the voices of those who have prematurely left school are left unheard. One of the factors measured in these surveys is the degree of a person’s religiosity. Regnerus (2007) points out that adolescent sexual behaviour often follows from:

(a) Quick decisions made in transient moments, and (b) planned but unstructured time spent together. Private religiosity is thought to affect (a), and public religiosity is known to affect (b). Thus researchers often find that multiple sources of religiosity affect adolescent behaviour and decision making in multiple ways. (p. 46)

Regnerus (2007) contends that devoutly religious American parents make decisions about sex based not only on their own sexual attitudes and morality, but also as a response to their perceptions of their children. Hence, the influence of parental religiosity is not only direct (determining in part what they ought to say), but also indirect (influencing their judgement on whether an adolescent is ready for such information).

When testing what American adolescents know about sex and contraception, it was found that they displayed an inability to accurately define most terms and their mothers fared no better.
Boys were less able than girls to recognize pregnancy risks and understand contraceptive practices. In this case, Regnerus (2007) continues, religion matters: “Youth who report weekly church attendance and who say that religion is ‘very important’ to them score lower than less religious adolescents…” (p. 73). Adolescent boys, African Americans, children of less educated parents, and sexually inexperienced youth also scored lower. Open discussions about sex, it seems, is not the norm among religiously devout families (Regnerus, 2007; Regnerus et al., 2003).

Regnerus (2007) also looks at such things as religious influences on actual sexual experiences; the frequency of having sex, timing, and context of the first experience; the likelihood of having sex only once and then shunning it until later; and attitudes towards and uses of contraception. He found that American youth are not as over-sexed as some fear. He also found that the loss of virginity tends to start a pattern of paired sexual activity, most commonly with more than one partner (81% repeated intercourse within 12 months of the first experience). Regnerus (2007) learned that religion is not a predictor with respect to contraceptive use, but it is a predictor with regard to attitudes on the morality of contraception. Still, youth for whom religion is important are less likely to use contraceptives at first intercourse.

Regnerus (2007) concluded that religious influence on sexual decision making is most consistently the result of high religiosity rather than a specific religious affiliation. The degree to which individuals are immersed in religious worldviews and how connected they feel toward family and friends who are helping them navigate adolescent sexual pressures are the main predictors. However, he also found that the most compelling sexual messages for American youth are not religious ones, but those that are secular and permissive, which are more pervasive.

Another important finding from Regnerus’ (2007) study is that there is evidence of a “new” sexual ethic emerging in the middle-class among mainline denominations. It is neither about religion nor abstinence, but rather about risk reduction, safeguarding one’s future, and sexual substitution. It trades the pleasures of vaginal intercourse for a set of low risk substitutes where the chance of pregnancy is zero and the threat of transmitting sexually transmitted diseases (STDs) reduced. This new perspective appears mostly among those youth who are among the wealthiest of religious Americans.

Regnerus (2007) concluded, “religious teens do not often make sexual decisions for religious reasons” (p. 184). In fact, in many cases, religious faith has a confused role with respect to colouring sexual attitudes and actions. For a small minority, religion is a vital part of day-to-day decision making; for others, religious claims on their behaviour are unknown or merely ignored.

**Teen Fertility in Canada**

As part of a large, internationally comparative research project on teen fertility sponsored by the Allan Guttmacher Institute, Maticka-Tyndale, McKay, and Barrett (2001) produced the “country report” for Canada. It reviews Canada’s teen pregnancy rates as a whole and only makes the simplest of disaggregation based on race or ethnicity. While it does not disaggregate Aboriginal youth from the sample, Matika-Tyndale et al. (2001) does acknowledge that Aboriginal people “are among the most disadvantaged of Canada’s population” (p. 7). What immediately follows is a summary of this report.
Canada is neither at the top nor the bottom of the list for teen fertility rates among the five comparison countries. The lowest rates were found to be in Sweden and France, and the highest rates in the USA. Canada and Britain sit in between the USA and Sweden and France, but is closer to the latter two countries than the former (Allan Guttmacher Institute, 2001). All of the study countries are democratic and highly developed. However, they differ in terms of population size and density, as well as political, economic, and social perspectives and structures. For example, European countries have placed greater political and social emphasis in providing a social safety net. The USA, in contrast, has long emphasized strong individualism with respect to one’s well-being. The result of this approach is an individualistic society that tends to foster more fluid social structures than can be found in much of Europe. A secondary result is greater disparity in terms of the gap between rich and poor.

