

Faculty of health sciences, Department of community medicine

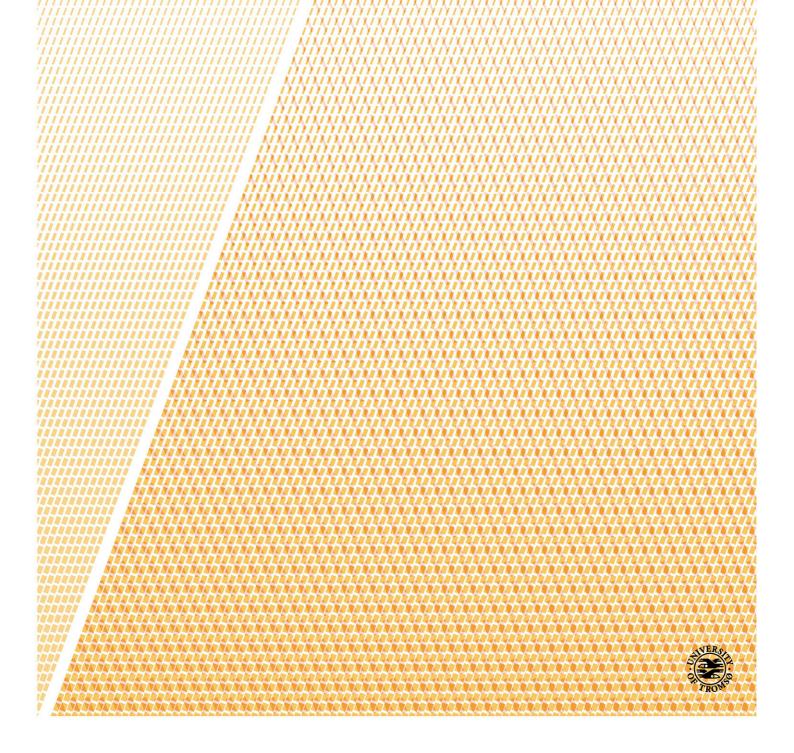
Sámi ethnicity as a variable

Premises and implications for population-based studies on health and living conditions in Norway

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Torunn Pettersen

A dissertation for the degree of Philosophiae Doctor – December 2014



Sámi ethnicity as a variable

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Sámi allaskuvla / Sámi University College





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"[] we may critique the use of population-level health statistics on one hand
and rely on those very statistics on the other hand;
we are in and of the worlds that we study".
Celina Callahan-Kapoor
http://somatosphere.net/2013/06/medicine-and-science-unpredicted.html [blogpost]

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Acknowledgements

This thesis is the result of *some* coincidences, but above all of several individuals' and institutions' efforts and contributions. Among the coincidences is that in the late 1980s, I happened to apply for a job at the then newly established Sámi allaskuvla / Sámi University College in Guovdageaidnu/Kautokeino (in Finnmark County, Norway). In this milieu I – a person born and raised in Northern Norway but with no Sámi family background – obtained insights that awoke an interest in working professionally with "Sámi issues". I also had first-class conditions for learning to speak and read Northern Sámi; an opportunity I perceived as a significant additional benefit both professionally and personally. In 2000 I was given the opportunity to take over a Sámi Instituhtta / Nordic Sámi Institute project concerning societal needs for a variety of up-to-date quantitative data on Sámi conditions. This, together with education in social sciences and humanities, was my position when some years ago the Centre for Sámi Health Research at UiT The Arctic University of Norway, invited me onto the team in order to design a PhD project on Sámi ethnicity and living conditions.

Now that the writing of this thesis is about to be completed, my first and greatest thanks go to Professor Magritt Brustad who initiated the PhD project and who has been a constructive and supportive supervisor all the way. She deserves extra appreciation because she kept faith in me and continued to be there for me when the project went on (and on...) and the thesis included more (and more...) social science aspects. I am also very thankful to co-supervisor Professor Nils Oskal at Sámi University College for being available for discussions on "Sámi issues" in general and, more specifically, for his insightful response on various ethical issues. I thank the Norwegian Research Council for funding a three-year PhD scholarship. I am very grateful that the Centre for Sámi Health Research contributed with additional funding when the timeframe for the original project period was exceeded. I thank Sámi University College for supplying me with office facilities at Diehtosiida throughout the project period. The almost 17,000 people who chose to participate in the SAMINOR study in 2002–2003 also deserve acknowledgement for *their* absolutely essential contribution.

Warm thanks go to former and current colleagues – at the Centre for Sámi Health Research as well as the Sámi University College (including my "distant colleagues" working with Sámi electoral research) – for informative and inspiring conversations and discussions, and (other) pleasant gatherings. Finally, heartfelt thanks to family and friends; to those who have been there *with* me and *for* me and in various ways contributed to "the bright side(s) of life" in the world outside the often demanding, but above all privileged PhD bubble. Special thanks go to Reidar; for language and computer assistance, and for various "extra efforts" at home in the project's rather lengthy final phase.

Guovdageaidnu/Kautokeino, December 2014

Torunn Pettersen

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Summary / Čoahkkáigeassu / Sammendrag

The use of Sámi ethnicity as a variable in studies aiming at quantitative knowledge on health and living conditions at the population level in contemporary Norway is challenged by insufficient Sámi-demographic data and blurred Sámi-ethnic boundaries. Based on the premise that the Sámi can be conceptualized as an ethnic group which is also an indigenous people, this thesis explores aspects of the operationalization, registration and (self-)reporting of Sámi ethnicity in the Norwegian part of Sápmi. The purpose was to contribute to more systematic knowledge on and understanding of factors that may affect the design, results and interpretations of population-based studies involving patterns of Sámi health and living conditions.

The thesis employs empirical data from the Sámediggi electoral roll in Norway for the period 1989–2009 (Paper I), from Norway's 1970 Census (Paper II), as well as from the SAMINOR study; a population based study of health and living conditions conducted in 2003/2004 in selected rural areas with Sámi and non-Sámi settlement in Norway (Papers II and III). The results show how Sámi ethnicity can be measured in various ways, and how both the ethnicity measures themselves and (self-)reported Sámi ethnicity based on such measures, may change over time. The choice of Sámi ethnicity measures can have a noticeable effect on study populations' size and geographical profile, but seems to have less influence on the outcomes when comparing living conditions in the Sámi population and in the remaining population in the same area. The overarching discussion emphasizes that epidemiological studies using a Sámi ethnicity variable must take into account the Sámi-internal variation and the complexity of cross-cultural research, i.e. the study of ethnically defined populations.

The thesis' main message is that it was not possible to propose an unambiguous solution regarding the operationalization of Sámi ethnicity. It is argued, however, that a key challenge is that of weighing the two measures 'Sámi linguistic connection' and 'Self-identification as Sámi'. It is also argued that using Sámi ethnicity as a variable calls for particular awareness not only about *how* studies are performed, but also about the purpose of each study and the research standpoint of the actors involved in the various phases of such studies. Overall, the thesis offers a systematic overview that may facilitate meaningful communication about results obtained by using Sámi ethnicity as a variable; that it becomes more transparent who we are talking about when the topic is health and living conditions in a population that is neither given nor uniform.

<u>Čoahkkáigeassu</u>

Geavahit sámi etnisitehta variábelin iskkademiin man ulbmil lea háhkat kvantitatiiva máhtu dearvvašvuođa ja eallindiliid birra populašuvnna dásis dála Norggas, hástaluvvo váilevaš Sámi demográfalaš dáhta ja eahpečielga sámi-etnálaš rájiid geažil. Eavttuin ahte sápmelaččat ipmirduvvo etnihkalaš joavkun mii maiddái lea eamiálbmot, dát dutkkus guorahallá iešguđetlágan beali sámi etnisitehta operašonaliseremis/meroštallamis, registreremis ja (ieš-)dieđiheamis Norgga bealde Sámis. Ulbmil lei addit eambbo systematálaš máhtu ja ipmárdusa dakkár áššiid birra mat sáhttet váikkuhit hábmema, bohtosiid, ja dulkomiid populašuvnna dási guorahallamiin gos sámiid dearvvašvuođa ja eallindiliid minstarat leat fáddán.

Dutkos geavaha empiralaš dáhta Sámedikki jienastuslogus Norggas jagiin 1989–2009 (Paper I), Norgga 1970 olmmošlohkamis (Paper II), ja vel SAMINOR-guorahallamis; muhtun populašuvnna dási guorahallan dearvvašvuođa ja eallindiliid birra mii čađahuvvui 2003/2004 vissis rurala guovlluin Norggas gos ásset sihke sápmelaččat ja dážat (Paper II ja III). Bohtosat čájehit movt sámi etnisitehta sáhttá mángga láhkai meroštallojuvvot ja ahte sihke sámi meroštallamat ja (ieš-)dieđihuvvon sámi etnisitehta sáhttet rievddadit áiggi mielde. Mo vállje sámi etnisitehta-meriid sáhttá mearkkašan veara čuohcat populašuvnnaid sturrodaga ja daid geográfalaš profiilla, muhto ii oro váikkuheame bohtosiid nu garrasit go buohtastallá sámi ja dáža eallindiliid seammá guovllus. Dutkosa váldodigaštallamis deattuhuvvo ahte epidemiologalaš guorahallamiin gos sámi etnisitehta geavahuvvo variábelin, ferte vuhtiiváldit maiddái siskkáldas variašuvnnaid sámi álbmogis ja kompleksitehtas mánggakultuvrralaš dutkamis, nammalassi guorahallat populašuvnnaid mat definerejuvvojit etnisitehta mielde.

Dutkosa váldosáhka lea ahte ii lean vejolaš arvalit čielga čovdosa mo operašonaliseret sámi etnisitehta. Ákkastallojuvvo goitge ahte váldohástalus lea vihkkedit gaskkal mihttomeriid 'Sámi giellačanasteapmi' ja 'Iešidentifiseren sápmelažžan'. Ákkastallojuvvo maid ahte go geavaha sámi etnisitehta variábelin de ferte leat dihtomielalaš ii dušše mo muhtun guorahallan čađahuvvo, muhto maiddái mii lea dán ulbmil ja mii lea dutkanposišuvnna aktevrrain geat leat mielde iešguđetge fásain guorahallamis. Oktiibuot fállá dutkkus systematalaš gova mii sáhttá dagahit álkibun gulahallat jierpmálaččat bohtosiid birra mat lea vuolgán sámi etnisitehta variábelgeavaheamis; ahte šaddá čielgaseabbo geaid birra mii hupmat go fádda lea dearvvašvuohta ja eallindilit muhtun populašuvnnas mii ii leat addojuvvon ii ge oktalaš.

Sammendrag

Bruk av samisk etnisitet som variabel i studier som sikter mot kvantitativ kunnskap om helse og levekår på populasjonsnivå i dagens Norge, utfordres av mangelfulle samisk-demografiske data og utydelige samisk-etniske grenser. Basert på et premiss om at samene kan begrepsfestes som en etnisk gruppe som også er et urfolk, utforsker denne avhandlingen aspekter ved operasjonalisering, registrering og (selv)rapportering av samisk etnisitet på norsk side av Sápmi. Hensikten var å bidra til mer systematisk kunnskap om og forståelse for forhold som kan ha betydning for design, resultater og fortolkninger av populasjonsbaserte studier som involverer mønstre i samers helse og levekår.

Avhandlingen anvender empiriske data fra Sametingets valgmanntall i Norge for tidsrommet 1989-2009 (Paper I), fra Norges folketelling for 1970 (Paper II), samt fra SAMINOR-studien; en befolkningsbasert helse- og levekårsstudie utført i 2003/2004 i utvalgte rurale områder med samisk og ikke-samisk bosetning i Norge (Paper II og III). Resultatene viser hvordan samisk etnisitet kan måles på ulike måter, og hvordan både selve etnisitetsmålene og (selv-)rapportert samisk etnisitet basert på slike mål, kan endres over tid. Valget av samisk etnisitetsmål kan ha merkbar effekt på studiepopulasjoners størrelse og geografiske profil, men synes å ha mindre betydning for utfall av sammenligninger av levekår hos den samiske og den øvrige befolkningen i samme område. Den overordnede diskusjonen vektlegger at epidemiologiske studier som anvender samisk etnisitet som variabel, må ta høyde for internsamisk variasjon og for kompleksiteten ved krysskulturell forskning; forstått som det å studere etnisk definerte populasjoner.

Avhandlingens hovedbudskap er at det ikke var mulig å foreslå en entydig løsning vedrørende operasjonalisering av samisk etnisitet. Det argumenteres imidlertid for at en nøkkelutfordring er å avveie mellom målene 'Samisk språkforbindelse' og 'Selvidentifikasjon som same'. Det argumenteres også for at bruk av samisk etnisitet som variabel påkaller særskilt bevissthet ikke bare om *hvordan* studier utføres, men også om hva som er hensikten med hver studie og om forskningsståsted for aktører som er involvert i de ulike fasene av slike studier. I sum tilbyr avhandlingen et systematisk overblikk som kan gjøre det enklere å kommunisere meningsfullt om resultater framkommet ved bruk av samisk etnisitet som variabel; at det blir mer gjennomskuelig hvem vi snakker om når temaet er helse og levekår i en populasjon som verken er gitt eller enhetlig.

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List of papers (I, II & III)

The thesis includes the following three papers:

Paper I

Torunn Pettersen (2015, forthcoming): The Sámediggi electoral roll in Norway – framework, growth and geographical shifts 1989-2009. I: Mikkel Berg-Nordlie, Jo Saglie & Ann Sullivan (eds.): *Indigenous politics: Institutions, Representation, Mobilisation*, Colchester, ECPR Press.

Paper II

Torunn Pettersen & Magritt Brustad: Same Sámi? A comparison of self-reported Sámi ethnicity measures in 1970 and 2003 in selected rural areas in Northern Norway.

Conditionally accepted for publication in *Ethnic and Racial Studies* (revised version to be submitted December 2014).

Paper III

Torunn Pettersen & Magritt Brustad (2013): Which Sámi? Sámi inclusion criteria in population-based studies of Sámi health and living conditions in Norway – an exploratory study exemplified with data from the SAMINOR study. *International Journal of Circumpolar Health* 2013, 72: 21813 - http://dx.doi.org/10.3402/ijch.v72i0.21813.

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"Nothing about ethnicity and its interplay with healthcare is simple: terminology, classification and how, when and why to collect ethnicity data all present challenges that are practical as much as they are philosophical" (Donaldson 2007:ix).

"Working with ethnicity data is complicated, but so too are the 'real world' processes in which ethnicity is implicated" (Kukutai 2010:163).

"Gii lea sápmelaš? Mo galgá dovdat su? Lea go varra vai vuoigŋa mii mearrida?" [Who is a Sámi? How can s/he be identified? By blood or by the spirit?] (Song lyrics by Harald Gaski to a recording by Amund Johnskareng, 1980.)

1. Introduction

For a long time the knowledge of patterns of the Sami people's health and living conditions was rather sparse (Kvernmo 1997, Sosial- og helsedepartementet 2001, Hassler & Sjölander 2005). In recent years, a growing number of studies have sought to improve the level of knowledge. The overall impression from these studies is that as a group, the Sámi are in most cases relatively well off, both in absolute terms and relative to the rest of the population in the same geographic area (Hassler, Kvernmo and Kozlov 2008, Brustad 2009, Sjölander 2011). However, it turns out that these types of studies tend to apply a variety of Sámi inclusion criteria and categories. This is not least the case in the Norwegian part of Sápmi (illustrative examples are Nystad, Melhus & Lund 2000, Lund et al. 2007, Silviken & Kvernmo 2007, Brustad et al. 2009, Bals 2010, Hansen 2011, Norum & Nieder 2012, Eliassen 2013). This practice can, on the one hand, be explained by two factors that are partly interrelated: firstly, the absence of a formalized Sámi-demographic "framework" based on regularly updated Sámi census data (Lie 2002, Pettersen 2011b), and secondly, that until recently the number of individuals who at any time are (self-)identified as Sámi, has not been given (see e.g. Jernsletten 1969, Aubert 1978, Nielsen 1986, Stordahl 1996, Andersen, S. 2003, Gaski 2008, Olsen 2010, Blix 2013). On the other hand, one consequence of such a practice is that uncertainty may arise regarding the degree of trustworthiness in the knowledge produced about patterns of Sámi health and living conditions in time and space – with reference to each study, but especially when several studies are reviewed together.

The varied use of Sámi inclusion criteria and categories in studies involving patterns of health and living conditions among the Sámi in Norway, has made some scholars argue that a key

challenge for such studies is "[...] to define the Sámi population in an appropriate way" (Brustad 2009:68, translation by the present author). *This challenge is the topic of the present thesis*. The purpose is to contribute to more systematic knowledge and understanding of certain factors that may affect the design, results and interpretation of studies of this kind. Based on the premise that the Sámi can be conceptualized as an ethnic group which is also an indigenous people (Makkonen 2000), the thesis explores various aspects of the monitoring, recording and (self-)reporting of Sámi ethnicity in the Norwegian part of Sápmi – as such, but especially with respect to the use of Sámi ethnicity as a variable in studies aiming at quantitative knowledge on health and living conditions at the population level in contemporary Norway. The thesis thus has a social epidemiological foundation.

It is an additional ambition that the thesis will also serve as a contribution to international scholarly and ethical-political discourses, first and foremost on practices concerning the recording of information on ethnicity (see e.g. Seltzer & Anderson 2001, Peters 2011, Simon & Piché 2012, Williams & Husk 2013), but also, more specifically, on the use of ethnicity as a variable in studies of patterns of ethnically defined populations' health and living conditions (see e.g. Whaley 2003, Shim 2005, Bhopal 2009a, Kukutai 2010, Ingleby 2012).

The thesis is based on the standpoint that in Sámi and other indigenous peoples' knowledge-building about themselves (Stordahl 2008), meaningful statistical narratives also have a role to play (Prout 2012, Walter & Andersen 2013). A more specific rationale is that adequate and precise numerical data on indigenous peoples and their factual situations are a key factor for fulfilling global ambitions to level up social inequities in health (CSDH 2008), and also for the practical implementation of indigenous rights (Stavenhagen 2009). In Norway, this has relevance for, among other things, the Sámi' people's right to equivalent health services (St.meld. nr. 34 (2012-2013)), and, also for (aspects of) Sámi self-determination in health-related issues (Henriksen ed. 2010).

The thesis employs empirical data from the Sámediggi electoral roll in Norway for the period 1989–2009 (Paper I), from Norway's 1970 Census (Paper II), as well as from the so-called SAMINOR study – a population-based study of health and living conditions conducted in 2003/2004 in selected rural areas with Sámi and non-Sámi settlement in Norway (Papers II and III).

2. Concepts and contexts

The background to this thesis is the need for more systematic knowledge and understanding of various aspects of the use of ethnicity as a variable in studies of patterns in health and living conditions that involve the Sámi people in Norway. In particular, the operationalization – i.e. measurement – of Sámi ethnicity has proven to be a challenging task (Senter for samisk helseforskning 2006, Brustad 2009). Analytically and empirically, the thesis rests on three pillars. The first pillar consists of understandings of health and/as living conditions at the population level, as well as characteristics of studies that seek to obtain quantitative knowledge about such conditions. The second pillar is the concept of ethnicity and aspects of the recording of information on the ethnic affiliation of individuals, so-called ethnicity data. The third pillar is the position of the Sámi as an indigenous people and ethnic minority in the Norwegian part of Sápmi, with special emphasis on the status of Sámi ethnicity data in Norway across time and space. This chapter provides a brief presentation of each of these pillars.

2.1 Health and living conditions of populations

Originally, the term *population* referred to all individuals in a given geographical area, but it has gradually been applied (also) as a general designation for a given quantity of units that share at least one attribute (Krieger 2012b). Thus, human populations can be defined on the basis of practically any kind of permanent and temporary aspects of individuals, their environments and their relationships. Ethnicity is one such aspect. Knowledge on health and living conditions in specified populations can emphasize various aspects, but does typically need to rely on so-called population-based studies.

2.1.1 Health and/as living conditions

The term *health* is not unambiguous (Mæland 2009), and differing notions of health and how it can be achieved will have varying implications for health-related practices as well as health-related analyses. (Gjernes 2004). In the Nordic research tradition, the concept of *living conditions* is defined as the individuals' access to resources that can be deployed in various arenas; living conditions are the result of an interplay between the resources that each individual can access and characteristics of the arenas in which these resources are deployed (Fyhn & Dahl 2000). The most important resources include: 1) health and access to medical

care; 2) financial resources and opportunities for consumption; 3) employment and working conditions; 4) competence and educational opportunities; 5) family and social relations; 6) housing and access to community services; 7) recreation and culture; 8) security for life and property; and 9) political resources and democratic rights (NOU 1993: 17). The concept of living conditions may thus refer to health status as well as to factors that may have an impact on health.

The nexus between health and living conditions is also prominent in that in recent years it has become (more) common to regard health as an interplay between individual biology and factors that are external to the individual (Fugelli & Ingstad 2001; Fleischer et al., 2006; Mæland 2009; Schei 2010). Such "external" factors – often referred to as social determinants of health – include individual lifestyles, social and local networks, as well as general socioeconomic, cultural and environmental conditions (Dahlgren & Whitehead 2009). Some scholars emphasize that the health of individuals must be seen in light of their entire life course (Næss & Kristensen 2009, Tong et al. 2011). Others accentuate in particular that biography, in the sense of existential conditions and experiences primarily over the individual's own life course, but also including those of previous generations, may manifest itself as biology (Getz, Kirkengen & Ulvestad 2011). Per Fugelli (2003) has suggested that health (and illness) can be regarded as a product of biology multiplied by culture and politics, raised to the power of time and place. Social epidemiologist Nancy Krieger (2008, 2012a) has suggested a holistically oriented ecosocial theory of health patterns and distribution of illness at the population level, the core of which is that people are biological organisms and social beings that characterize as well as are characterized by a variety of contexts at multiple levels in time and space. The theory emphasizes cumulative effects and includes responsibility and accountability, power and resistance.

2.1.2 Population-based studies

The study of patterns in the health and living conditions of populations is part of the domain of epidemiology, and epidemiology's unit of analysis is specified *populations*, not specific individuals (Rose 1985, Bhopal 2008). While traditional epidemiological studies typically address illness or health in defined populations and may include social factors for elucidation, studies in *social* epidemiology place their *main focus* on social or societal aspects; on whether and how these may be related to variations in health in specified populations (Oakes &

Kaufman 2006, Mæland et al. 2009). Social epidemiology therefore typically uses theoretical perspectives and empirical knowledge obtained from health-related as well as social-science disciplines. Studies in social epidemiology come in various forms (Bråthen et al. 2007, Mæland et al. 2009, O'Campo & Dunn 2012). Some are primarily *descriptive*, presenting conditions and prevalences. Others are (additionally) *analytical*; they identify associations and may suggest explanations or causes. A third type are *action-oriented*, in having an emphasis on solutions and interventions.

In population-based studies of health and living conditions it is essential to state explicitly to whom the results shall apply (Bhopal 2008). This is especially crucial when results from a (presumed representative) sample will be generalized to others than those who are actually included in the study. To be able to understand and explain the results of studies, as well as to assess their representativeness and potential for generalization, it is essential to know the demographic characteristics of the population(s) and the general conditions under which the members are living (Bhopal 2008, Mæland et al., 2009). Since population-based studies of health and living conditions typically use statistical measures such as proportion, average, rate and ratio, there will often be a need to quantify the population(s) at the time or times at which they are studied. Thus, it will be an advantage to have access to a formalized overview of the individuals that are included – or *can* be included – in the population(s) that is (are) of interest.

All population-based studies ought to have the highest possible degree of reliability and validity (see e.g. Laake, Thoresen & Veierød 2007; Svensson, Hjartåker & Laake 2007; Ringdal 2007). *Reliability* refers to the trustworthiness of the study's results, i.e. that there is correspondence between the observed and "true" values, permitting the results to be replicated under equal conditions. *Validity* refers to whether a study has investigated what it has set out to investigate, i.e. that it has provided an answer to the research question. The value of a reliable study depends on its also having a high degree of validity. Both the data material and the analyses may have an effect on the reliability and validity of studies. Some scholars claim that the paramount form of validity is *conceptual* validity, i.e. that each (theoretical) concept is operationalized – rendered measurable – in a way that captures the "representation" of the concept in an intersubjective sense, so that meaningful communication about the measured phenomenon is facilitated (Jacobsen, D. 2006; Grenness 2012). Other aspects of validity include *internal* validity, referring to inferences drawn from statistical correlations in a data

material, and *external* validity, which denotes the extent to which the conclusions regarding those who have been studied can be generalized to the population from which the sample was drawn, and possibly also to other individuals in other contexts.

It is commonly recognized that in practice no studies are perfect. *Random error* ("noise") pulls in different directions and has no effect on the results apart from a dilution of the estimated effect – at least in large samples. *Systematic error* (bias) causes results to differ from what they would have been in the absence of such error. Common forms of systematic error include *information bias*, which occurs when the measurements are faulty, as well as *sampling bias*, which occurs when those who are studied are not representative of the population for which the study aims to draw conclusions. So-called *confounding* occurs when the assessment of an observed correlation (association) between two variables fails to take into account that a third variable co-varies (statistically) with the two former, *without* being a necessary intermediate variable in this context (see e.g. Bhopal 2008; Jacobsen, B. 2010). Confounding factors thus disrupt the clarification and interpretation of correlations.

The handling of reliability and validity will be complicated when studies involve phenomena of a high complexity and therefore will not invariably have a shared understanding or even a clear definition. The very starting point for this thesis is that *Sámi ethnicity* is such a phenomenon.

2.2 Ethnicity and ethnicity data

In recent years, the concept of *ethnicity* – whose etymological base *ethnos* is a Greek word for "people" – has become increasingly widespread in academic as well as everyday parlance. At the same time, it has become increasingly clear that this concept is "[...] neither simple nor precise" (Senior and Bhopal 1994:327), but rather "[...] fuzzy, flexible and contingent [...]" (Ahmad 1999). On the whole, many perceive this concept as analytically "slippery" and there are continuous "[...] ontological debates over the nature of ethnicity [...]" (Brown & Langer 2010:24); "[d]efining ethnicity is a minefield, as many authors have recognized" (Green 2005:2).

2.2.1 Ethnic groups

Despite the fact that ethnicity is "[...] a big concept – so big as to be meaningless" (Chandra & Wilkinson 2008:517) and therefore tends to function as an umbrella concept (Westin 2010), two aspects stand out as central (Fenton 2003). The first includes *notions of origin*, of having descended from the same ethnos. The second includes *ideas about culture*, of having shared customs, including language. Over time, various main analytical views of ethnicity as a phenomenon have developed (see e.g. Brown & Langer 2010). The *primordialist* view focuses on (given and unique) cultural content, regarding ethnic groups as natural results of biological differences or long historic processes. The *instrumentalist* view assumes that in situations of social, political and economic competition, social elites use references to ethnicity as a (strategically instrumental) resource to define group identities and regulate group boundaries, and ethnic groups are hence defined by their mutual relationships, not by their (original) cultural practices. A third view is referred to as *constructivist*, emphasizing in particular those (identity-forming) processes that cause ethnic groups to be created and assume social importance, and regarding ethnic groups as the result of purposive efforts by cultural entrepreneurs to construct an identity.

While primordialist views of ethnicity appear to remain widespread, constructivist views have occupied a strong position in many academic communities since 1980 (ibid.). Some constructivist positions have been criticized for throwing the baby out with the bathwater, overlooking the fact that ethnic constructions do not fall from the sky; they are based on conditions that many people regard as "their" culture, history, language and community (Karner 2007). It has been claimed that more moderate constructivist positions combine the primordialists' views of cultural tradition as an ethnic "basis" with the instrumentalists' views on situationally dependent construction and maintenance of ethnic groups and ethnic affiliations (Karner 2007, Brown and Langer 2010).

Nation and race

A complicating factor is that the concept of ethnicity shares its domain of meaning with two other concepts that also have origin as their pivotal point: nation and race. (Fenton 2003). *Nation* is partly associated with culture and partly with politics, but is used in particular to denote groups that are – or are assumed to be – based on a cultural community. *Race* is associated with hereditary biological characteristics, in particular visible and external

differences such as skin colour, but to some extent also physical characteristics. Today, the concept of race is highly controversial. Many want to banish this term to the scrapheap of history because it is deemed (biologically) irrelevant. Others claim that this term captures the (social) consequences of the fact that the world is not "colour blind", and it thus remains relevant as well as necessary (see e.g. Möschel 2011; Zuberi 2011; Krieger 2010).

Territorial/national minorities – immigrants – indigenous peoples

Today, the term ethnic group is mostly used to refer to named intra-state groups that constitute a minority in the state in question. Distinctions are commonly drawn between a) territorial/national minorities, b) immigrants (sometimes including descendants of foreignborn ancestors) and c) indigenous peoples (Kjeldstadli 2008; Ingierd & Fossheim 2011). Among these, the concept of indigenous peoples has proven to be especially difficult to define with any degree of precision (Corntassel 2003; Barnard 2006; Friedman 2008). Over time, the indigenous peoples' movement has shifted its focus from "essence" to "positioning" (Minde 2007:34). It is worth noting that not even the UN Declaration on the Rights of Indigenous Peoples contains an explicit definition of "indigenous people" (United Nations 2007), but on the whole, the most prominent characteristic of ethnic groups that are also indigenous peoples is a long-standing historic affiliation with a territory at a time when colonization or modern state formation took place. It has been argued that the positions of indigenous peoples seen as a whole imply that they constitute a *people* within the meaning of international law and thus are entitled to (forms of) self-determination (Åhren, M. 2007; Anaya 2009). Conceptualizing indigenous peoples as a type of ethnic group has been criticized by some, while others have pointed out that such a conceptualization is analytically appropriate to capture the way in which indigenous peoples are understood and treated in given contexts within a state (Andersen, C. 2009; Kukutai 2010). National censuses are one such context.

2.2.2 Registration of information on ethnicity

In modern states, national censuses are the most common source of general demographic data. By definition, such censuses are undertaken at regular intervals and include a complete registration of all those who are resident in a defined area, undertaken by the authorities and published in a systematic form (Soltvedt 2004). As a phenomenon, censuses have been described as "a tool of statecraft" (Berdayes 2008) which are "[c]oncerned with knowing population" and which over time have become "[...] institutionalised, codified and

systematised such that myriad policies and practices of governments, international organisations, corporations and researchers rely upon censuses to a great extent" (Ruppert 2007:5).

A widespread, but not self-evident census practice is to register various forms of information on the ethnic affiliation of the citizens. A global study of the census round in the year 2000 found that such practices were applied in 63 per cent of the world's countries (Morning 2008). A study based on the latest census forms in each of 236 countries found that 23 per cent of them made provision for specific enumeration of citizens with an affiliation to indigenous peoples (Peters 2011). Historic studies show that practices regarding ethnicity data vary not only between states, but also within states – primarily over time, but also between various parts of the state's territory and in some cases also between various groups of citizens (Anderson 1996; Kertzer & Arel 2002; Simon 2012). Such variations must be seen in light of differences in historical-political conditions, which in turn constitute frameworks for the assessment by social actors regarding whether the collection and recording of ethnicity data is important and appropriate or superfluous and reprehensible (see e.g. Ahmad 1999; Seltzer & Anderson 2001; Morning & Sabbagh 2005; Simon & Piché 2012).

