2010-2011 ANNUAL REPORT

on the State of Inuit Culture and Society



The Status of Inuit Children and Youth in Nunavut

Published by
Nunavut Tunngavik Incorporated
www.tunngavik.com

ISBN 978-0-9784035-8-4

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Front Cover by David Kilabuk

Cody Hughes (L) and Mika Angie of Arctic Bay fishing.





Executive Summary

Nunavut Tunngavik Inc.'s (NTI) 2010/11 Annual Report on the State of Inuit Culture and Society focuses on the status of Inuit children and youth in Nunavut, with a focus on ages 2 to 18. In 2008, NTI reported on the overall health of Inuit, with an emphasis on health service availability and delivery, and in many ways this report complements that document by focusing on the concept of wellness as it applies to Inuit children and youth, and the specific opportunities, challenges and priority areas associated with this rapidly growing demographic. Young people make up a larger proportion of Nunavut's population than in any other Canadian jurisdiction (see Figure 1). Children and youth are the most vulnerable people in society, relying on parents, guardians, and extended family members for food, shelter, nurturing, support, and protection. Factors impacting the well-being of Inuit children and youth, such as the availability of nutritious foods and reliable child, youth, and family services, adequate housing, and quality, early childhood and kindergarten to Grade 12 (K-12) education are beyond their influence or control. The high incidence of violent crime, sexual assault, and substance abuse in Nunavut can compound these challenges, making sustained political advocacy for this population all the more urgent.

In addition to facing these challenges, Inuit in this age group will inherit responsibility for leadership of the territory and its people, the transmission of Inuit language, knowledge, and way of life to subsequent generations, and the development of Nunavut's economy. They will soon be responsible for addressing issues such as poverty reduction,

increasing Inuit employment in government to a representative level, and the social and economic sustainability of their communities. The harmful impact of rapid climate change on country food acquisition and food security, as well as the health risks posed by contaminants within country foods, will remain a growing challenge.

Talk of ways to improve Inuit child and youth health and well-being, then, is not an abstract concept packaged into yet another policy report: the success or failure of Nunavut hinges on policy decisions made now that can help lay the foundation for the physical, mental, and cultural health and well-being of our people.

This report places the challenges facing Inuit children and youth within the context of international human rights. As a member state of the United Nations, Canada is obliged to uphold international standards for the fair treatment of its citizens, but has consistently failed to ensure that basic rights to adequate housing, education, food, and social services are extended to Inuit. Many of Nunavut's social and economic challenges are symptomatic of this failure.

On Nov. 12, 2010, the Government of Canada endorsed the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), a document ratified by the United Nations General Assembly in 2007 in order to establish clear standards for the treatment of Indigenous Peoples by their respective governments. Article 23 of that document describes

what NTI is optimistic can be achieved through the recommendations of this report: "indigenous peoples have the right to be actively involved in developing and determining health, housing and other economic and social programs affecting them and, as far as possible, to administer such programs through their own institutions." Similar rights are guaranteed under Article 32 of the Nunavut Land Claims Agreement (NLCA), which states: "Inuit have the right as set out in this Article to participate in the development of social and cultural policies, and in the design of social and cultural programs and services, including their method of delivery, within the Nunavut Settlement Area."2 As this report makes clear, Inuit have not been engaged by the Government of Nunavut (GN) or Government of Canada in a way that is consistent with the UNDRIP, nor has the GN met its legal obligations under Article 32 of the NLCA.

The future health and well-being of Inuit children and youth in Nunavut hinges on the willingness of the GN and the Government of Canada to work with Inuit organizations and communities as equal partners in development of the policies that affect our lives. Unless the social conditions that are barriers to the health and well-being of many Inuit children and youth are addressed by policy-makers and community members now, the challenges just described will be left to subsequent generations of Inuit who will also struggle to prosper under Nunavut's current socioeconomic state. The task of this report is to highlight these challenges and provide constructive criticism and coherent recommendations that will contribute to the hard work already in progress.

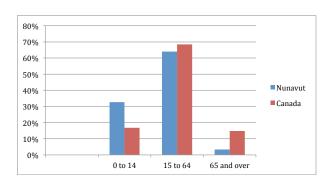
Public policy-makers and researchers are often in search of quick fix programs believed to alleviate burdens that negatively impact societal health and well-being, such as poverty, lack of education, violence, or addictions. Unfortunately, no quick fix exists that will immediately improve the health and well-being of Inuit children and youth overall, but ensuring access to high quality education is an excellent and defensible place to start.

Part 1 of this report focuses on the education status of Inuit children and youth, and incorporates research that demonstrates that investing in education – especially early childhood education – can be a cost effective, preventative healthcare measure with positive outcomes for students and their families. In Nunavut, Inuit parents are marginalized from decision-making about the schooling of our children, and this has led to a widening gap in trust between communities and schools that must be closed if our children are to experience the benefits associated with educational attainment.

Part 2 of this report addresses the interrelated challenges of child, youth, and family services, housing, suicide, and food security. We recommend that Inuit organizations, GN, Government of Canada must develop solutions to these challenges by using a more holistic understanding of Inuit wellness as articulated by Inuit organizations and communities.

Introduction

Figure 1. Age groups as a percentage of the population, Nunavut and Canada, 2011



Reporting on the status of Inuit children and youth in terms of wellness is important because it helps move beyond reductionist discussions of health data toward a more holistic understanding of Inuit societal health. Policy decisions in Nunavut are often modeled after southern Canadian ones, with a focus on closing the gap between the North and south in areas such as educational attainment, health, and quality of life. This approach becomes problematic when Indigenous acculturation and assimilation into the dominating society are required to achieve the desired ends. Including the concept of Inuit wellness in analyzing the status of Inuit children and youth is vital, because doing so respects Inuit ways of knowing and measuring progress, success, and fulfillment of gender and community roles and responsibilities. Incorporating the concept of wellness into policy discussions alongside health data empowers policy change on the basis of what constitutes well-being from an Inuit perspective.

Inuit Wellness

Wellness in an Inuit community context is about achieving balance and harmony in a number of social, cultural, and spiritual areas that include family and community cohesion, knowledge of language and culture, including on-the-land skills and associated values and beliefs, as well as having a positive selfconcept and sense of purpose. Inuit well-being can be described as being responsible to family, community, and future generations through individual choices, behavior, and actions. Achieving wellness for Inuit involves balancing these elements at the level of the family and community, rather than at the level of the individual. Wellness and more traditional health indicators are complementary and both must be at the centre of policy discussions for the status of Inuit children and youth to be improved. The policy implication is that decisions made in critical policy areas such as education and healthcare must be made on the basis of their contributions to Inuit well-being specifically, rather than on the basis of Eurocentric conceptions of health and social progress.

In a society in which sharing and humility are often valued above individual wealth and personal achievement, for example, it should be a given that the education system's pedagogy and curricula should strongly reinforce these values, rather than contradict them, as is too often the current practice. In a society where skilled hunters are highly regarded, attaining the skills that make a hunter highly regarded should become an alternative or additional measure of what it means to be an educated and successful person in Nunavut.

Inuit in Nunavut have not had a territory-wide discussion about where we want our people and society to be five generations from today, the approximate number of generations that have lived in settled communities governed by Canadian laws. Continued uncertainty about our collective direction as a people is particularly harmful to children and youth, whose lives and futures are, in too many cases, defined by challenges rather than by empowering opportunities to create their own futures.

What do we, as a society, want our children to know and be able to do by the time they reach adulthood? What must have status in our society in order for us to prosper with dignity? How might we reconstruct institutions or develop new ones to better reflect where we have been and where we want to be? These are important questions that Inuit must work together to answer as a community, with imaginations unburdened by politics, funding constraints, and social and economic realities.

For our part, NTI is committed to hosting a series of territory-wide dialogues around the issue of wellness as it relates to the long-term direction of our people and society. The product of these dialogues will become a useful blueprint that policy-makers can use to include the values and vision of our people in the work that we do.

Persisting Challenges

Nunavut is unique in that it is the only jurisdiction in Canada with a majority Aboriginal population. In 2006, 24,640 of 29,325 territory residents identified as



By David Kilabuk - Judy Akulukjuk on her bicycle during Canada Day celebrations in Pangnirtung, Nunavut.

Inuit (84 per cent of the population). ⁴The fact that Inuit constitute the majority of the territory's population means that, unlike in other provinces and territories where Aboriginal Peoples are minorities experiencing narrowly concentrated levels of social and economic inequity, many of the social, cultural, and economic health issues, challenges, and risk factors associated with colonized Indigenous Peoples are spread across Nunavut's entire population. Currently, comparative statistical information shows Inuit are more likely to die by suicide, abuse substances, and commit and experience violent crime and sexual assault, than Canadians as a whole. We are more likely to leave high school before graduating, live in crowded housing in need of major repairs, die from smoking induced lung cancer and heart disease, and experience shorter lifespans than non-Aboriginal

Canadians. In 2008, the Nunavut Economic Forum reported that for the most part, health and social conditions in Nunavut have improved only slightly since 1999, if at all.⁵

The reasons for these and other elevated risk behaviours among many – though certainly not all – Inuit and other Aboriginal Peoples are complex, yet all have profound consequences for the health and well-being of our families and communities, and especially children and youth.

These negative characteristics are not endemic to Inuit culture and society. Inuit are not genetically predisposed to elevated rates of the socio-economic indicators discussed in the preceding paragraphs.

Many Inuit believe that current social challenges are deeply rooted in the systematic displacement and disempowerment of Inuit families and communities: first, primarily through family relocation, coerced settlement in communities, schooling by the Government of Canada and colluding religious institutions and private economic enterprises in the North; second, and more recently, by federal and territorial policies that create power imbalances and inequity between Inuit and Canadians as a whole.

Many Inuit are experiencing the ripple effects of historical trauma, or "the cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma." Inuit, in what is now Nunavut, have undergone a rapid transition from autonomous life on the land to Canadian citizens, living in sedentary communities that are oriented toward the cash economy. Traditional forms of justice, education, and socialization have

been eroded and undermined in the process of this ongoing transition. Understanding the sources of historical trauma (and helping others understand it through education, especially those experiencing it), and how trauma influences Inuit society, is key to interpreting present day challenges and forming policy solutions that will help improve the health and well-being of Inuit children and youth in Nunavut.

Inuit as Equal Partners

At no step of the way have Inuit been equal partners with the Government of Canada in guiding this transition, but have instead been subjected to European-Canadian colonization. Colonization refers to formal and informal methods (attitudes, behaviours, institutions, policies, and economies) of subjugating and exploiting Indigenous Peoples, lands, and resources in order to further the social, political, and economic power of the colonizer. As this report helps illuminate, colonization is ongoing in Nunavut, and children and youth are bearing a large part of that burden.

Unequal power relations between Inuit and the GN and Government of Canada make it difficult for Inuit to exercise self-determination by making decisions about issues that impact the health and well-being of our children. Nunavut's education system in particular remains a flashpoint of contention and mistrust between Inuit parents, communities and the government that has serious health implications for Inuit children and youth.

Nunavut's population is young, with a median age of 24.8 years (compared to 39.9 years for Canadians as a whole) and almost a third (31.5 percent) under the age of 15.8

The incidence of suicide, violent crime, and substance abuse are as much as ten times higher for Inuit than national averages, and the poverty associated with low educational attainment compounds these problems. Challenges in these areas are exacerbated by variables that include a severe shortage of quality affordable housing and early childhood education programs, along with job scarcity, lack of access to essential healthcare services, and food costs. These interrelated factors are associated with Inuit children and youth's exposure to violent crime and unhealthy lifestyle choices, which make educational opportunities and many related benefits taken for granted by southern Canadians less accessible to Inuit.

Inuit children and youth are especially vulnerable, because in addition to being placed at risk by circumstances out of their control, they lack the means, resources, and essential services needed to improve their situation. Nunavut is the only jurisdiction in Canada that lacks a government-level child and youth advocate, for example. As discussed in Part 2 of this report, steps have recently been taken by the GN to create such an office, and NTI applauds the intent to do so.

The Challenges of Poverty

Nunavut's 25 communities are divided into three regions spread over a geographic area roughly the size of western Europe. With no roads linking communities, and in the absence of deep-water ports, food and goods not locally available must be flown into communities or brought by summer sealift supply, resulting in an extraordinarily high cost of living. Nutritious store-bought foods such as fresh produce can cost three or four times as much as in southern Canada. Bulk goods such as diapers and baby formula are prohibitively expensive in relation to the median household income of the territory, which stands at \$26,848 for persons 15 and over, or slightly lower than the \$26,850 median household income for Canada as a whole.

The combination of high food costs, poor decisionmaking by parents, and the cumulative effects of poverty, means an unacceptable number of Inuit children experience hunger or poor diets leading to health complications that can impact on a child's academic performance and future opportunities.

In 2008, approximately 49 per cent of Nunavummiut receive Income Support (Nunavut's social assistance program).¹⁰ In 2010, Inuit made up 78 per cent of the working age population in Nunavut, but only 64 per cent of all the employed people in the territory. The same year, the employment rate* in Nunavut was 46 per cent for Inuit and 89.5 per cent for non-Inuit.¹¹

Inequitable Access to Medical Services

Essential healthcare services are less accessible to Inuit in Nunavut than for southern Canadians because geographic distance between communities, high construction costs, and a shortage of healthcare providers often necessitates air travel in order for patients to receive care. In 2011, the Aboriginal advocacy organization Centre for the North determined that according to 2006 Census data, Nunavut's physician to population ratio is five doctors for every 10,000 people, or 15 doctors total. 12 The physicians-to-population ratio is smaller only in northern Saskatchewan, where there are three physicians for every 10,000 people. In contrast, there are between 20-29 doctors for every 10,000 people in most of southern Canada.