Based on data from the 1996 National Population Health Survey and 1995 General Social Survey, it was found that the overall Canadian teenage fertility rate declined between 1980 and 1997. The abortion rate (22/1000) was higher in 1997 than the birth rate (20/1000) for women aged 15 to 19. Teen fertility and STDs are concentrated in census tracts with the lowest mean socioeconomic indicators and “the primary differences between these regions is in the proportion of aboriginal [sic] people concentrated in each, with proportions highest in the territories [sic], followed by the prairie provinces [sic] and the lowest in the maritime [sic] regions of Canada” (Maticka-Tyndale et al., 2001, p. 7).

Most Canadian men and women are initiated into intercourse before leaving their teens (over 73%). There continues to be a downward trend in age of the first instance of intercourse, with around 51% of both men and women initiating sexual intercourse before 18 year of age. With respect to the number of partners in a year, it was found that instances of engaging in intercourse with more than one partner in a year generally decreases with age. In addition, those teens not in school were more likely to have multiple partners and the proportion of multiple partners generally decreases as income levels increase (Maticka-Tyndale et al., 2001).

The 1995 General Social Survey, as well as the Canadian Contraceptive Survey conducted in 1993, 1995, and 1998, provide insights into adolescent contraceptive use. Both show a consistent pattern of awareness and use of contraceptives among Canadian adolescents: 99% of 15- to 17-year-olds were aware of various birth control methods. However, patterns of contraceptive use change with age, with more Grade 12 students (45%) using oral contraception than at Grade 7 (4%), and fewer Grade 12 students employing condoms (36%) as compared to those in Grade 7 (55%) (Maticka-Tyndale et al., 2001).

Maticka-Tyndale et al. (2001) provide their readers a caveat: The methodology used to collect the data excludes those at the greatest risk of STDs and teen pregnancy - Aboriginal and street-involved youth. While these two groups may represent a minority of Canadians, “the risks to their health and well-being surpass those represented in this report. Risks for aboriginal [sic] youth are seen in teen pregnancy and STD rates that are four times higher in aboriginal [sic] than non-aboriginal [sic] populations” (p. 9).

**What We Know about the Relationship of Religion and Spirituality to Sex and Early Parenting in the Canadian Aboriginal Context**
Compared to the USA, there is a relative dearth of Canadian research on teenage fertility. Even rarer is Canadian research addressing the relationship between religion and teenage pregnancy. Mainly, this is due to the fact that among the general Canadian population teenage fertility is sufficiently low as to not induce panic. Yet, things are different in the teenage Aboriginal context. And, there is a nascent debate on this topic found in two previous Canadian studies.

In 2001, around 50% of Canada’s Aboriginal population was under 25 years of age (Maticka-Tyndale et al., 2001). Twice as many Aboriginal children under 15 years of age, as compared to the rest of the Canadian population, were living in single-parent families on income assistance (Maticka-Tyndale et al., 2001), both of which are associated with elevated rates of teen fertility. An outcome of such conditions is that teen fertility rates for Aboriginal women under 20 were between 4 and 7 times higher than the general teenaged population; for girls under 15, the rate was up to 18 times higher than their non-Aboriginal peers (Anderson, 2002; Senate Standing Committee on Aboriginal Peoples cited in Guimond & Robitaille, 2008; First Nations Regional Longitudinal Health Survey [RHS], 2005).

Canadian First Nation teen fertility rates are highest in the Prairie Provinces, where one finds one of the greatest concentrations of First Nations persons in Canada. In Manitoba, for example, 1 teenaged First Nations woman in 8 had a child in 2004 (i.e., 128 per 1000 for women aged 15 to 19). Moreover, Guimond and Robitaille (2008) point out that fertility rates among First Nations teens are twice as high as that of American teens, who have the highest fertility rate among industrialized nations. Canadian First Nations teenage girls have fertility rates similar to those of Nepal, Ethiopia, and Honduras (cf., United Nations Population Fund [UNPF], 2008), which are all among the least developed countries in the world.