Defining ethnic categories for use in censuses and assigning individuals to such categories can both be regarded as ways of exercising power – and where there is power, there will be resistance: "Ever since the censuses began, state efforts to pigeon-hole each individual into a single category of identity, and then conceive the whole population as divisible into these units, have faced resistance" (Kertzer & Arel 2002:27). In some cases the very idea of categorizing citizens ethnically will be controversial. One view on this is that a state should only care whether a person is a citizen or an "alien", the latter referring to a person born outside the territory of the state. In general, it has been far less controversial to register information on the citizens' *country of birth* than on their ethnicity (Blum 2002). In other cases, the controversy will concern what the relevant categories are and/or the conditions for being assigned to these (see e.g. Mateos, Singleton & Longley 2009; Aspinall 2009; Williams & Husk 2013). Key issues are: which aspects related to ethnicity will form the basis for ethnic categories? Should ethnic identification be ascribed or self-ascribed? How should affiliations to more than one group be handled?

The UN's recommendations for the 2010 census round restricted the *core topics* to demographic data on gender, age and marital status, but emphasized also that "[d]ata on ethnicity provide information on the diversity of a population and can serve to identify subgroups of a population" (United Nations 2008:139f). If such data were to be collected, it was pointed out that "[t]he subjective nature of the term (not to mention increasing intermarriage among various groups in some countries, for example) requires that information on ethnicity be acquired through self-declaration of a respondent and also that respondents have the option of indicating multiple ethnic affiliations". It was underscored that "[d]ata on ethnicity should not be derived from information on country of citizenship or country of birth". Furthermore, the recommendations contained separate sections on the registration of religion, language and affiliation to indigenous peoples.

It is recognized that in national censuses, neither the questions, nor the categories are static phenomena. The causes of change may vary, but essential for this thesis is that ethnic categories of this type are not given *a priori*. Not only the *implementation*, but also the *design* of censuses is "[...] inherently a political practice" (Ruppert 2007:6, see also Rowse 2009).

Since national censuses are a main source of demographic data, the census practices will have consequences for other practices that make use of such data. However, censuses are not the only possible source of ethnicity data, since information on ethnicity also may be (more or less routinely) recorded in administrative registries, in surveys for production of official statistics, as well as in the context of research. In such contexts as well, the recording and use of ethnicity data remain a contentious area with varying practices – including in terms of legislation and ethical codes – within and between countries.

2.3 The Sámi

The Sámi are an ethnic group that also has the status of an indigenous people. Their traditional area of residence – often referred to as Sápmi – includes parts of the four states of Norway, Sweden, Finland and Russia (cf. the map in Appendix A). Through the ages there have been varying views of when the Sámi first arose as a distinctive group, but a long-standing Sámi presence in the Sápmi area prior to the delineation of the present national borders has been established by way of a number of sources (Aarseth 1975; Hansen and Olsen 2004). However, the Sámi have never been a homogenous group; a total of nine Sámi

languages/dialects have been identified historically (cf. Figure 2.1), and ways of life that were adapted to the natural environment led to the development of a diversity of main forms of Sámi material culture (Vorren & Manker 1957).

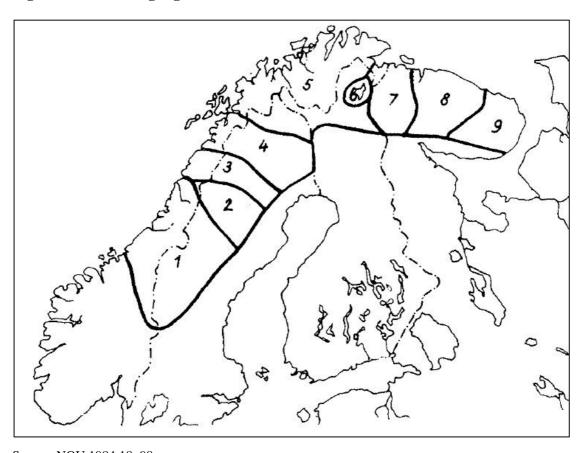


Figure 2.1 Sámi language/dialect areas

Source: NOU 1984:18: 98.

1=South Sámi, 2= Ume Sámi, 3=Pite Sámi, 4=Lule Sámi, 5=North Sámi, 6=Enare Sámi, 7=East Sámi, 8=Kildin Sámi, 9=Ter Sámi

While Sámi unity and pan-Sámi community have been emphasized in a number of contexts (Smith ed. 2005), significant differences in the position and general situation of the Sámi developed over time within each of the states that intersect the Sápmi area (Lantto 2010). These differences include different and varying polices with regard to the identification of Sámi citizens in national censuses (Aikio 1994; Lie 2002; Evjen og Hansen 2009; Axelsson 2010; Sokolovskij 2011). Despite the fact that this has resulted in partly absent and partly deficient demographic data on the Sámi population, practically all presentations of the Sámi and Sámi-related issues include more or less rough estimates of the prevailing size and geographical distribution of the Sámi people; typically in the order of 60 – 70 000 Sámi in

total, who are typically distributed with 40 000 Sámi in Norway, 20 000 in Sweden, 7 500 in Finland and 2 000 in Russia (see e.g. Galdu 2006; Hassler, Kvernmo & Kozlov 2008). The Sámi are thus – even with a reservation about low estimates – a numerically rather small indigenous people that constitutes relatively minor ethnic minority populations in each of the four countries.¹

2.3.1 In the Norwegian part of Sápmi

In this thesis, the empirical material and the explicit analyses are restricted to the Norwegian part of Sápmi. The primary concern of the thesis is the distinction between Sámi and non-Sámi. The thesis will only touch upon the fact that parts of the Norwegian Sápmi are populated by descendants of persons from a Finnish/Kven language background who immigrated to Northern Norway before 1945. This group is officially referred to as the *Kven* and enjoys formal status as a national minority in Norway (St.meld. nr. 15 (2000-2001); see also Niemi 2002; Ryymin & Nyyssönen 2012).

Main features of the position of the Sámi as an ethnic minority and indigenous people in Norway are presented briefly in Papers I–III. The position can be summarized in the keywords ethnic interaction, government assimilation policy, resistance and Sámi revitalization. Ethnic interaction included – and still includes – inter-ethnic marriages, although with some local variations (see e.g. Thuen 1989; Evjen 2008). Government assimilation policy – which has been related partly to the emergence of strong nation states and Norwegian concerns for security policy as well as Social Darwinist ideas of race and racial hierarchies – impacted notions of the Sámi and everything relating to them as culturally, socially and individually inferior (Eriksen & Niemi 1981; Stordahl 1997; Schanche 2002; Minde 2005). Various kinds of resistance to the assimilation policy and the so-called "Norwegianization" that followed in its wake contributed to, among other things, the adoption of the Sámi Act of 1987 and the Section 110a Constitutional Amendment of 1988, which in turn helped change the overall framework with respect to being a Sámi in Norway in general (Broderstad 1999) and produce an institutional and linguistic Sámi (re)vitalization in particular.

¹ In 2012, the population in the countries amounted to approximately 5 million in Norway, 9.5 million in Sweden, 5.4 million in Finland and 144 million in Russia (The World Bank 2013).

Development of Sámi policy and politics in Norway has partly overlapped with the development of a universalist welfare state and general processes of modernization, including centralization (Stordahl 1997; Kuhlne 2006; Sørlie 2010). With regard to Sámi ethnicity it has been argued that developments over the last decades have had a liberating effect for some, while they have also provided fertile ground for new conflicts and personal dilemmas (see e.g. Stordahl 1996; Johansen 1998; Agenda Utredning & Utvikling 2002; Sivertsen 2009; Olsen 2010; Høgmo 2011; Suongir 2011; Kalstad 2013). It is impossible, however, to explicitly document the impact that previous assimilation policies or more recent Sámi revitalization have had on the number of people who, at given points in time, *de facto* have – and in given contexts have chosen to *articulate* – a Sámi affiliation. The main reason for this lies in the preconditions for defining and studying the Sámi population in Norway as a demographic unit (Pettersen 2011b).

2.3.1 Sámi ethnicity data in Norway

Since the Second World War, Norway has been among those countries whose policy is not to register information on their citizens' ethnicity in the national censuses. While all censuses undertaken from 1845 to 1930 had recorded information in various ways on Sámi or Kven affiliation in those census tracts where the authorities believed that these groups accounted for a significant slice of the population (Torp 1985; Lie 2002), this practice was in principle abandoned in 1946. It was no longer deemed "purposeful" to include questions on Sámi and Kven ethnicity – both because "[r]acial mixing has now proceeded so far that it will often be very difficult to determine the race to which large groups of the population belong" and because "[t]he concept of "race" had also become so strongly discredited due to wartime circumstances, that it surely would give rise to indignation if such a question were to be included on the enumeration forms" (Statistisk sentralbyrå 1956:20f). In addition, it was noted that "[m]oreover, a large proportion of the Sami and Kven live exactly the same lives as the population in general and have completely adapted to Norwegian culture and tradition" (ibid.). The 1950 census, however – because of external input, but with strong doubts on the part of Statistics Norway – included questions on Sámi (and Kven) domestic language in a small number of selected villages in the three northernmost counties.

An exception: the 1970 census

Although the registration of the Sámi (and Kven) in the early census was not flawless, especially because of inconsistent criteria for ethnic categorization (Evjen and Hansen 2009), and even though the registrations of Sámi language use in the 1950 census were regarded as clearly incomplete (Statistisk sentralbyrå 1956:22; NOU 1984: 18, Ch. 3.3.3), Sámi organizations felt that a complete absence of demographic data on the Sámi population was problematic (Aubert 1978). After repeated requests from the Norwegian Sámi Council in particular (NOU 1984: 18, Ch. 10.2.2), Statistics Norway decided that the 1970 census should include four questions on Sámi affiliation. The questions – which were formulated in cooperation with the Sámi organizations and focused on various connections to the Sámi language and self-identification as Sámi – were not included in the regular census form in the way the Sámi organizations had wanted, however. It was claimed that this would be too costly (Thorsen 1972). Instead, the questions were printed on a separate form (cf. Appendix B) for distribution in 45 rural municipalities north of the Arctic Circle, whereof 24 included only census tracts with an assumed concentration of Sámi settlement (cf. Appendix C). The census tracts in which at least one Sámi form was returned had a total population equivalent to 2.9 per cent of the Norwegian total in all of the country's 451 municipalities at that time.

As of today, the Sámi questions in the 1970 census still represent an exception in recent Norwegian census practice. Moreover, since the Norwegian census in 2000 most likely was the last so-called *form-based* census ever, such an exception is unlikely to occur again. The 2011 census was a so-called *registry-based* census, meaning that it was collated from recycled existing data by Statistics Norway, partly the agency's own data and partly drawn from various administrative sources (Utne 2011). Consequently, since the production of national, individually based official Sámi statistics depends on systematic registration of (forms of) Sámi affiliation at the individual level, such statistics are likely to remain absent in Norway.

A Sámi electoral roll established in 1989

Over time, the Sámi organizations' requests for registration of the Sámi for demographic and statistical purposes became interwoven with discussions regarding the establishment of a separate Sámi register for use in direct elections to a nationwide Sámi representative body. The Sámi Act of 1987 established such a register. The preparatory works of the Act nevertheless emphasized that enrollment in the roll should be a right, not a duty; this was to be a tool for use in the context of elections to the Sámediggi, *not* a complete "Sámi census"

(NOU 18: 1984; Ot.prp. nr. 33 (1986-87)). The framework and numeric development of this electoral roll is the topic of Paper 1.

Geographically based official Sámi statistics from 2006

Since 2006, based on input from and cooperation with the Sámediggi and Sámi research institutions/representatives, Statistics Norway has produced bi-annual demographic and other statistics that are specified for those areas that are encompassed by the Sámediggi subsidy schemes for business development; 'Sametingets tilskuddsordninger for næringsutvikling' in Norwegian (Statistisk sentralbyrå 2014).² In principle, this so-called STN area includes selected municipalities and local communities that are regarded as especially crucial for the preservation and development of Sámi culture and industry. This notwithstanding, subsidies can be granted to all residents in the area, irrespective of the applicant's ethnicity. When the precursor of the current scheme, the Sámi Development Fund; 'Samisk utviklingsfond' (SUF) in Norwgian, was established in 1975, the geographical area of applicability encompassed five municipalities in Finnmark county. After several rounds of expansion, the area currently encompasses 21 municipalities and 10 sub-municipalities north of the Arctic Circle/Saltfjellet mountain range (cf. the table in Appendix D and the map in Appendix E). As of 1 January 2013, the population of the STN area accounted for 14.2 per cent of the total population north of the Arctic Circle/Saltfjellet mountain range (Statistisk sentralbyrå 2014) and 1.1 per cent of the Norwegian population as a whole.

² This author was involved in this cooperation via a position as social scientist at the then Sámi Instituhtta / Nordic Sámi Institute (merged with Sámi University College in 2005).

3. Aims of the thesis

Taking the situation of deficient Sámi-demographic data and blurred Sámi-ethnic boundaries as the starting point, the *overall objective* of this thesis was to contribute to more systematic knowledge and understanding of some basic issues regarding the use of Sámi ethnicity as a variable – particularly in studies aiming at quantitative knowledge on health and living conditions at the population level in contemporary Norway.

The specific aims were:

- To explore and critically assess actual and potential approaches to the *operationalization*of Sámi presence in Norway.
- To investigate the extent of *stability and change* in (self-reported) Sámi ethnicity over time, and assess the results in light of certain factors at various levels.
- To demonstrate some numerical consequences of using different measures of Sámi ethnicity when comparing living conditions in the Sámi and the remaining population in a given area.

4. Materials and methods

4.1 Overview

The thesis is based on three studies with different design and the use of partly different and partly the same material. Each study is presented in a separate paper; in the present text referred to as Paper I, Paper II and Paper III, respectively. Table 4.1 gives an overview of each study's design, data set, the number of participants and their age, the geographical area covered, as well as the time of data collection. The subsequent sections summarize other essential aspects of each study, with an emphasis on the respective Sámi ethnicity measures.

Table 4.1. Overview of the studies' design, data set, the number of participants and their age, the geographical area covered, and the time of data collection

Study/ Paper. Design	Data set	Number of participants	The participants' age	The area covered	Time of data collection
I. Historical- descriptive	The Sámediggi electoral roll*	5,505- 13,890***	> 18 years	Norway (the whole country)	1989—2009 (every fourth year)
II. Time series	Norway's 1970 Census **	-	> 0 years	45 municipalities in Norway north of the Arctic Circle	1970
	The SAMINOR study **	10,541	36-79 years	17 municipali- ties in Norway north of the Arctic Circle	2003—2004
III. Cross- sectional	The SAMINOR study	14,797	36-79 years	17 municipali- ties in Norway north of the Arctic Circle	2003—2004

^{*} The study is partly based on already published data

4.1.1 The Sámediggi electoral roll (Paper I)

The study on the Sámediggi electoral roll (see also Chapter 2.3.2) combined secondary data from various kinds of publications with primary data on the number of enrolled per municipality in 2005 and 2009; in total and by gender and age group. The Sámi ethnicity measures were implicitly determined by the Sámi Act's criteria on the right to enrolment in the Sámediggi electoral roll:

^{**} The study is based on a linkage of the two data sets

^{***} The increase is a topic in the study.

'All persons who make a declaration to the effect that they consider themselves to be Sámi, and who either a) have Sámi as their domestic language, or b) have or have had a parent, grandparent or great-grandparent with Sámi as his or her domestic language, or c) are the child of a person who is or has been registered on the Sámi electoral roll may demand to be included on a separate register of Sámi electors in their municipality of residence' (§ 2-6).

The paragraph did not originally include the great-grandparent generation; due to input from some Sámi communities, this generation was added ahead of the third Sámediggi election in 1997 (Sametinget 2007). Those who wish to join the electoral roll must use a certain application form (cf. Appendix F). Enrolled persons might later resign from the roll.

The numerical analyses included, all in all, persons who were enrolled in the Sámediggi electoral roll at the time of each election between 1989 and 2009.

4.1.2 The SAMINOR study (Papers II and III)

Studies II and III are based on data from the so-called SAMINOR study; a population-based cross-sectional study of health and living conditions in selected rural areas in Norwegian Sápmi, where Norway's 1970 census or other relevant knowledge indicated a significant presence of both Sámi and non-Sámi populations (Lund et al. 2007). Data collection took place in 2003/2004. The study was designed as a combined living conditions and cardiovascular survey, based on questionnaires and screening. It was initiated by the Centre for Sámi Health Research at UiT The Arctic University of Norway and was carried out in collaboration with the Norwegian Institute of Public Health. The study included 24 municipalities, 18 north of and 6 south of the Arctic Circle. In 7 of the municipalities, however, only some villages were covered (cf. Figure 1 in Paper II and Figure 1 in Paper III). A total of 27,987 persons who were officially registered as resident in the selected area, and who were aged either 30 years or between 36 and 79 years, were invited to participate. Of these, 16,865 persons (60.6 per cent) returned at least one of the study's questionnaires. The response rate did, however, vary geographically, which might be due to minor adjustments to the study design along the way (Lund et al. 2007, Nystad 2010). The questionnaires were distributed in Norwegian and Northern Sámi; 1.6 per cent of the participants returned the latter.

Studies II and III include women and men aged between 36–79 years who were resident in one of the 17 wholly included municipalities north of the Arctic Circle. To account for local variations, the municipalities were grouped into five regions, based partly on cultural

variations and partly on location and population size (cf. Figure 2 in Paper II and Figure 2 in Paper III). The SAMINOR study obtained data on gender, age and municipality from the Norwegian Central Population Register. Data on ethnicity and a range of aspects of health and living conditions were obtained through the questionnaires (cf. Appendix G). Studies II and III utilized data on ethnicity and length of education. In addition, Study II utilized data on household income and self-rated health. The Sámi (and other) ethnicity questions were:

- What language do/did you, your parents and grandparents use at home?
- What is your, your father's and your mother's ethnic background?
- What do you consider yourself to be?

For all questions, one or more boxes could be ticked for the options 'Norwegian', 'Sámi', 'Kven' and 'Other, please describe'. The responses about language were to be specified for each parent and grandparent (cf. Appendix G). In this thesis, the responses are categorized as 'Yes' to Sámi when the Sámi option was ticked, either alone or combined with one or more other options.

Study III included 14,797 SAMINOR participants who fulfilled the criteria on age and home municipality and who had also answered at least one of the questions about ethnicity in the SAMINOR questionnaire (for Study II, see below).

4.1.3 Norway's 1970 Census (Paper II)

In Study II the answers about Sámi ethnicity in the SAMINOR study were compared with responses from the same persons in Norway's 1970 census (cf. Chapter 2.3.2). This was made possible by linking the data from the SAMINOR study with the answers to the questions on Sámi ethnicity in the 1970 census, and also with information about the participants' home municipality in 1970. The linking of the data was accomplished by Statistics Norway on behalf of the Centre for Sámi Health Research. The Norwegian unique personal identification number was used as linkage and then removed to anonymize the data. The Sámi ethnicity questions in the 1970 census were:

- 1) Was Sámi the first language spoken by the person?
- 2) Was Sámi the first language spoken by one of the person's parents?
- 3) Was Sámi the first language spoken by one of the person's grandparents?
- 4) Does the person consider him/herself to be a Sámi?

The answers could be 'Yes' or 'No', with 'Don't know' as an alternative in Questions 2 and 3 and 'Uncertain' or 'Do not wish to answer' in Question 4. Parents or guardians were to determine whether children under 15 should be considered as Sámi (cf. Appendix B). In Study II, four possible outcomes were defined for the comparison of the responses about Sámi ethnicity in the SAMINOR study with the answers in the 1970 census: 'Stable yes', 'Stable no', 'New yes' and 'New no'.

Study II included 10,541 SAMINOR participants who fulfilled the criteria on age and home municipality, had returned the SAMINOR questionnaire including the ethnicity questions, and, also, responded to at least one of the Sámi ethnicity questions in Norway's 1970 census

4.2 Statistical analyses

In Study I the numerical analyses were performed using Excel. In Studies II and III the statistical analyses were performed in STATA, version 12. The analyses are described in each paper. In general, frequency tables were used for descriptive analysis, while for other analyses, logistic regression was used to estimate the odds ratio (OR) with corresponding 95 per cent confidence intervals.

4.3 Ethical aspects

The SAMINOR study was approved by the Regional Committee for Medical Research Ethics, Northern Norway (REK North). A Sámi consultant participated in the review of the application. Permission for retention of personal data was provided by the Norwegian Data Inspectorate. All invitees were informed of and asked to consent to subsequent linkage to various health and administrative registers, including census data (cf. Appendix G). All study participants gave their consent. The linking of SAMINOR data with the census data was approved by REK North. Beyond this, in contrast to many other indigenous peoples, the Sámi in Norway have discussed but not (yet) adopted specific guidelines or procedures for research involving Sámi participants (Porsanger 2008).

In the present thesis, some ethical aspects regarding research involving indigenous peoples is in itself a topic, especially in Chapter. 6.3.

5. Summary of results

Paper I

- The growth of the Sámediggi electoral roll in Norway of about 150 per cent from 1989 to 2009 was distributed in ways that altered the electoral roll's geographic profile somewhat from north to south, and from rural to urban municipalities. The two municipalities with the highest number of enrolled in both 1989 and 2009 had their total share of the electoral roll reduced from 40 to 20 per cent.
- For certain selected municipalities, calculations showed large variations in the relation between the numbers of enrolled in the Sámediggi electoral roll in 2009 and the number of persons entitled to vote in the parliamentary election the same year; from less than 1 per cent to about 70 per cent. The concept of *Sámi political density* was launched as a possible term for the calculated relation.
- Local features of the Sámediggi electoral roll related to local trends in election turnout indicate that for some persons, enrolment might serve primarily as a marking of Sámi affiliation; to enrol is to recognize and publicly show/declare Sami ancestry one lets oneself be officially "counted in" as Sámi, but active participation in the Sámediggi elections is (apparently) of lesser importance.
- Other reasons for the increased number of enrolled might be that a) more people have a positive view of the Sámediggi as an institution, that b) fewer are sceptical towards of the recording of Sámi ethnicity in a public registry, and c) that more people self-identify as Sámi perhaps due to d) increased openness about having a Sámi linguistic connection in their family history.
- In the absence of relevant demographic data, it is not possible to calculate the proportion of those who have actually enrolled in the Sámediggi electoral roll, relative to those who potentially meet the (current) criteria for enrolment.

Paper II

- The study combined replies about Sámi ethnicity given by the same individuals in Norway's 1970 census and in the population-based SAMINOR study in 2003/2004, in order to compare self-reported Sámi ethnicity at two points in time that encompass a period when the effects of a longstanding assimilation policy gradually lost ground in favour of upcoming Sámi revitalization. The results showed that self-reported Sámi ethnicity – measured as a) Sámi as home language in each of three generations and b) the respondent's self-identification as Sámi –has remained generally stable, but some changes were observed.
- For the questions about Sami language, the share of 'Stable yes', 'New yes' and 'New no' replies represented about 32, 11 and 7 per cent for the grandparent language, about 27, 6, and 4 per cent for the parent language, and 19, 4 and 1 per cent for the respondent's own language, respectively.
- For the question about self-identification as Sámi, the share of 'Stable yes' replies
 represented 17 per cent, while the 'New yes' and 'New no' represented 9 and 5 per cent,
 respectively. The number of 'Yes' replies in the SAMINOR study in 2003/2004
 represented an increase of 34 per cent gross and 24 per cent net compared with the 1970
 census data.
- Changed reporting of self-identification as Sámi was significantly associated with changed reporting of Sámi language for the parents and grandparents.
- Compared to the 'Stable yes' replies there was increased odds for 'New yes' replies about self- identification as Sámi among participants with commenced college/university studies (OR 1.70, CI 1.25–2.31) and among participants with multi-ethnic self-identification (OR 5.51, CI 4.40–6.92).
- As a whole, the observed *intra*-generational ethnic mobility in this sample indicates that stability and change of self-reported Sámi ethnicity reflect interplays between societal and individual of factors.

Paper III

- The study utilized Norway's Sámi Act as a starting point to define various Sámi ethnicity measures, in order to explore numerical consequences of applying different Sámi inclusion criteria in population-based studies. Four partially overlapping measures were derived, one geographically based 'Resident in the Language area' (G1), and three individually based; –'Sámi linguistic connection' (I1), 'Self- identification as Sámi '(I2), and 'Sámi as active language' (I3). By using data from the SAMINOR study in 2003/2004 restricted to 17 wholly included municipalities north of the Arctic Circle the four suggested measures were used to establish four Sámi example populations.
- The geographically based population constituted 38 per cent of the sample and included about 40 per cent self-reported non-Sámi.
- The three individually based populations varied significantly with respect to size. About 36 per cent of the sample reported the Sámi linguistic connection, while 18 per cent reported Sami as active language. About 21 per cent reported self-identification as Sámi; numerically this population corresponded to about 60 per cent of the number reporting Sámi linguistic connection. The three populations had considerably different geographical distribution related to five regions defined for this study.
- The testing of how the Sami example populations appeared relative to the respective non-Sámi ones, showed some but modest effect of inclusion criteria for the three measures education, household income and self-reported health, respectively.
- Taken together, in this sample the choice of Sami inclusion criteria had a clear impact on the defined populations' size and geographical distribution, but less influence when comparing certain living conditions in the Sámi population and the remaining population in the same area.

6. Discussion

Knowledge on patterns in the health and living conditions of populations is commonly regarded as a significant factor in and for modern states and should therefore have the highest possible credibility: "Much of health policy is planned and designed on the basis of epidemiological knowledge", and it is therefore "[...] essential that such studies have high quality and that the population has confidence in this type of research activity" (NOU 2005: 1:29). While discussing what may *motivate* states to produce knowledge on the health and living conditions of specified populations (see e.g. Augestad 2005; Bore 2007; Skolbekken 2010; Biruk 2012; O'Campo & Dunn 2012) will be beyond the concerns of this thesis, it is a main concern that the ambitions of high quality and confidence on the part of the population should also apply to knowledge that involves Norway's Sámi population. In turn, this is conditioned by knowledge on and understanding of the use of Sámi ethnicity as a variable.

According to Brown and Langer (2010), challenges pertaining to the use of ethnicity as a variable in general were until quite recently "[...] insufficiently acknowledged and addressed in most quantitative studies focusing on implications of ethnic diversity on different social and economic outcomes" (p. 414). According to Rughinis (2011), addressing such challenges has been more common in health-related quantitative studies (see e.g. Hahn & Stroup 1994; Senior & Bhopal 1994), but the attention appears to be increasing even here (see e.g. Ramirez et al. 2005 on social differences in health; Møllersen & Holte 2008 on psychology; Lee 2009 and Kanakamedala & Haga 2012 on biomedicine; Ford & Harawa 2010 on social epidemiology; Hunt & Megyesi 2008 and Ali-Kahn et al. 2011 on genetics). Some scholars are especially concerned with the accessibility and quality of ethnicity data (see e.g. Sandefur, Campell & Eggerling-Boeck 2004 on the health of elderly people in the USA; Fremantle et al. 2008 on the health of indigenous children in Australia; Minore, Katt & Hill 2009 on the health of indigenous peoples in Ontario; Varcoe et al. 2009 on clinical contexts in Canada; Cormack & McLeod 2010 on the health sector in Aotearoa New Zealand; Kaneshiro et al. 2011 on health research on Hawai'i; Mathur, Grundy & Smeeth 2013 on primary health in the UK). Questioning of the relationship between the concepts of ethnicity and race is a topic in particular. According to Afshari & Bhopal (2010), ethnicity has become more common than race in health-related academic articles in recent years – especially by way of the compounding of ethnicity and race. At the same time, it has been claimed that this shift is "[...] useless unless it is accompanied by a theoretical understanding of what race and

ethnicity are as concepts related to human diversity" (Moubarac 2013:113; see also Kaufman & Cooper 2001; Duster 2006).

A main reason for this increasing attention devoted to ethnicity as a variable is most likely that a growing number of states and local communities are becoming (increasingly) more ethnically complex; increasing (trans)national migration leads to the presence of additional ethnic groups, which in turn may give rise to a greater number of ethnically mixed families that cause more people to (self-)identify with more than one ethnic group (see e.g. Snipp 2002; Callister et al. 2007; Kjeldstadli 2008). In some states, an increased focus on ethnicity may be related to the facilitation of options to select a multi-ethnic affiliation in censuses (see e.g. United Nations 2008; Gullickson & Morning 2011; Thompson 2012). More specifically, it may be significant that genetics and bioinformatics have gained a strong position in studies of human variation at the population level, and this may have caused the (potential) relationships between biology and the socially constructed categories of ethnicity and race to become a frequent – and controversial – topic on scientific as well as public agendas (see e.g. van Baren-Nawrocka 2013); not least with regard to assessments of indigenous ancestry (see e.g. Tallbear 2009; Reardon 2011; Liu 2012). Most likely, however, the attention devoted to ethnicity as affiliation with indigenous peoples has been made relevant by the fact that the rights and living conditions of indigenous peoples have become a topic on the global agenda as well as within individual states (United Nations 2004, Bartlett et al. 2007; Stavenhagen 2009). This thesis is a Sámi example from Norway in this respect.

The discussion in this chapter stems from an argument that was launched by Peter A. Senior and Raj Bhopal as early as 1994, saying that while epidemiological studies typically involve a number of factors that are not easily measurable, the phenomenon of ethnicity is unusual because "[...] it suffers from the problem of measurement error, *together* with heterogeneity of the measured populations, and the *additional* complexity of cross-cultural research" (Senior & Bhopal 1994:29, italics added). Seen as a whole, Papers I-III focus mainly on aspects of the former of these factors: measurement of Sámi ethnicity (measurement error). This chapter will also address the two other factors explicitly. The chapter starts by comparing and elaborating key results from Papers I-III. The next two sections will discuss internal Sámi variation(heterogeneity) and the study of ethnically defined populations (cross-cultural research) respectively. The fourth section discusses the use of Sámi ethnicity as a variable more specifically related to studies that aim to generate quantitative knowledge about health

and living conditions at the population level in contemporary Norway. The chapter ends with some reflections on the strengths and limitations of the thesis.

6.1 Operationalization of the Sámi presence in Norway

In questions pertaining to Sámi rights it may be sufficient to refer to how a Sámi presence in an area is a historic fact: that the state of Norway is based on the territory of two peoples – Sámi and Norwegians (see e.g. Smith ed. 2005; Ravna 2012). In other contexts it will be necessary to *operationalize* the Sámi presence more specifically: Sámi ethnicity must be *measured*. Production of quantitative knowledge that includes the health and living conditions of the Sámi people is one such context.

As an ethnic group and indigenous people, the Sámi are historically associated with the so-called *Sápmi* area. However, Sápmi has never constituted a formalized unit with distinct borders (Niemi 1997; Eriksson 2002) and the area has also long been inhabited by people other than the Sámi (Hansen and Olsen 2004). The relationship to the Sápmi area alone can therefore not be used as a basis for operationalizing the Sámi as a distinct demographic unit. A concern in and for Papers I-III is that while the Sámi on the one hand are officially recognized as a separate ethnos whose language, culture and social life shall be protected and developed, longstanding inter-ethnic interaction combined with (the legacy of) assimilation policies have contributed to blurring Sámi ethnic boundaries at the group and individual level. This notwithstanding, the Sámi presence in Norway is *de facto* operationalized in some contexts – partly with the aid of individually based and partly via geographical approaches. At the same time, Norwegian policy with regard to ethnicity data provides the framework for how Sámi affiliation can be presented and explored numerically. Both these factors constitute key premises for the use of Sámi ethnicity as a variable in, for example, studies of health and living conditions in Norway.

