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COMPENSATION FOR THE DELAY AND DENIAL OF SERVICES TO FIRST NATIONS CHILDREN



OFFICE OF THE PARLIAMENTARY BUDGET OFFICER
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The Parliamentary Budget Officer (PBO) supports Parliament by providing economic and financial analysis for the purposes of raising the quality of parliamentary debate and promoting greater budget transparency and accountability.

This report estimates the financial cost of complying with a Canadian Human Rights Tribunal decision (2019 CHRT 39) as it relates to children who experienced delays and denials of services which should have been available under Jordan's Principle. A previous report estimated the cost of complying with that decision as it relates to children taken into care.

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Executive Summary

In September 2019, the Canadian Human Rights Tribunal (CHRT) ordered Canada to pay compensation to certain First Nations children. That decision included compensation for children who remained in their home but were “denied services or received services after an unreasonable delay or upon reconsideration ordered by [the] Tribunal, between December 12, 2007 ... and November 2, 2017.”

Cost of complying with the compensation order

This report estimates that 33,000 additional persons will be eligible for compensation in relation to the delay and denial of services, entailing a cost of \$1.3 billion. This estimate is highly uncertain due to data limitations. Indigenous Services Canada’s (ISC) initial estimated liability did not include any cost of complying with the Jordan’s Principle aspect of the order.

The total cost of complying with the CHRT’s order consists of the compensation for delays and denials of services estimated in this report and compensation for children taken into care estimated in a prior report to be \$0.9 to \$2.9 billion.

The total cost of complying with the CHRT’s order is estimated to be \$2.2 billion to \$4.2 billion.

Cost of complying under parties’ assumed interpretation of that order

The parties to the CHRT proceeding submitted a framework, approved by the CHRT on 12 February 2021, for the payment of compensation under the CHRT’s order. The framework and the process leading to it suggest that parties intend to offer broader compensation than required by the CHRT order.

Specifically, subsequent submissions indicate that parties have assumed that compensation must be paid to all children who were deprived of essential services as a result of a gap in services. The 2019 CHRT order only requires compensation to be paid to children who were deprived of essential services as a result of a gap in services if that child was taken into care; children who remained in their homes are compensated only for delays and denials of services. With the interpretation apparently assumed by the parties, 250,000 additional persons will be eligible for compensation in relation to the delay and denial of services or gaps and services, entailing a cost of \$10 billion.

This figure is, to an even greater extent, highly uncertain due to data limitations.

The approved compensation framework also explicitly provides for broader compensation for children taken into care. Specifically, it compensates all children taken into care instead of children unnecessarily removed from their home, family, and community. This would result in an estimated \$6.5 billion in compensation being paid in relation to children taken into care.

The total cost of complying with the order based on the interpretation of that order set out in the compensation framework and process leading to that framework is estimated to be \$15 billion after accounting for overlap.

1. Jordan's Principle

The Origins of Jordan's Principle

Jordan River Anderson was a First Nations child with a severe medical condition. He was surrendered into provincial care in order to receive medical services which were not available on-reserve. After spending two years in hospital, he could have been placed into a specialized foster home close to the hospital for the remaining few years of his life. He was unable to do so because Indigenous Services Canada (ISC), Health Canada, and the Province of Manitoba disagreed over who should pay for the costs of home-based care.¹

Jordan's Principle, named in recognition of Jordan River Anderson, is a systemic order of the CHRT regarding the approval of government services for First Nations children.² Where a government service is available to all other children, the government department of first contact must pay for the service. Where a service is not necessarily available to all other children, the government department of first contact must evaluate the needs of the child to determine whether the requested services should be provided to ensure substantive equality, to ensure culturally appropriate services, or to safeguard the best interests of the child.³

Jordan's Principle requests can be submitted by individuals or groups. The individual or group filing the request does not need to specifically invoke Jordan's Principle for it to apply. When a request is refused under another program, ISC considers whether Jordan's Principle applies. When a request specifically invokes Jordan's Principle, it may nevertheless be referred to an applicable existing program.