Aboriginal youth are in the same category as are street-involved youth in terms of poor sexual and reproductive health outcomes. They are younger at first intercourse, have a larger number of sexual partners, and have higher teen pregnancy and STD rates. According to the First Nations Regional Longitudinal Health Survey (RHS, 2005), an estimated 50% of Canadian adolescents were sexually active. Among Aboriginal adolescents, 66% of males and 57% of females 17-years-old were sexually active; for those 13- to 14-years-old, it was 3% and 19% were sexually active, respectively, which is approximately 8% to 9% more than non-Aboriginal youth. Aboriginal adolescent males are reported to have twice as many partners as their female counterparts. Aggregated together, we find that 67% of Aboriginal adolescents had 1 to 2 partners, 19% reported 3 to 4 partners, 6% reported 5 to 6 partners, and 4% claimed 7 to 10 partners. Based on this, the RHS (2005) concluded that First Nation youth are more sexually active than their mainstream counterparts and show higher levels of sexual activity at younger ages.

Contraceptive use among First Nations youth is akin to that of their mainstream counterparts. First Nations males are more likely than First Nations females to have used a condom at their last intercourse (89% vs. 72%). However, while Aboriginal male teenagers are more likely than their mainstream counterparts to report condom use, at least 50% of urban Aboriginals do not use condoms every time or are using them incorrectly (RHS, 2005).

While it appears that trends in adolescent sexual behaviour are changing (a decrease in those sexually active and an increase in contraceptive use), the greatest declines are reported in the
lowest risk groups. That is, the changes affecting the sexual behaviour of adolescents from the lowest risk groups are of limited significance for Aboriginal youth, who remain the highest risk group in terms of early pregnancy, STDs, sexual abuse, sexual exploitation, as well as depression and suicide (RHS, 2005). RHS also reports a higher prevalence of substance use (drugs and alcohol) among Aboriginal than mainstream youth (RHS, 2005), which has impacts on sexual decision making and “may result in incidences of unprotected sexual activity, often leading to teen pregnancy, unwanted pregnancy, STIs [sexually transmitted infections] and HIV” (RHS, 2005, p. 210).

In a smaller study of the 2003 British Columbia Adolescent Health Survey conducted by Devries, Free, Morison, and Saewyc (2008), we find similar but varying results. Data from First Nation adolescent respondents shows that only 34% of males had intercourse, 63% with more than one partner, but 21% did not use a condom at last intercourse. Among First Nation adolescent females, 35% had intercourse, 56% with more than one partner, and 41% did not use a condom the last time. The mean age for both Aboriginal males and females for their first sexual intercourse was 14.8 years (Devries et al., 2008).

Among the relevant Canadian research on Aboriginal early parenting, only Anderson (2002) and Bibby and Penner (2009) ask questions related to the impacts that religion and spirituality may have on Aboriginal teen sexual practices and attitudes. Over the next several pages, I consider findings from both studies.

Anderson (2002) investigated the following question: “Are the youth influenced by Native traditional knowledge and ethics, or are there other spiritual ethics that influence their approach to sex and parenting?” (p. 13). Her goal was to explore the impact that cultural or spiritual practices and beliefs may have on attitudes toward sex and about family among contemporary urban Aboriginal youth in Ontario. However, her sample size was small (350 participants, 255 of which were adolescents).

Interestingly, it was found that those adolescent participants identifying with Native spirituality were less likely to have been pregnant (66% vs. 52% of those claiming Christianity and 48% of those following no tradition). When asked if they thought that spiritual practices influenced their sexual activity or attitudes regarding family, only a few respondents discussed pregnancy as a “gift of the creator” and 6% (n = 3) of the 53 youth parents spoke about the use of traditional knowledge in their own lives. Additionally, some interviewees suggested that traditional families were more reserved about sex. In the end, “Over half of the interviewees surmised that Aboriginal youth are not greatly influenced by Native culture and tradition, and certainly not in the areas of sex and sexuality” (Anderson, 2002, p. 48). While a few of the youth workers discussed how hard it is to get youth interested in the cultural parts of their programs, 35% of the interviewees suggested using Elders and cultural teaching as a method to encourage healthy sexual practices and prevent unwanted pregnancies (Anderson, 2002).