For most Inuit requiring treatment by a physician or for appointments with medical specialists, individuals must be flown out of their community. There is a health centre staffed by nurses in each Nunavut community, supported by regional health centres staffed by family physicians in Cambridge Bay, Rankin Inlet, and Iqaluit. These regional health centres provide birthing facilities for prenatal mothers, medical support to smaller communities through community visits, telephonic support for community nurses, and treatment of more serious cases following referral by community nurses.

The 35-bed Qikiqtani General Hospital in Iqaluit is the most functional hospital in the territory. Patients requiring serious medical attention such as surgeries, chemotherapy, or prenatal mothers giving highrisk birth, must travel to hospitals in Yellowknife, Edmonton, Winnipeg, or Ottawa for treatment. At the time of writing, there are no drug or alcohol inpatient rehabilitation programs in Nunavut. Individuals seeking such care must leave the territory for programs in Winnipeg, Ottawa, and Edmonton, or wherever the GN may have service agreements.

While Inuit are not racially or ethnically predisposed to unhealthy lifestyle choices and behaviour, we face a number of obstacles that make such choices and behavior more common than in non-Aboriginal populations. Who has power and status in Inuit society, how leadership and success are measured, how and why knowledge is transferred from one generation to the next, and how family and community cohesion is achieved and preserved these social conventions, values, and practices have undergone rapid change within a small timeframe. Inuit are navigating many complex challenges associated with colonization. Evidence of this struggle is most pronounced in the education system available to Inuit, the ethnic composition and manner in which the GN operates, and is reflected in an array of social and economic indicators that reflect striking inequity between Inuit living in Nunavut and Canadians as a whole.

Negotiating rapid social and economic change would be challenging for any society, yet Inuit are doing so within a framework of territorial and federal laws and policies that in some cases fall short of meeting basic human rights. Laws and policies affecting the well-being of Inuit children and youth are often crafted without Inuit consultation or input, let alone opportunities for Inuit to provide sustained guidance and implementation. The result is that in the last decade, policies that have the greatest impact on the health and well-being of Inuit children and youth have generally failed, as the Auditor General of Canada's 2011 report, Children, Youth and Family Programs and Services in Nunavut, makes clear. Bright spots do exist: development of the Nunavut Suicide Prevention Strategy in 2010 and the Nunavut Suicide Prevention Strategy Action Plan and the Makimaniq Plan: A Shared Approach to Poverty Reduction in 2011 involved cross-sector cooperation between Inuit organizations, the GN, and the public.

Relevant Child and Youth Wellness Indicators in Nunavut

- In 2002, the last year from which data are available, life expectancy in Nunavut (both Inuit and non-Inuit) was 68.5 years compared to 79.7 years for all Canadians, a difference of more than 10 years.¹⁴
- Nunavut's fertility rate is the highest in Canada, with the average woman having 2.97 children in 2007, compared to 1.66 for Canada as a whole.¹⁵
- In 2006, 34 per cent of Nunavut's population, or approximately one in three Nunavummiut, were under the age of 15 compared to 17.7 per cent for all Canadians.¹⁶

- In 2004, Nunavut had the overall highest proportion of live births to teenage mothers at 24.4%.¹⁷ For mothers as a whole, 45.4 per cent lacked a high school education in 2005.¹⁸ Parents who have limited education, few employment opportunities, and little access to childcare services are more likely to face social and economic challenges and make unhealthy lifestyle choices that place the health and well-being of their children at risk.
- In 2006, only 29 per cent of Inuit children aged 6
 to 14 in Nunavut had contact with a pediatrician
 or general practitioner in the last 12 months
 compared to 51 per cent of Inuit children living
 outside the Canadian Arctic.¹⁹
- The same year, only 57 per cent of Inuit children in the same age cohort had received dental care in the last 12 months.²⁰
- According to Statistics Canada, 64 per cent of Inuit in Nunavut aged 15 and over were daily smokers in 2006.²¹ Canadian Inuit as a whole have the world's highest rate of lung cancer.²² Smoking is a major risk factor in cancer and heart disease, the first and third leading causes of death in Nunavut in 2007.²³ Suicide was the second leading cause of death that year.
- The rate of suicide for Inuit in Nunavut is roughly 10 times the national average. In the past decade, 83 per cent (225 of 272 in 2008) of suicides were by men, and of this number, 70 per cent were by men under the age of 25.²⁴



 The rate of death by suicide among 15 to 24 year old Inuit men in Nunavut is 28 times that of their peers Canada-wide.²⁵

Statistics are reductionist because they boil down the stories of people and complex challenges into numbers for the sake of brevity. As an advocacy organization, we acknowledge that doing so can be insensitive and harmful, and apologize for our inability to present a more balanced picture of Inuit children and youth health and well-being in this limited space.

Inuit children and youth are among the most active in Canada, and have the benefit of growing up in the most culturally resilient Indigenous society in North America, where a majority of the population speaks the Inuit language and country foods continue to nourish our people. We are blessed that our children live in one of the last societies on earth that values sharing before personal gain, humility before personal accomplishment, and consensus before expediency.

The GN and Government of Canada can help address economic inequity and health and educational disparities, but this work will be protective rather than

proactive unless we come to consensus as a society about what optimal wellness looks like in an Inuit community context and how our concepts of wellness should be reflected in policies and services. We are fortunate to still have Elders with us carrying the knowledge of hundreds of generations, which tells us about surviving and flourishing in our homeland, as well as about social cohesion. Without clear guidance from our Elders articulating expectations for future generations, there is only uncertainty about what the future holds for our children and grandchildren.

A territory-wide conversation about what optimal health and wellness for Inuit could look like is therefore a critical first step we can take toward ensuring that the expectations for Inuit child and youth wellness laid out in this report, and others not yet articulated, are being met by parents and communities, and the appropriate institutions and organizations. NTI is committed to organizing a series of dialogues around the concept of Inuit wellness that will provide communities with an opportunity to articulate their expectations in relation to where we have been, where we are, and where we wish to be as a people and society.

Part 1:

Education and Well-being

"Indigenous peoples have the right to establish and control their educational systems and institutions providing education in their own languages, in a manner appropriate to their cultural methods of teaching and learning."²⁶

United Nations Declaration on the Rights of Indigenous Peoples
September 2007

The relationship between schooling and a wide range of social and economic outcomes is explored in this section, and the argument is made that educational reform must be the top priority area for NTI and the GN. Inuit have lacked real control over our own schooling for the entire 60-year period of governmentrun schooling in the eastern Arctic.²⁷ High school graduation rates are abysmally low, and of those students who do graduate, many are not adequately prepared for employment or post-secondary education. As a result, it is rare for Inuit to complete university and to occupy policy-making positions in government. And when territorial policy is developed by non-Inuit without at least a strong measure of Inuit participation, the power imbalances between Inuit and non-Inuit that Nunavut was established to eliminate are maintained. Inuit have consistently voiced disapproval of current education practices, yet the GN has been resistant to change.

Schooling continues to drastically alter the social, cultural, and economic landscape of Inuit society by curtailing the time youth spend with parents and extended family members at home and on the land where Inuit education traditionally takes place. Parents must play a strong role guiding the conceptualization and delivery of schooling, but in Nunavut this is currently not possible. Nunavut is the only jurisdiction in Canada in which locally elected school boards do not have quality control over schooling through measures which may include curriculum development, teacher and principal hiring and firing, and the development of community-based programs.

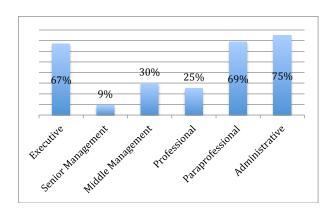
The GN's Department of Education appointed itself to oversee these responsibilities through passage of the 2008 Education Act,²⁸ a decision that in our view undermines the ability of Nunavut students to access a quality education. Challenges in Nunavut's K-12 education system are taking place against a backdrop of scarce early childhood education opportunities, and inequitable resourcing of Inuit language medium education. This section explores education policy changes that could result in positive, reciprocal effects on the health and well-being of Inuit society.



Schooling in Nunavut

When Nunavut was established in 1999, many Inuit believed the new government would establish a path to social, cultural, and political equity by fostering an environment in which the integrity of Inuit values, language, knowledge and identity were embraced rather than compromised by government. Decisionmaking power about what constitutes teachable or worthwhile knowledge, the manner in which knowledge is transmitted and for what purpose, continues to rest in the hands of non-Inuit educators, administrators, and bureaucrats from southern Canada (see Figure 2). This is a power dynamic that places Inuit parents and communities in a subordinate position when it comes to decision-making about what is best for our children. Inuit perceive this inequity, and many parents and community members are consequently reluctant to support an education system that in many ways is incongruous with our culture, identity, and way of life.29

Figure 2. Distribution of Inuit employees within Department of Education by ${\it category}^{30}$



Note: Numbers are based on the total number of available positions versus positions filled by Inuit as of December 31, 2010.

The 1999 NWT Labour Force Survey (Expectations of Nunavut) found that:

- 80 per cent of Inuit respondents believed the new territory would improve respect for Inuit values.
- 77 per cent of Inuit respondents believed the new territory would improve the teaching of Inuktitut and Inuinnagtun.
- 71 per cent of Inuit respondents believed the new territory would lead to improvements for the Inuit language generally.³¹

Education programs (69 per cent), economic development (63 per cent), and environment (65 per cent) were the next three areas of expected improvement for Inuit. But education research in Nunavut has documented that these expectations are largely unfulfilled.³²

Past governments have given lip service to Inuit wishes for more language, culture, and Elders in classrooms, yet little has changed about Nunavut's education system in the last two decades. In 1989, for example, the Baffin Divisional Board of Education published Piniagtavut: Integrated Program, a guide to help teachers move toward culturally responsive teaching by incorporating culturally relevant themes, and in 1996 the Government of the Northwest Territories' (GNWT) Department of Education. Culture, and Employment published Inuugatigiit: The Curriculum from the Inuit Perspective.³³These initiatives were coupled with increased training and hiring of Inuit teachers and helped bring more Inuit content into schools, particularly in the primary grades.

Although Inuit do work in schools, especially elementary schools, the majority of teachers, principals, and school operations administrators are non-Inuit and the curricula and pedagogy of classrooms are based on southern models.³⁴

Formal education was introduced in what is now Nunavut when missionaries and government agents (including the RCMP) pressured Inuit families to send their children to residential and community day schools following the end of World War II, sometimes exploiting the vulnerability of families by threatening to withhold government allowances families were promised. Families depended on these allowances during a time of transition to the cash economy and settlement life.35 This was a challenging time for many Inuit that included forced relocation and death by invasive diseases. Many children were separated from their families and communities and sent to residential schools for long periods, often unable to return home for years while enduring physical and sexual abuse and other forms of exploitation at the hands of their caretakers. These children were particularly disadvantaged, but all children including those at day schools in Inuit communities were impacted by what were often profoundly negative experiences in classrooms.

Today, avenues are scarce for parent and community participation in decision-making about what our children will be taught in school, what values will be enforced, what teaching methods will be used, and what qualifies as teachable knowledge and skills.

This marginalization helps sustain the dark legacy of Canadian schooling for Inuit in addition to preserving staggering educational deficits that in turn correspond

with social and economic inequity between Inuit and Canadians as a whole.

Focusing resources on improving Nunavut's education system now is a preventative healthcare measure that is cost effective and can improve the well-being of our society. The current education system has failed Inuit in Nunavut for an excess of 40 years. Truly alternative ways for educating our children must be developed and implemented.

Relationships Between Education, Health, and Well-being

In 2007/08, the last year in which data are available, the high school graduation rate for Nunavut was 32.4 per cent. High school graduation rates have been variable over the last decade with little remarkable improvement, and the average high school graduation rate between 1998/99 and 2007/08 was only 28.4 per cent.³⁶This compares to 71.3 per cent for Canada as a whole in 2006/07.³⁷

Discussion of graduation rates in Nunavut can be relatively hollow because students who do graduate often find that they lack the skills needed to function in the workplace or in university. In 2003, the International Adult Literacy and Skills Survey tested more than 23,000 Canadians for English or French language proficiency in four domains: prose, literacy, document literacy, numeracy and problem-solving, with proficiency rated on the basis of levels one to

five with one being lowest. In Nunavut, 88 per cent of Inuit scored below level three on the prose literacy scale, "The desired threshold for coping with the increasing skill demands of a knowledge society." This compared with 45 per cent of the non-Aboriginal population of Manitoba, and 39 per cent of the non-Aboriginal population of Saskatchewan.

These numbers are not surprising considering that the Inuit language is the first language of 83 per cent of Inuit (or 70 per cent of the territory as a whole) yet Inuit language of instruction is narrowly concentrated in the early grades. ⁴⁰ Sparse opportunities to receive Inuit language of instruction means students do not have the opportunity to develop advanced language skills in their mother tongue. ⁴¹The policy implication is that increasing opportunities for students to receive Inuit language of instruction is a key component of their educational success.