Jordan's Principle Claim Volumes

The federal government initially applied a narrow definition of Jordan's Principle which focused on jurisdictional disputes related to children with severe medical needs. As a result, very few cases were identified by the federal government where the principle applied. The CHRT subsequently ordered the federal government to revise its definition and reconsider the applications it had denied.

Since the federal government broadened its definition of Jordan's Principle, it has received a large number of claims. More than 594,000 claims were approved between July 2016 and April 2020.⁴ With approximately 375,000 First Nations children including those off-reserve, this represents approximately 1.6 claims per current First Nations child or roughly one per person when including those who became adults during the period.⁵

Since 2017, most approved products and services have been provided under "community managed group requests". From March to August of 2019, 126,257 out of 136,003 approved products and services under Jordan's Principle (92%) were approved under group requests.⁶

The reported volume of services provided under group requests greatly overstates the number of unique children receiving essential services. By volume, most services funded under group requests are activities on the land or social activities which are not generally included on lists of essential services.⁷ In addition, children participate in multiple funded activities and are counted as receiving a service for each event they attend. However, these group requests also included services which are clearly essential, like intensive mental health counselling.

2. Compensation Order

In September 2019, the Canadian Human Rights Tribunal (CHRT) ordered Canada to pay compensation to certain First Nations children and their caregivers.

That CHRT decision included compensation for children unnecessarily removed from their home, family and community. In a previous report, we estimated that 19,000 to 65,100 persons would be eligible for compensation in relation to such removals, entailing a cost of \$0.9 billion to \$2.9 billion. This includes compensation for children removed from their home in order to receive services. The estimate was based on compensation being paid to all children unnecessarily removed from their home, family, and community.

With respect to this aspect of the order addressed in the PBO's prior report, the parties to that agreement proposed a compensation framework, approved by the CHRT on 12 February 2021, which extends compensation to all children removed from the home, including those placed in kinship care and irrespective of whether the removal was unnecessary.⁸ In this way, the cost of compensating children would rise to \$6.5 billion under the compensation framework with 72,000 children and 73,000 parents receiving compensation.

The CHRT order also included compensation for children who remained in their home but were "denied services or received services after an unreasonable delay or upon reconsideration ordered by [the] Tribunal, between December 12, 2007 ... and November 2, 2017." This aspect of the order is the subject of this report.

The parties to the CHRT proceeding have apparently assumed the decision requires compensation to be paid to all children who were deprived of essential services as a result of a gap in services.⁹ However, the CHRT order only requires compensation to be paid to children who were deprived of essential services as a result of a gap in services where that child was taken into care. Further explanation of this point is provided in Annex A.

3. Affected Children

The number of children who were affected by delays and denials of essential services is highly uncertain because Jordan’s Principle claims were not tracked prior to 2017. The below table shows the estimated number of affected children, by group. In total, about 13,000 children are expected to be eligible for compensation, mostly in relation to delayed approval of group claims. A further 90,000 children affected by essential service gaps are assumed not to be eligible but would be eligible under the interpretation apparently assumed by parties to the CHRT proceeding.¹⁰

The estimation of these figures is explained in Annex B.

Eligibility	Form of denial of services	Individual	Group
Eligible	Delayed	200	12,800
	Denied	10	90
	Approved upon reconsideration	50	
Not eligible but apparently assumed eligible by parties	Service Gaps	90,000	

4. Cost Implications

Each affected child is entitled to \$40,000.¹¹

Any caregiving parents of that child are also each entitled to \$40,000, or if the parents were absent and the children were in the care of one or more grand-parents, any caregiving grandparent of that the child are each entitled to \$40,000.¹² First Nations children live with an average of 1.5 biological parents (or grandparents if parents are absent).¹³

With 13,000 children assumed to be eligible, this implies 20,000 eligible parents for a total of 33,000 persons eligible for compensation. This would entail a cost of \$1.3 billion.

The total cost of complying with the CHRT's order consists of the compensation for delays and denials of services estimated in this report and compensation for children taken into care estimated in a prior report. The total cost of complying with the CHRT's order is estimated to be \$2.2 billion to \$4.2 billion.