With respect to the influence of Christian teachings on sexuality and pregnancy, four of the youth interviewees reported having received messages to delay first sex until older and married. Others noted that, while they have Christian backgrounds, their families rarely attend church. This finding led Anderson (2002) to conclude that “Overall, Christianity did not appear to have a big influence on the youth interviewees or their peers” (p. 49). Anderson (2002) suggested that
youth identifying with “Native spiritual knowledge” had significantly lower teenage pregnancy rates. However, she did not find that the influence of Native culture and tradition affected sexuality. The relationship between spiritual affiliation and First Nations teen fertility will be explored below.

Before moving on, it is necessary to acknowledge some limitations to this study. Anderson (2002) does not provide details on what is referred to by “Native traditional knowledge”. For instance, we are unable to determine if term refers to: (a) local traditional knowledge, (b) what has been called “pan-Indian” spirituality, (c) knowledge flowing from a syncretic Aboriginal-Christian context, (d) some combination of the above, or (e) something completely different. This question is relevant given anecdotal evidence of generational divides in spiritual or religious identification among at least some First Nations (Adelson, 2008; Hayes, 1998; Tanner, 2008). A second limitation to Anderson’s (2002) study is that it does not distinguish the degree of religiosity. Most surveys examining the impact of spirituality or religion on decision making and behaviour generally account for degree of “religiosity”. While there is no guarantee that adding this variable would have yielded interesting results, it is clear that by not doing so it is not possible to determine what portion of the sample was highly religious and whether degree of religiosity has any bearing on sexual decision making in the urban Ontario First Nations context.

During 2008 and 2009, Reginald Bibby and James Penner (2009) conducted a survey of Aboriginal youth attitudes. Their survey asked a number of questions on a variety of issues, including religious preferences and sexual attitudes or practices. It also asked about the degree to which spirituality is considered important in the lives of the respondents. They found that 38% reported that Aboriginal spirituality is “very important” and an additional 43% said it is “somewhat important” (for 81% in total). The remaining 20% view it as “not very important” or “not important at all”. It was also found that 50% highly valued both Aboriginal spirituality and Christianity; 25% highly valued Aboriginal spirituality, but not Christianity; and 5% highly valued Christianity but not Aboriginal spirituality. Thus, we find a 30% overlap, where 80% value Aboriginal spirituality and 50% value Christianity. This finding is corroborated by 75% of respondents who said that spiritual teachings are very important to them and they have a high level of confidence in the people in charge of traditional ceremonies (Bibby & Penner, 2009).

Based on these results, we can agree with Bibby and Penner (2009) who write in contrast to Anderson: “Clearly, Aboriginal spirituality is both valued and practiced by significant numbers of young people” (p. 30).

With respect to sexual attitudes and behaviour, it was found that the Canadian teen attitude towards premarital sex when love is involved receives high levels of acceptance and approval (72%). When it is merely a case of liking the partner, premarital sex is still fairly highly accepted but approval drops dramatically (38%). In contrast, only 5% of teens both accept and approve of extramarital sex, with some 80% neither approving nor accepting it. First Nation teenagers attending off-reserve schools show higher levels of acceptance and approval of premarital sex and same sex relations (Bibby & Penner, 2009). However, both “are uniform in rejecting extramarital sex” (Bibby & Penner, 2009, p. 18). With the exception of approval of premarital sex where love is involved, the degree to which one finds Aboriginal spirituality important does not results in significant differences in attitudes.
What some of these findings suggest is contrary to Anderson’s (2002) conclusion that First Nation spirituality and religion have little impact on sexual decision making and behaviour. In fact, Bibby and Penner (2009) demonstrated several differences by spiritual and religious affiliation in attitudes towards co-habitation, premarital, contraception use, and extramarital sex. Given the nature of the data available in Canada, it is fair to say that more research will be necessary to confirm what is suggested above: that there may be some potentially significant different cultural attitudes towards sexuality and related issues among Aboriginal teens as compared to the rest of Canadian youth and some of this may be impacted by the nature and degree of First Nation adolescents’ religiosity.