Highly educated individuals are better positioned to make healthier life choices, and in recent years data regarding the relationship between educational attainment and health have become more available. In 1993, The World Bank reported on the positive correlation between the availability of education, larger incomes, and child survival and overall health in developing countries.⁴² In a well-known 2008 study published in the journal Health Affairs, American researchers examined the educational disparities in life-expectancy (the average lifetime of an individual or group) and mortality (the number of deaths in a given period) among non-Hispanic blacks and whites in the 1980s and 1990s. Researchers based their findings primarily on the National Longitudinal Mortality Study and U.S. Census data. They found that educational attainment, life expectancy, and other health indicators are related:

- Between the 1980s and 2000, life expectancy increases occurred nearly exclusively among high-education groups.⁴³ "Low education was classified as 12 years or fewer of formal education while high education was classified as at least 13 years of schooling.
- Between 1990 and 2000, life expectancy grew 1.6
 years for the high education group but remained unchanged for the low education group.⁴⁴
- In 2000, a 25-year-old with a high school diploma could expect to live until 75 while a person the same age but with some university education could expect to live until 82.⁴⁵
- By 2000, lung cancer and chronic obstructive pulmonary disease (COPD) death rates were twice as high among low education white men and women and black men, compared to the more educated in these groups. There are two main forms of COPD: chronic bronchitis, defined by a long-term cough with mucus, and emphysema, defined by destruction of the lungs over time.
 Smoking is the leading cause of COPD.⁴⁶
- Between 1966 and 1995, smoking rates dropped 22 percentage points among the better educated, versus 18 percentage points among less-educated men. Between 1979 and 1995, smoking rates for better-educated women dropped 12 per cent compared to 5 per cent for less educated women during the same period.⁴⁷

The authors of the study note that all factors could not be controlled for, such as changing tobacco laws and public healthcare policy. But as a whole, declines in tobacco use and incidence of related diseases were more pronounced among the most-educated group across race lines. The study suggests not that education by itself leads to healthier outcomes, but that more education generally leads to more intelligent lifestyle choices in which people are less likely to engage in risky or unhealthy behavior.

In the words of study co-author David Cutler: "It turns out that across the board, if you look at any health behavior, better educated people do better than less educated. Anything from smoking, obesity, wearing seat belts, having a smoke detector in your house, not using illegal drugs, not drinking heavily, better educated people do better."

The disparity in average life expectancy at birth between Nunavut and the rest of Canada is shocking. In May, 2011, the Conference Board of Canada Centre for the North reported that Nunavummiut have the second lowest life expectancy in Canada at 68.7 years, compared to a national average of about 81 years. ⁴⁹ Nunavik had the lowest life expectancy at 66.7 years. This 12-year gap in average life expectancy makes Nunavut comparable to many third world countries, such as Bangladesh (68), Kyrgyzstan (69), Iraq (70.5), and Mongolia (68).⁵⁰

The potential for education to positively impact lifespan and other health outcomes begins early, with high-quality early childhood education programs often buffering challenges faced by children from low-income families. The early years of a child's life are a

vital time for physical growth and the development of motor coordination, emotional health, social competence, cognitive processing, language and preliteracy skills, and the development of language and identity. ⁵¹ The HighScope Perry Preschool study is the most well-known longitudinal study of the correlation between quality early childhood education and short and long-term social and economic benefits for participating children.

Between 1962 and 1967, 123 three and four-yearold low-income African-American children who were assessed to be at high risk of school failure were randomly divided into two groups. One group entered a high quality preschool program (58) and the other received no preschool program (65).⁵² In the study's most recent phase, 97 per cent of the study participants still living were interviewed at age 40 and additional data were gathered from the subjects' school, social services, and arrest records. Project staff collected data annually on both groups of students from ages three through 11 and again at ages 14, 15, 19, 27, and 40. After each period of data collection, staff analyzed the information and wrote a comprehensive, official report. The preschool program was considered responsible for positively impacting education, economic performance, crime prevention, family relationships, and health outcomes decades after students left the program. The following are some of the study's major findings:

 More program than no-program males raised their own children (57 per cent vs. 30 per cent); fewer program than no-program males reported using sedatives, sleeping pills, or tranquilizers (17 per cent vs. 43 per cent), marijuana or hashish (48) per cent vs. 71 per cent), or heroin (zero per cent vs. nine per cent).

- the no-program group significantly outperformed the no-program group on highest level of schooling completed (65 per cent vs. 45 per cent graduating from regular high school). The program group also significantly outperformed the no-program group on various intellectual and language tests from their preschool years up to age seven; on school achievement tests at ages nine, 10, and 14; and on literacy tests at ages 19 and 27. At ages 15 and 19, the program group had significantly better attitudes toward school than the no-program group, and program group parents had better attitudes toward their 15-year-old children's schooling than did no-program group parents.
- The program group had significantly fewer lifetime arrests than the no-program group (36 per cent vs. 55 per cent arrested five or more times) and significantly fewer arrests for violent crimes (32 per cent vs. 48 per cent ever arrested), property crimes (36 per cent vs. 58 per cent ever arrested), and drug crimes (14 per cent vs. 34 per cent ever arrested).
- Significantly more of the program group than the no-program group were employed at age 40 (76 per cent vs. 62 per cent), which continues the trend from age 27 (69 per cent vs. 56 per cent). The program group also had significantly higher median annual earnings than the no-program group at ages 27 and 40 (\$12,000 vs. \$10,000 at age 27 and \$20,800 vs. \$15,300 at age 40).

Rather than paying rent, receiving a subsidy, living with others, or being incarcerated, the program group had significantly more stable dwelling arrangements at ages 27 and 40—that is, more of them owned their own homes (27 per cent vs. five per cent at age 27, 37 per cent vs. 28 per cent at age 40). ⁵³

There are several unique factors that contributed to the success of the HighScope model. The HighScope curriculum treats children as active learners rather than sponges, inviting youngsters to plan their own projects each day, then carry them out and review what they learned. Froject teachers were paid salaries equivalent to public school teachers, most teachers held professional degrees in child development, and teachers made weekly visits to children's homes to show parents how everyday events could be transformed into teachable moments.

As they progressed through school, former Perry
Preschool students were less likely to skip school,
be assigned to a special education class, or repeat a
grade. But what explains early childhood education's
strong influence all the way through the adult years?
Because Perry Preschool was a multipronged effort
involving parent outreach, well-trained teachers, a
unique curriculum, and strong leadership, there is
no obvious answer, but quality preschool is believed
to ignite a chain reaction by arming children with
tools they need to succeed once they enter primary
school, and with early success leading to positive
reinforcement that carries through primary and
secondary school, leading to better employment and a
higher standard of living later in life.

The results of a similar study conducted in North Carolina compares the health outcomes of fifty-three 21-year-olds who participated in a preschool program (the Carolina Abecedarian Project) designed to enhance cognition and language development to fifty-one 21 year-olds who had not participated in early childhood education between 1972 and 1977. All 103 participants were identified as at risk of poor educational outcomes prior to the beginning of the study. Children's progress was monitored over time with follow-up studies conducted at ages 12, 15, and 21. The study found that the Carolina Abecedarian Project (ABC) preschool program was responsible for significantly improved health and reduced behavioral risk factors by 21 years of age for participants. ⁵⁵

Researchers found that those who had not attended the childcare program showed higher levels of depressive symptoms, and 37 per cent met diagnostic criteria for clinical depression. Among the childcare attendees, 26 per cent scored high enough on tests of depressive symptoms to be considered clinically depressed. Significantly, the correlation between a bad home environment and depression risk did not apply to the young adults who had participated in the program because, "The program buffered the effects of that difficult home environment." Additional major findings of the study include:

- Children who participated in the early intervention program had higher cognitive test scores from the toddler years to age 21.
- Academic achievement in both reading and math was higher from the primary grades through young adulthood.

- Intervention children completed more years of education and were more likely to attend a fouryear college.
- Intervention children were older, on average,
 when their first child was born.
- The cognitive and academic benefits from this program in particular are stronger than for most other early childhood programs.
- Enhanced language development appears to have been instrumental in raising cognitive test scores.
- Mothers whose children participated in the program achieved higher educational and employment status than mothers whose children were not in the program. These results were especially pronounced for teen mothers. 58

The Perry Preschool and ABC programs yielded positive results over time because children had access to well-trained teachers with early childhood education backgrounds. In the case of the Perry Preschool study, teachers had bachelor's degrees and certification in education, followed a prescribed curriculum emphasizing self-initiated learning activities, and studied and received regular training and support in the use of the curriculum. ⁵⁹ Both programs also stressed outreach to parents and included them as equal partners in the education of their children by sharing effective education principles and practices.

Inuit Language Education

Inuit face a difficult ultimatum within the current education system: adopt English as a first language and acculturate as a means for our children to succeed within English dominant schools, or settle for the status quo, in which language proficiency in both languages suffers to the detriment of educational attainment, the survival of our language and culture, and the overall health and well-being of our communities.



nearly all grade levels in Nunavut, despite the fact that Inuktitut is the mother tongue of 83 per cent of Inuit, and 70 per cent of the territory as a whole. An Inuit language of instruction track is available in most communities from kindergarten to Grade 3 or 4, but these students then experience an abrupt transition into an English language of instruction setting and the Inuit language becomes a subject of study. According to linguist lan Martin, the current practice of providing

Inuktitut language of instruction in the early grades

followed by an abrupt transition to English, "replaces

the child's first language with an imperfectly learned

English is the dominant language of instruction at

second language, and rather than allowing both languages to develop to a high level, too often neither language develops to its full potential."⁶¹ Linguist Louis-Jacques Dorais reached the same conclusion in his research, finding that, "words and meanings that most [Inuit language speaking] individuals under thirty to thirty-five years of age have at their command for expressing contemporary life in a modern community are English, for the good reason that English is the language in which they were taught."⁶²

Inuit are not equal partners with schools in making critical decisions about the school program, and time and again, Inuit have communicated that this is a source of frustration and resentment. The clearest statement of public concern came in 2009 when the GN contracted North Sky Consulting Group to undertake a comprehensive review (Qanukkaniq?: The GN Report Card) of the effectiveness of government programs and services. Consultants held public meetings and interviews in Nunavut's 25 communities and distributed an online survey, in the end soliciting feedback from 2,100 Nunavummiut. In regards to education, North Sky Consulting Group reports that:

Nunavummiut told us that their public schools are failing to provide a quality education that prepares youth to move successfully into the workforce or post-secondary educational and training programs. They are extremely concerned about the ability of communities to be involved in the governance of education, the suitability of the curriculum, the teaching of Inuit language, the suitability of bilingual education programs, the inclusion of Inuit culture in the curriculum, high dropout rates, truancy, social promotion, the lack of guidance counselors in most

schools, and programs for children with special learning needs. They told us that many children in Nunavut regularly go to school hungry.⁶³

Reconciling this inequity by building trust between communities and schools is a goal that Inuit education stakeholders identified as central to the success of the 2011 National Strategy on Inuit Education. Mary Simon, Chair of the National Committee on Inuit Education, advised in her introduction of that strategy that, "if we are to restore the trust of parents who have been deeply hurt by their own educational experiences, we must build an education system grounded in the Inuit culture, history and worldview, and with respect for the role of parents."64 Schools must accept the onus of initiating educational reform and fostering trust because parents have never played a meaningful role designing Nunavut's education system, and in many cases have as a consequence accepted educational inequity as, "almost normal." 65

The longer the GN waits to initiate closing the gap in trust between schools and families by demonstrating in its practice that the voices of Inuit parents and communities actually matter with regard to designing Nunavut's education system, the longer it will take for high school and university graduation rates to improve, and the longer it will take for Inuit children and youth to acquire the requisite credentials and certification needed to become teachers and principals in Nunavut schools, policy-makers in government offices, and nurses and doctors in Nunavut's medical facilities.

Implementing Inuitmedium Education in Nunavut

The 2008 Education Act and Inuit Language Protection Act include promises to implement bilingual Inuit language education in grades K-12 by 2019 in accordance with the wishes of Inuit. It is doubtful whether it will be possible for the GN to meet this objective because the majority of teachers, principals, and school operations administrators are non-Inuit, unilingual English speakers. 66 The ambiguous language used to describe Inuit language rights within these laws is further reason to question their enforceability. The words bilingual education and language of instruction are used in section 23 ("Bilingual education") of the Education Act and section 8 ("Inuit Language instruction") of the Inuit Language Protection Act. These terms are not clearly defined as enforceable rights within these laws, making it difficult to ensure that students are fully bilingual when they graduate.

A full bilingual education program is one in which two languages are used as media of instruction for all subjects, and students are able to develop all skills in both languages in all domains, with the result that they are capable of thinking and expressing themselves in either of two languages independently.⁶⁷ NTI reaffirms our position that in order for students to become fully bilingual Inuit language and English speakers, 80 per cent of K-12 language of instruction must be in the Inuit language and 20 per cent in English or French.⁶⁸

We recommend amending section 23 of the Education Act to include definitions of the words "bilingual education" and "language of instruction," where "bilingual education" is defined as: the proportional allocation of language of instruction time in K-12 in which the language of instruction is the Inuit language 80 per cent of the time, and in either English or French 20 per cent of the time. "Language of instruction" should be defined as: the language in which all communication takes place within a school.

Strengthening the **Inuit Teaching Force**

Inuit make up a slim minority (25 per cent) of Nunavut's teaching force, the majority of which is concentrated in the elementary grades. Moreover, the Inuit teaching force is shrinking at a time when Inuit language speaking teachers are needed most, with more Inuit teachers retiring or leaving the teaching profession than are being replaced.⁶⁹ Nearly all Inuit teachers are graduates of the Nunavut Teacher Education Program (NTEP) at Nunavut Arctic College, a program founded in 1979 and run today in conjunction with the University of Regina. The GN will have to find ways to expand this program, and recruit and retain more Inuit teachers in order to meet the 2019 language deadline. At the same time, action must also be taken to improve the overall quality of education in Nunavut.

Paul Berger is a professor of education at Lakehead University with extensive research and classroom teaching experience in Nunavut. In an interview

conducted for this report, Berger succinctly articulates the difficulties inherent within Nunavut's current education policies. "It's pretty unrealistic to expect that more teaching in the Inuit language without more Inuit teachers because there's just not a record of southern people coming up and learning the language, or at least not quickly enough to be able to teach in it."70



Niriniaqpaanga to her students.