Under the interpretation of the CHRT's decision apparently assumed by the parties to that proceeding, eligibility is much broader. If compensation is also paid to the approximately 90,000 First Nations children who were affected by gaps in essential services but were not removed from the home, there would be roughly 100,000 eligible First Nations children and 150,000 eligible parents or grandparents of such children for a total of 250,000 persons eligible for compensation. This would entail a cost of \$10 billion.

As noted earlier, the compensation framework also provides for broader compensation for children taken into care.¹⁴ Specifically, it compensates all children taken into care instead of children unnecessarily removed from their home, family, and community. Under these parameters, and assuming 26% of placements are in informal kinship care only as seen in Quebec, the model set out in our prior report suggests that approximately 72,000 children and 73,000 parents or grandparents would be eligible for compensation in relation to removals.¹⁵ This would suggest the cost of paying compensation for removals would total \$6.5 billion.

This suggests that, in combination, complying with the CHRT's order in the manner set out in the compensation framework would cost \$15 billion, after accounting for the proportionate overlap between the two eligible groups.

5. Annex A: Eligibility with Service Gaps

The parties to the CHRT proceeding have apparently assumed that the decision requires compensation to be paid to all children who were deprived of essential services as a result of a gap in services.¹⁶ The CHRT clarified in a subsequent decision that a service gap, which exists even where no request was ever made, is distinct from delays and denials where a request was made.¹⁷

However, the CHRT order only requires compensation to be paid to children who were deprived of essential services as a result of a gap in services where that child was taken into care. In full, the CHRT order on this point reads:

The Panel finds there is sufficient evidence and other information in this case to establish, on a balance of probabilities, that Canada's systemic racial discrimination found in the Tribunal's Decision 2016 CHRT 2 and subsequent rulings: 2017 CHRT 7, 2017 CHRT 14, 2017 CHRT 35 and 2018 CHRT 4, resulted in harming First Nations children living on reserve or off-reserve who, as a result of a gap, delay and/or denial of services were deprived of essential services and placed in care outside of their homes, families and communities in order to receive those services or without being placed in out of home care were denied services and therefore did not benefit from services covered under Jordan's Principle as defined in 2017 CHRT 14 and 35 (for example, mental health and suicide preventions services, special education, dental etc.). Finally, children who received services upon reconsideration ordered by this Tribunal and children who received services with unreasonable delays have also suffered during the time of the delays and denials. All those children above mentioned experienced pain and suffering of the worst kind warranting the maximum award of remedy of \$20,000 under section 53 (2)(e) of the CHRA. Canada is ordered to pay \$ 20,000 to each First Nation child removed from its home and placed in care in order to access services and for each First Nations child who was not removed from the home and was denied services or received services after an unreasonable delay or upon reconsideration ordered by this Tribunal, between December 12, 2007 (date of the adoption in the House of Commons of the Jordan's Principle) and November 2, 2017 (date of the Tribunal's 2017 CHRT 35 ruling on Jordan's Principle), following the process discussed below. [Emphasis added]

With respect to the children taken into care, the order includes children unable to access services as result of a gap in services. Because these children were included in our previous report on children taken into care, they do not represent additional children entitled to compensation for the purposes of this estimate.

However, with respect to children not taken into care, admissibility is consistently restricted to children who were denied services, received services upon reconsideration, or received services after unreasonable delays. Moreover, the distinction between children who were and were not removed would be irrelevant if both groups were eligible for compensation whenever they were unable to access services. No explanation for the distinction is provided in the CHRT's analysis.

The parties to the CHRT proceeding have apparently assumed that the decision would benefit the large number of First Nations children who were

1. unable to access services as a result of service gaps but did not request those services, and
2. were not taken into care in order to receive those services.¹⁸

In addition, there is some potential ambiguity as there is no analysis supporting this distinction and the CHRT makes statements, in the context of defining a "service gap", which reject Canada's argument that a service must have been requested for compensation to be provided.¹⁹ For this reason, this report presents the consequences of adopting the interpretation apparently assumed by the parties, i.e. that all children affected by service gaps are eligible, irrespective of whether they were taken into care in order to receive those services.

6. Annex B: Estimation of Affected Children

This Annex outlines the calculations of the size of each group of affected children.