Like Anderson's (2002) report, Bibby and Penner's (2009) suffers from the limitation of not defining what is meant by Native spirituality. Additionally, it does not include Aboriginal teens who have left school prematurely. However, it does address the second limitation of Anderson's (2002) study: the degree to which spirituality was valued. While Bibby and Penner's (2009) approach to this question does not meet Regnerus’ (2007) standard, it provides some indication of the impact degree of religiosity has among on-reserve First Nations teenagers.

What a Community-Based Statistical Approach Shows

The goal of this section is to report on research examining whether or not religious or spiritual affiliation impacts adolescent fertility rates within First Nations communities, as suggested by Anderson (2002) above. In order to do this, First Nation adolescent fertility rates are cross-referenced to both the broad general spiritual affiliation claims made in the 2001 Canadian Census of the Population and to each community’s score on the CWB Index for 2006. The assumption is that communities with different spiritual affiliations may have different adolescent fertility rates and those fertility rates may be reflected by those communities’ CWB scores.

Because of Canadian data limitations, and in keeping with the collectivist cultural preference among many First Nations persons, we conducted research on active religious and spiritual traditions at the community level. It is convenient to do so because we can compare national data on religious affiliation from the 2001 Census (the last time the question was asked) to that community’s adolescent fertility rate (as of 2006), and cross-reference this to the 2006 CWB Index, developed and maintained at Aboriginal Affairs and Northern Development Canada (AANDC). This approach was applied because Canada has no available national-level datasets on individual persons comparable to those used by Regnerus (2007) in the USA. The First Nations fertility rate used here was derived from AANDC’s Indian Register.

While the CWB has been described elsewhere (Beavon, White, & Spence, 2007), it deserves description here. The CWB is a way to examine the well-being of individual Canadian communities. Several indicators of socioeconomic well-being, including education, labour force activity, income, and housing, are derived from Statistics Canada's Census of Population and combined to provide each community a well-being “score”. These scores are used to compare well-being in First Nations and Inuit communities to non-Aboriginal Canadian communities over time.

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1 For more details on the data source and methodology see Robitaille, Kouaouci, and Guimond (2004).
The CWB is used for a variety of tasks, not the least of which is to monitor changes in the well-being of Canadian First Nations. Thus, the CWB is a way of determining the relative well-being of First Nations communities as compared to: (a) their last score from a previous census date, (b) other First Nations communities, and (c) the “average” Canadian community. Currently, the CWB shows that of the top 100 Canadian communities only one is First Nation and, conversely, of the bottom 100 Canadian communities 96 are First Nation.

When conducting the research for this chapter, we examined all First Nation reserve communities that, according to 2001 Census religion responses, had either over 50% (called “mainly”) or over 80% (called “super”) of their membership following one of the five following “religious” categories: (a) Catholic, (b) mainline Protestant, (c) all Protestants (i.e., all Protestant traditions claimed by Aboriginal persons in 2001), (d) Aboriginal spirituality, and (e) no tradition. These findings were then compared to that First Nation’s community fertility rate, derived as per Guimond and Robitaille (2008), and its 2006 CWB score. The justification for using a community level approach is: (a) the CWB is aggregated to the community level, which means that we need something reasonably comparable, and (b) we assume a certain threshold of religious or spiritual identification or affiliation would be necessary to be able to say, if at all possible, that a community's spiritual or religious character may have some bearing on its well-being and teenaged fertility rates.

The 2001 Census religion numbers are limited in terms of examining the impact of traditional Aboriginal spirituality – it simply did not capture the same numbers emerging elsewhere, such as the RHS (2005), Bibby and Penner (2009), and Anderson (2002), all of which indicate that around 80% of First Nations respondents claim an affiliation to Aboriginal spirituality. This difference is possibly due to a monotheistic bias in the Census of Population that only allows a single response to the religion question. Allowing for a single response is questionable when considering the changing face of the Canadian population, many of whom come from South East Asia, for instance, where participating in a number of different religious traditions has historical and cultural precedent.