Berger and a team of six third-year NTEP students at Nunavut Arctic College are in the process of analyzing preliminary findings from more than 100 interviews conducted with Nunavut high school students about their views of the teaching field as a possible career choice. Berger's team conducted interviews in eight Nunavut communities, with research results forthcoming in Oct., 2012. The preliminary findings from this study reveal that Inuit students are rarely engaged about the possibility of entering the teaching field, lack information about NTEP, and would like to teach upper grades that they cannot prepare for in Nunavut:

Half of the study participants had thought of teaching as a possible career. Academic preparation, however, concerned many. Housing and money concerned those who would need to move to a different community to study. Two-thirds of participants said

that no one had ever talked to them about teaching.
Two-thirds said that they did not have enough
information to apply to the Nunavut Teacher Education
Program. Three-quarters said they would think more
about teaching because of the interview, and half said
they would like to teach upper grades that they cannot
prepare for in Nunavut.⁷¹

Significantly, the largest barriers to entering the teaching field among those who indicated a desire to do so was finding housing and funding to get teacher training.⁷²

Elderly language speakers are less likely to become certified teachers, so it is essential that younger Inuit language speakers be actively recruited into the teaching profession now, before the effects of language shift isolates the language among older generations. Until language shift is reversed in Inuit society, the number of children learning the Inuit language will continue to decrease and the burden to maintain the language will fall disproportionately on the shoulders of Elder speakers. At the same time, Inuit language speaking teachers are needed to help eliminate the linguistic compromise students must



make as they struggle with language competence in both the Inuit language and English.

Health, Well-being, and Early Childhood Education in Nunavut

Because they are associated with higher incomes, reduced crime, and the enhanced global competitiveness of the workforce, early childhood education enhancements are considered by many economists to be more cost effective than traditional medical and public health approaches to improving population health.⁷³ UNICEF estimates that for every dollar invested in early childhood intervention, the return can be as high as \$8,⁷⁴ and the results of the HighScope Perry Preschool Study show that investments in quality early child education for the control group resulted in an economic return to society that was more than 16 times greater per pupil by the age of 40:

In constant 2000 dollars discounted at 3 per cent, the economic return to society of the Perry Preschool program was \$244,812 per participant on an investment of \$15,166 per participant—\$16.14 per dollar invested. Of that return, \$195,621 went to the general public—\$12.90 per dollar invested (as compared to \$7.16 in the age-27 benefit-cost analysis), and \$49,190 went to each participant—\$3.24 per dollar invested. Of the public return ... 88 per cent (\$171,473) came from crime savings, 4 per cent (\$7,303) came from education savings, 7 per cent

(\$14,078) came from increased taxes due to higher earnings, and 1 per cent (\$2,768) came from welfare savings. Preschool program participants earned 14 per cent more per person than they would have otherwise—\$156,490 more over their lifetimes in undiscounted 2000 dollars. Male program participants cost the public 41 per cent less in crime costs per person—\$732,894 less in undiscounted 2000 dollars over their lifetimes.⁷⁵

According to UNICEF, Canada is faring poorly in comparison to 24 economically advanced countries, ranking second to last in its fulfillment of 10 minimum standards for protecting the rights of children in their most vulnerable and formative years. These minimum standards are:

- Parental leave of 1 year at 50 per cent of salary.
- A national plan with priority for disadvantaged children.
- Subsidized and regulated childcare services for 25 per cent of children under three-years-old.
- Subsidized and accredited early education services for 80 per cent of 4-year-olds.
- 80 per cent of all childcare staff trained.
- 50 per cent of staff in accredited early education services tertiary educated with relevant qualifications.
- Minimum staff-to-pupil ratio of 1:15 in preschool education.

- 1 per cent of GDP spent on early childhood services.
- Child poverty rate less than 10 per cent.
- Near universal outreach of essential child health services.

Canada managed to fulfill only one of these standards, "50 per cent of staff in accredited early education services tertiary educated with relevant qualifications," in contrast to Sweden, which fulfilled all 10.⁷⁶

Childcare Availability

Currently, demand for childcare spaces in Nunavut far exceeds supply, and there are nearly 1,000 names on 45 licensed daycare and Aboriginal Head Start program waiting lists, with some parents waiting years on multiple lists in hopes of their child being admitted.⁷⁷ More than 200 of these names are on waiting lists in Iqaluit.⁷⁸

There is a smaller proportion of preschool age Inuit children in childcare in Nunavut than in Nunatsiavut, Nunavik, and the Inuvialuit region due to a lack of available care, rather than parent choice. Just 31 per cent of Inuit children aged 24 months and over and not attending primary school in Nunavut were in childcare, compared to 54 per cent in Nunatsiavut, 53 per cent in Nunavik, and 37 per cent in the Inuvialuit region.⁷⁹

In 2002/03, 54 per cent of preschool age children in Canada were in some form of non-parental childcare, nearly the same proportion as in Nunavik.⁸⁰

There are more children in childcare in Quebec overall than in the rest of Canada because the province, in recognition of the long-term social and economic benefits associated with childcare, has made significant financial investment in the administration of childcare services. Inuit children in Nunavik will benefit from this investment in the future.

In 2009/10, the Kativik Regional Government Department of Employment, Training, Income Support, and Childcare (EITC) received \$12,840,698 to administer 814 childcare spaces in Nunavik. The bulk of funding came from the Quebec government (89.5 per cent), 10 per cent from Human Resources and Skills Development Canada (HRSDC), and 6.2 per cent from the Public Health Agency of Canada.81 EITC's Childcare Section delivers technical support to the parent board of directors and staff of Nunavik's childcare centres in areas such as financial management, building management, insurance, learning activities, nutrition, health, hygiene, board activities, laws and regulations, staff management, and policy. EITC ensures that periodic visits to childcare centres are carried out and it maintains regular contact with centres to ensure compliance with applicable laws and regulations. The training in Inuktitut of educators in every Nunavik community is a stated priority of the Childcare Section, which provides a 1400-hour standard course that leads to a college attestation. Customized management training is delivered to a majority of childcare centre directors across the region as well.

As in Nunavik, Nunatsiavut, and the Inuvialuit region, daycare, not preschool or early childhood education, is the most common type of institutional childcare arrangement in the territory. Daycare differs from preschool or early childhood education programs in that emphasis is on general care, without prescribing to a specific curriculum and pedagogy designed to stimulate and measure the cognitive development of children. Accreditation requirements for staff working in daycares are also generally more lenient than for preschools or early childhood education programs, though this does not necessarily correspond to program quality.

Lack of available childcare options can limit the career pursuits and educational attainment of parents who must stay at home. This can place economic strain on families by reducing earnings, and increase the likelihood of household food insecurity. This is one reason past Nunavut Economic Outlook reports have emphasized the importance of investing in early childhood education programs. E2 Children not with a stay-at-home parent or enrolled in a childcare program are ostensibly in the care of relatives or friends. These informal childcare arrangements can be optimal for the transmission of Inuit culture, language, and values, but they can also be less reliable and create stress for working parents.

The GN's Department of Education's Early Childhood
Division provides support for early childhood
programs and services for children from birth to
age six and for licensed out-of-school programs for
children up to age 12. The division is responsible for
licensing, inspecting, providing support and guidance
to all early childhood programs, for providing

workshops and training opportunities for parents and early childhood educators, and for providing support for special needs children. But unfortunately, the division is small in proportion to the scale of desperate need, and there is a limited amount the division can actually do to support the creation and maintenance of quality childcare programs.

Responsibility for providing a service that contributes to the health and well-being of citizens and to Nunavut's economy in the long-term falls disproportionately on parents and regional Inuit organizations. Childcare programs in Nunavut are independent startups, the result of parents banding together to fill local need. In order to start a program, parents must find an adequate space that complies with the national fire code, the Public Health Act, and municipal zoning requirements. They must incorporate as a non-profit organization in good standing with Nunavut Legal Registries (family day homes do not need to incorporate themselves) and buy \$2 million worth of liability insurance before even applying for a childcare facility license. In exchange for the opportunity to operate a childcare program, program employees have access to incidental training and certification opportunities by a division stretched thin and unable to provide resources such as Inuit language teaching materials.

Childcare programs are licensed by the GN's
Early Childhood Division as non-profit societies in
accordance with the Child Day Care Act, Nunavut's
childcare legislation consolidated from the GNWT.

Programs are responsible for developing their own policies when it comes to curricula, staffing,

governance, and child waiting lists. Each receives different degrees of financial and professional assistance from organizations in Nunavut's three regions: Kakivak Association in the Qikiqtaaluk, Kivalliq Partners in Development in the Kivalliq, and Kitikmeot Inuit Association in the Kitikmeot.

These organizations mainly provide financial assistance for the basic operation and maintenance of programs in proportion to the percentage of Inuit children, and to programs in the form of subsidized staff wages and daily tuition costs for Inuit NLCA Beneficiaries. Funding comes primarily from HRSDC. Regional organizations work to distribute these dollars equitably, and childcare programs set their own tuition rates. Tuition rates therefore vary considerably across the territory and within each region. In the Qikiqtaaluk region, for example, tuition costs range from \$46 a day to \$15 a day. Kakivak Association offers tuition subsidies for NLCA Beneficiaries that help offset costs, but this subsidy is capped at \$19 per day per Inuk child.⁸³

Childcare programs in Nunavut experience high staff turnover due to low pay, lack of essential training in skills such as bookkeeping, and face financial challenges to accessing early childhood education courses or professional development opportunities in the Inuit language.

As a result of the minimum level of support programs receive, there is a high degree of variance in quality as communities work with scarce resources. In Oct., 2009, and Feb., 2010, NTI spoke with staff at all licensed early childhood education programs registered with the GN's Department of Education.

These conversations revealed that none of these programs utilizes a curriculum specifically designed to measure the cognitive development of children comparable to preschool, although almost all were Inuit language immersion programs stressing language development and on the land activities.

Nearly all staff members told us that the chronic shortage of childcare options for parents in Nunavut, poorly constructed or too few facilities, shortage of Inuit language reading materials, and the absence of core funding and government financial support for programs made delivery of high quality early childhood programs on a consistent basis difficult. Many individuals told us that the process of applying for grants to keep programs operating was overwhelming their staff and negatively impacted recruitment and retention.

Inuit Language and Early Childhood Education

Childcare services can be improved in part by amending the Education Act and Inuit Language Protection Act to help ensure that a high standard of early childhood education is accessible across Nunavut, and that such education is delivered in Inuit language immersion settings. NTI recommends that Inuit language immersion be defined as: "a learning environment in which the Inuit language is the language of communication and instruction 100 per cent of the time."

To the extent that the Education Act addresses early childhood education, section 17 (Early childhood program, Inuit language and culture) requires District Education Authorities (DEAs) to provide an early childhood program that, "promotes fluency in the Inuit Language and Knowledge of Inuit culture."84 This does not necessarily mean full-day programming with a permanent facility and full-time staff, but could be a family fun night with a language component focusing on pre-school age children.85 In order to strengthen the Inuit language rights of children, we recommend amendment to section 17 by inserting the language "Inuit language immersion" so that the section reads: "the district education authority shall provide an Inuit language immersion early childhood program that promotes fluency in the Inuit language and knowledge of Inuit culture."

The Inuit Language Protection Act is also passive when it comes to childcare programs. Section 9 (Early childhood education) mandates the promotion of, "early childhood Inuit Language development and learning involving children and their parents at the community level."86 NTI recommends amendment to section 9 by inserting the language, "Inuit language immersion as the basis for," so that the section reads: "the Government of Nunavut shall promote Inuit language immersion as the basis for early childhood Inuit language development and learning involving children and their parents at the community level." Moreover, we recommend that the right to receive a bilingual education as articulated in section 23 of the Education Act be extended to include early childhood education programs licensed by the GN.

Currently, 84 per cent of young Inuit children under the age of six have at least one parent with the Inuit language as their mother tongue. 87 Although the majority of childcare programs are Inuit language of instruction programs, there is no guarantee that parents will have access to Inuit language of instruction care in the future.

Childcare Quality Control

As we have seen, quality early childhood education programs can have positive, long-term effects on the lives of children who attend them, yet in Nunavut parents lack access to information about practices that can contribute to long-term positive outcomes in an Inuit early childhood education context.

Professional development for program staff is key, and the Inuit Language Protection Act promises professional development for childcare workers, but the Department of Education can do more to provide parents with the tools they need to make fundamental choices about the quality of care they would like their children to receive.

The Early Child Daycare Act sets low expectations for program staff and operators, and does not set quality standards for early childhood education for Nunavummiut. For example, section 52 of the legislation requires program operators to, "encourage training of staff through appropriate courses or seminars, if available." 88 The act should at minimum guarantee professional development opportunities in the Inuit language for program staff within the

law's qualifications and training section, and program operators should, with the support of the GN's Early Childhood Division, be required to encourage primary staff to seek certification in early childhood education.

Greater support for childcare program staff should include an increase in training and accreditation opportunities that develop expertise in early childhood education. This long-term goal is consistent with early childhood education research findings identified by Inuit Tapiriit Kanatami (ITK).



ITK identifies Nunatsiavut's early childhood education program structure and certification process as a model for all Inuit regions. The Government of Newfoundland and Labrador's Department of Child, Youth and Family Services childcare regulations are relatively stringent, requiring specific levels of education and work experience for early childhood education program operators and staff members. Program operators are required to hold two-year diplomas in early childhood education and must have at least two years of work experience in a licensed childcare centre. Lead staff persons must hold a one-year certificate in early childhood education and be certified to work with the age groupings of

the children for which the centre is licensed.⁹⁰The Newfoundland and Labrador Association for Early Childhood Educators is responsible for certifying early childhood educators.

We recommend that the GN's Department of Education work closely with Inuit educators and Inuit organizations to develop an Inuit language early childhood education curriculum framework that communities can modify for local use, as well as to provide consistent training in its use. Such a curriculum framework could help ensure a baseline of quality childcare, and its introduction would be an educational opportunity to highlight the developmental needs of Inuit children. The GN's Early Childhood Division is currently understaffed and lacks the capacity to carry out this work.91 We recommend that the division be expanded for the purpose of fulfilling this need, as well as to provide more robust training for childcare workers. Childcare workers without a background in early childhood education or access to professional development opportunities are not as well equipped to facilitate the long-term benefits associated with quality early childhood education.

