

counselling, and economic development. Within our communities the distinctions between these areas are neither clear nor straightforward.

To be successful, national Inuit policy and programming must support holistic, multi-dimensional initiatives that rest on core Inuit values and culture. The challenge is to identify and act upon those elements of Inuit society that require immediate attention and will have sustainable outcomes. To this end, we must start with strengthening Inuit families.

Many of the current problems found within our communities can be linked to the erosion of traditional community support mechanisms and the need to reinforce traditional parenting skills. In response to these needs, Pauktuutit has been instrumental in establishing daycare centres in most Inuit communities, conducting parenting workshops, and promoting communication between Elders and youth. Policies and programs for Inuit children must include the maintenance of strong Inuit cultural values and language in an effort to promote the physical, mental, spiritual, social, and emotional well-being of Inuit children. These steps will help ensure Inuit families are strengthened - a priority for the Inuit Women's Action Plan.

Our commitment is to Inuit children and youth and to a birthing system that reinforces Inuit family and social values. There is a need to invest in the parenting skills that will provide the social network that will strengthen community life. Early Childhood Development (ECD) is a broad-based concept that must be directed towards the health and social development of Inuit children. It is much more than simply creating more daycare positions; it is healthy pregnancies; it is increasing the knowledge about sexual health; and it is the social support network that ensures our children have a healthy environment in which to grow.

Childbirth in the north is another priority concern. The legacy of southern medical intervention and evacuation of Inuit women for childbirth has not always served the social and cultural interests of Inuit women and their families. Inuit women recognize the need to establish healthy community-based birthing practices that are culturally sensitive to Inuit ways and preferences — practices that reinforce family and cultural integrity. Pauktuutit has extensive knowledge about traditional Inuit pregnancy and midwifery that complements our experience with Inuit childcare, child support, and the overall health of Inuit women and children.

These are priority issues that beg for practical, community-level responses. Action must be seen as an investment in the future of Inuit society and must be a key component of the first Inuit Action Plan. 2001 Demographics include:

- Inuit population growth rate: 12% between 1996 and 2001;
- The Inuit population is young. 50% of Inuit were under 20 years of age;
- 39% of Inuit were under the age of 15;
- Life expectancy is 10 years shorter than southern Canada;

RISKS

- Teen pregnancy rates are high. In 2000, the rate was up to four times higher than the rest of Canada;
- Inuit youth commit suicide at rates at least six* times the national average (*much higher today)

WHAT IS PAUKTUUTIT DOING ABOUT IT?

Midwifery

- *Documentation of Traditional Practices Related to Pregnancy and Childbirth.* A series of seventy-seven historical interviews, describing 516 births, conducted with Inuit about their birthing experiences over the last several generations.

The interviews are recorded oral narratives of Inuit women, many of them Elders, detailing the birthing histories of women living across Canada's Arctic. They contain the wisdom, skills, and knowledge of a generation who first gave birth on the land, then later in community nursing stations, and most recently in regional and southern hospitals. The Elders describe what it was like to grow up on the land, their pregnancies, their childbirths, and their experiences as midwives.

- *Analysis of Inuit Pregnancy and Birthing Practices 2005-2006;*
- Seeking funding support to develop training modules from the Midwifery data set for maternity care/midwifery training;
- Providing Support to a National Midwifery Working Group and
- Inuit Pregnancy, Childbirth and Midwifery – Promoting Healthy Pregnancies in Inuit Communities Campaign

(See www.pauktuutit.ca for more information.)

Fetal Alcohol Spectrum Disorder

- *Children Come First, A Resource About FASD*, a health promotion resource kit, and a special workshop that trains front-line workers to use it, and our previously developed *Before I Was Born* video kit. These tools increase community participation and raise awareness about FASD
- *Katujjiqatigiitsuni Sannginiq, Working Together to Understand FASD* a training workshop for front line workers and others. It focuses on strategies to support women at risk. This workshop incorporates traditional Inuit values and principles as a firm basis to support communities to prevent and manage FASD.