With respect to methodological limitations, by setting the cut-off line at 50% and 80% of a community membership following one of the four aforementioned categories, we limited the number of communities that can be considered. That is, not many Aboriginal communities are as religiously exclusive as 80% and, more importantly, only seven of the communities enumerated in the 2001 Census showed more than 50% of its members claiming Aboriginal spirituality.

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2 The categories of religions used herein are as follows: Catholic (Roman Catholic, Ukrainian Catholic, Greek or Byzantine Catholic, and Christian Orthodox); Mainline Protestant (Protestant, Anglican, Lutheran, Mennonite, Presbyterian, Salvation Army, Unitarian, United Church, Protestant not otherwise specified [NOS], Swedenborgians [new church], Interdenominational, Methodist Bodies, and Reformed Bodies); All Protestants (includes those denominations in the Mainline Protestant category above, plus the following other groups – Adventist, Baptist, Christian and Missionary Alliance, Evangelical NOS, Jehovah’s Witnesses, Pentecostal, non-denominational, Born Again Christian NOS, Evangelical Missionary Church, Latter Day Saints [Mormons], Brethren in Christ, Church of Christ, Disciples, Church of God NOS, Church of the Nazarene, Christian Vineyard Fellowship, World Wide Church of God, Christian Assembly, and other Christian); Aboriginal Spirituality; and No Religion (no religion, Agnostic, and Atheist).
Hence, what is reported below (Figure 1) should be understood as provisional. The conclusions are suggestive and need further confirmation with more robust data with respect to Aboriginal spirituality.

**Figure 1: First Nation teen fertility rates by religion and CWB Score, 2001 - 2006**

Source: Census of the Population 2001, 2006

It was found that, in 2006, the First Nations teenage fertility rate of the mainly (50% plus) Catholic communities was 102 per 1000 teenaged women (15 - 19) and the average CWB score of the 186 communities was just over 56 out of 100. In the same year, the teenaged fertility rate for the super (over 80%) Catholic communities was marginally higher at 107 per 1000 teenaged women and the average CWB score was 55 for the 96 communities considered. For the mainline Protestant communities, the teenaged fertility rate was 109 per 1000 women with an average CWB score of 57 for the 119 communities. The super mainline Protestant communities showed 118 births per 1000 teenaged women, with an average CWB score of 55 for the 37 communities. For the grouping of communities categorized as all Protestants, the teenaged
fertility rate was 109 per 1000 women the average CWB score was 58 for the 145 communities. At the super level for the all Protestant category, the teen fertility rate was 115 per 1000 and the average CWB score was 56 for the 64 communities. For those seven communities with greater than 50% of its members reporting Aboriginal spirituality, the teen fertility rate was 108 per 1000 per teenaged women and the average CWB score was 55. Of those 17 communities with more than 50% of its members claiming no tradition, the average teenaged fertility rate was 140 per 1000 women and their average CWB score was 53. Of the 94 communities that could be said to have an even mix (no tradition able to claim more than 50% of a community’s members), the average teenaged fertility rate was 126 per 1000 women, and the average CWB score was 58. Taken as an unweighted whole, of the 482 communities included above, the average teenage fertility rate is 107 per 1000 teenaged women and the average CWB score is 56.

To put this into context, we need to consider that the general Canadian teen fertility rate in 2006 was around 14 per 1000 adolescent women. In contrast, the total First Nations teen fertility rate has remained around an average of 100 per 1000 teenaged First Nation women since 1986. The fertility of First Nations teenage girls is seven times higher than that of other young Canadian women. “For First Nations teenage girls under 15 years of age, the rates are estimated to be as much as 18 times higher than that of other Canadians” (Guimond & Robitaille, 2008, p. 49). Finally, the average 2006 CWB score for all First Nations communities was 56.