Educators in Nunatsiavut are utilizing what educators have termed developmentally appropriate practice.

Developmentally appropriate practice is a teaching philosophy meant to ensure that a baseline of knowledge about early childhood development among teachers is in place, guiding decisions about the structure and operation of programs. Such practice may include, for example, developing a curriculum premised on the understanding that each individual child develops according to his or her

own timetable and pace, and thus has unique needs and characteristics at different stages of learning; or that there are optimal periods of readiness in a child's learning that are recognizable and important to capitalize on. These practices should be locally situated and developed by the people and communities served. Early childhood education research can help shape the development of curricula (what children learn and when), learning processes (how children learn), instructional strategies (how teachers will teach), and assessment methods (how to know what children have learned and to plan for the future) within Inuit community contexts. 92

Inuit Control of Inuit Education

In order for an education system to be an effective lever of social change, parents, students, and community members must have confidence that the skills and knowledge gained through participation have value and relevance to their lives. Such trust is an essential ingredient to the success of Nunavut schools because many Inuit regard formal Canadian education with skepticism, due to the fact that formal schooling has, from its inception, formed an integral part of an assault by Euro-Canadians and their culture on Inuit culture and society.⁹³

Education researchers have identified social trust as a core resource for school reform and student success. A relationship based on respect is conducive to trust, and parents need assurance that schools are serving the best interests of their children and

those of the community. Respectful relationships are difficult to foster if parents are marginalized from school decision-making and governance. Nunavut is the only jurisdiction in Canada where the opportunity for parental governance of schools is not guaranteed through local school boards or an equivalent governing body. This is a universal human right protected by the United Nations Universal Declaration of Human Rights. Article 26(3) of the Declaration states that, "Parents have a prior right to choose the kind of education that shall be given to their children." Inuit parents in Nunavut have no such prior right.

A new form of education is possible when schools work in equal partnership with community members to develop curricula and pedagogy, with the long-term goal of transferring complete control of schools to Inuit teachers and administrators. In order for such cooperative relationships to be possible in Nunavut communities, policies outlined in the 2008 Education Act must be revised.

The Nunavut Education Act

Nunavut's education system under the 2008 Education
Act falls short of counter-balancing the legacy of
colonial schooling in the Arctic. This legislation
instead preserves power imbalances that Inuit and
Indigenous Peoples everywhere are engaged in
struggle to overcome. Furthermore, the manner in
which the act was developed contravenes Article 32
of the NLCA because Inuit organizations were not
allowed to participate. Article 32 reads, "Inuit have

the right as set out in this Article to participate in the development of social and cultural policies, and in the design of social and cultural programs and services, including their method of delivery, within the Nunavut Settlement Area." 95 NTI was included in the initial development phases of the legislation as a co-chair of a joint steering committee, but that committee was dissolved in 2006 following a dispute between non-government members of the working group and the GN concerning language of instruction drafting instructions. Drafting of the Education Act was then undertaken exclusively by the GN with targeted input from like-minded stakeholders.

By closing the only avenue available for Inuit participation in the development of the act, the GN contravened UNDRIP, which establishes a set of international standards for the treatment of Indigenous Peoples within our respective jurisdictions. Ratified by the United Nations General Assembly in Sept., 2007, UNDRIP recognizes the rights of Indigenous families and communities to retain shared responsibility for the education of our children, and Article 14(1) states that, "Indigenous peoples have the right to establish and control their educational systems and institutions providing education in their own languages, in a manner appropriate to their cultural methods of teaching and learning." 96

The Government of Canada agreed to uphold these standards when it endorsed UNDRIP on Nov. 12, 2010, with Indian and Northern Affairs Canada calling the occasion an, "opportunity to reiterate our commitment to continue working in partnership with Aboriginal peoples in creating a better Canada." 97

Inuit Marginalized from School Planning

Prior to the passage of the Education Act, NTI submitted 77 recommended changes to the Nunavut Legislative Assembly's Health and Education Standing Committee in 2008, 72 of which were rejected from inclusion in the final version of the bill. These recommended changes included: vesting power in DEAs to set the school curriculum and measure the effectiveness of the school program; defining the meaning of bilingual education as it is used in the act; and including policy recognition of the educational and developmental value of traditional activities on the land, including measures to evaluate these activities and incorporate them into a student's final assessment.98 These recommendations aim to ensure Inuit students' right to an education in our own language and culture, and that these rights can be adjudicated if necessary.

In addition to the UNDRIP and the United Nations' Universal Declaration of Human Rights, the near unilateral rejection of these recommendations also contravenes the United Nations Convention on the Rights of the Child.



Nunavut and the United Nations Convention on the Rights of the Child

The Convention on the Rights of the Child is the first legally binding international instrument developed to acknowledge and protect the civil, political, social, economic, and cultural rights of people less than 18 years of age. The United Nations General Assembly opened the convention for signature on Nov. 20, 1989, and Canada ratified it on Dec. 13, 1991. In a 2003 letter addressed to the Prime Minister of Canada, Nunavut Premier Paul Okalik expressed his support for the objectives and principles contained in the convention, and extended the GN's formal support for its ratification. 99 In relation to the Education Act, the GN is in violation of Article 30 of the convention, which states:

In those States in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practice his or her own religion, or to use his or her own language.¹⁰⁰

The Education Act guarantees the inclusion of Inuit language and modest cultural components such as Inuit Qaujimajatuqangit into Nunavut's education system,¹⁰¹ but the ambiguous language used to describe these rights undermines their enforceability.

By dismissing Inuit concerns, the GN has jeopardized our children's internationally recognized human right to receive an education in a culturally and linguistically appropriate context. This is a failure of the system that can place Inuit children and youth at an academic disadvantage.

Canada's endorsement of the UNDRIP and the Convention on the Rights of the Child are meaningless unless Canada's provinces and territories are held accountable for honoring the standards set out within them. The GN must fulfill its legally binding obligation to abide by the terms of the NLCA, the Convention on the Rights of the Child, and other international human rights standards, by working with Inuit as equal partners toward the development of a legitimate education law.

Local Control

The status quo of failing schools inevitably led to poor health outcomes and greater risk behavior among students, the majority of whom leave school before graduating. The GN must devolve key decision-making powers over education to Inuit communities represented by DEAs if policy-makers wish to see greater numbers of Inuit leading healthier lifestyles under more positive social and economic conditions.

The Department of Education's decision-making power extends into areas traditionally reserved for local school boards and districts in all other Canadian provinces, such as teacher and principal hiring and firing, expulsion of students, and professional and curriculum development. The Minister of Education

is responsible for determining the school curriculum under the Education Act, which may be adjusted locally by a publicly elected DEA subject to ministerial approval. DEAs structurally resemble local school boards, but lack the power to exercise authority over important school functions.

In contrast to the position of the majority Inuit population, the ethnic and linguistic interests of Nunavut's francophone community are protected by the Commission scolaire francophone du Nunavut, a corporation established by the Education Act that functions as a school board, "responsible for the provision of public education in the French language for the children of rights holders in Nunavut." Democratically elected members of the commission must be French language rights holders, as do those who elect them. The commission is independent of GN ministerial oversight in developing and delivering its own curriculum to francophone student rights holders in Grades 1-12.

In order to help ensure that Inuit have a comparable avenue for input and control over key school functions, we recommend amendments to the Education Act that limit the minister's role to establishing the certification process for teachers, establishing broad education standards and curriculum guidelines, allocating block funding to DEAs, exercising arms-length supervision over DEAs, and providing intellectual and administrative support. 103 We further recommend the reciprocal devolvement of ministerial powers that do not include these responsibilities to DEAs.

The GN and Inuit organizations can learn from the past and ongoing experiences of Inuit in Greenland to develop a more robust, responsible, and democratic education law. Inuit in Nunavut and Greenland share similar challenges, such as chronic shortages of Inuit teachers in their respective jurisdictions, high rates of teacher turnover among non-Inuit teachers, and challenges related to community capacity building. Taking the efforts of Inuit educators, advocates, activists and allies in this jurisdiction into consideration may shed light on how rhetoric around Inuit Qaujimajatuqangit and bilingual education can be unraveled and turned into meaningful education policy, curricula and pedagogy that contribute to students' learning in equal partnership with parents, community members, and regional school boards.

Atuarfitsialak: Greenland's Countrywide School Reform Initiative

Greenland's Atuarfitsialak (the good school) countrywide school reform initiative was launched in 1998 when the Ministry of Education declared a need for a new educational system based on the language, culture, and history of Greenlanders. This latest step in the evolution of Greenlandic education marks a strong departure from previous education models imported from Scandinavia and is one of the largest steps Greenland has taken toward decolonization. 104 The ministry commissioned a small group of administrators from the country's education

clearinghouse organization Inerisaavik (Institute for Arctic Education) to develop ideas for the new school system. Inerisaavik settled on the University of California's Berkeley-based Center for Research on Education, Diversity & Excellence's (CREDE) Standards for Effective Teaching and Learning principles as the framework most conducive to effecting the changes sought.¹⁰⁵ Reform leaders adopted these standards as a shell to fill with Greenlandic culture and values. They are: (a) Joint Productive Activity - teachers and students collaborating on joint products; (b) Language and Literacy Development - teachers supporting language development in all classrooms and subjects; (c) Contextualization - teachers making connections between students' prior knowledge and new information; (d) Complex Thinking - teachers supporting students' engagement and skills in critical thinking; and (e) Instructional Conversation - teachers instructing through dialogue.

Education in Greenland falls under the jurisdiction of the Ministry of Education, Research and Nordic Cooperation. The Legislative Assembly provides the legal standards and operating rules for public schools and their administrators. Authorities in each of Greenland's four municipalities guide the students' daily work, and locally elected school boards ensure the influence of parents in the daily activities of each school. 106 The founding of Inerisaavik in 1991 coincided with Greenland's 1990 School Act and the country's need for a professional and materials development centre overseeing its implementation. Key to passage of the 1991 act was a comprehensive commission investigation in which parents, members of school boards and local politicians got the opportunity to express themselves. Similarly, Inerisaavik convened

a colloquium of parent groups, teachers, school leaders, education experts, and community members to provide input and share ambitions and concerns surrounding Atuarfitsialak. This input was later used to write the 2002 School Act, Greenland's current education law. This action is considered the single most important event in the development and implementation of Atuarfitsialak from the perspective Inerisaavik.

Atuarfitsialak differs from similar Indigenous education initiatives premised on greater student educational attainment with the aid of localized. culturally compatible curricula and pedagogy in one important respect: the Greenlandic language is relatively unthreatened, and Atuarfitsialak's reforms stress the need for increased Danish language proficiency among Greenlanders as the key to broadening post-secondary opportunities. But at the core of the Atuarfitsialak countrywide school reform initiative is the desire by many Greenlanders for an education system that helps facilitate the strengthening of Greenlandic students' identity through school content and teaching practices that are in synchrony with Greenlandic society, and which at the same time lead to greater student engagement and higher educational attainment. Atuarfitsialak closely parallels the vision of education expressed by many Inuit in Nunavut in this respect.



Recommendations

Childcare: The GN and Government of Canada must work to ensure that each community has a solid base of high quality, early childhood education by providing capital funding to support programs, developing a territorywide curriculum framework in partnership with NTI, and expanding the role of the Early Childhood Division to provide increased support to childcare programs.

Revise Education Act: The GN should fulfill its NLCA Article 32 responsibilities, as well as the education standards established by UNDRIP, the United Nations Universal Declaration of Human Rights, and the United Nations Convention on the Rights of the Child, by working in equal partnership with NTI and regional Inuit organizations to revise the Education Act. Where possible, this work should be informed by consultation with Nunavut communities, with community feedback guiding the conceptualization and implementation of education policy.

Bilingual Education: Consistent with these revisions, the Government of Canada must work with the GN to fully finance development and implementation of a full bilingual, K-12 education system.

Systemic Educational Reform: The Education Act should be revised through an equal partnership between NTI, GN, and regional Inuit organizations. Particular emphasis should be placed on devolving ministerial authority over critical school functions to local DEAs. We see NTI and the GN benefitting from consultation with the Government of Greenland throughout this process.

Part 2:

Health Services and Living Conditions

"Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control." 107

United Nations Universal Declaration of Human Rights

Adopted by the United Nations General Assembly December 1948

As the Universal Declaration of Human Rights makes clear, everyone has a right to a standard of living conducive to the health and well-being of the individual, including food, clothing, housing and medical care, and necessary social services. These basic needs are not being met for a large proportion of Inuit children and youth in Nunavut, many of whom are experiencing hunger, unreliable child, youth, and family services, overcrowded housing, and epidemic levels of youth suicide. Despite living in one of the wealthiest countries on the planet, too many Inuit children and youth are experiencing third-world living conditions.

Inadequate or unavailable mental health services in the territory of Canada most in need of them increases the likelihood that Inuit with mental health

disorders will attempt to cope through dysfunctional behavior or self-harm. The number and scale of these challenges is overwhelming, and will remain so unless a more coordinated, holistic approach to delivering health and social services is taken by the appropriate GN departments with financial support from the Government of Canada.

Promising first steps toward resolving some of these longstanding challenges have been taken with the finalization of the Makimaniq Plan: A Shared Approach to Poverty Reduction, Nunavut Suicide Prevention Strategy, Nunavut Suicide Prevention Strategy Action Plan, and the current government's support for the proposed Child and Youth Representative Act.

This section focuses on three social and economic areas that are impeding the health and well-being of Inuit children and youth in Nunavut: housing, suicide, and food security. It also suggests ways NTI, the GN, and the Government of Canada can coordinate to deliver social and health services, and reiterates our position that school reform can assist in overcoming these challenges.