Early Childhood Development

- **2002** Pauktuutit contributed to the ITK initiative that contributed to a federal government **Early Childhood Development Strategy**;
- **2004** Published *Teenage Pregnancy in Inuit Communities: Issues and Perspectives*
- **2005 -2007.** *Piaranut – Quality Practices for Inuit ECE Programs*
Partnering with Human Resources and Social Development Canada, and advised by a National Advisory Committee, Pauktuutit is canvassing and gathering quality practices from mainstream sources, traditional Inuit child rearing, current Inuit Day Care, Head Start and Child Care programs. Pauktuutit will publish a resource that will include examples, tools, and a video. It will be available to all Inuit Communities in Canada.
- **2007-2009** Proposal submitted to HRSDC for *Paqgittiarniq – Caring for Our Children* for a national summit on parenting issues relevant to Inuit communities. The summit will bring together parents/caregivers, and frontline workers to provide a forum for training, sharing, resource

development and capacity building. Key issues and concerns relevant to Inuit parents will be identified and integrated into resource development in year two of the project.

OPPORTUNITIES

RECOMMENDATIONS

Midwifery

- Explicit support and endorsement to further the work of advancing Inuit community-based birthing and the accreditation of Inuit midwives;
- As efforts proceed among Inuit women and Inuit organizations to coordinate their activities towards an Arctic Midwifery Association, endorsement by the Government of Canada will lend strength and legitimacy to these efforts. FHIHB, INAC, CMHC and other government departments and agencies need to be informed and encouraged to back community-based birthing;
- facilitate or broker the working relationships between Inuit midwifery associations and all provincial and territorial governments;
- **Financial support is needed to bring about change.** This is a broad-based recommendation with multiple areas that need project money and operational support.
 - A new National Working Group on Inuit Midwifery will require financial support;
 - Pauktuutit development of training material and modules that integrate traditional knowledge will need financial support. This will include the use of knowledge held by Pauktuutit and other sources as well seeking the advice and insights of Elders.
- **FNIHB follow-up on recent and up-coming developments.** The recent Promoting, Supporting, and Strengthening Inuit Midwifery meeting in Iqaluit in 2006 is an excellent initiative, that will benefit from further commitment;
- **A population health approach to maternal care is critical to the success of any program.** Arctic maternal health care is a broad-based issue with multiple factors. Teen pregnancies, FASD, nutrition and northern contaminants, substance abuse, STDs and HIV/AIDS, sexual abuse, housing shortages and overcrowding, inadequate community infrastructure, education levels, and income levels all influence health and the quality of life. Solutions cannot be found without the partnership of several departments and agencies.

Early Childhood Development

- Partner with Pauktuutit to identify Inuit needs, priorities, and expectations;
- Conduct an interdepartmental review for funding sources for ECD, parenting, FASD, and related projects and initiatives;
- Refer to the *2006 Inuit Early Childhood Development Strategy* and partner with Pauktuutit on all Inuit ECD and related policies, programs and initiatives and

- Review past and present ECD programs and recommend changes for sustainability and future activities.

Fetal Alcohol Spectrum Disorder

- Sufficient, sustained funding for comprehensive, multidisciplinary training and for holistic prevention, diagnosis, management and intervention services;
- Each Inuit community be provided adequate, dedicated funds to fill a position to coordinate and maintain a multidisciplinary approach to FASD training and services;
- Resources sufficient to reduce barriers to participation in FASD training and provide support to participants before, during and after training;
- Prevention/awareness and intervention FASD training that is:
 - community based and holistic to build self-sustainable delivery over time;
 - culturally relevant, delivered by trained facilitators and be offered in English and Inuktitut;
 - designed in the context of the complexities of substance use;
 - targeted to community health care professionals, paraprofessionals, families and community members;
 - incorporated into all ECD/ECE teacher and on-going training to prepare staff to help manage and support children and families affected;
 - incorporated into elementary and secondary school teacher training and as on-going, regular in-service training for all school personnel;
 - aimed at secondary prevention, including specialized training in women-at-risk work, such as assessment, relationships and intervention/change strategies.
- Diagnostic capacity building should be a priority, targeted to community health care professionals and conducted by diagnostics specialists.
- Prevention and awareness that is:
 - part of the curriculum for elementary and secondary school students and
 - provided to young adults on an ongoing and regular basis;

EVERYONE AFFECTED BY FASD WILL DEAL WITH IT FOR LIFE. URGENTLY REQUIRED ARE:

1. A set of permanent, holistic, responsive support services for families and individuals affected, including, but not limited to, respite, home visits, recreational activities, independent living, resource lending, intervention and employment services;
2. A national mechanism to share leading edge information, best practices and resources across the Arctic;

FURTHERMORE

3. All programs and support services must respond to the unique needs of women in remote and isolated Arctic communities and
4. Evaluation and improvement of training programs and services needs to be ongoing to ensure relevance and sustainable results.