6.1.1 Individually based approaches

Individually based approaches to the Sámi presence can include *objective* measures (based on ancestry) of a connection to Sámi language, as well as *subjective* measures of self-identification as Sámi. The (current) criteria for enrollment in the Sámediggi electoral roll take into account a connection to the Sámi language through up to four generations. Sámi

ethnicity measured as 'Connection to Sámi language' (alternatively phrased: 'Sámi linguistic connection') may thus encompass a connection to a minimum of one and a maximum of fifteen Sámi speakers in a family tree. The measure of 'Self-identification as Sámi' may include persons for whom such an identification is self-evident as well as others for whom it is less distinct. Such identifications may also be combined with other ethnic identifications (cf. Paper II). Although the wording of the criteria for enrollment in the Sámediggi electoral roll indicates – and implies – that self-identification as Sámi will be *based on* a connection to Sámi language in recent family history, it remains a fact that a connection to the Sámi language does not automatically convert into self-identification as Sámi (cf. Paper III, Table I, and Paper II, Table 1).

'Self-identification as Sámi' stands out as the most complex and challenging measure of Sámi ethnicity. Ethnic (self-)identification is typically interwoven with individual life stories that are part of a cultural life context (Oskal 2003). For some, this can be an unproblematic or unobtrusive aspect of life, while for others this may involve serious ethical and existential issues, regarding "[...] the life one has lived and the life one wants to live, who one is and who one wants to be" (Oskal 2003:325). In democratic states that are governed by law, each individual must answer such questions; nobody can answer on someone else's behalf, and a lack of tolerance for the answers given will "[...] represent a moralization over the answers of others" (Oskal 2003:328). A "true" answer to the question of self-identification as Sámi will thus be the answer that a person *has* at any one time. Whether this answer will be reported will depend on how this person perceives the conditions for answering in one way or another (cf. Paper II).

Changes over time

All individually based measures of Sámi ethnicity may capture different persons at different times. This can happen "indirectly" through a change in definitions, such as when the language criteria for enrollment in the Sámediggi electoral roll were extended from three to four generations (cf. Paper I). More commonly, however, this change takes place within the individual – either substantially or in the form in which ethnic affiliation is reported and manifests itself in various contexts. Paper I suggests that one reason for the growth in the Sámediggi electoral roll is that a growing number of persons declared themselves to be Sámi during this period. Paper II shows *de facto* that the number of affirmative answers to self-identification as Sámi grew by a gross percentage of 34 and a net percentage of 24 when the

responses from the SAMINOR study were compared to responses from the same persons in the 1970 census. Similar changes were found in the responses regarding language use.

Variations in ethnic "thickness"

While countries such as the USA, Canada, Australia and Aotearoa New Zealand have practised and partly continue to practise measurement of affiliation with indigenous peoples in the form of "proportions" or "blood quantum" (see e.g. Snipp 2002; Kukutai 2011a; Gover 2010; Tallbear 2011), this is not the case in contemporary Norway, official Sámi contexts included. Not least, it is essential that the right to be included in the Sámediggi electoral roll is not linked to total language background; having at least one person within a certain number of generations in your family history who has or has had Sámi as his/her home language is sufficient. The fact remains, however, that the individually based measures of Sámi ethnicity used in this thesis are able to capture persons with varying degrees of what can be termed ethnic "thickness". This is not an established concept, but it is intended to indicate that this type of ethnicity measure is not unambiguous, nor can it be. The measure 'Connection to Sámi language' may capture persons who have a varying number of Sámi speakers in their family history as well as a varying generational proximity to an active use of the language. At the same time, the measure 'Sami as an active language' may in itself have varying "thickness"; language competence may vary from fluent written and oral command to knowing "a little". Moreover, it varies whether a given language is the only language that a person will master at different times in life. The measure 'Self-identification as Sámi' may capture individuals who identify with a varying number of ethnic groups and with a varying degree of (reported) ethnic stability through time and space (cf. Paper II). On the whole, persons with an identical ethnic Sámi language connection may have differing ethnic (self-)identifications, and vice versa, people who self-identify as Sámi may have widely different connections to the Sámi language.

6.1.2 Geographically based approaches

Geographical approaches to the Sámi presence in Norway are based on various types of knowledge on how the population in some areas traditionally has (had) an especially large proportion of people with Sámi ethnic affiliation. Thus, these areas have a high *Sámi ethnic density* (see e.g. Bécares 2009 for a general introduction to the concept of ethnic density). Differences in Sámi ethnic density have over time been used as an argument in favour of

various area-specific interventions or schemes. An early example is provided by the so-called Sámi Committee of 1956, which argued that in order for the Sámi language to have an opportunity to continue to exist, it had to be "[...] linked to a Sámi *core area* in which the Sámi constitute a definitive majority" (Kirke- og undervisningsdepartementet 1959:32, italics added). According to the committee, this was the case at the time in the municipalities of Kautokeino, Karasjok, Polmak (now part of Tana municipality), Tana, Nesseby and Kistrand (now part of Porsanger municipality). The proposal for a Sámi core area was not followed up, although many Sámi-related programmes and institutions have over time been located in one or more of these municipalities (NOU 2008: 5, Ch. 6.4). In addition, the concept of core area seems to have become an established term.

A later example of a geographical approach was the distribution of the separate form containing the 1970 census Sámi ethnicity questions in only 45 selected rural municipalities north of the Arctic Circle (cf. Paper II, see Appendix C for a specified overview). The administrative area for Sámi language is an even more recent example; this area originally consisted of six municipalities and currently includes ten (cf. Paper III). Another example is provided by the area encompassed by the STN scheme, which is also used as basis for geographically based Sámi statistics (originally five municipalities, today 21 municipalities and 10 sub-municipalities; cf. Chapter 2.3.2 and Appendices D and E). Moreover, when the formalized consultations between government authorities and the Sámediggi address issues that impinge on the material basis for culture – such as land-use issues, land incursions and land rights – the area of applicability is defined as the four counties of Finnmark, Troms, Nordland and Nord-Trøndelag, as well as thirteen municipalities in Sør-Trøndelag county, five in Hedmark county and two in Møre og Romsdal county (Kommunal- og regionaldepartementet 2005). The areas that are included in geographical approaches to the Sámi presence in Norway are thus far from given a priori.

When the SAMINOR study was being planned, its intention was to encompass municipalities in which at least five per cent of the population had reported to have at least one Sámispeaking grandparent in the 1970 census (Lund et al. 2007). However, other concerns were also taken into concideration. The final area of study included parts of the South Sámisettlement area and excluded some of the 26 municipalities that were eligible on the basis of the 1970 census (ibid). Table 6 provides an overview of the 26 eligible municipalities and those that were actually included. The table presents the Sámi ethnic density of each

municipality according to the primary inclusion criterion of the SAMINOR study. In addition, the table identifies the municipalities that a) were included in the language area north of the Arctic Circle as of 2012 and 1990 when the scheme was established, and b) were included in the STN area as of 2014 and 1975 when the Sámi Development Fund was established (cf. Chapter 2.3.2). By showing the difference between two points in time, the table implicitly demonstrates that both the a) and b) areas have changed over time. In addition, the table demonstrates that both the language area and the STN area include municipalities that as of 1970 had quite markedly different Sámi ethnic densities when Sámi ethic density is measured as having at least one Sámi-speaking grandparent.

Table 6.1 Municipalities included in various geographical approaches to Sámi ethnicity

Eligible and included municipalities, the SAMINOR study (number of census tracts for the 1970 census if not all were included)	Proportion reporting to have at least one Sámi- speaking grandparent in the 1970 census	Region of residence in Papers II and III / County for those included in the SAMINOR study	Included in the language area north of the Arctic Circle as of 2012 (included as of 1990)	Included in the STN area as of 2014* (included in the SUF area as of 1975)
Varitaliaina		4 / Figure 20 and 6	()	(14)
Kautokeino	82.0	1 / Finnmark	(x)	(x)
Karasjok	80.1	1 / Finnmark	(x)	(x)
Nesseby	78.2 57.5	2 / Finnmark 2 / Finnmark	(x)	(x)
Tana Kåfjard	57.5 57.5	2 / Finnmark 2 / Troms	(x)	(x)
Kåfjord		2 / Finnmark	(x)	X
Porsanger	39.9		(x)	(x)
Kvalsund	37.7	3 / Finnmark	-	X
Storfjord (8/9)	26.8	3 / Troms	-	X
Lebesby	24.4	3 / Finnmark	-	Х
Skånland (6/15)	19.2	4 / Troms	-	X
Kvænangen	18.5	3 / Troms	-	X
Måsøy	16.3	-	-	XX
Hasvik	12.8	- 4 / Nian-Han-I	-	-
Evenes	12.4	4 / Nordland	-	XX
Sørøysund **	11.1	-	-	-
Hammerfest **	(3.0)	-	-	-
Gamvik	<i>10.8</i> 10.1	- 3 / Finnmark	-	X
Loppa	10.1	3 / Finnmark	-	X
Sør-Varanger (17/18)		-	-	XX
Berlevåg Vadsø	9.3	-	-	-
	9.0 8.7	4 / Nordland	-	-
Tysfjord (12/13)	_		X	X
Lavangen ***	8.5	4 / Troms	Х	Х
Salangen (13/19)		-	-	-
Nordkapp	8.2	- 2 / Tra	-	XX
Lyngen (16 / 19)	7.6 6.5	3 / Troms 5 / Finnmark	-	X
Alta	6.5	5 / Finninark	-	XX

Sources: Aubert 1978; the Sámi Act; Statistics Norway 2014

Indentation and italics denote municipalities that were \underline{not} included in the SAMINOR-study.

^{*} STN = The Sámi Parliament's subsidy scheme for industrial development, SUF = The Sámi Development Fund (cf. Appendix D).

^{**} Hammerfest and Sørøysund were merged in 1992.

^{***} Lavangen and Salangen were merged in the years 1964–1976.

^{- - -} The municipalities above this marker constituted the Sámi language area when this was established in 1990.

⁽⁾ The municipality was not included when the scheme was established.

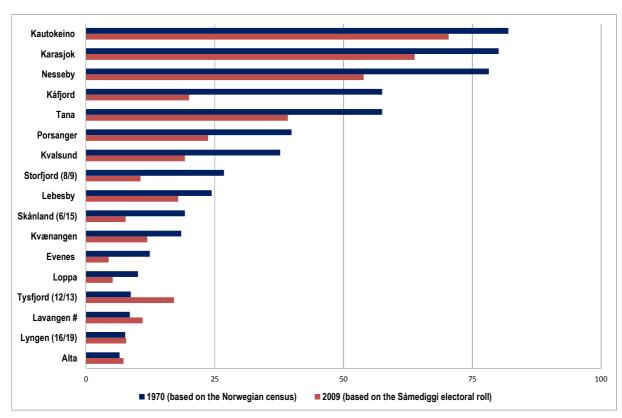
x The whole municipality is included.

xx Parts of the municipality are included.

Different measures of Sámi ethnic density at different points in time

Norwegian policy regarding ethnicity data precludes any estimation of the Sámi ethnic density of given areas after 1970. Paper I therefore suggests that estimation of *Sámi political density* could be a pragmatic alternative. Figure 6.1 compares Sámi political density in 2009 for those 17 municipalities that constitute the area of study in Papers II and III to Sámi ethnic density measured in terms of grandparental language in the 1970 census, cf. Table 6.1 above. The objective is to indicate what the situation looks like today when compared to 1970; despite the fundamental difference between the two measures, they both represent complete sets of registry data, each in their own way.

Figure 6.1 Two measures of Sámi ethnic density (percentages) at two points in time in 17 municipalities north of the Arctic Circle, based on the Norwegian census of 1970* and the 1990 Sámediggi electoral roll, respectively**



Sources: Aubert 1978; Pettersen 2010; Paper I, Table 2.

^{* 1970:} Proportion reporting to have at least one Sámi-speaking grandparent.

^{** 2009:} Sámi political density (cf. Paper I).

⁽⁾ Proportion of census tracts included, if not all districts were included in the 1970 census.

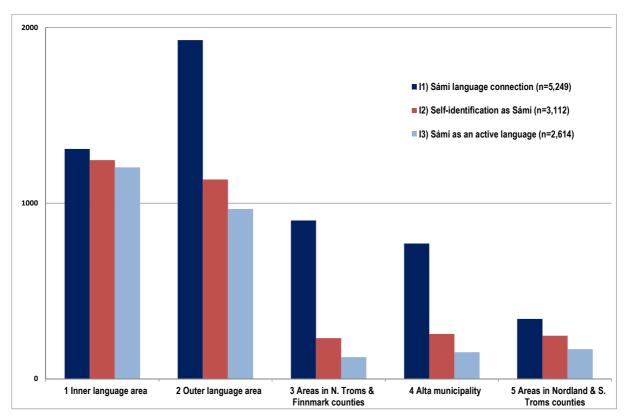
[#] Lavangen was merged with Salangen during the period 1964–1976.

The figure illustrates primarily how both measures vary between the 17 municipalities, and secondly that the same municipalities are "at the top" at both times, i.e. those six that originally were defined as the Sámi language area (cf. Paper III). Their sequence varies somewhat, however. In sum, the figure illustrates that according to these two measures, no major changes have occurred with regard to *which* municipalities on these grounds stand out in terms of a geographical approach to the Sámi presence.

Different measures of Sámi ethnic density at the same point in time

Paper III describes how the choice of an individually based measure of Sámi ethnicity has different effects in the five regions that have been defined for this study (cf. Paper III, Table 1). Figure 6.2 illustrates how the three measures 'Connection to Sámi language', 'Self-identification as Sámi' and 'Sami as an active language' (labelled I1, I2 and I3 in Paper III) have *a minor* effect on the sample populations in Region 1 and a little more in Region 5. In the three remaining regions, the choice of measure has a *material* effect. The difference between Regions 1 and 2 is especially prominent, i.e. between the central and peripheral parts of the language area that was defined originally.

Figure 6.2 Numeric distribution of three partly overlapping, individually based Sámi sample populations in the age group 36–79 years as of 2003/2004, for five areas of settlement defined for 17 full municipalities included in the SAMINOR study north of the Arctic Circle



Source: Paper III, Table II.

Changes in the geographical distribution of the Sámi population

While the Sámi data in the 1970 census encompassed only selected rural areas in the North, the Sámediggi electoral roll includes the entire country. Paper I identifies a shift in the geographical distribution of this electoral roll from 1989 to 2009; from rural to urban municipalities and from the North to the South. These shifts can partly be explained by changes in how individuals assess and report their ethnicity (cf. Paper II), but may also reflect actual changes in the areas where people with a Sámi affiliation are settled. The latter assumption is supported by the recent documentation of relatively significant long-term outmigration from rural Sámi municipalities to urban regions in the North and South (Sørlie & Broderstad 2011). Both these forms of change imply that a geographical approach to the Sámi presence may capture varying proportions of a specified Sámi population at different points in time. Table 6.2 shows two examples in this respect, on the basis of the development of the Sámediggi electoral roll.

Table 6.2 The Sámediggi electoral roll as of 1989, 2001 and 2009, nationwide, in 17 municipalities included in the SAMINOR area of study as well as in 6 municipalities that constituted the Sámi language area in 1990.

	1989		2001		2009	
	n	%	n	%	n	%
Nationwide	5,505	100.0	9,921	100.0	13,890	100.0
Study area 2003/2004 (17 mun.)	4,031	73.2	6,330	63.8	7,517	54.1
Language area as of 1990 (6 mun.)	3,334	60.6	-	-	5,143	37.0

Sources: Hætta 1992; Hætta 2002; Pettersen 2010

In 1989, approximately 73 per cent of those included in the Sámediggi electoral roll were resident in one of the 17 municipalities that constitute the area of study in Papers II and III. By 2009 this proportion had decreased to 54 per cent. Specified to regions 1 and 2 in Papers II and III, i.e. those six municipalities that constituted the original language area, the proportion of those included in the electoral roll decreased from 61 per cent in 1989 to 37 per cent in 2009. The latter observation is of particular interest, because these six municipalities are virtually identical to the area that the so-called Sámi Committee proposed as a Sámi core area (cf. above). Although such an area was never formalized, many Sámi-related schemes and institutions have been located in exactly these municipalities over the years – thus probably contributing to reinforce their profile as (*the*) "Sámi" municipalities (NOU 2008: 5, Ch. 6.4).

6.1.3 Approaches to Sámi ethnicity data

Papers I-III describe how Norway since the Second World War has adhered to a policy of not recording the ethnicity of its citizens in censuses (cf. also Chapters 2.2.2 and 2.3.2). Internally in Statistics Norway there is "[...] considerable opposition to ethnic mapping, and with regard to Norwegian statistics there is no legislative basis for this" (Østby 2001:6f). At the same time, information on country of birth – which is routinely registered in Norway's central population registry – is in many cases treated as a *proxy* for ethnicity, not only in official statistics (Østby 2001; Dzamarija 2014), but also in public documents (Djuve, Kavli & Tronstad 2011) and also in, for example, health-related studies (Jennum 2009; Abebe 2010).

In has been claimed that Norway, which in the European context is a long, narrow and sparsely populated country, has an especially strong tradition for emphasizing geographical

dimensions; not only regional variations in general, but also distinctions between the centre and the periphery (Sørlie 2010). Combined with the fact that geography represents the "classic" approach in studies of living conditions (Melinder & Schærström 2005; Bråthen et al. 2007; Sund & Jørgensen 2009), this may be one reason why the first contemporary numerically based descriptions of the living conditions of the Sámi in Norway was based on exactly this kind of approach; the geographical. The occasion was Report No. 50 (1998-1999) to the Storting - The Equality Report. On distribution of income and living conditions in Norway (Utjamningsmeldinga. Om fordeling av inntekt og levekår i Norge in Norwegian) and the area concerned was the then SUF area (cf. Chapter 2.3.2). At the time, such data had to be ordered specifically, but once Statistics Norway initiated regular production of geographically based Sámi statistics in 2006 (cf. Chapter 2.3.2) they became more easily available in practical as well as financial terms. Statistics Norway underscores, however, that such statistics are not "real" ethnicity data; the statistics pertain to areas, and the agency has no knowledge of which individuals are or consider themselves to be Sámi. Statistics Norway is "[...] unable to draw any conclusions regarding health or living conditions in the Sámi population as such, only for those who reside in the Sámi core areas" (Ekern 2008:19, italics added).

The difference between geographically based and individually based approaches to the Sámi presence in Norway is underscored by the fact that the Personal Information Act (*personopplysningsloven* in Norwegian) defines information on "racial or ethnic background" as sensitive (Section 2-8a). Since information on ethnic affiliation – including language preferences – is not routinely registered in health-related administrative systems, this in turn entails consequences for institutional and official statistics as well as for access to data in health-related research.

In light of Norwegian policy on ethnicity data, the Sámediggi electoral roll represents an exception. It is worth noting that even though the Sámi questions in the 1970 census (Paper II) as well as the establishment of the Sámediggiand its electoral roll (Paper I) came as a result of the efforts of Sámi organizations, there has also been Sámi resistance against and ambivalence with regard to the registration of Sámi ethnic affiliation. Not all Sámi individuals and organizations were in favour of the idea of a separate electoral roll, and some Sámi have been suspicious of statistics enumerating those who are Sámi or Sámi-speaking because it is

remains burdensome to "[...] be assigned to a group that for centuries has been branded and gradually also perceived as a cultural and economic low-status group" (Magga 2003:235).

In 2001, the Sámediggi electoral roll was incorporated into Norway's central population registry. Technically it is thus fairly simple to link the electoral roll to other national collections of data, including Norway's numerous health registries (Folkehelseinstituttet 2009). However, this and other types of access to the electoral roll can only be granted to researchers for scientific purposes and with the consent of the Sámi Parliament. (cf. Section 81 of the Regulations for elections to the Sámi Parliament).

Since its establishment in 2001, The United Nations Permanent Forum on Indigenous Issues has emphasized that in order to document and fully understand the actual and relative situation of indigenous peoples, there must be access to adequate and quality-assured statistical data (United Nations 2004; United Nations 2009). Internationally, however, the situation remains that "[s]urprisingly, in most countries such information is lacking"; it is "[...] amazing how little information about the actual situation and condition of indigenous populations public officials in many countries possess" (Stavenhagen 2009:361f). Seen as a whole, the latter statement seems to be descriptive of Norway as well.

6.1.4 An analytical framework

An operationalization of the Sámi presence in Norway with the use of the connection to Sámi language as an ethnic "basis" can be summarized in an analytical framework for ethnically defined Sámi populations (Figure 6.3). The figure has been developed from the schematic populations in Figure 1, Paper I, and can also be related to the sample populations in Figure 3, Paper III.

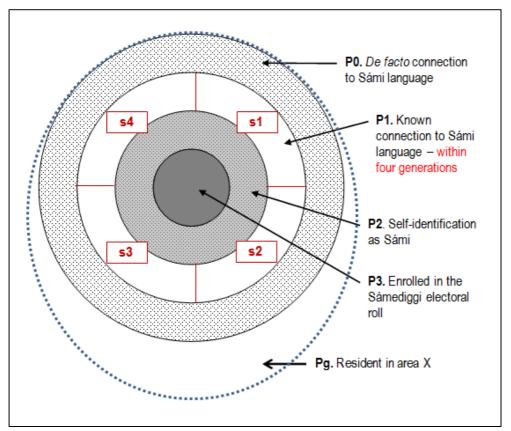


Figure 6.3 Analytical framework for ethnically defined Sámi populations *

By using the outermost of the solid circles as a starting point, the figure illustrates the following situation: in Norway there are a number of individuals who *de facto* have at least one connection to Sámi language in their family tree. These individuals constitute the theoretical population P0. In the population P0, there is at any time a proportion who *know* that they have a connection to Sámi language. This proportion constitutes population P1, here restricted to four generations in conformity with the prevailing language criterion for enrollment in the Sámediggi electoral roll – symbolized by the four rectangles s1–s4. Membership in population P1 can thus be based on a connection to at a minimum of one and a maximum of fifteen persons with Sámi as their home language – the person him-/herself (s1), two parents (s2), four grandparents (s3) and eight great-grandparents (s4), which indicates a potentially large variation in Sámi ethnic "thickness" when this is defined as various combinations of connections to Sámi language (cf. above). Among the persons in the figure's population P1, there will at any time be a certain number who define themselves as Sámi; these account for population P2. The innermost circle, P3, encompasses those who are at least

^{*} The outer solid circle (P0) is the starting point for the figure.

s1-s4 = connection to Sámi language within four generations:

s1 = the person, s2 = two parents, s3 = four grandparents, s4 = eight great-grandparents.

18 years old and have chosen to register in the Sámediggi electoral roll. ³ Each of the individually based populations P0, P1, P2 and P4 can theoretically be specified for the entire country or for a selected geographical area.

The dotted outermost oval (Pg) symbolizes different *geographically* based Sámi populations. Membership in such a population follows from being resident in a given area X that a given actor/institution at a specific time and in a specific context has defined or categorized as Sámi. The areas encompassed will vary, and the areas can be widely different in terms of so-called Sámi ethnic density – to the extent that this is measurable (cf. Chapter 6.1.2).

The situation with regard to Sámi ethnicity data in Norway implies that the Sámediggi electoral roll (P3) is the only individually based Sámi population that remains formally identifiable and quantifiable at all times. As demonstrated in Papers I-II, (reported) affiliations to individually based Sámi populations may vary over time. With regard to geographically based Sámi populations (Pg), their membership and population size can be inferred from address data in Norway's central population registry. Such populations change through demographic events such as migration, births and deaths.

6.2 Internal Sámi variation

The approaches to Sámi presence presented above share the feature that they are all concerned with *external* relationships, with the ethnic boundary between the Sámi and the non-Sámi. Senior and Bhopal (1994) are not alone in pointing out that studies that involve ethnic groups may be challenged by and have a tendency to disregard internal variation. For example, Kennedy and Hall (2006:124) have argued that "[o]ften, ethnic groupings used for research and policy formulation are very broad and fail to take into account within-group differences". The ability of studies that use ethnicity as a variable to address intra-ethnic heterogeneity could be of particular importance for groups that often experience partly essentialization and stereotypes and partly stigmatization. These include indigenous peoples that are often exposed to external – and occasionally internal – expectations and conformist demands of "[...] being an indigenous people in a pre-determined way" (Oskal 2003:335, see also Paradies 2006;

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³ It is recognized that persons may self-identify as Sámi without fulfilling the language criterion in the Sámediggi electoral roll, but this issue is not a topic here.

Andresen 2008; Waldram 2009; Gorringe, Ross & Fforde 2011; Harris, Nakata & Carlson eds. 2013; Peters & Andersen eds. 2013).

Paper I emphasizes that the establishment of the Sámediggias a representative Sámi body was (also) an institutionalization of the right to individual differentness and internal disagreement as Sámi. While Sámi unity and pan-Sámi community are emphasized (Smith 2006), drawing attention to exactly this internal Sámi variation has also become more common – in Norway often referred to as *Sámi diversity* (St.meld. nr. 28 (2007-2008); Solbakk & Solbakk 2013). This term refers in particular to the various Sámi language areas, but the distinction between coastal and inland areas also appears to be attracting more attention (Eyþórsson 2008; NOU 2008:5; Nilsen 2009). The same applies to Sámi who are resident in urban areas, who occasionally are referred to as "city Sámi" (Dankertsen 2006; Gjerpe 2013; Pedersen & Nyseth 2013). Whether the Sámi who are resident to the south of the Sápmi area should be understood as a separate group is not self-evident, but their proportion in the Sámediggi electoral roll has increased (cf. Paper I) and in several elections to the Sámediggi there have been lists entered on the basis of this geographical dimension (Pettersen 2011a). The latter observation indicates a Sámi community of interest in this respect.

Combined with the various forms and degrees of "thickness" in Sámi ethnicity as it has been described above, the Sámi diversity implies a considerable potential for variation in the experiences of individuals *qua Sámi*. At the same time, such experiences will necessarily vary because of general demographic and socioeconomic characteristics and ways of life, including individual life histories and lifestyles. Not least, considerable generational differences have been documented with regard to attitudes to how to "be" Sámi (see e.g. Stordahl 1997; Sivertsen 2009; Høgmo 2011; Blix, Hamran & Normann 2012). At the individual level, (potential) Sámi may have a wide range of experiences and preferences, and at the collective level, groups of (potential) Sámi may have different – and sometimes contradictory – interests. The extent to which and the contexts and ways in which the ethnic dimension has importance for the life of each individual must be investigated empirically, not assumed a priori (Stordahl 1998). Taking this internal Sámi variation into account means recognizing that "[...] there is no single Sami way of being, nor is the challenge to identify a Sami way of being which is the Sámi way of being" (Oskal 2003:333). According to Oskal (2003:335), approaches based on "[i]deas of a ranking list for Sámi-ness" that implicitly presume an idea of "The Genuine Sámi" may conceal rather than provide insight into empirical conditions.

6.2.1 Intersectionality

In recent years it has become increasingly common to emphasize the importance of simultaneous affiliations of individuals to social categories that may be unequally privileged; so-called categories of difference. Ethnicity/race is one such category, gender and social position are others. The main point is that to regard, for example, the category of Sámi and the category of women separately may result in a marginalization of experiences that stem from being both at the same time, i.e. from being a Sámi woman. Inspired by feminist research it has become more and more common in recent years to use the concept of intersectionality about understandings that emphasize the interwoven nature and mutual interaction between social categories (see e.g. Hancock 2007; see Gressgård 2013 and Gullikstad 2013 for informative, updated summaries in Norwegian). The increasing popularity of this concept – almost a buzzword some claime (Davis 2008) - has led some scholars to point out, firstly, a risk of an implicit essentialization of each single category, secondly that the concept may challenge traditional identity politics, and thirdly that there is nothing new in recognizing that affiliations are interwoven. What could be a point, however, is to operationalize this recognition in a way that helps provide new (change-oriented) insight (see e.g. McCall 2005; Veenstra 2011; Hancock 2012; Anthias 2013).

6.3 Studying ethnically defined populations

The point made by Senior and Bhopal (1994) that researchers who use ethnicity as a variable in their studies need to be aware of complexity related to "cross-cultural research" is based on the recognition that so-called *ethnocentrism* – i.e. using one's own ethnic group (unconsciously) as a standard for assessment of *all* ethnic groups – may have an effect on all aspects of research. Paying attention to this may prevent the researchers' own values from resulting in investigation of, for example, the (negative) deviations of a minority from a "neutral" majority, instead of focusing on issues that represent the most widespread health problems of the minority. A method for avoiding ethnocentrism is for the researcher to reflect on and give grounds for why and how a study is implemented (Senior & Bhopal 1994; Bhopal 2009a).

While *ethno*centrism as a phenomenon can be related to how classification of the surroundings is a fundamental human practice (Bowker & Star 1999), so-called *euro*centrism is linked to power structures and how the global position of Europe and the West emerged historically (Hjelde 2006). A particular aspect of this emergence is that practices involving

classification of people into official categories of ethnicity or race originated in the context of conquest, colonialism and the invention of the nation-state; the ethnics were "objects" about whom the power-holders needed to obtain knowledge in order to turn them into a governable population – they were "the Other" (see e.g. Anderson 1996; Kertzer & Arel 2002; Hacking 2007). Historically this has inflicted experiences of "the supremacy of the white race" on many ethnic groups, of being treated as a subordinate minority as well as of having the status of a research object.

6.3.1 Research objects and subject positions

Negative experiences of being a research object have – not least among indigenous peoples – led to widespread scepticism of research on the one hand, but also, on the other hand, to proactive resistance in the form of alternative decolonizing methodologies and separate codes of research ethics (see e.g. Castellano 2004; Smith, L. 2005; Kuokkanen 2008; Ball & Janyst 2010; Kendall et al. 2011; Ingierd & Fossheim 2011; Tuck & Yang 2012; Graeme 2013). The aspects being emphasized include the researcher's position in relation to the (local) community being studied and the importance of the research capacity of the indigenous peoples themselves. A main message in this context is that during the entire research process, respect and willingness for accountability must be combined with critical reflection on the part of the researcher on his or her positioning (see e.g. Nicholls 2009; Jones et al. 2013; Putt 2013). This message shares many features with the focus on situated knowledge and responsible knowledge production among feminst-oriented scholars (Haraway 1995; Rustad 1998; Kramvig 2007). At the same time, these scholars emphasize that while it is an illusion to have a view from *nowhere* – to be "neutral" – such partial perspectives remain of exactly such a partial nature: they are views from *somewhere*.

In Sámi research – which in itself is not an unambiguous term (Bull 2002) – the position of the researcher as a Sámi ethnic *insider* or *outsider* has occasionally represented a contentious issue, partly as a topic, but also as a specific conflict in research projects and at the institutional and individual level (see e.g. Otnes 2006; Kuokkanen 2008; Stordahl 2008; Evjen 2009).

6.3.2 Methodological awareness

Methodology is concerned with how research can – or should – be undertaken. According to Gobo (2011), most of the contemporary methodological knowledge is characterized by having its origin in Europe and by being embedded in Anglo-American culture. According to Zuberi and Bonilla-Silva (2008), statistical methods were originally developed by "elite white men" for purposes of numerical analysis of human differences in the form of deviations or deficiencies in "the Other", in an era when "the West" was associated with colonial power, slavery, white supremacy and the male citizen as its norm. They argue that research using race as a variable continues to be influenced by an inherent logic that views race as an unalterable characteristic of an individual, failing to recognize that "[t]he real issue is the way the society responds to an individual's racial identification" (p. 7). Their message is that even though statistical methods today are presented as neutral and objective, it remains a fact that the social contexts of the users of these methods assist determine what statistical correlations will be explored and thus provide frameworks for interpretations of empirical issues. Bhopal (2007) has summarized that through the ages, also health-related research has partly been based on and partly promoted ethnic stigmatization and racism, demonstrating that ethnicity and race are variables that show "[...] dramatically and unequivocally, the importance of historical, political and social awareness among health researchers" (p. 19).