The Makimaniq Plan: A Shared Approach to Poverty Reduction

The Makimaniq Plan: A Shared Approach to Poverty Reduction is the result of a public engagement process co-sponsored by NTI and the GN. Regional roundtables culminated in Nunavut's first poverty summit, held in Iqaluit Nov.28-30, 2011. The plan is informed by summit participants, who identified six themes framing Nunavut's approach to poverty reduction: collaboration and community participation, healing and well-being, education and skills development, food security, housing and income support, and community and economic development. Aspects of these six themes as they relate to Inuit child and youth health and well-being are explored in the pages that follow, complementing the holistic nature of that document and the steps being taken by NTI and the GN to implement identified solutions.

Improving Child, Youth, and Family Services

Social services are classified as a human right under Article 25(1) of the United Nations Universal Declaration of Human Rights. On March 8, 2011, assistant auditor general Ronald Campbell presented the findings of auditor general Sheila Fraser's audit of children, youth, and family programs and services

in Nunavut in the 2011 Report of the Auditor General of Canada. The report's findings are shocking, and reveal the staggering inability of these departments to respond to the basic needs of Nunavut's most vulnerable population. Fraser reported on the performance of the four key GN departments responsible for protecting the interests of children, youth, and their families: Health and Social Services; Culture, Language, Elders and Youth; Education; and Justice. The report investigates only the performance of Family and Social Services in detail, and assesses coordination between all four departments in health and social services delivery.

The Department of Health and Social Services was found to have failed to carry out important duties, such as conducting criminal record checks of potential adoptive parents of children under the Adoption Act, or performing the required safety checks of foster homes and completing annual compliance reviews of child protection files under the Child and Family Services Act. Fraser also found that the lack of formal coordination in departmental program areas such as family violence and early childhood development, "could be undermining the potential benefits of these programs and services to recipients." 109

In total, the auditor general's 2011 report makes 20 recommendations, all of which the GN has accepted and pledged to act upon. These recommendations focus largely on the role of Health and Social Services community social service workers, emphasizing the need for accurate and consistent record keeping, better training to ensure child protection laws are met, as well as supplemental training, including Inuit societal values training to facilitate better

communication between non-Inuit Health and Social Services employees and the communities they serve.

The auditor general's report acknowledges that in order to implement these measures, the Department of Human Resources must develop a hiring strategy to fill vacant community social service positions.

In 2009/10, 17 of the 46 community social service worker and supervisor positions were not filled by a permanent or casual employee or supervisor, and four communities were without a permanent full-time community social service worker or supervisor during this time. One community lacked any social service employees. The shortage of community social service workers has resulted in the needs of communities being unmet and the overburdening of current employees.

The GN agreed to act on this recommendation. NTI suggests two options for the Department of Human Resources: more vigorous outreach and recruitment of qualified non-Inuit to fill vacant positions; or the marathon approach to fulfilling Nunavut's healthcare needs by working closely with the Department of Education to support systemic educational reform as a mechanism for increasing the number of university educated Inuit needed to fill government positions. Considering the time-sensitive nature of filling vacancies, the first option may be necessary now, but the second is crucial in the long-term if the social services needs of Inuit children, youth and families are to be met, and if the GN ever hopes to fulfill its NLCA Article 23 Inuit hiring obligations.

Inuit Children in the South: Inuit Relocation in the 21st Century

The Government of Canada used manipulation and force to relocate many Inuit families into permanent settlements after World War II, causing social instability that was further compounded by residential schools and invasive diseases such as tuberculosis. This is a traumatic and unresolved chapter in the collective memory of Inuit, and it forms the backdrop to contemporary social challenges. Today, some Inuit children are again experiencing relocation, but this time to southern Canadian communities. The auditor general reported that as of July, 2010, 57 children were living in 24 group homes or residential care facilities in southern provinces due to the inability of the GN to provide the necessary programs and services. 111

The auditor general found that only two of eight southern facilities had been properly licensed by Child and Family Services, which means that basic licensing procedures in place to protect children, such as criminal background checks, had not been met in the other six. The auditor general also found that in five of seven cases examined, community social service workers had not fulfilled their obligation to meet annually with children to assess their progress and revisit their care plan, if necessary. If Inuit children abandoned in unlicensed childcare are experiencing sexual abuse, for example, they have no guarantee of protection by the GN.

Equally alarming, there is no evidence that the Inuit language, culture, and identity of children living in group homes or residential care facilities in the south is reflected in the education children receive or in the general care provided. Access to one's language and culture is a human right, identified in Article 14(3) of UNDRIP, which states:

States shall, in conjunction with indigenous peoples, take effective measures, in order for indigenous individuals, particularly children, including those living outside their communities, to have access, when possible, to an education in their own culture and provided in their own language.¹¹²

Inuit foster care workers in Nunavut have been vocal about the challenges Inuit children face to culturally rehabilitate when they return home. 113 Children receiving care outside of Nunavut and separated from the Inuit language and culture may unwillingly experience cultural assimilation into Euro-Canadian society, in contravention of Article 8(1) of the UNDRIP, which states that "Indigenous peoples and individuals have the right not to be subjected to forced assimilation or destruction of their culture." 114 This right is reinforced by Article 30 of the United Nations Convention on the Rights of the Child, which states that, "indigenous children shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practice his or her own religion, or to use his or her own language." 115

Inuit children and youth must access services outside the territory as a result of capacity challenges. These capacity challenges pose indirect threats to fundamental aspects of Inuit wellness, characteristics of which include a strong sense of collective identity reinforced by our common language, culture, and history. Development of Nunavut's Inuit human resources is the only viable long-term solution to filling the needs currently being met by southern group homes or residential care facilities. Like daycare centre employees, group home employees require training and education, consistent support, and basic skills such as budgeting and knowledge about nutrition and healthy eating. Many of our people lack understanding of how to apply this knowledge in their own homes, let alone in residential care facilities. Building capacity to ensure that all foster children are cared for within the territory therefore hinges on the GN's willingness for educational reform and a more equitable working relationship with Inuit organizations and communities.

A Child Representative for Inuit Children and Youth

Nunavut is the only jurisdiction in Canada without a government-level child and youth representative. In June, 2012, the GN proposed to enact a Child and Youth Representative Act to protect and promote the rights of children. This office would receive and respond to concerns from children, youth, and families who are seeking or receiving services under the Child and Family Services Act. NTI applauds the GN's intent to establish this office, which, much like

an ombudsmen, would be independently appointed and report directly to the legislative assembly. This policy guidance is needed to help ensure that child and youth services in Nunavut meet the standards set out by the United Nations Convention on the Rights of the Child.

Nunavut's Housing Emergency

Article 11 of the 1966 United Nations International Covenant on Economic, Social and Cultural Rights recognizes the right of every man, woman, and child to an adequate standard of living for himself and his family, including adequate food, clothing and housing. The Commission on Human Settlements and the Global Strategy for Shelter to the Year 2000 provides this definition of adequate:

Adequate shelter means ... adequate privacy, adequate space, adequate security, adequate lighting and ventilation, adequate basic infrastructure and adequate location with regard to work and basic facilities - all at a reasonable cost.¹¹⁶

The scarcity and poor condition of housing in Nunavut is having a debilitating effect on the health and well-being of our society, and Inuit children and youth are bearing the social and psychological costs of what commonly equate to third-world living conditions.

The small, private housing market in Nunavut is limited to a handful of larger communities, and building a home is not a realistic option for most, as the price of transporting building materials by

sealift to communities and the prices associated with construction are staggering.

Nearly half of all households in the territory lack enough bedrooms for residents and are considered crowded or require major repairs such as defective plumbing or defective electrical wiring, leaking oil or sewage tanks, or a broken hot water boiler. The material circumstances of housing - size, condition, location, having water delivered and sewage pumped out, the presence and condition of appliances - have implications for the mental health and well-being of residents, with overcrowding often associated with anger, depression and domestic violence. 117 In a crowded home, for example, water supply can be less secure in households, in which the water supply is held in tanks that must be refilled, making it difficult for members of the household to maintain hygiene or cook meals for children when water runs out prematurely.

People living in crowded households are also more likely to contract physical ailments such as colds, coughs, flu, and tuberculosis due to close living quarters. Ailments can be exacerbated by the stress of living in noisy, crowded housing without privacy, where sleep can be difficult. Poorly ventilated housing, often the result of housing made deliberately airtight by residents during the cold winter months, may adversely affect the health of those residents, particularly children and youth.

According to the 2006 Aboriginal Children's Survey, 48 per cent of Inuit children under six-years-old in Nunavut lived in crowded housing, and 27 per cent lived in dwellings requiring major repairs.¹¹⁸



By David Kilabuk - Janine Machmer holds fresh picked berries.

A separate 2007/08 survey of Inuit pre-school age children in 16 communities found that 52.7 per cent of homes were crowded, starkly contrasting with the three per cent of non-Aboriginal homes in Canada classified as crowded, according to the 2006 Census.¹¹⁹

A 2007 study published in the Canadian Medical Association Journal collected data on respiratory health and indoor air quality for 49 Inuit children under five in the Qikiqtaaluk region of Nunavut. Inuit infants have the highest reported rate of hospital admissions because of lower respiratory tract infections in the world. The study found that infection was significantly associated with indoor carbon dioxide levels and occupancy: on average, there were 6.1 occupants per house (as compared with 3.3-4.4 in southern Canada), ventilation rates were below the recommended Canadian standard in 80 per cent of the houses, and carbon dioxide levels often exceeded recommended concentrations. Elevated carbon dioxide in the home is an indication of crowding and reduced ventilation, and the policy implication is that crowded and poorly ventilated housing are twin problems that must be addressed in order to improve aspects of child and youth health. 120

The 2007/08 Inuit Child Health Survey of 388 preschool age children ages 3-5 in 16 communities shows that high incidence of respiratory infection among children is not isolated to the Qikiqtaaluk region.

That study found that 42 per cent of children had to go the health centre or hospital within the last year for a respiratory illness such as coughing, asthma, bronchiolitis, bronchitis and pneumonia, and that about 32 per cent of children surveyed had a serious lung infection before their second birthday.¹²¹

Poorly ventilated, overcrowded housing may also lead to growth of mildew and mold within the structure of houses – fungi that can cause respiratory health problems as airborne spores are inhaled. Mildew and mold growth occur in moist environments.

Poorly ventilated, crowded households can be especially vulnerable to mold and mildew.

Nunavummiut may be unaware of the risks associated with poor ventilation and moisture build-up, opening windows or utilizing other forms of ventilation in subzero temperatures may seem counterintuitive.

Not surprisingly, Nunavut's housing emergency makes it challenging for residents to function in school

and in the workplace, and in a living arrangement in which many residents are unemployed, frustrated and angry with their living circumstances, and in which substance abuse, smoking, and violence are common, it can be extremely difficult for children and youth to flourish.

Between Nov., 2009, and June, 2010, the GN conducted a territory-wide Housing Needs Survey in order to determine the housing needs of Nunavummiut. The survey found that of Nunavut's 9,400 households, 8,555 are occupied by their usual residents, while 850 dwellings are unoccupied or occupied temporarily by persons who consider their usual home elsewhere. 122

The average person per household ratio in Canada was 2.5 in 2006. If this ratio were applied in Nunavut in 2011, there would need to be an additional 3,921 housing units built, for a total of 13,321.

Territorywide, 49 per cent (4,030) of occupied dwellings are crowded or require major repairs, and are thus classified as below housing standards (see Figure 3). 123 This number varies by region, with 44 per cent of occupied dwellings crowded or requiring major repairs in the Qikiqtaaluk region, 56 per cent in the Kivalliq, and 58 per cent in the Kitikmeot. In reality, these numbers are even higher due to the statistical skewing that occurs as a result of comparatively spacious non-Inuit households being included in the survey.

Figure 3. Nunavut and three regions: characteristics of housing needs 124

Nunavut and regions	Dwellings below housing standards	Number of homeless at time of survey	Number of dwellings required to house groups wishing to move out
Nunavut	49% (4,030)	Approximately 1,200 (4% of total population)	3,580
Kivalliq	56% (1,240)	Approximately 400 (4% of regional pop.)	1,030
Kitikmeot	58% (820)	Approximately 230 (4% of regional pop.)	790
Qikiqtaaluk	44% (1,970)	Approximately 600 (3% of regional pop.)	1,760

Out of the 21,000 or so people living in a dwelling below housing standards, about 10,500 respondents or slightly more than half indicated that they would move out if more housing units were available in their community, either individually or in groups. In order to meet the housing needs of this group, 60 per cent of who would move out in groups and 40 per cent alone, 3,580 new units would need to be built.¹²⁵

Shockingly, 1,200 individuals surveyed (four per cent of Nunavut's population) by the Nunavut Bureau of Statistics indicated that they were homeless and living temporarily in another person's dwelling, the proportional equivalent of 1.36 million chronically homeless Canadians. 126

There are few homeowners in Nunavut, with 80 per cent of occupied households being rented. The majority of homes are classified as public housing, and 99 per cent of public housing residents were Inuit in 2009. Public housing costs the GN \$21,950 a unit, constituting up to 15.3 per cent of overall government spending. Many Inuit would like to become homeowners, but cite high costs (56 per cent) and difficulty financing (20 per cent) as major barriers. 128

Thousands of Inuit have been wait-listed for additional public housing, with 3,780 Nunavummiut aged 15 years and over reporting that they were on the waiting list for public housing. This means that 20 per cent of Nunavummiut 15 and over are waiting for public housing. Thirty-five per cent (1,330) of these individuals reported being on the waiting list for at least one year, with about 14.6 per cent (550) of those wait-listed waiting for at least five years. 129

A Growing Population, a Growing Need

Nunavut's population is the fastest growing in Canada, growing 15.3 per cent (4,401) between 2002 and 2010. One third of Nunavut's population is under 15 years of age, and in 2007 Nunavut had a fertility rate of 2.96, the highest of any jurisdiction in Canada. Nunavut's population may grow to as much as 44,200 by the year 2036, an increase of approximately 10,000 due to the young age of the population combined with a high fertility rate. ¹³⁰ As Nunavut's population continues to grow, social problems will become exponentially worse unless housing development can keep pace with the growth of the population.