Because systematic tracking of Jordan's Principle claims did not begin until June 2017, claims based on requests submitted between June 2017 and the November 2017 cut-off date are analysed separately from those submitted from 12 December 2007 to June 2017. In addition, the lack of tracking means that the number of children affected by delays and denials essential services prior to June 2017 is highly uncertain.

6.1. 13,000 Under Delayed Claims

200 Under Delayed Individual Claims

Based on PBO's analysis of ISC's operational data between June 2017 and November 2017, there are 219 distinct individuals who received approval for services after more than 2 calendar days had elapsed between the time ISC reported having received sufficient information to make a decision and the request being approved.²⁰ Without a case-by-case review of the details or a concrete standard, it is impossible to determine whether these delays were unreasonable. Some were in areas where there is little risk of harm from a few days of delay, like education, but most were in areas that are potentially more urgent like respite care and medical transportation.

Between April 2007 and June 2017, a very small number of Jordan's Principle requests were tracked because the federal government had a narrow interpretation of that principle. As a result, data prior to June 2017 is incomplete, which makes it difficult to identify children potentially eligible for compensation in relation to delays prior to 2017.

For the period prior to June 2017, the federal government conducted a retroactive review of its records using the CHRT's broader definition of Jordan's Principle. Among 203 individual requests identified in this retroactive review, 50 claims were approved upon reconsideration. The children who needed the services identified in these requests are explicitly eligible for compensation under the CHRT's order.

Some individual requests approved between 1 April 2007 and June 2017 may have been unreasonably delayed, but these claims cannot be identified from

any available data as they were not tracked. With only 195 unique children having approved claims in 2016, the historical number of individual claims is likely small relative to claims received after that date and historical group claims.²¹

Overall, it is assumed the delay was unreasonable for 200 children.

12,800 Under Delayed Group Claims

Between June 2017 and November 2017, there were 92 communities who received approval for services after more than 7 days had elapsed. To assess the risk associated with these claims, the PBO requested a sample of Jordan's Principle group claims from ISC. The nature of group events funded under group JP's claims are highly variable – "services" might range from community ice-fishing to intensive mental health counselling. Clearly some individuals received essential services under group requests, but that number is far less than the total of the number of children participating in each event.²²

For the purposes of a rough estimate, it was assumed the each of the 92 delayed group claim provided essential services to 25 children. This roughly aligns with the number of children who received services that would be recommended by a professional – like occupational therapy, physiotherapy, speech and language therapy, and mental health assessments. It excludes activities on the land and social activities.

Across 92 tracked community requests, this would suggest there may be 2,300 children eligible for compensation.

Children would also be eligible in relation to group requests within the scope of Jordan's Principle submitted prior to 2017 that were delayed or denied at the time. This would include examples of Jordan's Principle claims cited by the CHRT, such as a request submitted by Wapekeka First Nation for an in-community mental health team prior to suicides in that community.

There is little information available regarding group requests within the Scope of Jordan's Principle prior to 2017. Prior to 2017, these requests were not systematically identified nor tracked. These requests may have been made to a variety of ISC programs, including public health and education programs. These requests may, or may not, have cited Jordan's Principle. While some of these requests may have been approved, few requests, if any, would have been approved within the CHRT's subsequently established timelines.

In the first four months of 2017, prior to the CHRT's May 2017 order expanding Jordan's Principle, the federal government received an average of 3.5 group requests each month. Assuming this reflects the rate at which requests had been submitted historically, this suggests there may have

been about 420 requests submitted between 2007 and 2017. Assuming each request would have provided essential services to 25 persons, this represents 10,500 persons potentially eligible for compensation.

There is extreme uncertainty around this figure for several reasons. In particular, since May 2017 a large and increasing number of group claims have been submitted. To some extent, this may reflect claims previously submitted to other programs being identified and addressed as Jordan's Principle claims, which would suggest many more children may be eligible for compensation. But it may also reflect First Nations groups submitting more claims because they are aware of the expanded scope of Jordan's Principle or are aware of claims approved under that principle in other communities, which would suggest a similar volume of requests did not exist prior to 2017.