While the main message in de-colonizing methodologies has gained more general acceptance, some indigenous scholars have pointed out that with regard to research on indigenous peoples, these methodologies may have a restricting effect in giving pre-eminence to qualitative methods as well as in placing excessive emphasis on the degree of difference from what is defined as "Western": on dichotomies and a pre-colonial past (see e.g. Barnes 2006; Hokowhitu 2009; Nakata 2013). The philosopher Nils Oskal (2008:344) has argued this it is impossible "[...] to justify a distinctive methodology that is supposed to guarantee an *a priori* tenability [...]" and warns against establishment of new orthodoxies. In a recent book, Maggie Walter and Chris Andersen (2013) have argued that indigenous peoples that are embedded in the everyday life of modern nation-states must have a capacity for using the *entire* range of research tools to collect and analyse data that have an effect on how their social world is designed. Walter and Andersen underscore that all knowledge production – including forms based on quantitative methods – remains culturally and socially positioned. They propose a quantitative research methodology that recognizes the fact that research positions invariably

remain important and that provides an opportunity for statistical portraits of indigenous peoples, not only in order to dichotomize, aggregate and search for their deficiencies, but also to draw attention to local variations and diifferences within indigenous populations.

With reference to epidemiological research, Simmonds (2010) discusses and demonstrates in the context of Aotearoa New Zealand how a so-called *Kaupapa Maori* approach to the use of quantitative methods can provide knowledge that emphasizes the experiences and priorities of the Maori. Canada-based Cameron et al. (2010) present a framework for what they refer to as "culturally safe epidemiology", that recognizes that rigorous epidemiological research based on quantitative methods may be necessary to draw attention to serious health issues in local indigenous communities, but seeks to avoid designs in which the "external" researchers are collectors of information and the indigenous people being investigated are regarded as mere sources of data.

6.3.3 Populations as analytical units

Bhopal (2009b) claims that despite the elementary epidemiological insight that human populations are varied and variable, and that results thereby cannot necessarily be generalized "[...] between populations, within subgroups of the same population, or within the same population at different times" (p. 6), it remains a common mistake to place insufficient emphasis on the definition of the populations to be studied and on understanding them in their proper context. Krieger (2012b) argues that when considering the key role played by populations as analytic units in the demographic sciences, surprisingly little critical thinking has been devoted to the idea of a population. Who is being studied and why? Who constitutes meaningful populations in health-related studies? Krieger argues that rather than understanding populations as statistical aggregates of the inherent characteristics of individuals, emphasis should be placed on how populations and their members are being formed by dynamic internal and external relationships. For studies to result in meaningful population averages and valid conclusions regarding causes respectively, the selection of study participants must take place "[...] in relation to the range of exposures experienced (or not) in the real-world societies" (p. 660), and must take into account that experiences are *located* in "[...] the real-world societies, that is, meaningful populations, of which they are a part" (p. 666). Critical thinking on populations as analytic units in epidemiological studies bears witness to a modification of the conventional distinction between internal and external validity.

Krieger's point on populations as statistical versus substantial units is akin to the sociologist Richard Jenkins' (2008) idea of a distinction between categories and social groups. Social groups are made up of persons who have such an amount of (direct or indirect) contact and in some cases also a (more or less explicit) shared goal as to provide them with a collective identity (although it remains an open question whether the group or the (self-)identification with it will be the first to arise). Categories are primarily instrumental constructions that do not presume that those who are being assigned to a category maintain social relations or share an identity (see also Eriksen, T.H. 2010). On the basis of discourses related to indigenous peoples and social justice in Australia, Tim Rowse (2012) presents a tension between the concepts of people and population. *People* is a political concept that refers to a social, collective entity: an actor endowed with rights consisting of citizens endowed with rights. Population is primarily a technical concept that refers to an administrative category of individuals and households in state statistics (cf. also Chapter 2.1). Rowse suggests that the concept of 'people' invites an emphasis on relationships and mutual responsibility between two political collectives: between indigenous peoples and states. The concept of 'population' opens for regarding the indigenous people primarily as a statistical entity that – in the Australian context – occasionally appears to be defined by its degree of difference, or by the size of the "gap". Such ideas may invite an understanding that if the gap disappears, the indigenous people will disappear: assimilation has taken place (see also Kowal 2008). According to Rowse, both people and population nevertheless remain appropriate concepts if the distinction between them is taken into account.

6.4 Sámi ethnicity and/in studies of patterns in health and living conditions

Papers I-III demonstrate that, and how, Sámi ethnicity is defined, understood and handled in different ways in Norway. The absence of unambiguous Sámi ethnic boundaries in time and space is in conformity with moderately constructivist understandings of ethnicity as a phenomenon (cf. Chapter 2.2.1). Cultural heritage in the form of a connection to Sámi language via the family tree constitutes a formal "ethnic base", although establishment/maintenance of a (reported) individual Sámi affiliation measured as self-identification as Sámi may be situationally dependent. A connection to Sámi language will not necessarily be converted into self-identification as Sámi, and the likelihood for this to happen will vary in time and space and between different Sámi individuals. Furthermore, both formal definitions and individual

reporting of individually and geographically based measures of Sámi ethnicity may vary according to the context and change over time. A variation in the (reported) connection to Sámi language implies a variation in the Sámi ethnic "thickness" at the individual level and in Sámi ethnic density at the geographical level. These variations are supplemented by internal Sámi variation along ethnic as well as general dimensions (cf. Chapter 6.2).

On the one hand, some scholars argue that constructivist understandings have the consequence that ethnic affiliation becomes a matter to be explained, rather than being used for purposes of explanation (Brubaker 2002, quoted in Lynnebakke and Fangen 2011): since it is not given what ethnicity "refers to", ethnicity is hardly suitable as an explanatory variable in studies of specific outcomes. On the other hand, it remains a general and fundamental challenge that to be able to produce any form of (quantitative) knowledge about de facto named ethnic groups and their situation, ethnicity necessarily needs to serve as a classificatory variable (see e.g. Brown and Langer 2010). The pragmatic position is that whether and how ethnicity has a potential as a variable is not given a priori, but will depend on the context and objective of each study, as well as on how each researcher throughout the stages of study – from the design to the interpretations – describes and critically assesses the selected measures of ethnicity (Bhopal 2009a). Credible epidemiological knowledge combines high scientific quality with trust on the part of those whom this knowledge concerns and describes. With regard to studies involving the Sámi population in Norway, their trustworthiness may depend on the position from which a study is undertaken (cf. Chapter 6.3), on the objective of the study as well as on an assessment of the studied population(s) as meaningful and representative.

6.4.1 Objectives

One type of objective for the use of Sámi ethnicity as a variable in studies of health and living conditions is to obtain quantitative knowledge on the *situation* regarding health and living conditions of the Sámi – either *per se* or relatively in the form of similarities and dissimilarities when compared to other ethnically defined populations. Knowledge about the situation of the Sámi *per se* is necessary for designing policies and services for the Sámi population. Such knowledge is relevant for the authorities (St.meld. nr. 34 (2012-2013)), for the Sámi themselves with regard to (forms of) self-determination (Stavenhagen 2009; Henriksen ed. 2010) and not least for both parties in the formalized consultations between government

authorities and the Sámi Parliament, one of the purposes of which is to develop a shared understanding of the situation and development needs of Sámi communities (Kommunal- og regionaldepartementet 2005). Knowledge on the *relative* situation of the Sámi is also relevant for both parties, including with regard to any existing ethnically related social differences in health (St.meld. nr. 20 (2006-2007); CSDH 2008). At the same time, knowledge on the situation of the Sámi *per se* may be concerned with equality and equity as well as internal Sámi variation, including a possible internal Sámi health gradient (CSDH 2008; Sund & Eikemo 2011), and if so, the dimensions along which this gradient runs (see Shepherd, Li & Zubrick 2012 for a study of Australian aborigines in this respect).⁴

Another type of objective for using Sámi ethnicity as a variable could be to gain knowledge about a specific health/living conditions *phenomenon*, such as a given health issue or an (assumed) health determinant as it appears in a multi-ethnic population. In such studies, ethnicity will typically be a so-called *exposure variable*, often specified as a *risk factor* or a *protective factor*, which is tested by using multivariate analysis to reveal associations that can help provide an understanding or possibly explain the phenomenon being studied (Bhopal 2008).

Objectives for using ethnicity as a variable have – along with the research position – an effect on the choice of approach in epidemiological studies. According to Bhopal (2009a), a key principle should be that studies of ethnically defined populations give pre-eminence to the so-called *absolute risk approach*, meaning to report and compare the number of cases and ratios per population included. This is essential in order to obtain knowledge about the health and living conditions of populations *per se* – including, for example, their need for health services. This approach calls for data that are as *representative* of the population(s) as possible and thus sensitive to *selection bias*. It is consequently essential to avoid attrition among (invited) participants along dimensions that have a bearing on the results (Bhopal 2007). When more

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⁴ An aspect which is recognized but not discussed in this thesis includes issues pertaining to the use of *universal/standardized* versus *population-specific* measures of health and living conditions (see e.g. Larsen, Schweitzer & Fondahl eds. 2010; Prout 2012; Cram 2014). The same applies to the relationship between social inequality and *injustice* and (ethnicity-related) *differences in preference*, respectively (Braveman & Gruskin 2003; Herbert, Sisk & Howell 2008; Bhopal 2009a; Kowal & Paradies 2010).

than one ethnically defined population is involved, the participation per group must be sufficient to lend strength to the statistical analyses.

The so-called *relative risk approach* estimates the relationship between the (likelihood of) incidence of a specific phenomenon in various populations with the aid of statistical measures such as odds ratios and standardized mortality ratios. This approach – which according to Bhopal (2009a) has long remained (too) dominant in comparisons of patterns in two or more populations – calls for *distinctive categories* and is sensitive to *information bias* (Bhopal 2007). When using categorical variables – that are conditional on mutually exclusive categories – it is essential that individuals be assigned to the correct category in accordance with the research question of the study, including that identical cases are classified identically in time and space. In studies that involve ethnically defined populations it is thus crucial that systematic *mis-classification* is kept to a minimum.

Scholars have pointed out the necessity of being aware of how the use of absolute and relative approaches respectively under certain conditions may lead to diverging conclusions (see e.g. Elstad 2005; Sund & Eikemo 2011). When ethnically defined populations are involved, it is important to note that absolute approaches are suitable for elucidating health and living conditions *within* specific populations, while relative approaches are designed to elucidate differences *between* populations. A poorly considered use of the latter approach may cause certain challenges to attract attention because they represent "deviations", or even worse: because they are "exotic" in the eyes of (ethnocentric) researchers (Bhopal 2007).

6.4.2 Meaningful study populations

The complexity of ethnicity as a phenomenon, including the fact that there are different kinds of ethnic groups (cf. Chapter 2.2), makes it especially challenging to critically assess what and who constitute meaningful study populations when these are defined on the basis of ethnicity. A particular aspect is that while the ethnic categorization should be as optimal as possible with regard to the topic of a given study, it should also remain as consistent as possible through time and space. The latter is especially important, since studies that estimate ethnic ratios and proportions ought to be based on approximately the same denominator of a given ethnic group within a given geographic area (see e.g. Cormack & McLoud 2010).

According to Krieger (2008; 2012b), population-based epidemiological studies should in general be based on the view that people are biological *organisms* as well as social *beings*. At the same time, it is far from given what role should be assigned to socially relevant *categories* – such as gender, ethnicity/race and to some extent pre-defined age groups – in this respect, despite the widespread use of such categories in some countries in particular (see e.g. Shim 2002; Epstein 2007; Bhopal 2007; Mir et al. 2012; see also the references in the introduction to this chapter). As far as ethnicity is concerned, it appears to be more common to regard this as a relevant variable for the study of *situations* regarding health and living conditions than for the study of health and living conditions *phenomena*. This discrepancy is most likely related to a general uncertainty as to whether ethnicity fundamentally speaking is suitable for purposes of explanation – not least given the more or less explicit combination of biological and social factors in epidemiology (Galea & Link 2013). This uncertainty can be reinforced by the fact that studies calling for a relative risk approach are especially sensitive to classification error.

Ethnic mis-classification nevertheless remains a challenge for all epidemiological studies that involve ethnically defined study populations – not least indigenous peoples, given the history of marginalization and (enforced) assimilation endured by these peoples (see e.g. Simmonds 2010; Haozous et al. 2013). Moreover, although ethnicity typically is treated as a categorical variable, there is an increasing acceptance for permitting reporting of multi-ethnic affiliation in censuses and research data (cf. Chapter 2.2.2). What would be a "true" or a false classification in such cases is not given *a priori*, especially if multiple ethnic affiliations are involved, or even various combinations of these. Several scholars have pointed out that (reported) multi-ethnicity is gradually becoming a problematic aspect not only for classification and statistical analysis, but also for interpretation of results (Snipp 2002; Liebler 2010; Kaneshiro et al. 2011). The potential for mis-classification increases further since the very definitions of ethnic boundaries do not invariably remain stable, and since (reported) ethnic (self-)identification may change over time – so-called *ethnic mobility* (cf. Paper II; see e.g. Carter et al. 2009; Brown et al. 2010; Robitaille, Guimond and Boucher 2010).

6.4.3 Representativeness

In order to have high data quality in population-based studies, the data need to be representative of those from whom they have been collected. To prepare for and assess

representativeness requires access to information on how the population(s) is (are) composed with regard to criteria that are relevant for the research questions (cf. Chapter 2.1.2). A study that includes *all* information relevant for the study about *all* individuals in the relevant population(s) is of a representative nature. For example, this could be the case for studies that are based on complete *registry data*. Most population-based studies, however, are based on a *sample* drawn from the population(s) for which the study sets out to draw conclusions. Representative samples are established by following certain rules and procedures for selection of participants. Drawing conclusions that are valid for others than only those who have actually been studied (statistical generalization) requires a sample in which all units have the same likelihood of being selected, so-called probability sampling (Ringdal 2007). The larger the sample, the more representative the data may become.

Because regularly updated Sámi demographic data are mainly absent in contemporary Norway, it largely remains an illusion to prepare for and assess Sámi ethnic representativeness in individually based populations. The Sámediggi electoral roll represents a partial exception, since it may serve as a specific Sámi study population as well as a technical basis for drawing samples that are *de facto* Sámi samples. At the same time, it remains essential that Sámi representativeness in this case refers to the Sámi population that at any time is *enrolled*, and not to the population that at any time is *qualified* for such enrolment according to the objective *and* the subjective criteria. As a phenomenon, Sámi representativeness is further complicated by the fact that (reported) affiliation to various Sámi populations may vary over time (cf. Papers I and II). A given Sámi sample may of course *be* representative with regard to a selected measure of ethnicity, especially in areas that have a high Sámi ethnic density along this dimension (cf. Chapter 6.1.2).

In this thesis, the study of the Sámediggi electoral roll (Paper I) is representative in a formal sense, since it is a registry study. The SAMINOR study (Papers II and III) was based on a sample and had a total response rate of 60 per cent, which is usually deemed acceptable for studies of this type (Lund et al. 2007). Whether this study is ethnically representative or is subject to selection bias in this respect cannot be formally assessed. The SAMINOR study was partly conducted as a survey (ibid.). In some cases, such studies may have an acceptable response rate when seen as a whole, but nevertheless fail to be representative in all their subanalyses. The reason is that *partial* systematic attrition may occur if certain categories of participants fail to respond to certain questions (Elstad 2010). For example, the "tangled"

history of ethnicity as a phenomenon in society and research (cf. Chapter 6.3) may have caused some to perceive questions about ethnicity as so sensitive – or even provocative – that they have chosen not to respond to them. If so, a systematic attrition of persons who might have reported a Sámi ethnicity could lead to an ethnic selection bias. At the same time, it is conceivable that questions about ethnicity could constitute an incentive for (full) participation by persons who have an especially explicit and active relationship to Sámi issues in general and their own Sámi affiliation in particular. Attrition as well as "enthusiasm" may both be influenced by the local context, meaning that the participation could be more ethnically representative in some areas than in others.

More generally, some participants may choose not to respond to certain questions because the questions are (too) numerous or perceived as not very meaningful (ibid.). In ethnic minorities, (full) participation may be influenced by whether the study is not focused exclusively on risk factors and deviations from an assumedly "standard" population, but also on the strengths and capabilities of the minority (Cameron et al. 2010, Walter 2010). In a Sámi context, for example, the accentuation of externally inflicted, collective traumas, the so-called *Sámi pain* (Nergård 2011), can be counterbalanced by focusing on factors that promote resilience, such as the widespread Sámi idea of *self-preservation;* "birget" in Northern Sámi (Andersen, K. 2010; Bals et al. 2011). Participation can also be influenced by whether some topics are perceived as sensitive with regard to (cultural) norms. For example, a recent study suggests that some Sámi communities have a culture of not speaking directly about matters of health and illness (Bongo 2013). Provision of a questionnaire in multiple languages may help boost participation, but this effect will depend on the level of mother-tongue reading and writing skills. The latter are often deficient among Sámi speakers (Solstad ed. 2012).

Studies of ethnically defined populations may also be subject to a selection bias that is *unrelated* (directly) to ethnicity. In the SAMINOR study, the non-participants tended to be men, unmarried and among the youngest in the age segment included (Nystad 2010). In general, non-participation in survey-based studies tends to be socially biased (Elstad 2010). Scholars have therefore recommended that "[...] all types of health and medical research employ strategies to increase the representation of socially disadvantaged groups" (Bonevski et al. 2014).

6.5 The strengths and limitations of this thesis

While a number of studies during recent decades have used qualitative methods to explore contemporary Sámi ethnicity as a *phenomenon*, this thesis is the first study to address Sámi ethnicity as a *variable* for use in quantitative studies in contemporary Norway. By relating the qualitative phenomenon of Sámi ethnicity to the use of quantitative methodologies, the thesis elucidates, in a new way and in a Sámi context, "[...] the complex dynamics between concepts, instruments and phenomena" (Frønes 2010:44), and more specifically that "[...] questionnaires are primarily also a method for collection of qualitative data (Jacobsen, D. 2006:126). It is regarded as a strength that the thesis partly has assessed and partly used all of the three major Norwegian data sets that contain individually based Sámi ethnicity data of a relatively recent origin (cf. Table 4.1).

Some limitations of the different studies are presented in each paper. With regard to the thesis as whole, it can be regarded as a limitation that it explicitly discusses multi-ethnic origins and self-identifications to a fairly minor extent (Snipp & Lott 2009; Kukutai & Callister 2009). Paper III does not take into account that a significant proportion of the participants in the SAMINOR study reported multiple ethnic affiliations. Also, the category of 'Kven' could have been more widely discussed in Papers I-III. It was assumed, however, that this would have entailed quite lengthy descriptions that would not have provided any material contributions to the elucidation of the main topic in each paper.

The study could have touched on the fact that although ethnic self-identification has become (ethically) preferable in many contexts (cf. Paper III), some studies have demonstrated firstly that there is not always a correspondence between *self-ascribed* and *socially ascribed* ethnicity/race, and secondly that this distinction *may* have relevance for the life experiences of individuals (Jones et al. 2008; Harris, Cormack & Stanley 2013). In a Sámi context, features such as oral language characteristics (Sollid 2009; Bull 2011), place of birth or residence (Eidheim 1971; Thuen 2003) and certain external characteristics (Schanche 2002) become associated with an ethnic affiliation that does not necessarily accord with the self-ascribed ethnicity of the individual in question. More generally, one may ask whether the thesis fails to communicate fully how commonplace discourses on Sámi ethnic affiliation may be considerably more complex than is indicated by the use of connections to Sámi language as an ethnic "basis". Given the scope of various types of internal Sámi variation, it would have

required too much space to enter into a discussion of the relationship between ethnic boundaries and cultural meaning: "the cultural stuff", to use Barth's terminology (Vassenden 2011).

Some may have wished to see a systematic presentation of the different Sámi inclusion criteria and categories that can be observed in the literature. However, informative overviews can be found in Brustad 2009 and Sjölander 2011.

Finally, the independent variables 'Years of education' (Papers II and III), 'Self-reported household income' and 'Self-reported health' (Paper III) are presented only in passing. As socioeconomic measures these variables represent certain inherent challenges (Arntzen 2002; Schou, Krokstad & Westin 2006; Strand & Næss 2009), and there is also reason to be aware of the specific issues that may play a role when ethnicity is involved (see e.g. Chandola & Jenkinson 2000). The observation that all the Sámi populations in Paper III scored significantly lower than the non-Sámi on the measure 'Self-reported household income' could also have been explicitly addressed. However, a substantial assessment of outcomes related to health and living conditions was not a concern for this thesis.

7. Concluding comments

The objective of this thesis was to contribute to more systematic knowledge and understanding of certain fundamental issues pertaining to the use of Sámi ethnicity as a variable, primarily in population-based studies of health and living conditions in Norway. The thesis has presented and demonstrated issues that in various ways may have a bearing on the ability of such studies to provide optimally trustworthy quantitative knowledge on patterns in the health and living conditions of the Sámi across time and space.

7.1 Main messages

The main message of this thesis is that it was not feasible to propose an unambiguous solution to the challenge of "[...] being able to define the Sámi population in any appropriate way" (Brustad 2009:68). However, the thesis provides a contextual and systematic overview of a) fundamental aspects of this challenge and b) responsible alternatives and their opportunities and limitations. In itself, this may help facilitate meaningful communication regarding results produced using Sámi ethnicity as a variable, i.e. that it will be clearer who we are talking about when the topic includes health and living conditions in a population that is neither given, nor homogenous. Main messages in this regard are the following:

- **Productive use** of Sámi ethnicity as a variable in population-based studies **is conditional on** handling of analytical challenges pertaining to the construction of and ascription to Sámi ethnic categories, as well as of ethical and political challenges regarding whether and how the implementation of such studies should be facilitated. Special caution is required with regard to the objectives of each study and the actors that will be involved at various stages of the study, as well as how it will be conducted.
- A *key challenge* pertaining to the use of Sámi ethnicity as a variable consists in choosing between the two measures 'Connection to Sámi language' and 'Self-identification as Sámi' (populations P1 and P2 in the analytical framework in Chapter 6.1.4). On the one hand, ethnic self-identification appears to have become the (ethically) preferred measure of ethnicity in many (most?) contexts (United Nations 2008). On the other hand, with reference to how some scholars argue that the health of individuals must be seen in light of their entire life course (Næss & Kristensen 2009, Tong et al. 2011), there may

nevertheless be a reason to select a more inclusive measure, in this case 'Connection to Sámi language'. The reason is that this may capture a larger number of persons whose life experiences *may* be related to their Sámi connections, even though their ethnic self-identification at the moment is non-Sámi (cf. Paper II on ethnic mobility). Another, although related argument says that those who choose not to identify themselves as Sámi because of the effects that assimilation policy has inflicted on them and their families nevertheless have a "right" to be regarded as part of the Sámi people (see Rowse for a discussion related to indigenous Australians in this regard). Given the situation of Sámi ethnicity data and that the reporting of language connections and ethnic self-identifications proves to vary over time, use of the two measures must primarily be based on updated survey data that by their nature will have unknown representativeness.

- *The Sámediggi electoral roll* (population P3 in the analytical framework in Chapter 6.1.4) occupies a special position in being a de facto identifiable and quantifiable Sámi population, although it remains impossible to determine its representativeness for Norway's unknown (potential) Sámi population as a whole (population P0) or for all those who identify themselves as Sámi (population P2). Because the electoral roll is updated at regular intervals and covers the entire country, it is technically speaking well suited as a sampling frame for (primarily descriptive) population-based studies. Even though the Sámediggi may permit such use pursuant to the regulations under the Sámi Act, this is not without its problems, and practices have so far remained restrictive (Jonassen 2010). Similarly, because the Sámediggi electoral roll is integrated in Norway's central population registry, it can easily be linked to other (public) registries and used for registrybased studies of the health and living conditions of the Sámi. One advantage of such studies is their ability to include precise data on, for example, socioeconomic variables such as education and (household) income. Another advantage is that registry-based studies may to some extent reduce the scope of research questions applied to Norway's Sámi population, which accounts for a relatively small number by any measure. Relevant actors should occasionally assess whether facilitation of well-founded and responsible registry studies based on the Sámediggi electoral roll could constitute an alternative under specified conditions.
- Populations based on the measure 'Sámi as an active language' can be regarded as subpopulations of those specified in the analytical framework in Chapter 6.1.4. As a main

rule, use of this measure must be based on self-reported data. In population-based studies of health and living conditions, such a measure has special relevance with regard to aspects of the health and welfare services (Nystad 2006) although other aspects may also be relevant. This measure may also be used to establish study populations consisting of (self-identified) Sámi who are *not* active users of the language – a group that for this reason may have special challenges entailing consequences for their quality of life and thereby also for their living conditions (Andersen, A. 2011).

- Use of *geographically based measures of ethnicity* (cf. 'Pg' in the analytical framework in Chapter 6.1.4) may represent a practical as well as pragmatic solution. At the same time, such measures are somewhat ambiguous with regard to the area included and to Sámi ethnic density. In Paper III, the measure 'Resident in the language area' resulted in a population of which 40 per cent returned a response other than Sámi to all the explicit questions on ethnicity. Figure 6.1 illustrates the large variations in Sámi ethnic density, both inside the municipalities in the language area as well as outside. Scholars have suggested that the ethnic density of an ethnically defined population in a given area *may* have an effect on aspects of the health and living conditions of this population (see Bécares, Cormack & Harris 2013 for a study of ethnic density related to the health of the Maori). Studies of such aspects in a Sámi context should therefore use measures of ethnicity that are sufficiently fine-tuned to capture the fairly substantial variations in Sámi ethnic density in different areas.
- Giving priority to "small-scale approaches" in population-based studies of health and living conditions may permit taking into account that geographical areas differ from each other in a great many respects other that just Sámi ethnic density. According to Krieger (2012b:666), all population-based health-related studies should emphasize that experiences are located in "[...] the real-world societies, that is, meaningful populations, of which they are a part" (cf. Chapter. 6.3.3). Using more fine-tuned geographic measures may help provide more nuanced statistical images of the internal situation in "the Sámi community" and thereby also implicitly provide more nuances to the dichotomy Sámi/non-Sámi (see Walter 2008 for an example from indigenous Australia in this respect). A further point is that localized experiences do not necessarily need be related to ethnicity; other aspects of local affiliations and communities may also be (equally) relevant and material.

- Quantitative knowledge on patterns in the health and living conditions of the Sámi may be concerned with *external relations* in the form of similarities and dissimilarities between Sámi and non-Sámi populations as well as with *internal Sámi issues*. Given that there are only few and small "gaps" between the living conditions of the Sámi and those of other groups in given geographic areas, it nevertheless remains relevant to search for (more) knowledge on the situation within all or parts of the Sámi population in Norway. This includes potential (social) inequalities in health, as well as the dimensions and shape of a possible intra-Sámi health gradient. A focus on internal Sámi variation may help ensure that studies are based on real needs in actual communities (Kuokkanen 2008), rather than on the interests of (ethnocentric) researchers with regard to (exotic) ethnic "deviations" (Senior & Bhopal 1994; Bhopal 2007). Care should be taken not to base differentiations on dimensions that can be perceived as "ranking lists" of Sámi-ness (cf. Chapter 6.3). According to Lofters and O'Campo (2012), all action-oriented studies of health and living conditions should emphasize experiences and conditions that can be assumed to have relevance for the issues being studied and that also constitute "[...] actionable sources of heterogeneity [...]" (p.106, italics added).
- Emphasizing *differentiated approaches* to Sámi experiences and needs related to health and living conditions corresponds with the main message in a recent study of policy documents that are relevant for the provision of health and welfare services to the Sámi (Blix, Hamran & Normann 2013). This study's proposal for a new and knowledge-based, updated public study of this field deserves support.
- Despite the fact that the use of Sámi ethnicity as a variable remains a challenge, well-founded and well-justified use ought to continue not least since it is generally recognized that "[...] from a policy context, statistical results will almost always count for more than qualitatively obtained evidence" (Walter & Andersen 2013). At the same time, it is worth noting how several scholars have pointed out that demographic statistics and population-based studies not only *reveal* the actual situation of populations; they may also contribute to *construct* and *produce* populations, categories and identities (see e.g. Ruppert 2007; Rowse 2009; Walter 2010; Biruk 2012; Kukutai & Taylor 2012). Such aspects of the use of Sámi ethnicity as a variable should also be included in future research.

7.2 Closing statement

The Norwegian state is based on the territory of two peoples – Norwegians and Sámi – and is also home to other ethnic groups of different kinds. Longstanding inter-ethnic interaction combined with (the legacy of) assimilation policies have contributed to blurring Sámi ethnic boundaries at the group and individual levels, in time and space. When Statistics Norway after the Second World War abandoned the practice of recording Sámi (and Kven) ethnicity in Norwegian censuses, this implicitly contributed to render the Sámi invisible in statistical narratives about the Norwegian state, as well as explicitly complicate certain types of numerically based, Sámi-related knowledge buildning. In sum, this creates a situation in which issues pertaining to operationalization of Sámi ethnicity in general and (self-)identification as Sámi in particular are complex, demanding and often controversial.

Against a global historic backdrop where (even) health-related research has partly been based on, and partly contributed to promote ethnic stigmatization and racism (Bhopal 2007, 2009a), it has been argued that the only ethically acceptable justification for using ethnicity as a variable in studies of health and living conditions is to do so with a view to benefiting and not harming the ethnic group(s) involved. In this perspective it is essential for relevant actors to reflect on and justify whether, why and how studies that use ethnicity as a variable can and should be implemented.

At the same time, as an ethnic group that is also an indigenous people, the Sámi in Norway have – like other peoples in modern states – a general need for "[...] meaningful statistical narratives about themselves" (Prout 2012:333) and "[...] a robust and relevant statistical evidence base with which to make informed decisions" (Kukutai 2011b:60). One precondition for meeting this need is to have systematic knowledge and understanding of various aspects pertaining to the use of Sámi ethnicity as a variable. This thesis may serve as a contribution to this effect.

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⁵ Capitalization (headline-style or sentence-style) follows, in principle, the style of the publication. References to Internet websites (URLs) were accurate at the time of writing.

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Paper I

Torunn Pettersen (2015, forthcoming):

The Sámediggi electoral roll in Norway – framework, growth and geographical

shifts 1989-2009. In: Mikkel Berg-Nordlie, Jo Saglie & Ann Sullivan (eds.):

Indigenous politics: Institutions, Representation, Mobilisation,

Colchester, ECPR Press

Paper II

Torunn Pettersen & Magritt Brustad: Same Sámi? A comparison of self-reported Sámi ethnicity measures in 1970 and 2003 in selected rural areas in Northern Norway.

