

Our Communities **HEALTH**Information Sheet 7

Context

Prior to 1975, rudimentary nursing stations were only found in Nunavik's larger communities. Implementation of Section 15 of the *James Bay and Northern Québec Agreement* over the last 35 years provided a framework for major advances in the delivery of healthcare in the region, improving the general well-being of residents and supporting the growth of the population. Notwithstanding, the general health of Nunavimmiut now seems to have reached a plateau. The emergence of new challenges requires innovative solutions, the participation of residents and the contribution of a variety of local and regional institutions.

A Few of the Challenges

A shortage of Inuit staff makes it difficult to effectively deliver healthcare and social services in line with Inuit values.

The recruitment and retention of healthcare professionals is difficult. Moreover, a lack of housing has in some cases made it impossible to hire the staff needed to deliver additional services.

Some recent indicators show that the gap between the health of Nunavimmiut and other Québecers is continuing to widen. Psychosocial issues, such as substance abuse, mental health problems (including suicide), child sexual abuse and family violence, show few signs of abating. The impacts of social determinants on health must be evaluated and adequate responses implemented.

The region needs further cutting-edge broadband telecommunications infrastructure to take advantage of advanced healthcare technologies.

Some healthcare services are paid for with federal funds and, as future funding is not guaranteed, these services could be disrupted or cancelled. More resources are required to deliver services in new healthcare facilities.

In 2012, 89 cases of tuberculosis were reported in the region. Only a total of 12 and 27 cases were reported in 2010 and 2011, respectively.

Solutions and Priorities

Ensure the implementation of all the provisions of the *James Bay and Northern Québec Agreement* related to health and social services.

Consolidate basic front-line health and social services to help improve overall access to healthcare, while also promoting integrated health services, including access to dental services.

Establish proper drug and alcohol addiction treatment facilities to help deal with the long-standing issue of substance abuse and develop adequate aftercare services.

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Recruit and retain more Inuit staff, promote training and professional development for all Inuit front-line and management staff, and improve working conditions.

Extend the retention periods for healthcare professionals by improving overall working and housing conditions.

Continue the implementation of the seven-year healthcare funding agreement signed with Québec in 2011.

Improve telecommunications infrastructure to allow for the implementation of advanced healthcare technologies.

Focus on children, youth and families with enhanced preventive, curative and rehabilitative services.

Improve health facilities in the communities to take into account the integrated development of health and social services, including the need for isolation rooms, as well as additional positions and itinerant staff physicians and specialists.

Plan Nunavik pre-condition 4 – Health services in Nunavik require substantial additional human and financial resources from Québec that are culturally adapted to Nunavik Inuit.

Plan Nunavik pre-condition 6 – Investigation into child and youth protection services in Ungava Bay and Hudson Bay – Nunavik: Report, conclusions of the investigation and recommendations: The recommendations outlined in this April 2007 report and the September 2010 follow-up report of the Commission des droits de la personne et des droits de la jeunesse need to be implemented.

Discussion

The objective to deliver healthcare and social services in line with Inuit values depends heavily on the capacity to recruit Inuit staff with the proper educational backgrounds, while the continued improvement of the health of the general population depends on funding and other issues, such as better housing conditions, food security, a lower cost of living and job creation. Beyond these issues, improved health will depend on our commitment, as organizations, communities, families and individuals, to resolve the region's social problems and their effects on the development of youth.