6.2. 100 Under Denied Claims

10 Under Denied Individual Claims

Among the 203 denied requests between 1 April 2007 and 1 November 2017 which were re-reviewed by ISC, 98 were denied upon re-review. Since the re-review was overseen by the CHRT, most of those re-denied claims probably fall outside of the scope of Jordan's Principle. It is assumed that 10 might have been wrongfully redened and give rise to compensation.

90 Under Denied Group Claims

Between June 2017 and November 2017, there were two communities who had requests for services denied. The denied requests each served less than 50 children. This suggests that at most 100 children could be entitled to compensation in relation to post-2017 denied group claims. It is assumed that 90 children are entitled to compensation in relation to these claims. Group claims denied at the time of request prior to 2017 are assumed to be captured in the above estimate of the number of children affected by delays in the approval of group claims. Since group need is generally ongoing, it is assumed that claims denied prior to 2017 would have been resubmitted and approved after 2017, making them cases of delays rather than denials.

6.3. 90,000 Affected by Service Gaps

Whereas delays and denials refer to services that were requested, service gaps are situations where services were required but not requested.²³

As explained above, the CHRT order does not require children to be compensated when they were deprived of an essential service due to a service gap unless they were placed in care. Because our previous estimate of the cost of compensating children taken into care included these children, these are not additional eligible children for the purposes of this estimate.

However, the parties to the CHRT proceeding have apparently assumed, in the process leading to the implementation framework, that these children are eligible.²⁴ So, it is worth estimating the scope of this population who may receive compensation if this interpretation is reflected in an agreement between the parties which is subsequently incorporated into a CHRT order.

Prior to 2017, Jordan's Principle claims were not systematically tracked. As part of its reconsideration of denied claims, ISC attempted to identify and reconsider claims within the scope of Jordan's Principle which might not have been tracked. This involved a search by ISC employees of all their records, as well as a search of newspapers, discussions with regional staff and services providers, and outreach through the Assembly of First Nations. While this process is not subject to any cut-off date, ISC identified 203 claims denied between 1 April 2007 and 2 November 2017, as of 2020. These claims were discussed above.

Nevertheless, the scope of potential untracked claims that could be raised once compensation becomes available is large.

The absence of requests or recommendations does not limit the eligible population. It is quite possible that ISC would have no record of a request for services. It is also quite possible that a service would be recommended by a professional without actually being requested from ISC, especially when published materials indicated that a service was not available and previous requests had been denied. And even if there was never any request or recommendation, families may still be able to make a claim for compensation. While the exact circumstances in which this would occur are not specified, the decision appears to imply that the lack of an assessment, referral or recommendation should not automatically disentitle a claimant where they were unable to access assessment or referral services due to systemic barriers in access to services.²⁵

The CHRT clarification decision indicates that "not all supports, products and services as currently approved by Canada since the Tribunal's rulings in 2017 CHRT 14 and 2017 CHRT 35 are equally necessary" and that as a result, "some measure of reasonableness is acceptable" in defining what is an essential service.²⁶ However, the decision also indicates that children may be entitled to compensation for violations of substantive equality, even if there was no adverse impact on the health or safety of a First Nations child.²⁷ While vague, it appears this definition would exclude the vast majority of services delivered under Jordan's Principle group requests, like activities on the land and social activities. The CHRT clarification decision also suggests that the

services should generally have been recommended by a professional, which supports narrowing compensation to the types of service that would be recommended by a professional, like occupational therapy, physiotherapy, and mental health services.²⁸

The requirement that a service was recommended by a professional, or would have been recommended by a professional but for systemic barriers, roughly aligns the scope of need for which compensation is available with the scope of services now being approved under Jordan's Principle individual requests. As such, it is instructive to look at recent Jordan's Principle claims to understand the scope of need which may have existed historically.

Since expanding its definition of Jordan's Principle, the federal government has approved a large number of individual requests for products and services. In 2019, ISC approved 25,508 individual requests, of which 10,335 were from new and unique children.