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Paper III

Torunn Pettersen & Magritt Brustad (2013):

Which Sámi? Sámi inclusion criteria in population-based studies of Sámi health and living conditions in Norway – an exploratory study exemplified with data from the SAMINOR study. *International Journal of Circumpolar Health* 2013, 72: 21813 - http://dx.doi.org/10.3402/ijch.v72i0.21813

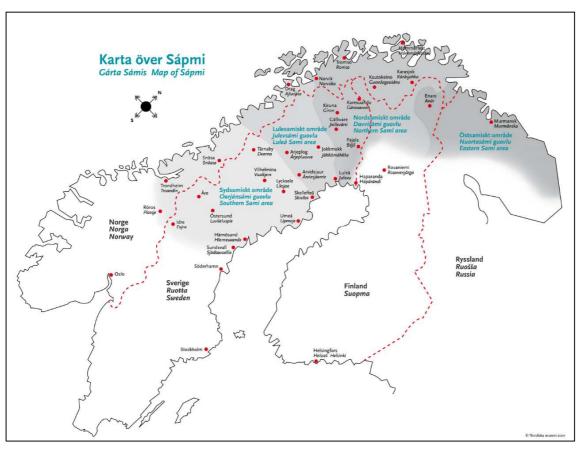
Appendices A-G

- A) Examples of maps of Sápmi
- B) The additional form containing the questions about Sámi ethnicity in Norway's 1970 census (in Norwegian and in Northern Sámi)
- C) The municipalities where the additional form in Norway's 1970 census was distributed
- D) The municipalities included in the geographical scope of the Sámediggi subsidy schemes for business development (STN) / the Sámi Development Fund (SUF) between 1975 and 2014.
- E) Map of the municipalities included in the geographical scope of the Sámediggi subsidy schemes for business development (STN) per 2014
- F) Application form for enrolment in the Sámediggi electoral roll per 2014 (in Northern Sámi and Norwegian)
- G) The SAMINOR study: Information pamphlet, letter of invitation, informed consent statement, questionnaires (in Norwegian and in Northern Sámi)

A) Examples of maps of Sápmi



 $Source: www.galdu.org/govat/doc/eng_sami.pdf$



Source: www.nordiskamuseet.se/sites/default/files/public/amnen/sapmi/sapmi-karta-03-05-2013_1920px.jpg

B) The additional form containing the questions about Sámi ethnicity in Norway's 1970 census (in Norwegian and in Northern Sámi)

Šemé sámegiel-tævs (Skjema med samisk							
Statistisk Sentralbyrå Oslo-Dep.	Tilleggsskjema Konfidensielt						
	r						
Folke- og boligtelling 1. november 1970							
Finansdepartementets bestemmelse av 12. iebruar 1970 gitt med hjemmel i: 1) lov nr. 2 av 25. april 1907 § 5, jfr. Stortingets vedtak av 14. november 1969 og 2) lov nr. 1 av 16. januar 1970 § 5, jfr. kgl. res. av samme date.							
Hovedpersonen i leiligheten (eller hovedpersonens sted- fortreder) må sørge for at dette skjemaet blir fylt ut for hver person i tillegg til personskjemaet. Skjemaet må være klart for avlevering sammen med de andre skjemaene mandag 2. november.	Oppgavene vil bli behandlet strengt konfidensielt. Telleren har taushetsplikt. De som ønsker det, kan levere utfylt skjema i lukket konvolutt.						
Etternavn, fornavn, mellomnavn	Fødselsdato og -år Skriv ikke her Personnr.						
Gate/vei, nr. eller bostedets navn	Kretsnr.						
Poststed Kommune	Leilighetsur.						
 Var samisk det første språk som personen selv snakket? (Sett kryss i ruten foran riktig svar) For barn som ennå ikke har lært å snakke, skal det settes kryss for Ja dersom samisk antas å bli det første talespråket. I motsatt fall settes kryss for Nei. 	1						
Var samisk det første språk som minst én av personens foreidre snakket? (Sett kryss)	l						
Var samisk det første språk som minst én av personens beste- foreidre snakket? (Sett kryss)	1						
 Regner personen seg selv som same? (Sett kryss) Foreldre eller andre foresatte avgjør om barn under 15 år skal regnes som same. 	1						

Source: Aubert 1978:129

Skjema med bokmålte (Semå dårogiel-tævsta:		
Statistisk Sentralbyrå Oslo-Dep.		Lassišemá Konfidensalaš
Áľbmut- ja årronviesso-lål	kkan 1. november	1970
Finansdepártemente mærrádus 12. februar 1970 ad'dujuvvun dáid miel' šiet'tama 14. november 1969 ja 2) lákka nr. 1 ad'dun 16. jánuar 1		
Árronvieso oai'vipersuvna (dahje su saddjásaš) gal'gá fuolahit dán šemá dev'dujuvvut juokke persuvna birra lassin persuvnašemái. Dát šemá gal'gá læt válmasin dev'dujuvvun leveren váras åk'tanaga daid será šemáiguin vuosárga (mánnudaga) 2. november 1970.	gævahuvvut sagga konf Låk'kis læ jávuhag	a-årron gædnegasvuotta. let nu, såt'tet leveret dev'dujuvvun
Maŋit namma, âv'danamma, gas'kanamma	Riegádanbæi'vi ja -jakki	Ale čále dággu Personnr.
Gát'ta/gœi'dno ja nr. dahje árronbáiki namma		Kretanr.
Poas'tasaji namma Kommuna namma		Leilighetsnr.
1. Læi gå sámegiella vuostas giella maid persuvna ieš sárdnoi? (Sár'ge x dan ruvtui mii læ vuoi'ga vás'tádusa åvdabæl'de) Mánáid hárrái gudet æi velá læt oap'pan sár'dnot, ber're x sár'gejuvvut «Læi» åvdabæle ruvtui gå nav'dá sámegiela šad'dat máná vuostas sár'dnongiellan. Jäs ii navde, de sár'g-juvvu x «Li» åvdabæle ruvtui	1 🗌 Læi 2 🔲 Ii	
Læi gå sámegiella vuostas giella maid uccimusat åk'ta per- suvna vánhemiin sárdnoi? (Sár'ge x)	I Læi 2 III 3 In diede	
 Læi gå sámegiella vuostas giella maid uccimusat åk'ta persuvna åddjáin ja ákkoin sárdnoi? (Sár'ge x). 	1 Lwi 2 li 3 ln diede	
 Adná gå persuvna iežas sábmelsž'žan? (Sár'ge π) Vánhemat dahje ærát gudet læt mánás fuola-ad'nin, mærridit gal'gá gå 15 jagi vuollil mánná låk'kujnvvut sábmelaž'žan 	1 Læi 2 Li 3 Li læt vissis	

4 🔲 In dáttu vás'tidit

Grøndahl & Søn. Oslo.

Source: Aubert 1978:130

Fuobmáš: Dušše fal nubbebælle dán šemás gal'gá dev'dujuvvut.

C) The municipalities where the additional form in Norway's 1970 census was distributed

OVERSI	KT OVER KRETSER	A LIST	OF THE CENSUS TR	ACTS		
1841	Fauske	1921	Salangen	1940	Kåfjord	
13	Nedre Vatnan	1	Løksa/Løkse- botn/Rørbakken		Alle kretser	
1842	Skjerstad	2	Medby	1941	Skjervøy	
6	Misvær	4	Seljeskog		Alle kretser	
1845	Sørfold	5	Sjøvegan	1942	Nordreisa	
12	Mørsvikbotn	6	Stokkenes/	1	Storvik	
			Elvelund	11	Bakkeby	
1849	Hamar øy	7	Bekkebotn	10/2	V	
4	Straumsnes	8	Elvebakken	1943	Kvænangen	
5	Sagvatnan	9	Masterbakken		Alle kretser	
12	Uteidet	10	Laberg	2001	Hammerfest	
1850	Tysfjord	1.7	Spannsdalen		Alle kretser	
	Alle kretser	1024	Målselv	2003	Vadsø	
	unntatt:	1924 5	Rossvold	2003	Alle kretser	
4	Hundholmen	7			Aile Kreuser	
5	Indre Tysfjord	10	Storjord Takelvdal	2011	Kautokeino	
13	Tysnes	10	TakeIvdai		Alle kretser	
1853	Evenes	1925	Sørreisa	2012	Alta	
1000	Alle kretser	6	Sørstraumen	2012	Alle kretser	
		7	Storlia/Rabbås			
	Ballangen	9	Nordstraumen	2014		
1	Råna/Arnes		Reinelv		Alle kretser	
	Ballangen	14	Sørstraumen		unntatt:	
	Bjørkåsen	1926	Dyrøy	8	Loppa	
	Stor-Ballangen	2	Bjørkbakk	2015	Hasvik	
	Ballangsmark	4	Kastnes	2022	Alle kretser	unntatt:
6	Bøstrand			1	Stjernvåg	CHILLEGE C.
7	Kjeldebotn	1927	Tranøy			
1855	Ankenes	4	Bryggerhaug	2016	Sørøysund	
	Alle kretser	5	Tranøybotn		Alle kretser	
	unntatt:	1929	Berg	2017	Kvalsund	
6	Seines	8	Straumsbotn/		Alle kretser	
7	Trældal		Hamn	2018	Måsøy	
9	Kvitsandøra					
12	Nordre Håkvik	1931			Alle kretser	
1.5	Kongsbakk	7		2019	Nordkapp	
16	Elvegård	8	Fagernes		Alle kretser	unntatt:
18	Sørskjomen	9	Finnfjord	6	Kjelvik	
19	Vidrek		Finnsnes Kårvik	2020	Downonger	
1902	Tromsø	14	Karvik	2020	Porsanger Alle kretser	
18		1933	Balsfjord		Alle Kretser	
19		3	Ørnes	2021	Karasjok	
21		4	D. E. C. C. C. III.C. J.		Alle kretser	
53	Lakselvbukt		Tomasjord	2022	Lebesby	
54	Lakselvdalen	5	Seljelvnes	2442	Alle kretser	unntstr
55	Sørstrøm	15	Sagelvvatn	14	Godviknes	with rect.
56		20	Sandøyra			
57	**	21	Malangseidet	2023		
58	Breivikeidet	1936	Karlsøy		Alle kretser	unntatt
		15	Skogsfjordvatn	4	Gamvík	
1911				5	Tyfjord	
8	Vik	1938	Lyngen	2024	Berlevåg	
1913	Skånland		Alle kretser		Alle kretser	
1	Tovik		unntatt:	****		
7	Kjønna	14		2025	Tana	
8	Trossemark		Lenangøyra		Alle kretser	
9	Boltås	19	Jægervatn	2027	Nesseby	
12		1939	Storfjord		Alle kretser	
1.3		1939	Alle kretser			
	•		unntatt:	2030	Sør-Varanger	
1919		9	Søndre Oteren	_	Alle kretser	unntatt:
	Fjelldal	_		1	Bugøynes	
	Firence			-		
7 8	Elvenes Laberg			7 8	Jarfjord Grense Jakob	

Source: Aubert 1978:25

D) The municipalities included in the geographical scope of the Sámediggi subsidy schemes for business development (STN) / the Sámi Development Fund (SUF) between 1975 and 2014.

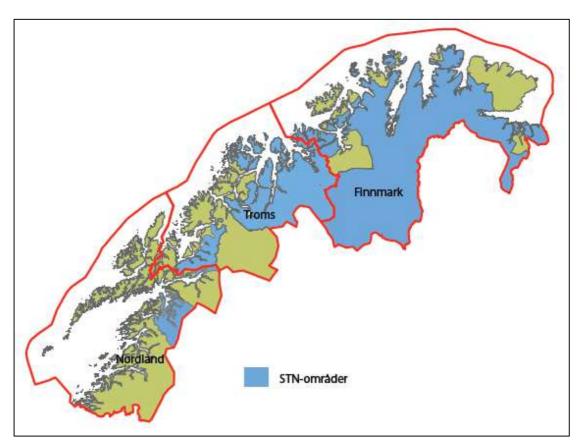
13 kommuner	1976	1984	1992
2020 Porsanger 2022 Lebesby* 2023 Gamvik* 2025 Tana 1913 Skånland* 1920 Lavangen* 1940 Kåfjord* 1850 Tysfjord* 1853 Evenes* 208 kommuner + 7 delområder 2012 Alta* 2012 Alta (u) 2014 Loppa 2018 Måsøy (u) 2014 Loppa 2018 Måsøy (u) 2018 Måsøy (u) 2018 Måsøy (u) 2019 Rordkapp* 2022 Lebesby (u) 1902 Tromso* 2023 Gamvik (u) 1904 Kåfjord (H) 1919 Gratangen* 1940 Kåfjord (H) 1910 Gratangen (H) 1920 Lavangen (H) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) 16 hele kommuner + 16 hele kommune			15 kommuner
2021 Karasjok 2025 Tana 2027 Nesseby 1913 Skånland* 1920 Lavangen* 1940 Kåfjord* 1850 Tysfjord* 1853 Evenes* (5 nye) 5 hele kommuner 6 hele kommuner + 7 delområder 2005 20 kommuner 2012 Alta* 2012 Alta (u) 2018 Måsoy (u) 2022 Lebesby (u) 1902 Tromso* 1919 Gratangen* 1919 Gratangen* 2023 Gamvik (u) 1920 Tromso* 1919 Gratangen* 2023 Gamvik (u) 1939 Storfjord 1940 Kåfjord (H) 1805 Narvik* 2012 Alta (u) 2023 Gamvik (u) 2014 Loppa 2015 Alta (u) 2016 Måsoy (u) 2018 Måsoy (u) 2018 Måsoy (u) 2019 Nordkapp* 2020 Tromso* 1919 Gratangen* 1920 Lavangen (H) 1920 Lavangen (H) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) 9 hele kommuner + 2023 Gamvin (2 endra) 16 hele kommuner +			
1913 Skånland* 1920 Lavangen* 1940 Kåfjord* 1850 Tysfjord* 1853 Evenes* 1940 kånford* 1940 kånford* 1940 kånford kmmuner 1950 korreisa* 1938 Lyngen 1805 Narvik kmmuner 1805 Narvik kmmuner 1960 kommuner 1960 kommun			1943 Kvænangen
1920 Lavangen* 1940 Kåfjord* 1850 Tysfjord* 1853 Evenes* (2 nye) (2 nye) (5 hele kommuner 6 hele kommuner + 7 delområder (2 nye) (2 nye) (3 nye) (2 nye) (3 nye) (4 nye) (4 nye) (5 hele kommuner + 7 delområder (2 nye) (3 nye) (4 nye) (4 nye) (4 nye) (5 nye) (5 nye) (2 nye) (5 nye) (2 nye) (2 nye) (2 nye) (3 nye) (3 nye) (4 nye)			
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1850 Tysfjord* 1853 Evenes* (2 nye) (5 nye) (6 hele kommuner + 7 delområder 7 hele kommuner + 8 delområder 7 hele kommuner + 8 delområder 1997 2005 26 kommuner 26 kommuner 2012 Alta* 2012 Alta (u) 2018 Måsøy (u) 2014 Loppa 2018 Måsøy (u) 2018 Måsøy (u) 2018 Måsøy (u) 2019 Nordkapp* 1919 Gratangen* 2023 Gamvik (u) 1939 Storfjord 2030 Sør-Varanger* 1940 Kåfjord (H) 1913 Skånland (H) 1913 Skånland (H) 1920 Lavangen (H) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) (6 nye, 8 endra) (2 endra) 16 hele kommuner + 17 hele kommuner 16 hele kommuner + 17 hele kommuner 16 hele kommuner + 18 hele k	2027 Nesseby		
1853 Evenes* (8 mye)			
(5 nye) 5 hele kommuner Folketall 1.1.1976: 14 300 1997 20 kommuner 2012 Alta* 2012 Alta (u) 2018 Måssøy (u) 2022 Lebesby (u) 1990 Gratangen* 1919 Gratangen* 1919 Gratangen* 1940 Kåfjord (H) 1805 Narvik* 1919 Gratangen (H) 1920 Lavangen (H) 1920 Lavangen (H) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) 9 hele kommuner + (2 nye) 7 hele kommuner + 7 delområder 2009 26 kommuner 2012 Alta (u) 2023 Gamvik (H) 1919 Gratangen (H) 1919 Gratangen (H) 1919 Gratangen (U) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) 9 hele kommuner + (6 nye, 8 endra) 14 hele kommuner +			
Thele kommuner		1855 Evenes	
Thele kommuner	(5 nye)	(8 nye)	(2 nye)
Folketall 1.1.1976: 14 300			
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20 20 20 20 20 20 20 20			
2012 Alta (u) 2018 Måsøy (u) 2014 Loppa 2012 Lebesby (u) 2018 Måsøy (u) 2018 Måsøy (u) 2018 Måsøy (u) 1902 Tromsø* 2019 Nordkapp* 1919 Gratangen* 2023 Gamvik (u) 1939 Storfjord 2030 Sør-Varanger* 1940 Kåfjord (H) 1805 Narvik* 1919 Gratangen (u) 1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) 9 hele kommuner + (6 nye, 8 endra) (2 endra) 16 hele kommuner +			
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1920 Lavangen (H) 1925 Sørreisa* 1938 Lyngen 1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) (6 nye, 8 endra) (2 endra) 9 hele kommuner + 16 hele kommuner +			
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1805 Narvik (u) 1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) (2 endra) 9 hele kommuner + 14 hele kommuner + 16 hele kommuner +			
1849 Hamarøy* 1850 Tysfjord (H) (5 nye, 3 endra) (6 nye, 8 endra) (2 endra) 9 hele kommuner + 14 hele kommuner + 16 hele kommuner +		1938 Lyngen	
1850 Tysfjord (H) (5 nye, 3 endra) (6 nye, 8 endra) (2 endra) 9 hele kommuner + 14 hele kommuner + 16 hele kommuner +		1805 Narvik (u)	
(5 nye, 3 endra) (6 nye, 8 endra) (2 endra) 9 hele kommuner + 14 hele kommuner + 16 hele kommuner +			
9 hele kommuner + 14 hele kommuner + 16 hele kommuner +		1850 Tysfjord (H)	
9 hele kommuner + 14 hele kommuner + 16 hele kommuner +	(5 mia 3 andra)	(6 mia & andra)	(2 andra)
11 delområder 12 delområder 10 delområder	11 delområder	12 delområder	10 delområder
Folketall 1.1.2004: Folketall 1.1.2005: Folketall 1.1.2009:			
25 800 37 500 38 500	25 800	37 500	38 500
2012			
31 kommuner			
1923 Salangen			
1933 Balsfjord			
1936 Karlsøy			
1941 Skjervøy 1942 Nordreisa			
1742 IVIUEDA	1342 INDIGICISA		
(5 nye)	(5 nye)		
21 hele kommuner +			
10 delområder	10 delområder		
F-11-4-11 1 1 2012	E-11-1-11 1 2012		
Folketall 1.1.2013:			
55 652 Deler av kommunen ble inkludert			l

Deler av kommunen ble inkludert

(u) Utvidet område av kommunen ble inkludert
(H) Kommunen gikk fra å være delvis til helt inkludert

Source: Statistisk sentralbyrå 2012:14

E) Map of the municipalities included in the geographical scope of the Sámediggi subsidy schemes for business development (STN) per 2014



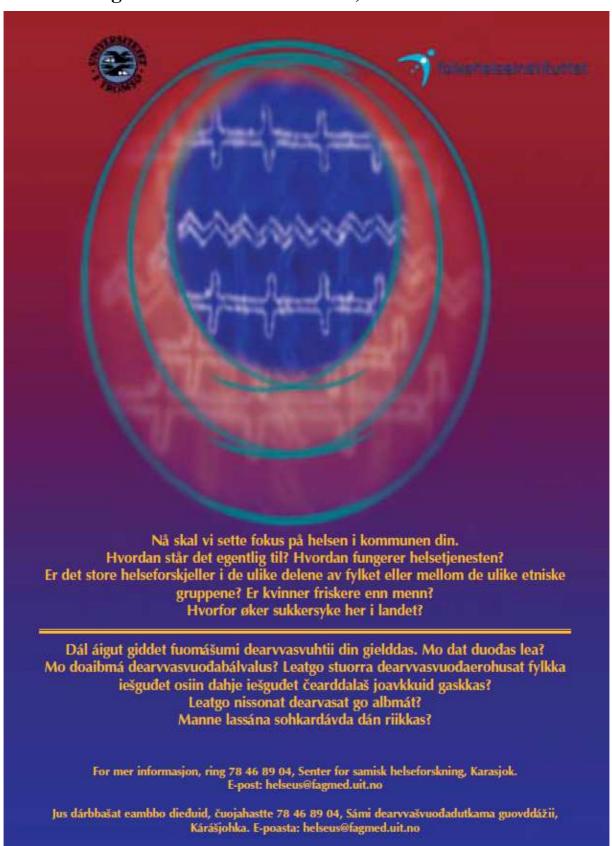
Kilder: Statistisk sentralbyrå 2014:18

F) Application form for enrolment in the Sámediggi electoral roll per 2014 (in Northern Sámi and Norwegian)

Čáliheapmi Sámedikki jienastuslohkui Registrering i Sametingets valgmanntall
NAMMA / NAVN
ČLJUHUS / ADRESSE
POASTANUMMIR / POASTABÁÍKI / POSTNUMMER / POSTSTED
ÁSSANGIELDA / BOSTEDSKOMMUNE
RIEGÁDANNUMMIR (11 LOGU) / FØDSELSNUMMER (11 SIFFER)
Mun anán iežan sápmelažžan, ja (merke jogo A-, B- dahje C-bustáva bokte): Jeg oppfatter meg selv som same, og (kryss av for enten A, B eller C):
A) Mu ruovttugiella lea sámegiella* / Jeg har samisk som hjemmespråk*
B) Mus lea, dahje lea leamaš váhnen, áhkku/áddjá dahje máttarváhnen, gean ruovttugiella lea dahje lea leamaš sámegiella / Jeg har, eller har hatt forelder, besteforelder eller oldeforelder med samisk som hjemmespråk
NAMMA / NAVN
ÁSSANGIELDA / BOSTEDSKOMMUNE
RIEGÁDANBEAIVI / FØDSELSDATO
C) Mun lean dan olbmo mánná, guhte lea dahje lea leamaš Sámedikki jienastuslogus / Jeg er barn av person som er eller har vært i Sametingets valgmanntall
NAMMA (VÁHNEN) / NAVN (FORELDER)
ÁSSANGIELDA / BOSTEDSKOMMUNE
RIEGÁDANBEAIVI / FØDSELSDATO
BEAIVI / DATO
VUOLLÁIČÁLUS / UNDERSKRIFT
Válgajagis galgá ohcamuš leat joavdan Sámediggái: geassemánu 30.beaivvi / I hende frist i valgår: 30. juni * Ruovttugiellan oaivvilduvvo dat giella, maid don hállet ruovttus bajásšattadettiin. Dávjá geavahuvvo sátni eatnigiella. Jos bajásšattadettiin leat geavahuvvon mánga giela, de galgá sámegiella leat okta dain gielain. * Med hjemmespråk menes det språket som du brukte i hjemmet under oppveksten. Ofte brukes ordet morsmål. Dersom det er brukt flere

Source: http://www.samediggi.no/Samediggevalga/Caliheapmi-jienastuslohkui

G) The SAMINOR study: Information pamphlet, letter of invitation, informed consent statement, questionnaires (in Norwegian and in Northern Sámi)



Helseundersøkelsen har tre formål:

- Du som deltar i helseundersøkelsen får sjekket om du har bestemte sykdommer, eller om det er fare for at du kan få dem.
- Å få ny kunnskap om helse, sykdom og levekår i områder med samisk og norsk bosetting.
- Å lage en oversikt over folks helse en «helseprofil» for fylket. Dette er viktig for å gi fylket og de enkelte kommunene et bedre grunnlag for å planlegge helsetjenesten i framtida.

Hvem kan delta?

Alle født 1925–1967 og i 1973 fra områder med samisk og norsk bosetting. Det er 9 kommuner i Finnmark, 6 i Troms, 4 i Nordland og 2 i Nord-Trøndelag med i undersøkelsen.

Hvordan får du time til helseundersøkelsen?

Dersom du ønsker å være med i helseundersøkelsen, krysser du av for det i vedlagte spørreskjema, besvarer det og sender det inn. Deretter får du time til helseundersøkelsen som vil foregå enten i buss eller i et fast lokale i kommunen. Hvis den oppsatte timen ikke passer, kan du møte når du vil innenfor åpningstiden vår som du finner i invitasjonsbrevet. Undersøkelsen er gratis. Du får tilsendt et spørreskjema sammen med innkallingen. Vi ber om at du fyller ut skjemaet hjemme og tar det med når du møter fram til helseundersøkelsen.

Dearvvasvuođaiskkadeami dieđuin leat golbma ulbmila:

- Dus gii searvvat iskkadeapmái iskat leatgo dus dihto dávddat, dahje leago dus várra daid oažžut.
- Oažžut odda máhtu dearvvasvuoda, dávddaid ja eallindili birra sámi ja dáža ássanguovlluin.
- Ráhkadit várdosa olbmuid dearvvasvuoðas – fylkka «dearvvasvuoðaprofiilla». Dát lea dehálaš vai fylkkas ja juohke gielddas lea buoret vuoððu plánet boahttevaš dearvvasvuoðabálvalusa.

Gii sáhttá searvat?

Juohkehaš riegádan 1925–1967 ja 1973 guovlluin gos ásset sápmelaččat ja dážat. 9 gieldda Finnmárkkus, 6 Tromssas, 4 Nordlánddas ja 2 Davvi-Trøndelagas leat iskkadeamis mielde.

Mo oaččut diimmu dearvvasvuođaiskkadeapmái?

Jus dáhtut leat mielde dearvvasvuođaiskkadeamis, de russet dan čuovvu gažadanskovis, vástidat dan ja sáddet dan midjiide. Dasto oaččut diimmu iskadeapmái mii lea juogo busses dahje dihto lanjas gielddas. Jus biddjon áigi ii heive, de sáhtát boahtit vaikke goas min rahpanáiggis maid oainnát rávkanreivves. Iskkadeapmi lea nuvttá. Oaččut gažadanskovi oktan rávkamiin. Bivdit du deavdit skovi ruovttus ja váldit dan mielde go boađát iskkadeapmái.

Hvordan foregår helseundersøkelsen?

Det gjøres målinger av blodtrykk, høyde, vekt og livvidde, og det taes en blodprøve. Blodprøven kan senere bli analysert på fettstoffer i blodet, blodsukker, markører for betennelsesreaksjoner, kosthold, hormoner, lever- og nyrefunksjon samt beinmarkører. Genetiske analyser av blodet kan også bli aktuelt.

Omtrent fire uker etter helseundersøkelsen får du et brev i posten med opplysninger om ditt kolesterol, blodtrykk og blodsukker, og hvordan du ligger an i forhold til anbefalte verdier. De som har særlig høy risiko for å få hjerte- og kar sykdommer og sukkersyke, vil bli bedt om å ta kontakt med sin egen lege for videre oppfølging.

Alle som møter fram til helseundersøkelsen, får et tilleggsskjema, med spørsmål om blant annet kosthold og levekår.

Vi trenger din tillatelse

Når du møter fram til helseundersøkelsen, ber vi deg om å undertegne et samtykke der du sier deg enig i et eller flere av de fire punktene nedenfor. (Du vil få kopi av samtykke erklæringen).

- At du kan bli kontaktet med anbefaling om oppfølging, behandling eller for å forebygge sykdom.
- At opplysningene dine kan brukes til medisinsk forskning etter vurdering og tilråding fra Regional komité for medisinsk forskningsetikk i Nord-Norge og Datatilsynet.
- At resultatene dine (etter godkjenning fra Datatilsynet) kan settes sammen

Mo iskkojuvvot?

Varradeaddu, allodat, lossodat ja seakkáš mihtiduvvojit, ja váldo varraiskkus. Varraiskosis sáhttá maŋŋil iskat vara buoideávdnasiid, varrasohkkara, infekšunreakšuvnnaid mearkkaid, biepmu, hormonaid, vuoivvas- ja monimušdoaimma ja dáktemearkkaid. Vara genetalaš analysat maid soitet šaddat áigeguovdilat.

Sullii njeallje vahku mannil dearvvasvuođaiskkadeami oaččut poasttas reivve iežat kolestrola, varradeattu ja varrasohkkara birra, ja mo dat leat rávvejuvvon meriid ektui. Bivdit sin geain lea hui alla váibmo- ja suotnadávddavárra ja sohkardávda, váldit oktavuođa iežaset doaktáriin joatkka čuovvoleapmái.

Juohkehaš gii boahtá iskkadeapmái, oažžu lassiskovi, gažaldagaiguin ee. biepmu ja eallindili birra.

Mii dárbbašat du lobi

Go boađát iskkadeapmái, de bivdit du čállit vuollái miehtama, mas logat iežat leat ovttamielas ovtta dahje moatti dán njeallje čuoggás vulobealde (Miehtamis oaččut mángosa).

- Ahte duinna sáhttá váldit oktavuoda go áigu rávvet čuovvoleami, dálkkodit dahje eastadit dávddaid.
- Ahte visot du diedut s\u00e4httet adnot medisiinnala\u00e5 dutkamii Regional komite for medisinsk forskningsetikk i Nord-Norge ja Datatilsynet \u00e4rvvo\u00e5tallama ja r\u00e4vvaga mielde.
- Ahte du bohtosiid (Datatilsynet dohkkeheami mielde) s\u00e4htt\u00e1 \u00fcohkket dieduiguin du birra ear\u00e4 registariin dutkandoaimmaide nugo Kreftregistret,

med opplysninger om deg i andre registre for forskningsformål slik som Kreftregisteret, Dødsårsaksregisteret og folketellingene. I alle disse tilfellene vil navn og personnummer bli fjernet. Forsikringsselskaper får ikke tilgang til dataene.

4) At blodprøven din kan lagres og brukes til medisinsk forskning og genetiske analyser for å finne årsak til sykdom. All bruk av denne prøven vil bare skje i samsvar med godkjenning fra Datatilsynet og etter at Regional komité for medisinsk forskningsetikk i Nord-Norge har vurdert og tilrådd prosjektet.

Selv om du sier ja til dette nå, kan du senere ombestemme deg og be om å bli slettet fra undersøkelsen uten at du må oppgi noen grunn for det. Dette gjøres ved skriftlig beskjed til Institutt for samfunnsmedisin, UiTø, 9037 Tromsø. Blodprøven din vil da bli tilintetgjort.

Vi ønsker å følge alle som møter til helseundersøkelsen i lang tid framover med hensyn til hjerteinfarkt, hjerneslag og andre aktuelle sykdommer. Derfor ønsker vi å lagre opplysningene du har gitt, frem til fylte 100 år, for å sammenholde disse med opplysninger fra sentrale registre slik som *Kreftregisteret* og *Dødsårsaksregisteret*.

Velkommen til helseundersøkelsen

Selv om du nettopp har vært hos lege eller selv om du føler deg frisk, kan du likevel delta i undersøkelsen. Da hjelper du oss til bedre kunnskap og riktigere oversikt over helsen i kommunen og fylket ditt. Dødsårsaksregistret ja olmmošlohkamat. Visot dáid oktavuođain sihkko namma ja personnummar. Dáhkádusfitnodagat eai beasa dáid dieđuid oaidnit.

4) Ahte du varraiskkus sáhttá ráddjot ja adnot medisiinnalaš dutkamii ja genetalaš analysaide gávnnahit dávddaid árttaid. Dán iskosa juohke geavaheapmi geavvá dušše Datatilsynet dohkkeheami mielde ja mannil go Regional komite for medisinsk forskningsetikk i Nord-Norge lea árvvoštallan ja rávven prošeavtta.

Vaikke dása dál mieðat, de sáhtát mannil molsut oaivila ja bivdit sihkkot iskkadeamis dieðitkeahttá makkárge ákka dasa. Dán dagat čálalaččat Institutt for samfunnsmedisinii; Institutt for samfunnsmedisin, UiTø, 9037 Tromsø. Du varraiskkus dalle bálkestuvvo.

Mii dáhtošeimmet guhkit áiggi čuovvut juohkehačča gii boahtá dearvvasvuođa-iskkadeapmái váibmodohppehaga, vuoiŋŋašgáldnanvigi ja eará vejolaš dávddaid hárrái. Danne dáhtošeimmet rádjat du addán dieđuid, gitta devdon 100 jahkái, vai daid beassá sulastahttit guovddáš registariid dieđuiguin, nugo Kreftregistret ja Dødsårsaksregistret.

Bures boahtin dearvvasvuođaiskkadeapmái

Vaikke leatge aiddo leamaš doaktára luhtte dahje dovddat iežat dearvvasin, de sáhtát liikká searvat iskkadeapmái. Dalle veahkehat min oažžut eanet máhtu ja riektasat dieđuid du gieldda ja fylkka dearvvasvuođas.