A 2006 case study of the characteristics of housing and homelessness conducted by social scientist Frank J. Tester in cooperation with a team of Inuit researchers in Kinngait (Cape Dorset) provides a detailed picture of the ramifications of Nunavut's housing crisis. The study was carried out in the summer of 2005 and involved 91 residents living in 91 randomly selected households. About 46 per cent of respondents received social assistance, with almost 44 per cent receiving the Child Tax Benefit, and 36.3 per cent eligible for the HST rebate. Only 14.3 per cent of the population received no government assistance of any kind. A large number of respondents lived in crowded housing, and in one case, 13 people were living in a three-bedroom unit which included four children under five, three children between five and 10, two between 11 and 15, two between 16 and 20, and two adults, 41-50 years of age. The salient points of that report follow:

- In 2006, young people under the age of 15 constituted 38 per cent of Kinngait's population. Nearly 42 per cent of survey respondents had at least one child 5 to 10 years of age living in the household, and the number was 49.5 per cent for children 11 to 15 years of age, and 52 per cent for youth 16 to 20 years of age.
- Depending on the definition of overcrowding applied, between 36 (39.6 per cent) and 45 (49.5 per cent) households surveyed could be classified as overcrowded.
- Forty-five per cent of respondents indicated that having fewer people in the house would help with personal problems, the top three being: people being angry (29.3 per cent), problems with school (19.5 per cent), and depression (17.1 per cent).
- Inuit were asked to share their opinion about what problems experienced by others living in their household might be related to overcrowding. The top six reasons given were: they never have time alone (19.6 per cent), they get angry (14 per cent), they think it's always noisy (14 per cent), they have trouble sleeping (11.9 per cent), they sometimes fight (11.2 per cent), they get depressed (9.8 per cent).
- Of those Inuit reporting that they needed a different house, housing design (18.7 per cent), age of house (16.4 per cent), and overcrowding (14.2 per cent) were the top three reasons given.
 Of those Inuit reporting someone living in their house in need of their own house, old enough (40.5 per cent), lazy/don't help (16.5 per cent), and

- make too much noise (12.7 per cent) were the top three reasons given.
- Of the 67 residents who reported what happens when there are problems with water and sewage, 38 (56 per cent) reported that nothing happens, 24 (35.8 per cent) reported that children cannot be fed, and another 24 (35.8 per cent) reported that other people get frustrated. Twelve (17.9 per cent) respondents reported that children are late for school as a result of problems with water and sewage.

A significant number of respondents identified experiencing depression as one consequence of living in crowded housing. Some respondents identified going out on the land as a strategy for coping with problems experienced at home, yet many indicated that they did not possess the expensive equipment needed to do so, with 15 per cent saying they were bored as a result, and 5.5 per cent indicating that this boredom leads to depression.¹³¹

This research reveals that crowded housing impacts the mental health of individuals in ways that are difficult to measure. Tester's case study is a glimpse into the complex relationships between levels of education, lack of meaningful employment and overcrowding that help to explain the social and mental health problems experienced by some people in the community. Nunavut's housing crisis may have the most negative impact on young people who have had the opportunity to leave the community and experience living conditions in southern Canada, or have personal knowledge of the standard of living elsewhere, which Tester estimates, "may contribute



significantly to feelings of hopelessness, confinement and, ultimately, depression in a population of young Inuit with increasing levels of education." ¹³²

Children and youth living in crowded homes in which residents are often angry, stressed, frustrated, and fighting as a result of poor living conditions and poverty, and in which basic utilities are often broken, food scarce, privacy rare, adequate sleep difficult to come by, and quiet space for relaxation and study nonexistent, will not be prepared to succeed in school and may eventually leave school, falling victim to the cycle of poverty entrapping too many Inuit in Nunavut. Without education, a large proportion of Inuit in Nunavut will remain dependent on social assistance, living lifestyles and making choices that negatively impact subsequent generations.

Housing Solutions

Immediate increase in federal investments in housing will be imperative to help keep pace with Nunavut's rapidly growing population, and to alleviate a housing emergency. Between 2000 and 2011, the Nunavut

Housing Corporation, the government corporation responsible for public housing, will have built just 120 units annually. At this pace, it would take nearly 30 years just to build the number of units needed now, and yet Nunavut's population will have grown by as much as 16,500 at that time if all factors remain constant. The federal government must rapidly increase investment in and the building of public housing in the short-term in order to relieve part of the crushing burden of poverty, poor health, and violence being experienced by Inuit families, children and youth.

As new public housing units are built with priority given to families in the most need, a number of coordinated steps must simultaneously be taken by the GN to ensure that all factors contributing to Nunavut's population explosion do not remain constant, such as improved educational opportunities, economic development and poverty reduction, and innovative solutions aimed at creating more private homeowners in the territory. Not doing so will result in unceasing reliance on public housing in the long-term, stretching GN capacity beyond its means.

Nunavut's Elevated Suicide Rates

If Nunavut were a country, its suicide rate would be the highest in the world and the rate of suicide for Inuit youth even higher. More than all other health indicators, the elevated rate of completed suicides and suicide attempts by Inuit reflect the hopelessness and despair that many of our children, friends, and relatives are experiencing. Nunavut's elevated suicide rate is symptomatic of several interrelated factors negatively impacting on the health and well-being of our society, and youth are struggling under the weight of that burden. The combined effects of poverty, inadequate and overcrowded housing,

colonialism, substance abuse, sexual assault, and the consequences of inadequate mental health and child, youth, and family services place enormous stress on our entire society. This stress is magnified within a framework of Euro-Canadian colonization, and the political, social, cultural, and economic disempowerment that Inuit are experiencing as a result.

Suicide among Inuit is a relatively recent phenomenon, with just one suicide recorded during the entire decade of the 1960s. This starkly contrasts with the 2000-2007 average of 23.4 completed suicides per year, or nearly two suicides every month (see Figure 4).

Figure 4. Total number of suicides and annual suicide rates in Nunavut, 1999-2011 134

Year	Number of suicides	Suicide Rate per 100,000 population*
1999	21	78.3
2000	26	94.6
2001	28	99.5
2002	25	86.7
2003	: : 37	126.2
2004	27	90.4
2005	24 · · · · · · · · · · · · · · · · · · ·	79.1
2006	29	94.2
2007	22	70.4
2008	: 29	91.7
2009	27	83.7
2010	30	91.4
2011	34	102
Total	359	91.4 (average)

^{*} Suicide rates per 100,000 population are calculated by dividing the number of suicides by the total population estimates as of July 1 and by multiplying by 100,000.

Between 1999 and 2011, there were 359 deaths by suicide in Nunavut at a rate of 91.4 deaths per 100,000 population. ¹³⁵ By contrast, the average rate of suicide for Canada as a whole during the same period was 10.9/100,000. Suicide rates were rising in what is now Nunavut prior to 1999, from 48.7/100,000 (1985–1987) to 66.7 in the following four years, and then from 75.1 (1991–1993) and 85.5/100,000 between 1994 to 1996. ¹³⁶

Inuit suicide in Nunavut is uncharacteristic of suicide for that of all Canadians in several ways, but most troubling is the fact that most completed suicides in Nunavut are by young Inuit aged 15 to 24. Between 1999 and 2008, the greatest number of deaths by suicide took place among Inuit youth aged just 15 years old, with 25 deaths. 137 Between 1999-2003, the rate of suicide for Inuit men aged 19 to 24 was roughly 50 times that of all men in Canada in that age bracket, and yet strikingly, there is no evidence that young Inuit men in Nunavut suffer from mental illnesses at anything like 50 times the rate at which their peers in the south do. 138

Understanding of the complex variables and risk factors that can lead to suicide is slowly evolving with the ever-present need for more research. A young Inuk man who lives in overcrowded housing, abuses substances, was sexually assaulted as a child, learns little in school that could help him understand the cycles of historical trauma impacting Inuit communities, and lacks access to quality, culturally appropriate counseling in his first language, is at greater risk to die by suicide than his peers with a more positive upbringing. Addressing areas of weakness in areas such as housing, education, and child, youth, and family services individually has

not worked to improve the health and well-being of Nunavut communities, and there is consensus between NTI, the GN, RCMP, and Embrace Life Council that a more coordinated approach is required, with communities playing the lead role guiding suicide prevention efforts. Still, many gaps remain in what is known about suicidal behavior in Nunavut, and little evidence-based research exists advocating for a definitive plan of action that assures successful suicide prevention.

Many of today's suicide risk factors share common origins in historical trauma resulting from major social and economic upheaval in Inuit society. This trauma is similar in nature to the post-traumatic stress experienced by soldiers returning from war zones, with the main difference being that Inuit have generally lacked the frame of reference and proper support needed to come to terms with deeply traumatic experiences in our past and their reverberating effects to the present. These rapid and radical societal changes are ongoing, and have included introduction of the cash economy, the Government of Canada's relocation of Inuit into sedentary communities, residential schooling, and epidemic diseases such as tuberculosis and influenza.

The cumulative historical trauma associated with these events can help us trace the origins of Nunavut's present day social challenges impacting on the status of Inuit children and youth. This social dysfunction must be mitigated through transformation of our entire society.

Lisa Wexler is a professor of Community Health Studies at the University of Massachusetts, and her research focuses primarily on Inuit youth suicide in Northwest Alaska. Her 2005 dissertation is likely the most comprehensive study of Inuit youth suicide and relies heavily on focus-group discussions with youth in the region's 12 communities. Northwest Alaska's suicide rate was elevated to 81/100,000 during 1999-2005. Wexler's research focuses on the role the region's institutions have played, contributing to negative perceptions of self and community among Inupiat youth, and the potentially devastating consequences these perceptions have. The education system in particular, she argues, is in an optimal position to help change these perceptions by equipping young people with the tools they need to decode the historical and contemporary forms of oppression that can leave individuals vulnerable to feelings of hopelessness and despair. Wexler's observations about schools are particularly salient within the context of this report:

Without full support from home, many young Inupiat 'lose interest' in school and stop going by grade 7. These 'drop outs' still want to succeed in 'the (Western) world', but have not gained the skills to do so. Their failing is understood as a personal failure, not an institutional one, e.g. not the failing of the schools. Blindness to current forms of oppression perpetuates individual and collective subjugation. Since social problems are believed to be the result of individual and collective lacking, Inupiat have no one to blame but themselves. This is itself a form of oppression because responsibility (and guilt) is placed on individuals who have little control over the institutional or structural frames that increase the likelihood of their failure. This spiral can lead to a pervasive feeling of hopelessness. 139

Schools can offer youth and others a collective sense of purpose by helping to unveil the effects colonialism and oppression have had and are having on communities, and in doing so will create new opportunities for communities to participate in the reconstruction of our society. This argument is consistent with the 2010 Nunavut Suicide Prevention Strategy's finding that social challenges in Nunavut must be mitigated through transformation of our entire society rather than through piecemeal focus on individual policy areas.

The Nunavut Suicide Prevention Strategy was developed through a partnership between NTI, GN, RCMP, and Embrace Life Council, with a vision to reduce Nunavut's suicide rate to the Canadian average or below. Nunavummiut have been exposed so directly and repeatedly to suicide that many have come to accept the situation as normal. The strategy is the culmination of two years of research and community consultation by strategy partners, and presents eight action-oriented commitments that partners believe will reduce the rate of suicide in Nunavut. It speaks to the necessity of cross-sector partnerships and community ownership in tackling the interwoven, complex challenges related to suicide prevention.

In addition to discussion in partner meetings, the strategy is informed by a total of 54 community consultation sessions held across the territory, reaching 500 people and hearing feedback from 251 people between April-August, 2009. Participants shared their thoughts about factors underlying suicidal behavior and put forward possible solutions, and also responded to ideas outlined in the working

group's 2009 Discussion Paper on Suicide Prevention in Nunavut. Community participants in those consultations expressed support for a mixture of greater professional help and more community activities. The area of greatest concern for participants seemed to be the shortage of mental health counselors and services in Nunavut. Significantly, people talked not so much about the quality or type of these services, but their very availability and the need for existing mental health service positions to be filled, and for more to be created. A mere 66 per cent of the 328 Health and Social Services professional positions are filled, with Inuit occupying only 30 (9.1 per cent) of those positions.

The policy implication is that mental health services available to Nunavummiut need to be of at least the same range and quality as those available to other Canadians living in the south, if not more and better services than the average community in the south due to Nunavut's elevated suicide rate. Community members who participated in consultation leading up to the strategy also expressed desire for culturally appropriate services, including more Inuit counselors and social workers, and more services available in Inuktitut. In addition to such services, people said they wished to see coping and parenting skills being taught, along with life-affirming community activities that strengthen self-esteem and knowledge of traditional skills.

The Nunavut Suicide Prevention Action Plan, released in Sept., 2011, is the companion document to the strategy. The action plan was developed in partnership between NTI, the GN, RCMP, and Embrace Life Council, and provides a roadmap for the



implementation of the strategy from the time of the document's release until Mar. 31, 2014. The action plan is encouraging, outlining eight broad commitments and 41 specific objectives to reducing the rate of suicide in Nunavut to the rate for Canada as a whole or lower. These commitments focus on increasing access to suicide prevention training, equipping youth with coping skills, improving mental health services, greater transparency, and more robust research on this issue. The document commits action plan partners to long-term accountability and responsibility for outcomes, and to the process of ongoing evaluation and monitoring of the implementation of the strategy's goals and objectives. Continued crosssector collaboration in this fashion is essential to mobilizing all of the resources needed to combat Nunavut's suicide epidemic.