The number of new original claims that would have been submitted since 2007 was simulated based on population churn and the specific probabilities of persons with and without a prior JP claim filing a claim in a given month of 2019. Given these assumptions, it is expected that 90,000 unique children would have needed services covered by Jordan's Principle from December 2007 to June 2017. This represents compensation being paid in relation to approximately one in five First Nations persons who were children in 2017 or became adults in the preceding 10 years. While meaningful comparisons are difficult, the Indigenous Services Canada's Non-Insured Health Benefits program paid pharmaceutical benefits to 138,016 registered Indian persons under 19 years of age in the 2018-19 fiscal year alone, about half of registered Indian persons under 19.²⁹ But, this reflects different services being provided to a narrower population and without accounting for repeat need across years.

There will be a moderate administrative burden to bring a claim. Families would have to provide some evidence that they were recommend, or would have been recommended, a service within the scope of Jordan's Principle.

However, there is no requirement to testify or provide any evidence of harm suffered as a result of not receiving services. In addition, there is also a strong incentive to bring forward claims with \$80,000 to \$120,000 in compensation available per family depending on the number of caregivers the child had at the time of the recommendation. The financial compensation available suggests uptake could be very high.

As a result, it is estimated that 90,000 unique children affected by service gaps would receive compensation. However, this figure is extremely uncertain.

Notes

- ¹ 2016 CHRT 2 at para 352.
- ² The term services is used in this report for the sake of brevity as most requests are for funding for services, although medical equipment is also provided and the child may receive either the service directly or funding for the cost of the service.
- ³ 2017 CHRT 35 at para 135.
- ⁴ Indigenous Services Canada, [Jordan's Principle](#).
- ⁵ Statistics Canada, [2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016155](#).
- ⁶ Attorney General of Canada, [Affidavit of Sony Perron](#) (3 October 2019) at 15 (Table 1).
- ⁷ First Nation Child and Family Caring Society, [Annex B – Clean version of Caring Society's definitions \(with essential services schedule\)](#).
- ⁸ Attorney General of Canada, Compensation Framework (submitted to the CHRT on 2 Oct 2020, available through the [First Nation Child and Family Caring Society timeline](#)), at § 4.2.1; 2021 CHRT 7.
- ⁹ In 2020 CHRT 15 at paras 61-120 no party draw any distinction between children who are and are not taken into care with respect to whether a request was require to be eligible for compensation, even in the context of defining a service gap and whether a request was required.
- ¹⁰ See endnote 9.
- ¹¹ 2019 CHRT 39 at paras 250, 254.
- ¹² 2019 CHRT 39 at paras 251, 254. 185.
- ¹³ Statistics Canada, [2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016350](#).
- ¹⁴ See endnote 8.
- ¹⁵ The ratio is not 1.5 to 1 because some parents are excluded because their child was removed due to abuse.
- ¹⁶ While not explicit, this assumption is apparent throughout the submissions of parties summarized in 2020 CHRT 15.
- ¹⁷ 2020 CHRT 15.
- ¹⁸ See endnote 9.
- ¹⁹ 2020 CHRT 15 at para 106-7, 146.
- ²⁰ The date on which ISC reports having received sufficient information may not be the same as the date on which the CHRT would consider ISC to have received sufficient information. In addition, due to missing data, it is not possible to determine whether approximately 900 additional claims were approved after more than 2 days had elapsed.

²¹ Data provided by ISC 19 Oct 2020.

²² For the delayed requests, it is difficult to determine the number of children served because of the way in which ISC collects this data. If, for example, a group request funded a series of events in the community, the number of children served would be reported to ISC as the sum of the number of children who attended each event. This is problematic because the same child is counted twice even though they could only be compensated once.

²³ 2020 CHRT 15 at para 106-107.

²⁴ See endnote 9.

²⁵ 2020 CHRT 15 at para 117.

²⁶ 2020 CHRT 15 at para 148.

²⁷ 2020 CHRT 15 at para 147.

²⁸ 2020 CHRT 15 at para 117.

²⁹ ISC, [Non-Insured Health Benefits program: First Nations and Inuit Health Branch: Annual report 2018 to 2019](#) at Figure 4.7: NIHB pharmacy claimants by age group, gender and region: 2018 to 2019