Helse- og levekårsundersøkelse

- et forskningsprosjekt

Helsedepartementet har bedt oss undersøke helse- og levekårsforhold hos alle født i 1925–1967 og i 1973 i utvalgte kommuner med samisk og norsk bosetting i Nord-Norge og Nord-Trøndelag. Formålet er å innhente opplysninger om hjerte- og karsykdommer, kreft, allergier, smerter og andre lidelser samt ulykker for å kunne forebygge dem. Videre er målet å få et bilde av folks oppfatning av helsetjenestetilbudet, deres levesett slik som kosthold og røyking, levekår og tilhørighet. De som ønsker å delta, blir med i et forskningsprosjekt som består av spørreskjemaer og helseundersøkelse. Alle opplysninger fra undersøkelsen vil bli behandlet konfidensielt.

Helse- og levekårsundersøkelsen er nærmere beskrevet i brosjyren, som ligger vedlagt. Dersom du er i tvil om noe, kan du kontakte oss på tlf. 78 46 89 04 eller på e-post: helseus@fagmed.uit.no

Du kan delta på følgende måter: (kryss av øverst på spørreskjema under «samtykke til deltakelse»)

- A Dersom du ønsker å delta i helseundersøkelsen og forskningsprosjektet, krysser du av punkt A, fyller ut spørreskjemaet og returnerer det til oss i vedlagte konvolutt. Du vil senere få et brev med tid og sted for fremmøte sammen med et nytt spørreskjema.
- B Dersom du bare ønsker å delta i en innledende del av forskningsprosjektet uten helseundersøkelse, krysser du av punkt B, fyller ut spørreskjemaet og returnerer det til oss i vedlagte konvolutt.
- C Du kan unngå purring fra oss ved å krysse av punkt C og returnere spørreskjemaet til oss. Purring vil skje skriftlig.

Datatilsynet har gitt konsesjon for lagring av opplysninger fra undersøkelsen og forskningsprosjektet er tilrådd av Regional komite for medisinsk forskningsetikk i Nord- Norge.

For forskningen sin del vil det være av stor interesse at vi får inn så mange opplysninger som mulig. Du deltar frivillig og kan, etter å ha sagt ja til deltakelse, senere trekke deg uten å begrunne hvorfor og uten at det vil ha noen konsekvenser for deg. Det samme gjelder dersom man i utgangspunktet ikke ønsker å delta. Opplysninger du har gitt kan du be om å få slettet.

Resultatene vil bli publisert i massemedia, og det utformes en rapport fra helse- og levekårsundersøkelsen når den er avsluttet.

De som fullfører hele helse- og levekårsundersøkelsen vil være med i trekningen av 3 reisegavekort til en verdi av á kr. 10 000,-. Vi regner med en deltakelse på ca. 15000 personer.

Med hilsen

Anne Kirsten Anti Senter for samisk helseforskning Karasjok Eiliv Lund Institutt for samfunnsmedisin Tromsø Per G. Lund-Larsen Nasjonalt folkehelseinstitutt

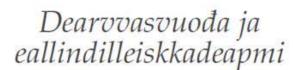
INFORMERT SAMTYKKE

Jeg har lest informasjonen om undersøkelsen og samtykker i at (stryk det / de avsnitt du reserverer deg mot):

- Jeg kan bli kontaktet med anbefaling om oppfølging, behandling eller for å forebygge sykdom.
- 2. Opplysningene mine kan brukes i medisinsk forskning til å kartlegge og finne årsaker til helse, sykdom og levekår. All bruk av opplysningene i eventuell framtidig medisinsk forskning vil bare bli brukt dersom Regional komité for medisinsk forskningsetikk og Datatilsynet ikke har noen innvendinger mot dette.
- 3. Etter godkjenning fra Datatilsynet kan opplysningene mine settes sammen med opplysninger om meg i andre registre for forskningsformål. I alle disse tilfellene blir navnet og personnummeret mitt fjernet. Det kan være registre om trygd, sykdom, inntekt, utdanning, yrke, og opplysninger fra de tidligere hjerte- og kar undersøkelsene. Eksempler på slike registre er Kreftregistret, Dødsårsaksregistret og folketellingene. Forsikringsselskaper vil ikke få tilgang til dataene.
- 4. Blodprøven min kan lagres og brukes til medisinsk forskning og genetiske analyser for å finne årsak til sykdom. All bruk av denne prøven vil bare skje i samsvar med godkjenning fra Datatilsynet og etter at Regional komite for medisinsk forskningsetikk i Nord- Norge har vurdert de etiske sidene ved gjennomføring av prosjektet.
 sted og dato
 underskrift







dutkanprošeakta

Dearvvasvuođadepartementa lea min bivdán iskat dearvvasvuođa- ja eallindili juohkehaččas riegádan 1925–1967 ja 1973 dihto gielddain sámi ja dáža ássamiin Davvi-Norggas ja Davvi-Trøndelágas. Ulbmilin lea viežžat dieđuid váibmo- ja suotnadávddaid, borasdávdda, allergiaid, bákčasiid ja eará gillámušaid ja lihkohisvuođaid birra vai daid sáhtášii eastadit. Dasto lea ulbmilin diehtit olbmuid oaivila dearvvasvuođabálvalusa birra, sin eallinvuogi nugo biepmu ja borgguheami, eallindili ja gullevašvuođa birra. Geat háliidit searvat, leat mielde dutkanprošeavttas mas leat gažadanskovit ja dearvvasvuođaiskkadeapmi. Iskkadeami visot dieđut meannuduvvojit čiegusvuođas.

Dearvvasvuođa- ja eallindilleiskkadeapmi lea dárkilat válddahallon gihppagis mii čuovvu mielde. Jus eahpidat maidege, sáhtát gulahallat minguin tlf. 78 46 89 04 dahje e-poasta: helseus@fagmed.uit.no

Dán láhkai sáhtát searvat: (russe bajimuččas gažadanskovis «miedan searvamii» buohta)

- A. Jus háliidat searvat dearvvasvuoðaiskkadeapmái ja dutkanprošektii, de russet A čuoggá, deavddát gažadanskovi ja máhcahat dan midjiide čuovvu konfaluhtas. Mannil oaččut reivve mas čuožžu goas ja gosa boadát oktan odda gažadanskoviin.
- B. Jus háliidat searvat dušše dutkanprošeavtta álgooasis almmá dearvvasvuođaiskkadeami haga, de russet B čuoggá, deavddát gažadanskovi ja máhcahat dan midjiide čuovvu konfaluhtas.
- C. Eat rása jus russet C čuoggá ja máhcahat gažadanskovi midjiide. Rássan lea čálalaččat.

Datatilsynet lea addán sierralobi rádjat iskkadeami dieđuid ja dutkanprošeavtta lea rávven Regional komite for medisinsk forskningsetikk i Nord-Norge.

Dutkama dáfus lea hui miellagiddevaš ahte oažžut nu olu dieđuid go vejolaš. Don searvvat eaktodáhtolaččat ja sáhtát, maŋŋil go leat miehtan searvamii, geassádit vuođuškeahttá ja dutnje čuozakeahttá. Seamma guoská jus álggus juo ii hálit searvat. Dieđuid maid leat almmuhan sáhtát bivdit sihkkut.

Bohtosiid almmuhat mediain, ja čállo raporta dearvvasvuođa- ja eallindilleiskkadeamis go dat lea loahpahuvvon.

Sii geat čađahit olles dearvvasvuođa- ja eallindilleiskkadeami leat mielde vuorbádeamen 3 mátkeskeaŋkakoartta man árvu lea 10 000,- ru. guđesge. Doaivut ahte su. 15000 olbmo servet.

Dearvvuodaiguin

Anne Kirsten Anti Sámi dearvvašvuođadutkama guovddáš, Kárášjohka Eiliv Lund Institutt for samfunnsmedisin Romsa Per G. Lund-Larsen Nasjonalt folkehelseinstitutt

DIEÐIHUVVON MIEHTAN

Lean lohkan dieđuid iskkadeami birra ja mieđan ahte (sihko dan / daid osiid maidda várašat):

- Sáhttá muinna váldit oktavuoða go áigu rávvet čuovvoleami, dálkkodit dahje eastadit dávddaid.
- Mu dieđuid sáhttá atnit medisiinnalaš dutkamii kártet ja gávdnat dearvvasvuođa, dávddaid ja eallindili árttaid. Visot dieđuid geavaheapmi soaiti boahttevaš medisiinnalaš dutkamii, adno dušše jus Regional komite for medisinsk forskningsetikk ja Datatilsynet eai vuosttal dan.
- 3. Datatilsynet dohkkeheami vuodul, sáhttá mu dieduid čohkket mu dieduiguin eará registariin dutkandoaimmaide. Visot dáid oktavuodain sihkko mu namma ja personnummar. Sáhttet leat oaju, dávddaid, sisaboadu, oahpu ja fidnu birra registarat ja diedut ovddeš váibmo- ja suotnaiskkademiin. Dákkár registariid ovdamearkkat leat Kreftregistret, Dødsårsaksregistret ja olmmošlohkamat. Dáhkádusfitnodagat eai beasa dáid dieduid oaidnit.
- 4. Mu varraiskkus sáhttá ráddjot ja adnot medisiinnalaš dutkamii ja genetalaš analysaide gávnnahit dávddaid árttaid. Dán iskosa juohke geavaheapmi geavvá dušše Datatilsynet dohkkeheami mielde ja mannil go Regional komite for medisinsk forskningsetikk i Nord- Norge lea árvvoštallan prošeavtta čađaheami ehtalaš beliid.

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bálki ja bealvi	vuolláičála

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Helse- og levekårsundersøkelsen

L

Personlig innbydelse

1. EGEN HELSE	3. MAGE OG TARM SYMPTOMER (fortsettelse)
Hvordan er helsen din nå? (Sett bare ett kryss) Dårlig lkke helt god God Svært god	Er avføringen din vanligvis: (Sett ett eller flere kryss) Normal Løs Hard og perlete
Har du, eller har du hatt? Alder forste JA NEI gang	☐ Vekslende hard og løs ☐ Illeluktende
Astma	Har du i perioder tre eller flere avføringer daglig?
Kronisk bronkitt/emfysem/KOLS	Har du hatt plager i mage/tarm etter inntak av melk?
Diabetes (sukkersyke)	Er det andre i familien som har de samme magesymptomene? Mor Far Søsken Barn Ingen
Fibromyalgi/kronisk smertesyndrom	4. ANDRE PLAGER
Psykiske plager som du har søkt hjelp for	Under finner du en liste over ulike problemer. Har du opplevd noe av dette <u>den siste uken</u> (til og med i dag)?
Hjerteinfarkt (sår på hjertet)	(Sett ett kryss for hver plage) Ikke Litt Ganske Veldig
Angina pectoris (hjertekrampe)	Plutselig frykt uten grunn plaget plaget mye mye
Hjerneslag/hjerneblødning	Føler deg redd eller engstelig
Multippel sklerose (MS)	Matthet eller svimmelhet
Ulcerøs kolitt	Lett for å klandre deg selv
Får du smerter eller ubehag i brystet når du: Går i bakker, trapper eller fort på flatmark?	Søvnproblemer
Kan slike smerter opptre selv om du er i ro?	Følelse av å være unyttig, lite verd
2. MUSKEL OG SKJELETTPLAGER	Følelse av håpløshet mht. framtida
Har du i løpet av <u>det siste året</u> vært plaget med smerter og/eller stivhet i muskler og ledd som har vart i <u>minst 3 måneder</u>	Tenkt på å gjøre slutt på livet ditt
sammenhengende?	VEI
Har du noen gang hatt: Alder JA NEI siste gang	Har en eller flere av dine foreldre eller søsken JA NEI IKKE hatt hjerteinfarkt eller angina pectoris?
Brudd i håndledd/underarm?	Kryss av for de slektningene som har eller har hatt noen av sykdommene og angi deres alder for når de fikk sykdom-
Lårhalsbrudd?	mene. (Hvis flere søsken, før opp den som fikk det tidligst i livet) Alder første
3. MAGE OG TARM SYMPTOMER	Mor Far Søster Bror Barn Ingen gang
Har du hatt sure oppstøt, halsbrann eller JA NEI brystbrann nesten daglig i minst en uke?	60-års alder
Har du noen gang hatt smerter eller verk	etter 60 års-alder
i magen som har vart i minst 2 uker?	Diabetes
Hvis JA, hvor i magen sitter smertene? (Sett ett kryss) ☐ Øvre del ☐ Nedre del ☐ Hele magen	Hjerneslag
Er smertene eller «verken» jevnt over tilstede? (Sett ett kryss)	Astma
I perioder av ukers varighet	Tykktarmskreft 🔲 🔲 🔲 🔲 🔲
I perioder av måneders varighet	Brystkreft
Bestandig	Eggstokkreft
Er du ofte plaget av oppblåsthet, rumling i MA NEI magen eller rikelig luftavgang?	Hvor mange søsken har du? Brødre Søstre
	11voi mange sosken nai du: Diodre Sostre

6. BRUK AV MEDISINER 7. MAT OG DRIKKE (fortsettelse)	
- 하다 NGC NGC 가는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니는 아니	jer Annet
Bruker du? Nå Før, men ikke nå Aldri brukt På brødet	
Medisin mot høyt blodtrykk	
Kolesterolsenkende medisin	
Insulin Bruker du følgende kosttilskudd:	
Tabletter mot sukkersyke	nt Nei
Tran, trankapsler?	
Hvor ofte har du i løpet av <u>de siste 4 ukene</u> brukt følgende Fiskeoljekapsler (omega 3)?	i I
medisiner? (Sett ett kryss pr. linje) Vitamin- og/eller mineraltilskudd?	i
lkke Sjeldnere	
brukt enn Hver uke, siste hver men ikke Hvor mye drikker du vanligvis av følgende? (Sett ett	kryss pr. linje
4 uker uke daglig Daglig Sjelden/ 1-6 1 2-3	
Smertestillende uten resept	
Smertestillende på resept	П
Sovemedisin Lettmelk, cultura,	
Beroligende medikamenter	
Medisiner mot depresjon	
Annen medisin på resept	
1 2 3 4 Fruktjuice	$\overline{\Box}$
For de medisinene du har krysset av for i de to punktene	
ovenfor og som du har brukt i løpet av <u>de siste 4 ukene</u> : Brus/Cola med sukker	П
Brus/Cola uten sukker	$\overline{\Box}$
Angi navnet og hvinken grunn det er in at du tal/har talt disse	3
(sykdom eller symptom): (Kryss av for hvor lenge du har brukt medisinen) Hvor mange kopper kaffe og te drikker du daglig?	
Navn på medisinen: Grunn til bruk Inntil 1 år	all kopper
(sett ett navn pr. linje) av medisinen: 1 år eller mer Filterkaffe	
Kokekaffe/trykkanne	
□ □ Annen kaffe	
□ □ Te	
Dersom det ikke er nok plass her, kan du fortsette på eget ark som du legger Omtrent hvor ofte har du i løpet av det siste året	trukkot
ved. alkohol? (Lettøl og alkoholfritt øl regnes ikke med)	HURKET
7. MAT OG DRIKKE Har aldri Har ikke Noen få Omtre	
7. MAT OG DRIKKE Har aldri Har ikke Noen få Omtre drukket drukket ganger gang i	H I
Hvor ofte spiser du vanligvis disse matvarene? alkohol siste år siste år måned	en
(Sett ett kryss pr. linje)	
Sjelden/ 1-3 g. 1-3 g. 4-6 g. 1-2 g. 3 g. el. aldri pr.mnd pr. uke pr. uke pr. dag mer pr. 2-3 ganger Ca. 1 gang 2-3 ganger 4-7 gal	nger
^{dag} pr. måned i uka i uka <mark>i</mark> uka	8
Frukt	
Bær	
Ost (alle typer) Til dem som har drukket siste år:	
Poteter Når du har drukket, hvor mange glass eller drinker har du vanligvis drukket? Antall	
Ost (alle typer)	
Omtrent nyor mange ganger det siste	
aret har du drukket så mye som minst Antall 5 glass eller drinker i løpet av ett døgn? ganger	

BRUK AV HELSETJENESTER

Hvor mange ganger de <u>siste 12 måneder</u> har du selv brukt; (sett ett kryss for hver linje)

	Inge	n 1-3	ganger	4 eller fler	2						
Kommunelege/fastlege											
Spesialist											
Legevakt			П			BRUK AV HELSETJEN	NESTER	(fortset	telse)		
Sykehus innleggelse	П		ī				Meget	Fornsyd	Misformøyd	Meget	Vet
Hjemmesykepleie	Ē						fornøyd	Same Val		misfornøyd	ikke
Kommunal hjemmehjel	, <u> </u>					Legens språkbeherskel	se _			_	
Fysioterapeut			ö,			(samisk eller norsk)	П			\Box	
Kiropraktor	H		_ 7			Totalt sett, hvor fornøy	d				
HIS SHOULD SHOUL						eller misfornøyd er du med den kommunale					
Tannlege	느					legetjenesten?	П				П
Alternativ behandler						0 9		100			in the
Hvor <u>mange leger</u> har d	u selv	vært ho	s de siste	12 måne	der?	Hvor lenge er det side	n du va	ar hos le	ge sist? (angi i hele	tall)
(angi antall)						(år)		(måne	Come	0	
						(III)		(reare	uc//		
Har du fått tildelt navn	gitt fas	tlege?	☐ Ja		lei						
Når du er til undersøke	lse. hv	ilket spr	ak komi	muniserer	du	Dersom du noen gang hvilke har du brukt?				behandle	ere,
og legen på? (sett ett ell						☐ Helbreder (guvllár	leser, i	blåser, h	åndspåle	gger)	
☐ Norsk ☐ Samisk		Bruker to	olk [Annet s	orák	☐ Healer					
						Akupunktør				T	
Tror du det skjer noen	gang a	t du og l	legen mi	sforstår		Soneterapeut, hom	eonat.	kinesiol	og osv.		
hverandre p.g.a. språkli							сории	Michiga			
Aldri Sjelden	_ A	v og til	Oft	e 🔲 Us	ikker	Dersom du har benytt er det siden sist? (ang.			behandl	er, hvor le	enge
Dersom det er behov fo	or tolk	, synes d	lu at leg	en er flink	nok	(år)	111212	(måne	der)		
til å be om det?		North Towns				(di)		(manc	auce)		
☐ Ja, alltid ☐ Ja, s	om re	gel	☐ Nei	i, ikke allti	id						
		kke å bru				Tenk deg at du i dag s den kommunale helse hjemmehjelp, sosiale	og sos	ialtjene	sten (hjer	nmesykep	
Hvor fornøyd eller mist						- Trees 10 10 10 10 10 10 10 1					
ved den kommunale <u>leg</u> (sett ett kryss per linje)	getjene	esten i di	in boste	askommui	1ef	Vet du hvor du skal h		e deg?			
ised ed kryss per imjer						☐ Ja ☐	Nei		Usi	kker	
	Meget	Fornøyd I	Misfornøyd		Vet						
Avstand til legen	fornøyd			misfomøyd	ikke	Er du trygg på at du få		hvis du			
	4			السنا		☐ Ja	Nei		Usi	kker	
Legens tilgjengelighet på telefon						28 8 97 8				574	
EMIOSEOFE OF						Dersom du i dag får h sosial tjenesten, er du				helse- og	
Ventetid på legetime							Nei	u meu t	Usi	kker	
Tid inne hos legen		Ш	Ш				135-1			arc.	
Mulighetene for å få											
fortalt om dine plager		Ш	Щ		Ш	SKADER/ULYKKER					
Legens forståelse av din kulturelle bakgrunn						Har du vært utsatt for ling hos lege og/eller				førte beha	ınd-
Legens informasjon om						NAME OF THE PARTY] Ja [antall gar	nger
dine helseplager,						8- L	Joseph L			San Par	D-1
undersøkelse og behandlingsonnlegg						Sykehus innleggelse] Ja [Nei		antall gar	nger

SKADER/ULYKKER (fortsettelse)	ARBEIDSLIV/ØKONOMI (fortsettelse)
Hvis ja, hva slags ulykke(r) er du blitt behandlet for? (sett ett eller flere kryss pr. linje)	Kunne du tenke deg å flytte fra din bostedskommune der- som du fikk tilbud om arbeid et annet sted?
Arbeid Hjem Fritid Ingen	☐ Ja ☐ Nei ☐ Deler av året ☐ Usikker
Bil	
Motorsykkel	Dersom du er arbeidsledig, angi hvor lenge du har vært
Snøscooter	arbeidssøker: (angi i hele tall)
Firehjulssykkel	(år) (måneder)
Traktor	
Fallulykke	Dersom du er selvstendig næringsdrivende, hvilken type
Kuttskade	næring jobber du i? (sett ett eller flere kryss)
Annet	Reindrift Fiske Jordbruk Skogbruk
Har ulykkan(a) fort til nødeatt arheidenyng?	Forretningsvirksomhet Annet (spesifiser)
riai ulykkeii(e) ibit tii neusatt arbeiuseviie;	
☐ Helt ☐ Delvis ☐ Ikke i det hele tatt	Hvor mange personer bor det i din husstand?
FAMILIE OG SPRÅKBAKGRUNN	(antall personer)
	Hvor stor er familiens/husstandens bruttoinntekt per år?
I Nord-Norge bor det folk med ulik etnisk bakgrunn. Det vil	MANUFACTURE OF THE SECOND OF T
si at de snakker ulike språk og har forskjellige kulturer. Eksempler på etnisk bakgrunn, eller etnisk gruppe er norsk,	Under kr. 150 000 Kr. 150 000–300 000
samisk og kvensk.	Kr. 301 000–450 000 Kr. 451 000–600 000
I halfford become and the standards discontinuous body	☐ Kr. 601 000–750 000 ☐ Over kr. 750 000
Hvilket hjemmespråk har/hadde du, dine foreldre og beste- foreldre? (sett ett eller flere kryss)	
Norsk Samisk Kvensk Annet beskriv	Hvor ofte spiller du på ulike pengespill slik som lotto, tip- ping, spilleautomater og lignende?
Morfar:	ping, spineautomater og ngnende:
Mormor:	☐ Aldri/sjelden ☐ 1-3 ganger i mnd.
Farfar:	☐ 1 gang i uka ☐ 2-6 ganger i uka ☐ Hver dag
Farmor:	805 SEE 2012 D NEE 12 47 1929
Far:	Hvor mye spiller du for ukentlig i gjennomsnitt?
Mor:	☐ Under kr. 100 i uka ☐ Kr. 100-500 i uka
Jeg selv:	☐ Kr. 501–1000 i uka ☐ Over kr. 1000 i uka
270 2772	
Hva er din, din fars og din mors etniske bakgrunn?	
(sett ett eller flere kryss)	MOBBING
Norsk Samisk Kvensk Annet, beskriv	Med mobbing mener vi når en eller flere personer gjentatte
Min etniske bakgrunn er:	ganger sier eller gjør vonde ting mot deg, og du har vanske-
Fars etniske bakgrunn er:	ligheter med å forsvare deg.
Mors etniske bakgrunn er:	Har du vært utsatt for mobbing?
	☐ Ja, de siste 12 mnd. ☐ Ja, før ☐ Nei
Hva regner du deg selv som? (sett ett eller flere kryss)	
Norsk Samisk Kvensk Annet, beskriv	Dersom du har vært utsatt for mobbing, hvilken type mob-
() () () () () () () () () ()	bing er du blitt utsatt for? (sett ett eller flere kryss)
	☐ Baksnakking ☐ Ignorering
ARBEIDSLIV/ØKONOMI	☐ Diskriminerende bemerkninger ☐ Annet
Hvilken type arbeid/livsopphold har du? (sett ett eller flere kryss)	Kan du angi hvor dette foregår/foregikk?
☐ Fastlønnet, heltid ☐ Fastlønnet, deltid	(sett ett eller flere kryss)
☐ Sesongarbeid ☐ Selvstendig næringsdrivende	☐ På skolen ☐ På skoleinternat ☐ I yrkeslivet
☐ Arbeidsledig ☐ Hjemmeværende	☐ I lokalsamfunnet ☐ Annet
☐ Alderstrygd ☐ Utøretrygd	_ · · · · · · · · · · · · · · · · · · ·
Annet (beskriv)	

Antall hele timer Røykte noen av de voksne hjemme da du	8. RØYKING OG BRUK AV SNUS	10. UTDANNING OG ARBEID
Svænt godt Godt Dårlig dårlig	Hvor lenge er du vanligvis daglig i et røykfylt rom? Antall hele timer	
Bor du, eller har du bodd, sammen med noen A NE dagligrwykere etter at du fytle 20 årf		
Har du roykt/royker du daglig?	Bor du, eller har du bodd, sammen med noen A NEI dagligrøykere etter at du fylte 20 år?	nåværende arbeid eller inntekt de JA NEI
Sigaretter? Attioring Sosialhjelp/-stonad Overgangsstonad for enslige forsorgere Hvis du har roykt daglig tidligere, hvor lenge er det siden du sluttet? Antall år Hvor gammel var du da du fikk menstruasjon aller første gang? Alder i år Hvor gammel var du da du fikk menstruasjon aller første gang? Alder i år Hvor gammel var du da du fikk menstruasjon aller første gang? Alder i år Hvor gammel var du da du fikk menstruasjon aller første gang? Alder i år Hvor gammel var du da den sluttet? Alder i år Hvor mange år til sammen har du røykt daglig? Antall år Hvor mange år til sammen har du røykt daglig? Hvis du brukt/bruker du snus daglig? Hvor mange barn har du født? Antall barn Hvor mange år til sammen har du brukt snus? Antall år Hvor mange barn har du født? Antall barn Hvor mange år til sammen har du brukt snus? Antall år Hvor mange år til sammen har du brukt snus? Antall år Hvor mange har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange m	Har du røykt/røyker du daglig?	ANY COLUMN TO THE COLUMN TO TH
Sosialhjelp/stonad Overgangsstonad for enslige forsørgere Hvis du har røykt daglig tidligere, hvor lenge er det siden du sluttet? Antall år Hvor mange sigaretter røyker/røykte du vanligvis daglig? Antall år Hvor gammel var du da du glig sigaretter myker/røykte du vanligvis daglig? Antall år Hvor gammel var du da du begynte å røyke daglig? Antall år Hvor gammel var du da den sluttet? Alder i år Hvor mange barn har du født? Antall år Hvor dan født barn, fyll ut hvert barns fødselsår, og hvor mange år til sammen har du brukt snus, som sen fødselsår, og hvor mange år til sammen har du brukt snus, som sen fødselsår, og hvor mange mårneder du ammet ette fødselsår, og hvor mange mårneder du ammet ette fødselsår, og hvor mange år den skuttete fødselsår. Alder i år Hvis du har født barn, fyll ut hvert barns føds	Hvis du røyker daglig nå, røyker du: JA NEI	Sykepenger
Rulletobakk/rullings? Overgangsstsnad for enslige forsørgere	Sigaretter?	Attføring
Hvis du har reykt daglig tidligere, hvor lenge er det siden du sluttet? Hvis du royker daglig nå, eller har røykt tidligere: Hvor mange sigaretter røyker/røykte du vanligvis daglig? Antall år Hvor gammel var du da du fikk menstruasjon aller første gang? Alder i år Hvor gammel var du da den skuttet? Alder i år Fr du gravid nå? Ja Nei Usikker alder Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor mange måneder du ammet etter fødselen. Hvis du hruker/har brukt snus. hvor mange år til sammen har du brukt snus? Antall år 9. MOSJON OG FYSISK AKTIVITET Hvordan har din fysiske aktivitet i fritiden vært det siste året? (Tenk deg et ukentlig gjennomsnitt for året. Arbeidsvei regnes som fritid. Besvar begge sporsmålene) Tim er pr. u ke: Lett aktivitet logen Under 1 1-2 3 og mer (ikke vert/andpusten)	Sigarer/sigarillos/pipe?	Sosialhjelp/-stønad
Hvis du røyker daglig nå, eller har røykt tidligere: Hvor mange sigaretter røyker/røykte du vanligvis daglig? Antall sigaretter hvor mange sigaretter røyker/røykte du vanligvis daglig? Antall sigaretter hvor gammel var du da du begynte å røyke daglig? Antall sigaretter hvor gammel var du da den sluttet? Alder i år røykt daglig? Antall år hvor mange år til sammen har du røykt daglig? Antall år hvis du brukt/bruker du snus daglig? Hvis du hrukt/bruker du snus daglig? Hvis du bruker/har brukt snus, hvor mange år til sammen har du brukt snus? Antall år hvis du bruker/har brukt snus, hvor mange måneder du ammet etter fødselen. (Hvis du ikke ammet, skriv 0) 9. MOSJON OG FYSISK AKTIVITET 1. barn		Overgangsstønad for enslige forsørgere
Hvis du royker daglig? Antall sigaretter hvis du ikke lenger får menstruasjon, hvor gammel var du da du begynte å røyke daglig? Alder i år Hvis du ikke lenger får menstruasjon, hvor gammel var du da den sluttet? Alder i år røyke daglig? Hvor mange år til sammen har du røykt daglig? Hvor mange år til sammen har du røykt daglig? Hvor mange år til sammen har du røykt daglig? Hvor mange år til sammen har du røykt daglig? Hvor mange år til sammen har du røykt daglig? Hvor mange barn har du født? Antall barn Hvis du bruker/har brukt snus, hvor mange måneder du annmet etter fødselen. Hvis du bruker/har brukt snus, hvor mange nåneder du annmet etter fødselen. Hvis du bruker/har brukt spess passer best Hvis du ske ammet, skriv 0) Barn: Fødsekår: Antall år Hvis du ikke ammet, skriv 0) Barn: Fødsekår: Antall år Lørn: Lørn	Hvis du har røykt daglig tidligere, hvor	11. RESTEN AV SKJEMAET SKAL BARE BESVARES AV KVINNER
Hvis du bruker/har brukt snus, hvor mange år til sammen har du brukt snus? Antall år 9. MOSJON OG FYSISK AKTIVITET Hvordan har din fysiske aktivitet i fritiden vært det siste året? (Tenk deg et ukentlig gjennomsnitt for året. Arbeidsvei regnes som fritid. Besvar begge sporsmålene) Ti m er pr. u k e: Lett aktivitet lngen Under 1 1-2 3 og mer (likke svett/andpusten)	Hvor gammel var du da du begynte å røyke daglig? Alder i år Hvor mange år til sammen har du røykt daglig? Antall år	menstruasjon aller første gang? Alder i år Hvis du ikke lenger får menstruasjon, hvor gammel var du da den sluttet? Alder i år Er du gravid nå? Over fruktbar Ja Nei Usikker alder 1 1 2 1 4 Hvor mange barn har du født? Antall barn Hvis du har født barn, fyll ut hvert barns fødselsår, og hvor
### Barn: Fodselsår: antall mnd: 9. MOSJON OG FYSISK AKTIVITET	Hvis du bruker/har brukt snus, hvor	(Hyis du ikka ammat skriv ())
9. MOSJON OG FYSISK AKTIVITET Hvordan har din fysiske aktivitet i <u>fritiden</u> vært <u>det siste</u> <u>året</u> ? (Tenk deg et ukentlig gjennomsnitt for året. Arbeidsvei regnes som fritid. Besvar begge spørsmålene) Timer pr. uke: Lett aktivitet lingen Under 1 1-2 3 og mer (likke svett/andpusten)	mange år til sammen har du brukt snus? Antall år	
9. MOSJON OG FYSISK AKTIVITET Hvordan har din fysiske aktivitet i <u>fritiden</u> vært <u>det siste</u> <u>året</u> ? (Tenk deg et ukentlig gjennomsnitt for året. Arbeidsvei regnes som fritid. Besvar begge spørsmålene) Timer pr. uke: Lett aktivitet lingen Under 1 1-2 3 og mer (likke svett/andpusten)	700	1 barn
Angi bevegelse og kroppslig anstrengelse i din fritid. Hvis aktiviteten varierer meget f. eks. mellom sommer og vinter, så ta et gjennomsnitt. Spørsmålet gjelder bare det siste året. (Sett kryss i den ruta som passer best) Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse? Spasserer, sykler eller beveger deg på annen måte minst 4 timer i uka? Ostrogen (krem eller stikkpiller) Ostrogen (krem eller stikkpiller) Ostrogen (krem eller stikkpiller) Ostrogen; hvilket merke bruker du? Ospesifiser:	9. MOSJON OG FYSISK AKTIVITET	Tr Dartis
Lett aktivitet Ingen Under 1 1-2 3 og mer (likke svett/andpusten)	Hvordan har din fysiske aktivitet i <u>fritiden</u> vært <u>det siste</u> <u>året</u> ? (Tenk deg et ukentlig gjennomsnitt for året. Arbeidsvei regnes som fritid. Besvar begge spørsmålene)	
Hard fysisk aktivitet (Svett/andpusten)	Lett aktivitet Ingen Under 1 1-2 3 og mer	
Angi bevegelse og kroppslig anstrengelse i din fritid. Hvis aktiviteten varierer meget f. eks. mellom sommer og vinter, så ta et gjennomsnitt. Spørsmålet gjelder bare det siste året. (Sett kryss i den ruta som passer best) Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse? Spaserer, sykler eller beveger deg på annen måte minst 4 timer i uka? (Regn også med gang eller sykling til arbeidsstedet, søndagsturer m.m.) Driver mosjonsidrett, tyngre hagearbeid e.l.? (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett Bruker du, eller har du brukt? (Sett ett kryss for hver linje) Nå Før, men ikke nå Før, men ikke nå Før, men ikke nå Før, men ikke nå Før, men okldri ikke vanlig spiral) Ostrogen (tabletter eller plaster) Ostrogen (krem eller stikkpiller) Hvis du bruker/har brukt reseptpliktig østrogen: Hvor lenge har du brukt dette? Antall år Hvis du bruker p-pille, minipille, p-sprøyte, hormonspiral eller østrogen; hvilket merke bruker du? Spesifiser:	[Handle Frankle	5, barn
Aldri aktiviteten varierer meget f. eks. mellom sommer og vinter, så ta et gjennomsnitt. Spørsmålet gjelder bare det siste året. (Sett kryss i den ruta som passer best) Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse? Spaserer, sykler eller beveger deg på annen måte minst 4 timer i uka? (Regn også med gang eller sykling til arbeidsstedet, søndagsturer m.m.) Driver mosjonsidrett, tyngre hagearbeid e.l.? Trener hardt eller driver konkurranseidrett Aldri ikke nå Før, men op ikke nå Før, m	(Svett/andpusten)	(Hvis flere barn, bruk ekstra ark)
aktiviteten varierer meget f. eks. mellom sommer og vinter, så ta et gjennomsnitt. Spørsmålet gjelder bare det siste året. (Sett kryss i den ruta som passer best) Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse? Spaserer, sykler eller beveger deg på annen måte minst 4 timer i uka? Driver mosjonsidrett, tyngre hagearbeid e.l.? (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett Aldrikke nå Fer, men kleft minst fragen ikke nå Fepille/minipille/p-sprøyte	Angi bevegelse og kroppslig anstrengelse i din fritid. Hvis	
Sa ta et gjennomsnitt. Spørsmålet gjelder bare det siste året. (Sett kryss i den ruta som passer best) Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse? Spaserer, sykler eller beveger deg på annen måte minst 4 timer i uka? (Regn også med gang eller sykling til arbeidsstedet, sondagsturer m.m.) Driver mosjonsidrett, tyngre hagearbeid e.l.? (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett P-pille/minipille/p-sprøyte. Hormonspiral (ikke vanlig spiral) Strogen (tabletter eller plaster) Strogen (krem eller stikkpiller) Strogen (kr	aktiviteten varierer meget f. eks. mellom sommer og vinter,	
Hormonspiral (ikke vanlig spiral)	så ta et gjennomsnitt. Spørsmålet gjelder <i>bare det siste året</i> .	***
Leser, ser på fjernsyn eller annen stillesittende beskjeftigelse?	(Sett kryss i den ruta som passer best)	
Spaserer, sykler eller beveger deg på annen måte <u>minst 4 timer i uka?</u> (Regn også med gang eller sykling til arbeidsstedet, søndagsturer m.m.) Driver mosjonsidrett, tyngre hagearbeid e.l.? (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett Ostrogen (krem eller stikkpiller)	Leser, ser på fjernsyn eller annen	
Spaserer, sykler eller beveger deg på annen måte <u>minst 4 timer i uka?</u> (Regn også med gang eller sykling til arbeidsstedet, søndagsturer m.m.) Driver mosjonsidrett, tyngre hagearbeid e.l.? (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett Hvis du bruker/har brukt reseptpliktig østrogen: Hvor lenge har du brukt dette? Antall år Hvis du bruker p-pille, minipille, p-sprøyte, hormonspiral eller østrogen; hvilket merke bruker du? Spesifiser:	stillesittende beskjeftigelse?	
Driver mosjonsidrett, tyngre hagearbeid e.l.? 3 (Merk at aktiviteten skal vare minst 4 timer i uka) Trener hardt eller driver konkurranseidrett Trener hardt eller driver konkurranseidrett	Spaserer, sykler eller beveger deg på annen måte <u>minst 4 timer i uka</u> ?	Hvis du bruker/har brukt reseptpliktig østrogen:
Trener hardt eller driver konkurranseidrett Spesifiser:	Driver mosjonsidrett, tyngre hagearbeid e.l.?	
Irener hardt eller driver konkurranseidrett		Spesifiser:
regenitessig og <u>nere ganger i ukar</u>		SAME COMPANY OF THE SAME OF TH
	regenitessig og <u>nere ganger i ukas</u>	

