



National Aboriginal Women's Summit – *Strong Women, Strong Communities*

June 20 – 22, 2007 Corner Brook, NL

Issue Paper Theme: Sexual Health in Inuit Communities

Topic: An Overview of Risks and Opportunities in Inuit Sexual Health

ISSUE FROM THE PERSPECTIVE OF INUIT

RISKS

Inuit communities suffer from very high rates of sexually transmitted infections (STIs), specifically gonorrhea and chlamydia, and alarming rates of teenage pregnancies. As of 2000, teen pregnancy rates were over two and a half times (2.5) the national average in NWT; over four (4) times the national average in Nunavut. Also in Nunavut, Gonorrhea and Chlamydia rates in 2003 were nine (9) and 125 times higher than the national average, respectively. Gonorrhea and Chlamydia, while both cured with antibiotics, are often without symptoms and can cause infertility in both men and women. Human Papilloma Virus (HPV or genital warts) is also over-represented among Inuit and is a proven cause of cervical cancer among women. The rates of STIs and teen pregnancy among Inuit would indicate a grave potential for entry and spread of Hep C and HIV/AIDS, the most deadly of STI's.

Rates of HIV/AIDS and Hepatitis C among Inuit are at best unknown. Although the known diagnosed cases in Nunavut, for example, add up to only two people, this does not account for undiagnosed cases, nor does it account for Nunavummiut who leave the territory before they are diagnosed, nor those who leave Nunavut upon diagnoses in order to access specialized care and treatment for their illness. These individuals must come to Ottawa to receive the care they need.

Up to 10 per cent of all Inuit live in Canada's urban centres. Inuit come to Montreal, Ottawa, Winnipeg and Edmonton in order to pursue education and career opportunities. Still many other urban Inuit have fled their home communities to escape abuse, overcrowded housing, the legacy of residential schooling and poor living conditions in the North. While seeking a better life, they are often at higher risk for substance abuse, sexual exploitation and homelessness. This in turn places them at a high risk for contracting Hepatitis C and HIV/AIDS. Furthermore, if an urban Inuk is diagnosed with HIV in Montreal, he will not be included in any Inuit-specific data since Québec does not ask for ethnic identifiers. This lack of accurate statistics makes it very difficult to address the issue in an effective way.

It should also be said that there is a very high level and of fear, stigma and discrimination in Inuit communities when it comes to people living with HIV/AIDS and Hep C. The lack of openness around the topic causes increased risk of infection and makes it very difficult for Inuit PHA's (People with HIV/Hep C and AIDS) to stay in their home communities. The lack of knowledge about the illness often leads to isolation and ostracization for the Inuit PHA and can force them to stay in and hide their illness or else flee to urban centres where they may access care and treatment. This isolation and transition on top of a very aggressive and deadly illness can be overwhelming for many. Some fall through the cracks and become street-involved/homeless and vulnerable in the very urban centres where they were sent to get help.

WHAT IS PAUKTUUTIT DOING ABOUT IT? The Pauktuutit Sexual Health program includes:

COMMUNITY MOBILIZATION

HIV/AIDS and Hep C Arctic Community Fairs

Fairs include a public display of projects created by youth about HIV/AIDS and Hepatitis C that are judged by a panel of community leaders, health representatives, and the guest speaker. Cash prizes are awarded to the school class or community and a community feast is held to celebrate the Fair.

Sexual Health Symposia

Regional Inuit-region symposia target front-line workers (Community Health Workers, Public Health Nurses) in an effort to build capacity, exchange knowledge, reduce isolation and mobilise action around risks to sexual health.

Sexual Health Conference (upcoming)

The objectives of this event are the same as those for the Symposia but will include front-line workers and other stakeholders from each of Canada's Inuit regions. The Conference is to be held in the Western Arctic and with a theme that reflects the large-scale resource development that is underway in the Inuvialuit Settlement Region (ISR) and across the North.

Building Supportive Communities

This project targets health-care providers, AIDS service organizations and community support organizations in both Iqaluit and Ottawa in order to identify gaps in the care, treatment and support options for Inuit living with HIV/AIDS. The action items from this initiative are being pursued and are as follows:

- Ottawa
 - Volunteer Support Network
- Iqaluit
 - Referrals card (PHA's)
 - Diagnosis fact sheet (Physicians)
 - Elder sexual health support training

On the-Land Sexual Health Camp (upcoming)

Through a partnership with Qikiqtani Inuit Association and Pauktuutit, a group of representative Nunavummiut youth and elders from across the Baffin Region and Nunavut will travel to Aniyaaqvik Camp on Frobisher Bay (a spiritual healing and culture camp operated by two well-known Nunavummiut counselors), to explore the meaning of respect – respect for the land, respect for one’s self, and respect for one’s partner.

Training Module and Glossary (upcoming)

Pauktuutit will lead the development of a culturally-appropriate, Nunavummiut-specific and factually accurate Training Module to educate front-line workers (Community Health Workers, social workers, home care workers, among others) on Sexual Health issues. A glossary of sexual health terminology will be developed and will be translated into the two dominant Nunavut dialects – Inuktitut and Inuinnaqtun.

PROMOTIONAL TOOLS AND RESOURCES

- Posters
- Condom covers
- Passports
- Sheepa’ Story CDs and Cassettes
- HIV/AIDS and Hep C Fact Sheets

OPPORTUNITIES

Recommendations

- National, consistent tracking and surveillance for enhanced data to better inform policy on prevention, care and treatment;
- More National financial support for enhanced programming regarding HIV/AIDS for prevention, care, treatment and support;
- Preparation for growing negative impacts of increased resource development across the North - government must plan ahead and budget accordingly;
- More holistic approaches to health policy development and collaboration between government departments and levels of government; i.e.; housing, abuse issues, food security, health promotion, etc.;
- National HIV/AIDS myth-busting and de-stigmatization education programs for Inuit of all ages;
- Community/regional HIV/AIDS service organizations should be established in the North to enable Inuit PHA’s to stay in their communities.