In this light, it appears that those 18 communities that include 50% or more of its members following no tradition have the highest teenaged fertility rates among First Nations communities. However, the approximately 40% difference between 140 per 1000 and 102 per 1000 teenaged women is not nearly as significant as the difference to the rest of teenaged Canada’s 14 births per 1000 teenaged women. It may also seem to be good news to Catholic communities that their average teenaged fertility rate is the lowest among all First Nations communities, but again 102 per 1000 is considerably higher than 14 per 1000 teenaged women.

The very small sample of communities with over 50% of their members claiming Aboriginal spirituality showed a teenaged fertility rate that is neither high nor low among First Nations communities. Yet, the average CWB score for these seven communities is the second lowest; it is just under two points higher than the 17 communities where over 50% of the membership claimed no religious tradition. In this case, while there is heightened socioeconomic deprivation in these communities, it did not translate into the same teenage pregnancy rates as found in those communities claiming to follow no spiritual path (140/1000) or showing a mix of traditions (126/1000). Moreover, those communities that are constituted by a majority (both 80% thresholds) of mainline Protestant or all Protestant denominations tend to show the next highest teen fertility rates (118 and 114, respectively) and below average CWB scores. The mainly Catholic and super Catholic communities showed the lowest teen fertility rates among all First Nations communities, but have CWB scores of 55 to 56.

**Conclusion**

Based on the available data, it is not possible to conclusively demonstrate specific community-level impacts of religious affiliation on First Nation teenage pregnancy. However, with the CWB, one is able to demonstrate a relationship between social and economic deprivation and
First Nation teenage pregnancy. This is to say that, generally, the lower a community's CWB score, the higher its rate of teenage pregnancy.

It is interesting to also observe that the teen fertility rates in the small number of communities claiming no spiritual path or a mix of traditions is considerably higher than other First Nations communities. In addition, it was found that those communities following mainly one spiritual path showed lower teenaged fertility at the community level. The degree to which this may or may not translate into better potential well-being outcomes at the individual level is hard to say given data limitations. While the relatively low teenaged fertility rate (compared to other First Nation communities) found among those few communities with greater than 50% of its population following Aboriginal spirituality (there were only four in this category) may be encouraging – especially in face of their lower average CWB score. The population of these four communities represent less than 0.3% of the total Canadian on-reserve First Nation population. Also interesting is that those individuals following two traditions, Aboriginal spirituality and Christianity, benefit the most (Bibby & Penner, 2009), while individuals and communities claiming to follow no spiritual path demonstrate the least beneficial well-being outcomes at the individual level and the highest teenage pregnancy rates of all communities considered.

Furthermore, while data at the community level is not able to demonstrate that religious affiliation has an impact on fertility and sexual decision making among entire communities, let alone among their adolescent populations, we can say that the impact that religion and spirituality was found to have on sexual decision making in United States (Regenerus, 2007) seems to be validated in Canadian First Nations context. Bibby and Penner (2009) show that the degree to which spirituality is valued makes a difference in the sexual decision making and in the practices and attitudes of First Nations teens attending band-managed schools. However, there remain data limitations at the individual level in Canada; notwithstanding the findings in the RHS (2005) and Bibby and Penner (2009), we simply do not have the wealth of individual data to which Regenerus (2007) had access.

Still both the RHS (2005) and Bibby and Penner (2009) suggest that the degree of individual religiosity impacts sexual decisions and, quite possibly, adolescent fertility rates. One next step for further research might be to re-evaluate the RHS data regarding sexuality (among other items) by age and degree of religiosity to bring to light more detail on the impact religious affiliation may have on adolescent decision making. Doing so will increase our knowledge of the individual level effects of degree of religiosity, similar to Regenerus’ (2007) work. It might also further contribute to the nascent debate between Bibby and Penner (2009) and Anderson (2002) regarding the degree to which First Nations adolescents are religious or spiritual and the impacts this may have on sexual behaviour and decision making. Finally, if the trends of increasing affiliation to Aboriginal spirituality observed in Anderson (2002), the RHS (2005), and Bibby and Penner (2009) continue, then it is quite possible that the religious landscape among reserve communities will change significantly (see for example, Fonda, 2011) and so will attitudes towards morally loaded issues like teenaged sexuality and fertility.
References