- ŋ	LEVEKÅRSUNDERSØKELSEN
P.I.J. Dato for utfylling: Dag Måned År	Takk for fremmøte til helseundersøkelsen. På denne måten har du bidratt til å skaffe ny viten om helse og leve kår i områder med samisk og norsk bosetting. Hoved formålet med undersøkelsen har vært å skaffe ny viten on hjerte- kar sykdommer for å kunne forebygge dem. I til legg skal undersøkelsen gi oss kunnskap om andre syk dommer og plager slik at vi kan lage en oversikt over folkhelse i fylket. Vi ber deg derfor svare på noen spørsmå om forhold som kan ha betydning for disse og andre syk dommer.
	Det utfylte skjemaet sendes i vedlagte svarkonvolutt
	Portoen er betalt. På forhånd takk for hjelpen! Med vennlig hilsen: Senter for samisk helseforskning og Nasjonalt folkehelseinstitutt
1. SYMPTOMER	Hvor ofte pleier middagen å inneholde:
Hoster du omtrent daglig i perioder av året?	Alchiv 1 pr. 2-3 pr. 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 1 pr. 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 2 pr. 3 pr. 4 pr. 5+ 1 pr. 5 pr. 4 pr. 5+ 1 pr. 5 pr.
3 måneders periode i begge de to siste år? Hender det at du er plaget av søvnløshet?	Kjøtt (helt, oppmalt)
Hvis ja, når er du mest plaget av søvnløshet?	Hvor ofte spiser du kokt torsk og sei til middag?
Sett ett eller flere kryss Hele året Vår Sommer Høst Vini Har du det siste året vært plaget av søvnløshet A Ni	Torsk (f.eks. fersk, lettsaltet, røkt, bokna)
slik at det har gått ut over arbeidsevnen?	Sei (f.eks. fersk, bokna)
Er du stort sett fornøyd med tilværelsen? Meget fornøyd Ganske fornøyd Litt misfornøyd Meget misfornøyd	Hvor ofte spiser du annen kokt fisk til middag? Aldri 1-5 6-11 1 pr. 2-3 pr. 1 pr. 2+ pr. pr. år pr. år mnd. uke uke Fete fiskeslag
Hender det at du i lengre perioder – A NI i minst 14 dager- er trist og nedfor?	Magre fiskeslag
Har du i de siste 14 dager følt deg ute av stand til å takle dine vanskeligheter?	Hvor ofte spiser du stekt fisk til middag?
□ Nei □ Av og til □ Ofte □ Nesten hele tiden	Aldri 1-5 6-11 1 pr. 2-3 pr. 1 pr. 2+ pr.
Hender det at du føler deg ensom? ☐ Nei ☐ Av og til ☐ Ofte ☐	pr. år pr. år mod. mnd. uke uke Fete fiskeslag
2. KOSTHOLD NÅ	Magre fiskeslag
Vi vil gjerne spørre deg om hvor ofte du pleier å spise enkelte matvarer. Tenk på gjennomsnittet det siste året. <u>S</u> ett kryss pr. linje for antall ganger. Hvis du ikke husker ne aktig, fyll ut så godt du kan.	(f.eks. stekt sei, torsk, abbor, gjedde, harr) ett
Hvor mange ganger i uken pleier	Fiskekaker/boller/ pr. år pr. år mnd. mnd. uke uke
du â spise middag? Antall ganger	pudding
	plukkfisk
	panert fisk

Hvor ofte spiser du fiske	påleg	g?					Hvor ofte spise								
Aldri Speket/saltet fisk	1-11 pr. år	1 pr. mnd.	2-3 pr. mnd.	1-2 pr. uke	3-4 pr. uke	S+ pr. uke	En gang tilsvan sjon middag, 1 du spiste friske	pors	jon d						-
Røkt fisk							Molter:		Aldri	1-5 pr. år	6-11 pr. år	1 pr. mnd.	2-3 pr. mnd	1-2 pr uke	3+ pr. uke
Nedlagt sild							Friske, frosne, i	rørte							
Kaviar							Kokt/kjøpt sylte	etøy							
Annet fiskepålegg		Ш	Ш	Ш	Ш		Tyttebær:								
Hvor mange ganger pr. a	år spise	er du 1-3	fiskeir 4-6	nnmat	10+	\perp	Friske, frosne, i Kokt/kjøpt sylte								
Fiskelever							Blåbær:								
Rogn							Friske, frosne, i								
Hvor ofte spiser du følge	ende r	etter?					Kokt/kjøpt sylte	-							
Aldri		6-11 pr. år	1 pr. mnd.	2-3 pr. mnd.	1 pr. uke	2+ pr. uke	Saft Krøkebær:				Ш	Ш			Ш
Pizza 🔲							Friske, frosne .								
Spagetti, pastaretter 🗌							Saft								
Hamburger i brød 🔲															
Kjøttkaker/ karbonader							Hvordan pleier eget bruk? (Sett					affe fø	slgende	e råva	rer til
Pølser							Sp	iser	Helt	E)eivis	Kjøper	Kjøp	er B	ytter
Gryterett							ele	dri/ elden	selv- forsy		elv- orsynt	i butik	priva	nt e	ller får
Hvor ofte spiser du rent steik, grytekjøtt, biff, filet		til mic	ldag (i	f.eks. k	oteleti	ter,	Kjøtt:			_]				
Aldri		6-11	1 pr.	2-3 pr.		2+ pr.	Sau								
Kylling	pr. år	pr. år	mnd.	mnd.	ukę	uke	Elg Fisk:]							
Svin							Ferskvann	1	\Box	ſ	٦		\Box	Г	٦
Okse/storfe							Saltvann]		Ē					
Sau/lam							Bær:								
Elg							Molter]							
Hval		\sqcup	Ш				Tyttebær								
Hvor mange egg fra sjøfe															
Antall egg	1-3	4-6	7-9	10+	Т		Hvor ofte pleie		å jak Aldri	te, fis Sjek	_	•	e bær? I Mye		ien
Hvor ofte spiser du kjøtt	av rei	in?					Jakte rype/småv		_						
Aldri	1-11 pr. år	1 pr. mnd.	2-3 pr. mnd.	1 pr. uke	2 pr. uke	3+ pr. uke	Jakte storvilt	_							
Kokt reinkjøtt 🗌							Fiske Plukke bær	[
Stekt reinkjøtt (helt, skavet, oppmalt)								·							
Røkt reinkjøtt 🗌							Hvor ofte har o	du en	ict at	hove	dmålt	id fea	ditt be	shold	
Tørket reinkjøtt							jakt/fiske siste	år?							
Hvor ofte spiser du andr	e mat	varer	av rei	n?					Aldri	1-5 pr. år	6-11 pr. år	1 pr. mnd.	2-3 pr. mnd.	1 pr. uke	2+ pr. uke
Aldri	1-5 pr. år	6-11 pr. å	n mi		3 pr. 1- nd. ul	+ pr. ke	Hovedmåltid ja								
Blodmat av rein							Hovedmåltid fi	3AC	ليا	LI	أسما	لسا	L.J		لسا
Margbein				_	_	_					1				
Reintunge					_	_									
Reinlever						_									

3. KOSTHOLD I OPPVEKSTEN	4. NATTSPISING					
Tenk på maten du fikk hjemme før du flyttet for deg selv. Hvis du bodde mesteparten av året på skoleinternat, tenk på maten du fikk der.	Våkner du ofte opp for å spise etter at du har lagt deg om kvelden?					
pa materi du ma des.	Hvis «ja», besvar de neste 4 spørsmålene:					
Bodde du på internat (statsinternat eller privat) da du gikk på barne- og ungdomsskolen?	Når har du oftest plagene? (Sett ett eller flere kryss) Hele året Vår Sommer Høst	☐ Vinter				
☐ Ja, ungdomsskolen ☐						
☐ Ja, barneskolen	Hva spiser du om natten? (Sett ett eller flere kryss)					
Ja, både barne- og ungdomsskolen	☐ Kjøtt ☐ Brødmat ☐ Godteri ☐	Annet				
☐ Nei, ingen av delene	Spiser du mer enn halvparten av døgnets	JA NE				
Hvis ja, hvor mange klassetrinn?	matmengde etter kl. 20 om kvelden?					
Hvor lenge var du på internat i snitt for hvert klassetrinn?	Er andre i familien plaget med nattspising? JA NEI VET IKKE					
☐ 1-3 mnd. ☐ 4-6 mnd. ☐ 7-9 mnd.						
		JA NE				
Hvor ofte spiste du fisk og reinkjøtt i oppveksten?	Har du skiftarbeid, nattarbeid eller går vakter?					
Aldri 1-11 1 pr. 2-3 pr. 1-2 pr. 3-4 pr. 5+ pr. pr. år mnd, mnd, uke uke uke	5. OPPVEKST, FAMILIE OG VENNER					
Kokt/stekt fisk	I hvilken kommune har du bodd lengre enn ett år? Kommune:					
жеткрес	1. Fødested: fra 0 år til	år				
William William William William	2 fra år til	år				
Hvor ofte spiste du andre matvarer i oppveksten?		di				
Aldri 1-11 1 pr. 2-3 pr. 1 pr. 2 pr. 3+ pr. pr. år mnd. mnd. uke uke uke	3fra år til	år				
Blodmat	4fra ar til	år				
Sauekjøtt	5 fra år til	år				
Kjøttkaker, pølser	(Hvis du har bodd i flere kommuner, bruk eget ark.)					
Fiskemat	in society and any angular state of the state of the society of the society	JA NE				
Fiskelever og rogn	Bor du sammen med ektefelle/samboer?					
Grøt, pannekaker						
CONTROL OF THE STATE OF THE STA	Har du delt eller daglig omsorg for	JA NEI				
Fikk du medisinsk tran i oppveksten?	Barn?					
	Foreldre/andre?	- Ц Ц				
Fikk du servert tran til for eksempel fisk (i stedet for annet fett)?	Hvor mange gode venner har du? (De som du kan snakke fortrolig med og som kan gi deg hjelp dersom du trenger det. Tell ikke med de du bor sammen med.) Antall venner					
Hvor ofte spiste du ville bær og planter i oppveksten?	TARREST VALUE OF SHORINGS THESE					
Aldri 1-5 6-11 1 pr. 2-3 pr. 1-2 pr. 3+ pr.	Er du tilknyttet noen av de følgende menigheter/tro funn: (Sett ett eller flere kryss)	ssam-				
pr. år pr. år mnd. mnd uke uke	☐ Medlem i statskirka					
Ville bær	☐ Den Læstadianske menighet —					
Syregress	Annen menighet					
Kvann	☐ Ikke medlem av noen menighet					
Er maten du spiser nå, forskjellig fra det du fikk i oppveksten?	Føler du at du kan påvirke det som skjer i lokalsam der du bor? (Sett bare ett kryss)	funnet				
□ Nei	☐ Ja, i stor grad					
Litt forskjellig						
☐ Ganske forskjellig ⊥	☐ Ja, en del					
☐ Veldig forskjellig	☐ Ja, i liten grad					
L. result totallenig	☐ Nei					
	☐ Har ikke forsøkt					

6. VERDITILI	CNYTNING			Synes du at	bevaring av typ	iske samiske n	æringer er viktig?
TIL ALLE:				Meget viktig	y Viktig □	Lite viktig	Helt uviktig
Er det viktig fo	r deg å ha ko	ntakt med nat	uren?	Er utviklinge	en av det moder	ne samiske sk	oleverket viktig for
Meget viktig	Viktig	Lite viktig	Helt uviktig	deg? Meget viktig		Lite viktig	Helt uviktig
Er utnytting av viktig for deg?		nom fiske, jak	t og bærplukking	Meget Vikite	, VIKING		
Meget viktig	Viktig	Lite viktig	Helt uviktig		for deg at sam v moderne arbe		ınn bør få et stør-
Er bevaring av	slekts- og far	u milietradisjoner	r viktig for deg?	Meget viktig	; Viktig □	Lite viktig	Helt uviktig
Meget viktig	Viktig	Lite viktig	Helt uviktig	Hva betyr s	amiske media (r	adio, TV, avise	r, bøker) for deg!
	tniske (samis		er diskriminert på isk, tamilsk, norsk,	Meget stor betydning	Stor betydning	Liten betydning	Ingen betydning
Svært mange g	anger Noer	ganger En sj	elden gang Aldri	Hva betyr n og teater) fo		kunst (billedku	ınst, musikk, film
Tror du at disk negative helse			iteter kan ha	Meget stor betydning	Stor betydning	Liten bctydning	Ingen betydning
I stor grad I	noen grad	I liten grad	Absolutt ikke				
Ď		ο̈́			r du på at samis sterkere interna		kultur med årene ?
Føler du deg p	resset ut av n noen grad	æringen din? I liten grad	Absolutt ikke	Meget viktig	Viktig	Life viktig	Helt uviktig
		-	TE	Hva betyr S	ametinget for d	eg?	
7. TIL DEM N	NED SAMISK	BAKGRUNN:		Meget stor betydning	Stor betydning	Liten betydning	Ingen betydning
Fr samiske kles							
Meget viktig	Viktig	Lite viktig	Helt uviktig		ı forurensning a din samiske tilv		i naturen som en
Hvilken betydr	ning har duoc	lji for deg?		I stor grad	I noen grad	I liten grad ☐	Absolutt ikke
Meget stor	Stor	Liten	Ingen			ne / .	
betydning	betydning	betydning	betydning	kulturen?	den moderne ut	viklingen fortr	enger den samiske
ш		[5]	Ш	I stor grad	I neen grad	I liten grad	Absolutt ikke
Hva betyr beva deg?	ring og utvik	ling av det sam	iske språket for				
Meget stor betydning	Stor betydning	Liten betydning	Ingen betydning				NATI
				HITCH	Å POSTLEG	R HJELPEN	
Er det viktig fo kan møte andr		et lokalsamfunr	n der du daglig	HUSK	A FUSILES	IGE SKJEN	AETTDAG!
Meget viktig	Viktig	Lite viktig	Helt uviktig				15/2-1
							T

 \top

DEARVVASVUOÐA -JA EALLINDILLE-ISKKADEAPMI

Bovdehus

1. DU DEARVVASVUOHTA	Baikkátgo soames áiggiid golmma dahje eanet JUO IN geardde beaivái?
Mo lea du dearvvasvuohta dál? (Russe dušše oktii) Heittot I li nu buorre Buorre Hirbmat buorre	Lastes elles in an Estillia (Estilado es
Ahki Leago dus, dahje leago dus leamaš? vuosttas	Leago earáin bearrašis seamma dávdamearkkat? Eatnis Áhčis Oappás/vieljas Mánáin li ovttasge
JUO II geardde	
Astma	4. EARÁ GIVSSIT
Bistevaš bronkihtta/emfysema/KOLS	
Diabetes (sohkardávda)	Vulobealde lea listu iešguđet váttisvuođain. Leatgo <u>manimu</u> <u>vahku</u> dáin ovttage dovdan (otnáš rádjai)? (Russe juohke givssi buohta) Veahss
ibromyalgia/bistevaš bávččassyndroma	li giksa- giksa- Hirbma Suvvan Suvvan Olu olu
sykalaš váttut maidda leat jearran veahki 🔲 📗	Fáhkka ballu ákka haga 🗌 📗 🔲
Váibmodohppehat (váibmohávvi)	Dovdan balu dahje árgodaga 🗌 👚 🔲
Angina pectoris (váibmogeasáhat)	Skurvvas dahje oaivejorran
Vuoiŋŋašgáldnanvihki/vuoiŋŋašvardin	Dovdan iežat čavgen dahje huššas \
Multippel sklerose (MS)	Álki iežat sivahallat
doubles And a visit statute a micro Manies Connect that a control to a fact that the first of th	Oaddinváttisvuodat
Ulcerøs kolitt	Hurvvas, lossamiella
Bávččagastágo dahje unohastágo rattis go:	Dovdan leat ávkemeahttun, unnán árvvus
Goarkŋut milliid, ráhpáid dahje váccát JUO II	Dovdan ahte visot lea lossat
ođánit dulbohagas? 🔲 🔲	DOVIGEN CAMPEGORITY OF
Sáhttágo ná bávččastit vaikke it lihkat? 🔲 🔲	boahtteáiggi ektui 🗌 🔲 🔲
	Jurddašan loahpahit eallima 🔲 📗 🔲
2. DEAHKKE- JA DÁKTERIGGEGIVSSIT	T
Leatgo <u>manimus jagi</u> váivašuvvan bákčasiiguin	5. BEARRAŠIS DÁVDDAT
ia/dahje stirdun dehkiiguin ja lađđasiiguin mii JUO IN lea bistán <i>uhcimusat 3 mánu</i> oktilaččat?	Leago ovttas dahje mángasis du váhnemiin IN dahje oappáin/vieljain leamaš váibmo- JUO II DIEĐ
Ahki Loogo dus goossigo komoži	dohppehat dahje angina pectoris?
Leago dus goassige leamaš: JUO II háve	Russe daid fulkkiid buohta geain lea dahje lea leamaš muh-
Doddjon giehtalađas/giehtadieiggus? 🗌 📗	tun dáid dávddain ja almmut sin agi goas ožžo dávddaid. (Jus eanet oappát/vieljat, čále su gii áramusat eallimis dan
Doddjon noras?	oaččui) Ahki
estaspentum monopelistica est un consequence consiste a consequence consequenc	Eadni Átičči Oabbá Viellja Mánná li oktage vuosttas Váibmo- geardde
3. ČOAVJE- JA ČOALLEDÁVDAMEARKKAT	dohppehat ovdal
Leago dus leamaš čáhcečolohagat,	60-jagi agi
čottaboalddáhat dahje raddeboalddáhat JUO 11	Váibmo-
masá beaivválaččat uhcimusat vahku?	dohppehat mannil 60-jagi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Leatgo dus goassige leamaš čoavjjis bákčasat	
dahje várka mii lea bistán uhcimusat 2 vahku? 🗌 🔲	
lus JUO, gokko čoavjjis dovdojit bákčasat? (Russe oktii)	Vuoiŋŋas- gáldnanvihki 🔲 🔲 🔲 🔲 🔲
Bajit oasis Vuolit oasis Miehtá čoavjji	
Dovdojitgo bákčasat dahje «várka» jámmat? (Russe oktii)	Astma
☐ Bistá ain vahkuid ☐ Bistá ain mánuid ☐ Čađat	Gassačoalle- borasdávda
Giksašuvatgo dávjá baggamiin, čoavješnjoarra- JUO IN	
miin dahje hirbmat buoskkuhemiin?	
Leago du baika dábálaččat: (Russe oktii dahje moddii)	Manneráksa- borasdávda
□ Dábálaš □ Njárbat □ Garas ja gágirlágan	
☐ Vurohagaid garas ja njárbat ☐ Guohca	Galle oappá/vielja leat dus? Vielja Oappa

6. DÁLKASIID GE	AVAHEAPA	AI .				Makkár vuoja						
Dálkasiiguin oaivvi	ildat dás an	otebk:	as oston i	dálkasi	id.		In geavat	Mejeri (vuoja mar		ipma/geal margariin	CAN THE PARTY	jjuid Eará
Biebmolasáhusat ja						Láibbi alde					[
Geavahatgo?			vdal, muhto	o in dál	In goassige	Borramuš-						
Dálkasa alla varrad						ráhkadeamis .			3	4	Į.	5 6
Kolesterolgeahpede		7				Geavahatgo d	áid biel	bmolasáhu	ısaid:			
dálkasa Insuliinna	L	=			H				Juo,		Soames	
Tableahtaid sohkare	dávdii Γ	=	Н		H				beaivvál	áččat	háve	In
rabicantara sorikan	Juvon [200				Trána, tránatal	oleahtai	d				
Man dávjá leat ma (Russe oktii juohke linn)		hkus g	eavahan	dáid d	álkasiid?	Guollevuodjat	ableah	taid (omega	3)			
500	In	atnán animuš	Hárvebut go juohke	Juohke vahku,	Beaivvá- laččat	Vitamiidna/mi	nerálala	asáhusaid				
T	4	vahku	vahku	muhto i		Man olu jugat	dábála	ččat dáin:	(Russe o	ktii juoh	ke linnjá	s)
ps. ss	Jen :			beaivvá laččat	-	Production Charles on Baselino		Hārve/	1-6	1	2-3	4 gl.
Bávččasvuogiheado reseptta haga		1				1 <u>24 (2</u> 1)		in goassige		glása	glása	dahje
		1	اسا	Ч	Ц	20 100			vahkkui	beaivái	beaivái	eanet beaivăi
Bávččasvuogiheado resepttain		1				Ollesmielkki,		-				Licaryan
						yoghurta						
Oađđendálkasiid	SCORE PRINTS OF THE	0.0				Geahppamiell			35	35	92 10	52-37
Ráfohandálkasiid .	_	-				geahppa yogh						
Dálkasiid hurvvi vu	iostá					Skummamielk	ki					
Eará dálkasiid resep	ottain 🗌					(suvrra, čielga)					
	1		1	3	*	Liigegeahppan	nielkki					
Daid délleaciidda m	aid lost my	con b	siébost a		žironeža	Šaddomáihlli .						
Daid dálkasiidda m ja maid leat atnán				uuvtu	cuoggas	Čázi						П
ja maio icat aman	marjunas 4	Varia	40			Bruvssa/Cola s			\Box	Η		
Bija nama ja mann								The same of	_			
dahje dávdamearka	a): (Russe dasa	man g	uhkā leat o	lálkasa g	eavahan)	Sohkkarhis bru	JV5Sa/C	ola 🗌		П		
				Man gu	hká?			1	2	3	*	5
	1		-	1930	A3 22	Galle gohpa g	áfe dah	ie deaia i	ugat bea	nivái?		
Dálkasa namma:	Manne gea	vahan		Gitta 1 jagi	Jagi dahje	(Bija 0 daid šlájai					Gall	le gohpa
(Ovtta nama juohke linnjäi)	dālkasa:			, 1-6	guhkit							
94 19			Į.			Filttargáfe						
	Î			П		20 AND 12						
	1		-	n		Vuoššangáfe/d	eattagie	evnni				
						F 2 27						
	4			ᆜ	- Ц	Eará gáfe						
						Deaja	20000000					
Jus dás ii leat doarvá i sa	ndji, de sáhtát j	joatkit e	eará báhpái	rii, maid	de bijat							
mielde.						Sullii man dáv	já leat	maŋimus	jagi juhl	kan all	cohola?	
7. BORRAMUŠ JA	TURKAMI	ıč				(Geahppavuolla ji	a alkohol	lahis vuolla i	i lohkko)			
7. BURKAMUS JA	LIUTKAM	13				In goassige	In juhk	an H	lui moatti		Sull	lii oktii
Man dávjá borat da		áid bo	orramuša	id?		juhkan alkohola	maŋim		áve maŋīr	nuš jagi	mái	nnuī
(Russe oktii juohke linn ₎	jás)				7.	1	2	_	3			4
					3 g. dahje	2-3 geardde	Su. okt	ii 2	-3 geardd	e	4-7	geardde
	rve/ 1-3 g.		g. 4-6 g.		eanet	mānnuī	vahkku		ahkkui			kkui
in go	assige männui	vahkl	kui vahkku	i beaivá	i beaivái	5	6] 7			8
Šattuid						Sidjiide geat le	eat juhl	an manin	nus jagi:			
Murjjiid						Go leat juhkai						
Vuosttá (buot šlájaid)						drinkka leat d	ábálač	at juhkan	?		Galle	
Buđehiid	7 0		(Register			Sullii gallii ma	nimus	iagi leat iı	ıhkan			
		-	-	100		nu olu go uho						
Vuššon ruotnasiid[drinkka jándo		0			Gallii	
Varas ruotnasiid/		,				Co lugat luga	tao dal	la dábála	čat2 m	seem which	deli	and days
saláhta	1 2	3		5	4	Go jugat, juga Vuola				olliviir	100	JG(GH)

DEARVVASVUOĐABÁLVALUSAID GEAVAHEAPMI

Gallii leat maņimus 12 mánus ieš geavahan:

(russe oktii	juohke	linnjás)
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1	n oktiige	1-3 gear	dde 4 dahj	e eanet						
Gielddadoaktára/fástadoaktára]						
Spesialistta	- 🗆									
Doavttervávtta	П	П	Г	1	DEARVVASVUOĐABA	ÁLVALI	JSAID C	EAVAH	IEAPMI (jo	atkka
Buohccevissui sisačállima				1	7		Duhtavaš	Duhta-	Hirbmat	In
Ruovttubohccedivššu		П	Ē	1	137	duhtavaš		meahttun	duhtameahttur	diede
Gieldda ruovttuveahki				1	Doaktára giellamáhttu					
Fysioterapevtta	2107		_	1	(sámegiella dahje dárogiella)					
Kiropraktora	20.00			-	darogicna)		-			-
Bátnedoaktára	11012		_	1	Oppalohkái, man					
Molssaevttolaš dálkkodeaddji				-	duhtavaš dahje duhtameahttun leat					
Moissaevitolas uaikkodeaduji				1	don gieldda doavtter-					
Galle doaktára luhtte leat ieš l	eamaš n	naŋimus	12 mánu	?	bálvalusain?					
(almmut galle)										
Leatgo ožžon namahuvvot fás	tadoakt	ára? 🗀]Juo 🔲	ln	Man guhká lea dassá g (almmut olles loguin)	o mani	mus fitn	et doak	tára luhtte	?
Go leat iskkadeamis, makkár gi (russe oktii dahje máŋgii)	llii gulal	hallabeah	ntti <mark>doa</mark> kt	áriin?	(jagi)		(mánu)		
☐ Dárogillii ☐ Sámegi	Hii	☐ Gev	ahan du	lkka				1 . 1		82
☐ Eará gillii		GOV:			Jus goassige leat geava geaid leat geavahan?					1,
Jáhkátgo ahte doai doaktáriin	eahppi	áddehala	a giella-		Guvllára (lohkki, b					
váttisvuođaid geažil?	NAME OF THE OWNER, THE	. 100	2000		☐ Healera					
☐ Ean goassige ☐ Hárve	☐ Duo	ollet dålle	e [] D	lávjá	☐ Akupunktora					
☐ Eahpesihkar					Soneterapevtta, hor	meopat	a, kinesi	ologa ji	na.	
Jus dárbbašuvvo dulka, leago čeahppi dan bivdit?	doavttir	du miel	as doary	ái	Jus leat geavahan mols	saevtto	olaš dálk	odeadd	ii de goas	lei
🔲 Juo, álohii 🔲 Juo, dábál	aččat	🗌 li ál	ohii		manimus? (almmut ol		iin)		in or boar	
☐ li goassige ☐ In liiko du	lkka gea	avahit			(jagi)		(mánu)			
Man duhtavaš dahje duhtame doavtterbálvalusa čuovvovaš (russe oktii juohke linnjás)					Jurddaš mat ahte dál d vuođa- ja sosiálbálvalu tuveahkis, sosiála bálv	isas (ru	ovttubu	ohcced	ivššus, ruov na.)	
Hirbmat	Duhtavas	Duhta-	Hirtimat	In	Dieđátgo geainna galg	gat válo	dit oktav	uođa?		
Doaktára lusa gaska		meahttun d	luhtameahtti.	in diede	☐ Juo ☐	In		☐ Ea	hpesihkar	
Doaktåra fidnet	ш	l-md			Leatgo oadjebas ahte o	vaččut	voahki ir	us dan a	dárbbačat?	
telefovnnas	П			П		In	vealiki ji		hpesihkar	
Vuordináigi doaktára		-	-					Ш са	презника	
lusa					Jus dál oaččut veahki g valusas, leatgo duhtav			svuođa	- ja sosiálb	ál-
Áigi doaktára luhtte					☐ Juo ☐	In		☐ Ea	hpesihkar	
Beasat muitalit du										
váttuid birra					VAHÁGAT/LIHKOHI	SVUO	DAT			
Doaktára áddejupmi du kulturduogážii					Leat go leamaš lihkohi lusa ja/dahje buohcciv				rtejit doakt	ára
Doaktára diediheapmi du dearvvasvuoda-		555		y====	Doaktára lusa] Juo [] In		Gallii
váttuid, iskkadeami					post Lacron en envertet		7.6	7.6		es Her
ja dálkkodeami birra					Buohccevissui čálihuv	VOI L	Juo	1 in		Gallii

VAHÁGAT/LIHKOHISV	UOĐA	T (joatl	kka)		BARGOEALLIN/RUHTADILLI (joatkka)			
Jus juo, de makkár lihkol (russe oktii dahje moddii B	juohke				Sáhtášitgo jurddašit fárret ássangielddastat jus fállo dutnje bargu eará báikkis? Juo In Muhtun ráje jagis Eahpesihkar			
Biila					D / D D			
Mohtorsikkel	П				Just least barrougheanne muital man rubká least barroug			
Muohtaskohter			F		Jus leat bargguheapme, muital man guhká leat barggu ohcan: (almmut olles loguin)			
Njealjejuvllatsihkkel			F		(jagi) (mánu)			
Traktor				3(0 + <u>10 (0 + 1)</u>	7.6			
Gahččanlihkohisvuođat		П	F		Jus leat iešbirgejeaddji ealáhusdoalli, makkár ealáhusas			
Čuohpadanvahágat	_		F	(1 m)	barggat? (russe oktii dahje moddii)			
Eará					☐ Boazodilis ☐ Guolásteamis ☐ Eanadoalus			
Las(t) as libbabisous bis (a	dati an	alan a da	a trans		☐ Vuovdedoalus ☐ Gávpedoaimmas			
Lea(t)go lihkohisvuohta(c	ohahki	- Carrier	Yall Park	ai oppanassiige	☐ Eará (čilge)			
	OHAHKI		nye	ar орранаssinge	Gallis ásset du bearašgottis?			
BEARAŠ JA GIELLADUG	OGÁŠ				(galle olbmo)			
Davvi-Norggas ásset már					Man stuoris lea bearraša/bearašgotti bruttosisaboahtu jahkái?			
mearkkaša ahte hállet ma kultuvrrat. Ovdamearkka					☐ Vuollel 150000 ru. ☐ Ru. 150000–300000			
leat dáža, sámi ja kveana		duids	uuoguz	n, danje cerun	Ru. 301 000-450 000 Ru. 451 000-600 000			
12-11-20 A TOTAL OF THE LOCAL O	West of the	4	4	in to secure a	Ru. 601 000–750 000 Badjel 750 000 ru.			
Makkár ruovttugiella lea, ádjáin? (russe oktii dahje			ınnemi	in ja ankuin/				
aujami gazze emir danje	16	en:			Man dávjá spealat makkárnu ruhtaspealuin nugo lotto, tihp-			
Dárogiella Sán	negiella	-	giella E	ará, čilge	pen, speallanautomáhtat ja sullasaččain?			
Eatniáhčis:			L		☐ In goassige/hárve ☐ 1–3 geardde mánnui			
Eatnieatnis:			L		Oktii vahkkui 2–6 geardde vahkkui			
Áhčiáhčis:			L		☐ Juohke beaivvi			
Ahčieatnis:			L					
Áhčis:			L		Man olu spealat gaskamearálaččat vahkkui?			
Eatnis:			L		nasa nasa nasa nasa da nasa da nasa da nasa nas			
Mus:			L		☐ Vuollel 100 ru. vahkkui ☐ 100–500 ru. vahkkui			
Mii lea du, áhččát ja ead	nát če:	arddad	uogáš?		501–1000 ru. vahkkui 🔲 Badjel 1000 ru. vahkkui			
(russe oktii dahje moddii	92530							
		Sámi	_	Eará, čilge	GIVSSIDEAPMI			
Mu čearddaduogáš lea:			Ц		Givssidemiin oaivvildat go okta dahje moattis dutnje baháid			
Áhči čearddaduogáš lea:	\Box			<u> </u>	mángii dadjet dahje dahket, ja dus lea váttis iežat bealuštit.			
Eatni čearddaduogáš lea:	\Box							
Maid logat iežat leat? (ru	isse okt	tii dahj	e modo	lii)	Leatgo goassige givssiduvvon?			
14	Dáža	Sámi	Kveana	Eará, čilge	☐ Juo, maŋimus 12 mánu ☐ Juo, ovdal ☐ In			
10000				□				
BARGOEALLIN/RUHTA	DILLI				Jus leat givssiduvvon, de mo leat givssiduvvon? (russe oktii dahje moddii)			
Makkár bargu/eallinbirge	ejunmi	lea du	5? Inser	oktii dahie moddii)				
☐ Fástabálká, ollesáigi			ká, oas		☐ Bostalemiin ☐ Badjelgeahččamiin			
Áigodatbargu	-			ea <mark>lá</mark> husdoalli	☐ Vealaheaddji mearkkašumiiguin ☐ Eará			
☐ Bargguheapme		uovttu			222 AMERICAN STATE AND STA			
☐ Boarrásiidoajus				svuođaruhta	Sáhtášitgo muitalit gos dát geavvá/geavai? (russe oktii dahje moddii)			
					THE RESIDENCE WHEN THE PROPERTY OF THE PROPERT			
☐ Eará (čilge)	17.00000	unares.			Skuvllas Skuvlainternáhtas Fidnoeallimis Báikegottis Eará			

8. BORGGUHEAPMI JA SNUVSSEN	10. OAHPPU JA BARGU
Man guhká leat beaivái dábálaččat suovvalanjas? Galle olles diimmu	Galle jagi leat skuvllaid vázzán? (Bija buot jagiid go leat skuvllaid vázzán dahje studeren) Galle jagi
Borgguhiigo oktage rávisolmmoš ruovttus go bajásšaddet?	Mo loavttát barggus? 1 ☐ Hirbmat bures 2 ☐ Bures
Ásatgo, dahje leatgo ássan, ovttas beaivválaš JUO IN borgguheaddjiiguin maŋŋil go devdet 20 jagi?	□ Heittogit 4☐ Hirbmat heittogit
Leatgo borgguhan/borgguhatgo beaivválaččat?	Oaivvildatgo ahte orut massimin dálá barggut dahje sisaboadut lagamus 2 jagi?
Jus borgguhat beaivválaččat dál, borgguhatgo: Juo IN Sigareahtaid?	Buohcceruda
Sigáraid/sigarillos/biippu?	Sosiá Iveahki/-doarjaga
Geassanduhpáha/rullings?	Gaskaboddosašdoarjaga ovttaskas
Jus beaivválaččat leat borgguhan <i>ovdal</i> , man guhká lea dassá go heitet? Galle jagi	fuolaheaddjiide
Jus borgguhat beaivválaččat dál, dahje leat borgguhan ovdal:	11. DUŠŠE NISSONOLBMOT GALGET VÁSTIDIT DÁS RÁJES SKOVIS
Galle sigareahta borgguhat/ borgguhit dábálaččat beaivái? Galle sigareahta	Man boaris ledjet go vuosttas geardde ožžot mánnodávddaid? Ahki
Man boaris ledjet go borgguhišgohtet beaivválaččat? Ahki	Jus eai šat leat mánnodávddat, man boaris ledjet go dat nohke? Ahki
Galle jagi leat oktiibuot borgguhan beaivválaččat? Galle jagi	Leatgo dál áhpeheapme? Juo In Eahpesihkkar Badjel sahkkoagi
Leatgo snuvssen/snuvssetgo beaivválaččat? ☐ Juo, dál ☐ Juo, ovdal ☐ In ☐	Galle máná leat riegádahttán? Galle máná
Jus snuvsset/leat snuvssen, galle jagi leat oktiibuot snuvssen? Galle jagi	Jus leat máná riegádahttán, deavdde juohke máná riegádan-
9. LÁŠMMOHALLAN JA RUMAŠLAŠ LIHKADEAPMI	jagi, ja galle mánu njamahit maŋŋil riegádahttima? (Jus it njamahan, čále 0) Galle mánu
9. LÁŠMMOHALLAN JA RUMAŠLAŠ LIHKADEAPMI Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>manimus</u> <u>jagi?</u> (Jurddaš gaskameari vahkus jahkái. Mátki bargui lohkko astoáigin. Vástit goappašiid gažaldagaid)	jagi, ja galle mánu njamahit maŋŋil riegádahttima? (Jus it njamahan, čále 0) Galle mánu Mánná: Riegádanjahki: njamahan: 1. mánná
Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>manimus</u> <u>jagi?</u> (Jurddaš gaskameari vahkus jahkái. Mátki bargui lohkko	jagi, ja galle mánu njamahit maŋŋil riegádahttima? (jus it njamahan, čále 0) Galle mánu Mánná: Riegádanjahki: njamahan:
Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>manimus</u> <u>jagi?</u> (Jurddaš gaskameari vahkus jahkāi. Mátki bargui lohkko astoáigin. Vástit goappašiid gažaldagaid) Diimmuid vahkkui: li ovttage Vuollel 1 1-2 3 dahje eanet	jagi, ja galle mánu njamahit maŋŋil riegádahttima? (Jus it njamahan, čále 0) Galle mánu Mánná: Riegádanjahki: njamahan: 1. mánná
Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>maņimus</u> <u>jagi?</u> (Jurddaš gaskameari vahkus jahkāi. Mātki bargui lohkko astoáigin. Vāstit goappašiid gažaldagaid) Diimmuid vahkkui:	jagi, ja galle mánu njamahit maŋŋil riegádahttima? (Jus it njamahan, čále 0) Galle mánu Mánná: Riegádanjahki: njamahan: 1. mánná
Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>manimus</u> jagi? (Jurddaš gaskameari vahkus jahkái. Mátki bargui lohkko astoáigin. Vástit goappašiid gažaldagaid) Diimmuid vahkkui: Ii ovttage Vuollel 1 1-2 3 dahje eanet Gehppes lihkadeapmi (Ii bivastuvvo/šieddaluvvo)	jagi, ja galle mánu njamahit mannil riegádahttima? (Jus it njamahan, čále 0) Mánná: Riegádanjahki: njamahan: 1. mánná 2. mánná 3. mánná 4. mánná
Mo lea du rumašlaš lihkadeapmi <u>astoáiggis</u> leamaš <u>manimus</u> <u>jagi?</u> (Jurddaš gaskameari vahkus jahkāi. Mātki bargui lohkko astoáigin. Vāstit goappašiid gažaldagaid) Diimmuid vahkkui: li ovttage Vuollel 1 1-2 3 dahje eanet Gehppes lihkadeapmi (li bivastuvvojšieddaluvvo)	jagi, ja galle mánu njamahit mannil riegádahttima? (Jus it njamahan, čále 0) Galle mánu Mánná: Riegádanjahki: njamahan: 1. mánná 2. mánná 3. mánná
Mo lea du rumašlaš lihkadeapmi astoáiggis leamaš manimus jagi? (Jurddaš gaskameari vahkus jahkái. Mátki bargui lohkko astoáigin. Vástit goappašiid gažaldagaid) Diimmuid vahkkui: Ii ovttage Vuollel 1 1-2 3 dahje eanet Gehppes lihkadeapmi (Ii bivastuvvo/šieddaluvvo)	jagi, ja galle mánu njamahit mannil riegá dahttima? (Jus it njamahan, čále 0) Mánná: Riegádanjahki: njamahan: 1. mánná 2. mánná 3. mánná 4. mánná 5. mánná Geavahatgo, dahje leatgo geavahan? (Russe oktii juohke linnjás) Dál Ovdal, muhto In in dál goassige P-pilla/minipilla/p-cirgganasa Hormonspirála (ii dábálaš spirála) Østrogena (tableahtaid dahje plastera) Østrogena (vuoidasa dahje čuggestatpillaid)
Mo lea du rumašlaš lihkadeapmi astoáiggis leamaš manimus jagi? (Jurddaš gaskameari vahkus jahkái. Mátki bargui lohkko astoáigin. Vástit goappašiid gažaldagaid) Diimmuid vahkkui: Ii ovttage Vuollel 1 1-2 3 dahje eanet Gehppes lihkadeapmi (Ii bivastuvvo/ŝieddaluvvo)	jagi, ja galle mánu njamahit mannil riegá dahttima? (Jus it njamahan, čále 0) Mánná: Riegádanjahki: njamahan: 1. mánná 2. mánná 3. mánná 4. mánná 5. mánná (Jus eanet mánát, čále sierra árkii) Geavahatgo, dahje leatgo geavahan? (Russe oktii juohke linnjás) Dál Ovdal,muhto In in dál goassige P-pilla/minipilla/p-cirgganasa Hormonspirála (ii dábálaš spirála) Østrogena (tableahtaid dahje plastera) Østrogena (vuoidasa dahje čuggestatpillaid)
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LASSIGAŽALDAGAT DEARVVASVUOĐA- JA EALLIN-DILLEISKKADEAPMÁI

Giitu go bohtet dearvvasvuodaiskkadeapmäi. Dán láhkai leat veahkehan háhkat odďa dieđuid dearvvasvuođa ja eallindili birra guovlluin gos ásset sápmelaččat ja dážat. Iskkadeami váldoulbmil lea leamaš háhkat odđa dieđuid váibmovarrasuotnadávddaid birra, vai daid sáhtášii eastadit. Iskkademiin galgat dasa lassin oažžut máhtu eará dávddaid ja givssiid birra, nu ahte sáhttit olbmuid dearvvasvuođas fylkkas bidjat várdosa. Danne bivdit du vástidit soames gažaldaga diliin mat sähttet leat måvssolaččat dáid ja eará dávddaide.

Devdon skovvi sáddejuvvo čuovvu vástidankonfaluhtas. Porto lea mákson. Giitu ovddalgihtii veahki ovddas!

Ustitlaš dearvvuođaiguin

	Sámi dearvvašvuođadutkama guovddáš ja Nasjonalt folkehelseinstitutt
1. DÁVDAMEARKKAT	Man dávjá lea mállásiin:
Gosatgo masá beaivválaččat soames ⊥ JUO IN	li goassigo/ 1 g. 2-3 g. 1 g. 2 g. 3 g. 4 g. 5+ hārve mānnui mānnui vahkkui vahkkui vahkkui vahkkui vahkkui
álggild jagis?	Guolli
Leatgo ná gossan nu guhká go 3 mánu guokte manimus jagi?	Biergu
Dáhpáhuvvágo ahte giksašuvat nagirgeahtesvuođas?	ferdnejuvvon)
Jus juo, goas giksašuvat eanemus nagirgeahtesvuođas?	iige biergu 📗 📗 📗 📗
(Russe oktii dahje moddii) Miehtá jagi Giđđat Geassit Čakčat Dálvit	Man dávjá borat <u>vuššon</u> dorski ja sáiddi mállásiidda? In goassige 1-11 g. 1 g. 2-3 g. 1 g. 2 g. 3+ g. jahkái mánnui mánnui vahikkui vahkkui
Leatgo manimus jagi giksašuvvon nagirgeahtes- vuodas nu ahte lea čuohcan bargonávccaide?	Dorski (omd. varas, · · ·
Leatgo eanaš duhtavaš iežat eallindiliin?	Sáiddi (omd. varas,
☐ Hirbmat duhtavaš ☐ Hui duhtavaš ☐ Veaháš duhtameahttun ☐ Hirbmat duhtameahttun	Man dávjá borat eará <u>vuššon</u> guoli mállásiidda?
Geavvágo ahte guhkit áiggi – ainjuo 14 beaivvi JUO IN – leat váivvis ja šlunddas?	In goassige 1-5 g. 6-11 g. 1 g. 2-3 g. 1 g. 2+ g. Buoiddes jahkkii jahkkii mannui mannui vahkkui vahkkui
Leatgo manimus 14 beaivvi dovdan ahte it nákce čoavdit váttisvuođaidat?	guollesorttaid
☐ In ☐ Muhtumin ☐ Dávjá ☐ Masá oppa áigge	Ruoidna guolle- sorttaid (omd.
Dovddatgo goassige ieżat okto? ☐ In ☐ Muhtumin ☐ Dávjá	divssu/juvssu, vuskona, hávgga,
2. BORRAMUŠ DÁL	hárri)
	Man dávjá borat <u>báiston</u> guoli mállásiidda?
Áiggošeimmet dus jearrat ahte man dávjá lávet muhtun bor- ramušsorttaid borrat. Jurddas manimus jagi gaskameari.	In goassige 1-5 g. 6-11 g. 1 g. 2-3 g. 1 g. 2- g. Buoiddes jahkāi jahkāi mānnui mānnui vahkkui vahkkui
<u>Russe juohke linnjái</u> galle geardde. Jus ii muitte justa, de deavdde nu bures go sáhtát.	guollesorttaid
Gallii vahkus lávet mállásiid borrat? Gallii	dápmoha, čuovžža)
Т	Ruoidna guollesorttaid

Beaivi goas deavddát:

Mánnu

Beaivi

Jahki

2. BORRAMUŠ DÁL (joatkka)		Man dávjá borat bohccobierggu?
Man dávjá borat guolleborramuša mállásiidda?		In goassige 1-11 g. 1 g. 2-3 g. 1 g. 2 g. 3+ g. Vuššon bohcco- jahktai mannui mannui vahkkui vahkkui vahkkui
	2+ g. vahkkui	bierggu/liema 🗌 📗 🔲 🔲 📗
Guollegáhkuid/		Báiston bohcco-
bulláid/deartna	Н	(Olles, cáhppon,
tiinna/		fierdnejuvvon)
guollerutta		Suovasbierggu
skávuhuvvon guoli		Man dávjá borat eará borramuša bohccos?
Man dévié horst molloquelle		ln goassigu 1-5 g - 6-11 g 1 g - 2-3 g 1 g - 2+ g jahkāi jahkāi mānnui mānnui vahkkui vahkkui vahkkui
Man dávjá borat guollesuvlli? In goassige 1-11 g. 1 g. 2-3 g. 1-2 g. 3-4 g.	51.0	Bohccovarra-
jahkāi mānnui mānnui vahkkui vahkku		borramuša
Spihke-/ sálteguoli	П	Addamiid
Suovasguoli		Bohcconjuokčama
		Bohccovuoivasa
Makrealla tomáhtas		Galle mearraloddemani borat jahkái?
(omd, suvrrasallit,		0 1-3 4-6 7-9 10+
tomáhtasallit)		Galle mani U U U U U
Meaddennjuvddus 🔲 🔲 🔲 📗		
Eará guollesuvIli		Man dávjá borat murjjid?
Galle geardde jagis borat guollesiskkožiid?		Oktii vástida 1 láibevajahas muorjemeasttuin, joŋaid 1 máleslihttái, 1 bajálušlihttái, 1 glása máihlli, dahje ovtta
0 1-3 4-6 7-9 10+		mátkkis goas borret varas murijiid.
Guollevuoivasa	\perp	In goaxsign 1-5 g. 6-11 g. 1 g. 2-3 g. 1-2 g. 3+ g.
Meaddemiid		Luopmániid: jahkäi mannui mannui vahkkui vahkkui
Weaddening		Varas, galmmihuvvon,
Man dávjá borat čuovvovaš borramušaid?		firrojuvvon
In goassigo 1-5 g. 6-11 g. 1 g. 2-3 g. 1 g. jahkši jahkši mdenui maneui maneui vahkki	2+ g. ui vahkkui	Vuššon/oston meastu
Pizza		Varas, galmmihuvvon,
Spagetti,		firrojuvvon
pastaborramušaid		Vuššon/oston meastu
Hamburgera láibbis 🔲 🗎 🔲 🔲		Sarridiid:
Biergogáhkuid/		Varas, galmmihuvvon,
karbonádaid	Ш	firrojuvvon
Mårffiid		Vuššon/oston meastu
Ruitoborramuša		Máihlli
		Čáhppesmurjjiid:
Man dávjá borat obba bierggu mállásiidda (omd.		Varas, galmmihuvvon 📗 👚 🔲 🔲 👚
čielgečaskásiid, čoarbeali, ruitobierggu, biffa, deahki)?		Máihlli
in goassigo. 1-5 g. 6-11 g. 1 g. 2-3 g. 1 g. jahkāi jahkāi mārenui mānenui vahkke	2+ g.	-T-
Vuoncáčivgga	U Various	
Spiinni		Mo lávet don/láve du dállodoallu háhkat čuovvovaš vuođđoávdnasiid iežat/iežas atnui? (Russe oktii dahje moddii)
Vuoksá/šibiha		
		In bora Visot Belohahkii Oastit Oastit Lonuhat goassige/ háhkat háhkat buvddas priváhta dahje
Sávzza/lábbá		Bierggu: hārve ieža ieža oažžut
Fállá		Bohcco
		Sávzza ····
		Ealgga

(A)	In bora goassige/ harve	Visot háhkat ie⊁a	Belohahkii hähkat ieža	Oastit buvddas	Oastit privahta	Loni dahj oak)	je	Ožžotgo medisiinnalaš trána bajásšaddamis?
Guoli:	-							Ožžotgo trána omd. guollái (eará vuoja sadjái)?
Sáivaguoli	Annual Contract							
Mearraguoli Murjjiid:								Man dávjá borret meahccemurjjiid ja šattuid bajásšaddamis?
Luopmániid								In goassigo 1-5 g. 6-11 g. 1 g. 2-3 g. 1-2 g. 3+ g. jahk≨i m≴nmui mánmui vahkkui vahkkui vahkkui
Jonaid								Meahccemurjjiid
								Jupmuid
Man dávjá lá					. ol			Borranrási
Bivdit rievssa		goassige	e Hárve	Muhtu	min Olu	ı astol	aiggis	Leago borramus maid dál borat earálágan go maid borret
fuđožiid	500]					<u> </u>	bajásšaddamis?
Bivdit fuoddi	uid 🗆							☐ li ☐ Veaháš earálágan
Guolástit	Г]						Hui earálágan Hirbmat earálágan
Murjet								4. IDJABORRAN
Man dávjá le		n válde	omállása i	ežat dá	illodoal	lu sál	llašis	Modilates divid have disposed as subbadia
maŋimus jag	11.	In goassi	ign 1-5 g. 6-					Morihatgo dávjá boradit maŋŋil go eahkedis JUO IN leat velledan?
Váldomállása	a bivddu	s 🔲	jahkai jal	ekti mánni	ii mannui v	rahkkui	vahldout	THE TOP OF THE TOP OF THE PROPERTY OF THE PROP
Váldomállása	a	9,115					_	Jus "juo", vástit boahtte 4 gažaldaga:
guolásteamis						_	Ш	Goas leat dus dávjjimusat givssit? (Bija ovtta dahje moadde ruossa) Miehtá jagi Geassit Geassit
3. BORRAN	AUŠ BAJ	ÁSŠAD	DAMIS					Cakčat Dálvit
toudday soon			Line and	-1 6:			teres	Maid borat ihkku? (Russe oktii dahje moddii)
Jurddaš ruov ásset eanaš o								☐ Bierggu ☐ Láibeborramuša ☐ Njálgáid ☐ Eará
birra doppe.			16.					
Ássetgo inter				s dahje	priváh	ta) g	ю	Boratgo eanet go beali jándora borramušas JUO IN maŋŋil di. 20 eahkedis?
vázzet máná			Kuviias					Givssiduvvojitgo earát bearrašis JUO EAI IN DIEĐE
☐ Juo, nuor					1			idjaborramiin?
Uo, sihke			oraidskuv	llas				Leago dus bargovuorru, idjabargu dahje IUO IN
☐ In goappa		,,,,,,,,,						vuoruid váccát?
Jus juo, galle	No.	,						5. BAJÁSŠADDAN, BEARAŠ JA USTIBAT
Man guhká l	ediet int	ernáhta	as gaskam	earálad	čat iuo	ohke		
	1-3		4-6				inu	Man gielddas leat ássan guhkitgo <i>ovtta</i> jagi? Gielda:
Man dávjá b	orret gu	oli ia b	ohccobie	roon ba	iásšadd	lamis	(?	T. Riegādanbáiki: 0 jagi rājes jahkāi
	orrer ga		1-11 g. 1 g.		500000000000000000000000000000000000000			2jagi rājes jahkāi
		in gonesige	jahkái mánn					3. jagi rājes jahkāi
Vuššon/báisto	on guoli							s II a so II some
Bohccobierg	gu							4. jagi rájes jahkái
Man dávjá b	orret ea	rá borr	amušaid l	aiásšao	ldamis?	,		5. jagi rájes jahkái
			1-11 g. 1 g. jahkai mann	2-3 g	1 g. 2	g.	3+ g. vahkkui	Ásatgo ovttas náittosguimmiin/elošteaddjiin?
Varraborram	uša							Leago dus beaivválaš dahje juhkkon fuolahus: JUO II
Sávzzabiergg	gu							Mánnái/mánáide?
Biergogáhkui						_		Váhnemiidda/earáide?
márffiid					닏ᆜ	=		
Guolleborrar				Ц	υι	_	Ш	Galle buori ustiba leat dus?
ja meaddemi								(Geaiguin sáhtát oadjebasat hállat ja geat sáhttet du veahkehit jus dan dárbbašat. Ále loga sin geaiguin ovttas ásat,
Suohkada, bánnogáhkui	id	П	пп		ПГ		П	muhto eará fulkkiid gal) Galle ustiba

Gulatgo ovttage dáid searvegottiide/oskkuide? (Russe oktii dahje moddii)	Maid mearkkaša dutnje sámegiela seailluheapmi ja ovddi- deapmi?					
□ Stáhtagirku miellahttu □ Lestadiánalaš searvegoddái □ Eará searvegoddái □ T	Hirbmat stuorra Stuorra Unnán li makkárge mearkkašupmi mearkkašupmi mearkkašupmi mearkkašupmi					
☐ In miellahttu ovttage searvegottis	Leago dutnje dehálaš ássat báikegottis gos beaivválaččat					
Dovddatgo ahte sáhtát váikkuhit dan mii dáhpáhuvvá báikegottis gos ásat? (Russe dušše oktii) Juo, hui olu Juo, muhtun muddui Juo, unnán In In leat geahččalan	sáhtát deaívvadit eará sámiiguin? Hirbmat Unnán Áibbas dehálaš Dehálaš dehálaš deattoheapme					
6. ÁRVOČATNAŠUPMI	Leago du mielas dehálaš ahte mihtilmas sámi ealáhusat bisuhuvvojit?					
BUOHKAIDE: Leago dutnje dehálaš leat luonddus?	Hirbmat Unnán Áibbas dehálaš Dehálaš dehálaš deattoheapme					
Hirbmat Unnán Áibbas dehálaš Dehálaš dehálaš deattoheapme	Leago dehálaš dutnje ahte ovddiduvvo ođđaáigásaš sámi skuvla?					
Leago luonddu ávkkástallan nugo guolásteapmi, bivdu ja murjen dutnje dehálaš?	Hirbmat Unnán Áibbas dehálaš Dehálaš dehálaš deattoheapme					
Hirbmat Unnán Aibbas dehálaš Dehálaš dehálaš deattoheapme	Leago dutnje dehálaš ahte sámi báikegottit berrešit oažžut eanet oddaáigásaš bargosajiid?					
Leatgo sohka- ja bearašárbevierut dutnje dehálaččat bisuhit? Hirbmat Unnán Áibbas dehálaš Dehálaš dehálaš deattoheapme	Hirbmat Unnán Aibbas dehálaš Dehálaš dehálaš deattoheapme					
Leatgo vásihan ahte leat givssiduvvon dahje vealahuvvon du čearddalaš duogáža (sámi, kveana, ruošša, tamila, dáža jna.) geažil?	Hirbmat stuorra Stuorra Unnán li makkárge mearkkašupmi mearkkašupmi mearkkašupmi l					
Hui mángii Muhtumin Hárve In oppanassiige	Maid mearkkaša dutnje ođđa sámi dáidda (govvadáidda, musihkka, filbma ja teáhter)? Hirbmat stuorra Stuorra Unnán li makkárge					
Jáhkátgo ahte čearddalaš unnitloguid vealaheapmi sáhttá dearvvasvuhtii čuohcat heajos guvlui?	mearkkašupmi mearkkašupmi mearkkašupmi					
Hui olu Muhtun láhkai Unnán li oppanassiige	Mo du mielas lea go sámi servodat ja kultuvra jagiid mielde lea ožžon lagat riikkaidgaskasaš oktavuođaid?					
Dovddatgo ahte ealáhusastis leat duvdojuvvomin eret?	Hirbmat Unnán Aibbas dehálaš Dehálaš dehálaš deattoheapme					
Hui olu Muhtun láhkai Unnán li oppanassiige	Maid mearkkaša dutnje Sámediggi?					
7. SIDJIIDE GEAIN LEA SÁMI DUOGÁŠ:	Hirbmat stuorra Stuorra Unnán li makkárge mearkkašupmi mearkkašupmi mearkkašupmi mearkkašupmi					
Leatgo sámi bivttasvierut dutnje dehálaččat? Hirbmat Unnán Áibbas	Dovddatgo ahte nuoskkideapmi luonddus dahje sisabahkken					
dehálaš Dehálaš dehálaš deattoheapme	lundui áitá du sámi eallima? Hui olu Muhtun láhkai Unnán li oppanassiige □ □ □ □ □					
Maid mearkkaša dutnje duodji?	Dovddatgo ahte ođđaáigásaš ovdáneapmi duvdá eret sámi					
Hirbmat stuorra Stuorra Unnán li makkárge mearkkašupmi mearkkašupmi mearkkašupmi	kultuvrra? Hui olu Muhtun láhkai Unnán li oppanassiige					
	CUTLL VEAHKLOVDDAS!					

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