Social scientists Frank J. Tester and Paule McNicoll have affirmed the importance of situating discussion about Inuit youth suicide in relation to ongoing imbalances of power between Inuit and southern Canadians, with the policy implication being that if interventions in Inuit suicide are to be successful, interventions must be designed and researched with the intent to return autonomy to Inuit in all areas of our society. 143 From the standpoint of selfdetermination, it is clear that reform of Nunavut's education system in order to return control to parents and communities as well as providing avenues for greater community participation and control in all political decisions made with regard to suicide prevention are twin goals that may help to prevent suicide.

Nunavut may be its own territory, but the Government of Canada has a responsibility to invest in work to reverse social and economic disparities created by some of its own policies. Without financial investment in essential mental health services such as counseling that give Inuit at least the same level of access to mental health services as southern Canadians, it is unrealistic to believe the rate of suicide in Nunavut will decline to a rate anywhere near the national rate. Looking ahead, Inuit must have control of our lives if we are to control our future and improve the health and well-being of our society. Again, as outlined in Part 1 of this report, social change will begin at the level of the family and education system working in partnership toward outcomes determined to be of value by parents and communities.

Food Security

People are food secure when they can acquire safe, nutritionally adequate, and culturally acceptable foods in a manner that maintains human dignity. 144 Statistics Canada defines households as food insecure if survey respondents had, in the previous year, been in at least one of the following situations: because of a lack of money they or someone in their household had not eaten the quality or variety of food that they had wanted; had worried about not having enough to eat; or had actually not had enough to eat. 145 By this definition, over half of Nunavut's population (56 per cent) reported food insecurity in 2005, compared to 14.7 per cent for all Canadians. 146 The severity of food insecurity varies by community within Nunavut. In 2001 for example, 83 per cent (76 of 92) of surveyed Inuit adults in Kugaaruk were food insecure, and 82 per cent (71 of 86) of children were considered food insecure. 147

Inuit children are experiencing high levels of food insecurity, which is reflective of, and contributes to, their poor health status.

According to the 2007/08 Inuit Child Health Survey, 70 per cent of Inuit toddlers aged 3 to 5 are experiencing some level of food insecurity. According to that survey, 24 per cent of 3 to 5-year-olds were from homes reporting evidence of severe child food insecurity (having to skip meals or eat only small meals due to lack of food), with those households receiving income support and living in public housing more likely to be child food insecure. 148 Older children also experience food insecurity. According to Statistics Canada, nearly four in 10 (39 per cent) Inuit children

aged 6 to 14 reported experiencing hunger because the family had run out of food or money to buy food in 2004. 149

Too often, what children are eating is unhealthy and of little nutritional value. The Inuit Child Health Survey found that of those children surveyed, 35 per cent of total energy from food came from high sugar or high fat food and drinks, such as chips, candy, soft drinks, powdered sweet drinks, high sugar cereals, fruit juice and high sugar baked goods, and junk food. These high sugar diets are contributing to significant oral health problems early on, with as much as 69.1 per cent of children aged 3 to 5 years reported to have had a decayed, extracted or filled tooth in 2008. Research has identified a causal relationship between food security, nutrition, and housing, as evidenced by the higher incidence of vitamin D deficiency among children living in crowded homes.

In Canada, there is a correlation between food insecure households and income level, with households with the least earnings at the highest risk of experiencing food insecurity. The median total family income for all Canadians is \$69,850 compared to \$62,680 in Nunavut, a difference of more than \$7,000.153 Inuit earn less than Canadians as a whole, despite living in communities where the price of food is at least double if not triple or quadruple southern Canadian prices. For example, in 2008, the cost of a basket of food for a family of four in Igloolik was \$551, more than twice the price of the same basket in Montreal (\$238).154

Nunavut's high cost of living relative to household income underlies food insecurity for Inuit, but there

are several complex and interrelated stresses that compound this issue. These stresses include high prices for store-bought foods, high fuel prices and decreasing access to country foods, limited knowledge about store-bought food nutrition, healthy eating, and cooking, lack of experience budgeting, and the multivariable effects of climate change on country food acquisition. Ford and Beaumier provide an apt description of food security in Nunavut in light of these interrelated factors, encouraging us to, "consider food security not as a state or end point but as a dynamic process of continual evolution and change in response to multiple driver, feedbacks and interactions over time and space." 155

Ford and Beaumier provide a glimpse into how food security is impacted by complex factors in their 2008 case study of food security in Igloolik. The researchers conducted semi-structured interviews with 66 Inuit adult community members. The majority of participants reported experiencing constrained access to food, simply not being able to afford to eat at least once in the previous year, even by those with a waged income. Decreased food sharing within the extended family household in recent years and with others in the community, particularly for country foods, was also noted. Country food harvests of seal, beluga, walrus, fish, geese, caribou, and other animals are essential in Nunavut because they decrease dependence on expensive, nutritionally inferior store-bought foods of poor quality, and are a core component of Inuit culture and identity. In 2006, 66 per cent of Inuit lived in homes where at least half of the meat and fish consumed was country food. 156 And in 2007/08, 72 per cent of children aged 3 to 5 lived in a household with an active hunter. 157

Fuel and hunting equipment such as snowmobiles, rifles and ammunition, and boats with outboard motors are expensive, and there is no guarantee that animals will be caught. In 2008 for example, a caribou hunting trip would necessitate a minimum of 240 litres of gasoline, at a total cost of \$340 (\$1.50 per litre).

Country foods in Igloolik are becoming less accessible, and cash payment is increasingly being viewed as a potential means of supporting hunting while improving access to country foods. There appear to be several reasons for this. Full-time hunters are the most reliable sources of country food, and they are declining along with the number of outpost camps that would ordinarily support long trips. The area in which it is possible to hunt is therefore shrinking, exacerbated by climatic changes such as thinning ice and later fall freeze ups and earlier spring break ups that affect the distribution of animal populations, shorten the amount of time available to hunt, and increase the danger of hunting when ice has formed.¹⁵⁹Younger generations also generally lack the skill and knowledge needed to be able to adequately adapt to these changing conditions, and the prospect of hunting full-time is possibly less attractive.

Furthermore, expensive addictions such as smoking, gambling and substance abuse can contribute to or become more pronounced during times of food insecurity. Addictions take away money for purchasing food or engaging in hunting activities and the stress of food insecurity can lead to addictive behaviour. Research in the United States has found that living with an adult smoker is an independent risk factor for adult and child food insecurity, associated with an approximate doubling of its rate and tripling of

incidence of severe food insecurity.¹⁶⁰ Sixty-four per cent of Inuit 15 and over smoke on a daily basis, and a pack of cigarettes can cost as much as \$20.¹⁶¹The correlation between food insecurity and addictions in Nunavut has not been studied in detail, but it is likely large.

What Could Food Security Look Like in Nunavut?

At the core of food security is educational attainment and economic security, a subject stressed exhaustively in this report. But based on what we have to work with now, what can be done to ensure that households are more food secure? Nunavut food security research has consistently highlighted the dilemma of expensive store-bought foods and the rising cost of hunting. Health Canada has implemented federal programs designed to subsidize the cost of nutritious, perishable foods in northern communities, such as the now defunct Food Mail Program, which was replaced by the Nutrition North Program on Apr. 1, 2011. It is unclear whether Nutrition North is positively impacting food security in Nunavut, but it is notable that the very consumers targeted by this program were not consulted in decision-making about what foods would be subsidized. Community greenhouses similar to ones operated by the non-profit Igaluit Community Greenhouse Society in Nunavut or the Community Garden Society in Inuvik may be viable sources of nutritious, perishable foods that may help alleviate food insecurity and improve nutrition, granted there is a market for them.

Inuit have generally expressed those existing programs that support hunting through government subsidies should be subsidized to a greater degree in order to increase community sharing of foods through informal networks. Generally, country foods sold in stores are not seen as relevant due to their expense, though at least in Greenland, a relatively food secure country, a variety of country foods are sold in stores and in open markets. Perhaps a combination of increased hunter support through existing programs and more sustainable country food commercial access would improve food security in Nunavut.

Looking across Davis Strait, there is evidence that in contrast to Nunavut, households in Greenland are relatively food secure, despite facing many of the same challenges related to acquiring country foods and store-bought foods, such as climate change and cost. 162 Although access to country foods is cited as a challenge in the Greenlandic community of Qekegtarsuag for many of the reasons addressed above, Greenland's distinct country food market may play a significant role in buffering stress on household food security by providing relatively affordable sources of country food for purchase in Greenlandic stores and at open-air markets. Country foods are sold in Nunavut stores, but they are often too expensive to purchase. In Igloolik for example, caribou on sale in the co-op store rarely sells for less than \$15 per pound and often much higher depending on availability, compared to steak, which regularly sells for \$15 per pound. 163 Inuit have expressed that the high prices of country foods sold in stores make them unattainable, and yet the costs associated with hunting is also a barrier to acquiring country foods. 164

Current information about Greenland's country food markets is sparse, and it would behoove the GN to work with Greenland's Home Rule Government to determine whether there is a causal relationship between the commercial country food market and household food security, and if there is, to explore the feasibility of developing a similar market in Nunavut to provide families with access to affordable country foods while providing hunters with a form of financial support. Identifying determinants of Greenlandic food security more generally could be of significant value to policy-makers as well.

Local country food markets have existed in Greenland for the last half-century, most built and maintained by local municipal governments in order to reduce dependency on imported goods. 165 As of 1996, hunters in Greenland could sell their catch to local institutions such as schools, senior citizens homes, or hospitals, sold fresh at local open-air markets in large and medium sized communities, or, most popularly, to four government-controlled processing plants. Each plant is dedicated to processing specific types of foods throughout the country (halibut in Ilulissat, lamb in Narsag, marine mammals in Qagortog, and all other products such as seabirds and fish in Nuuk). Once processed, country foods are shipped to Nuuk for distribution throughout Greenland, with 60-65 per cent of all products sold to Home Rule-owned retail stores and the remainder sold to other private retail outlets for resale. In some cases, country food prices are lower than the cost of imported foods, such as \$6 per kilo of whale meat versus \$10 per kilo of hamburger meat.¹⁶⁶

Greenland's country food market is intended to help facilitate sustainable community development, and by supporting this system, the government reduces the need for imports, promotes Inuit hunting practices, offsets the need for government subsidies to smaller settlements, and encourages consumption of nutritious and culturally valued foods. In the late 1990s, Greenland's dependence on imported foods was declining as a result. As stated above, it is unclear what effect this market is having on Greenlandic food security today.

The Nunavut Development Corporation owns four country food processors in Nunavut that receive significant operating subsidies from the GN (see Figure 5). These are Kitikmeot Foods Ltd., Kivalliq Arctic Foods Ltd., Pangnirtung Fisheries Ltd., and Papiruq Fisheries.

These foods are marketed nationally and internationally, and when sold in Nunavut stores

are too expensive to be a viable domestic source of food. Country foods have customarily been shared among Inuit, but with access becoming more difficult especially with the onset of climate change, making commercial country food more readily available on a territorywide basis may be a viable option in Nunavut that could help alleviate food insecurity in households by providing a more affordable, nutritious, commercial alternative to imported storebought foods.

We recommend that the Nunavut Development
Corporation work with NTI to conduct a feasibility
study determining the viability of developing
territorywide commercial country food access,
specifically in relation to its potential to reduce food
insecurity. Viability should be considered in the
context of food insecure households, and the longterm costs associated with malnutrition, hunger,
and related social ramifications, versus the cost of
investing in the food security of our own people.

Figure 5. Profile of Nunavut Development Corporation Arctic Foods Subsidiaries and Earnings, 2010¹⁶⁸

Processor	Location	Foods Processed	GN Subsidy Contribution	Net Profit "After Subsidy"
Kitikmeot Foods Ltd.	Cambridge Bay	Meat and fish, including arctic char and musk ox	\$350,000	\$38,980
Kivalliq Arctic Foods Ltd.	Rankin Inlet	Meat and fish, including arctic char and caribou	\$100,000	\$177, 344
Pangnirtung Fisheries Ltd.	Pangnirtung	Fish including arctic char and turbot	\$150,000	\$41,189
Papiruq Fisheries	Pangnirtung	Fish including arctic char	\$25,000	\$175



Recommendations

- Child, Youth, and Family Services: The GN
 Department of Health and Social Services must
 follow through on recommendations made in the
 auditor general's 2011 report. Health and Social
 Services must also develop a contingency plan
 for the rehabilitation of Inuit children and youth
 that have been placed outside of Nunavut and
 are returning to their respective communities.
 In the long-term, the GN must work to develop
 the Inuit human resources needed to provide
 these services locally through a combination of
 educational reform and increased government
 support.
- Food Security: The Nunavut Development
 Corporation should work with NTI and Inuit
 communities to assess the feasibility of a
 territorywide country food access. The consumer
 market for nutritious, perishable foods should
 also be assessed relative to the cost savings
 associated with locally grown produce.

- Housing: Creative solutions to Nunavut's housing crisis are needed to accelerate the number of housing units being built, as well as to improve existing housing. Programs that assist individuals and families in building and improving houses may help in the short-term. Higher educational attainment can help to ensure that more Inuit have the option of owning their own homes.
- Suicide: Risk factors associated with youth suicide in Nunavut are numerous and understanding is still evolving. Consistent with the holistic scope of the Nunavut Suicide Prevention Strategy, schools must take responsibility for inculcating in Inuit students a clear understanding of the interplay between historical and contemporary forces of oppression and colonization, and ongoing social challenges. Students who possess this understanding will be better equipped to resist the multivariable causes of suicide.

Conclusion

The basic needs of Inuit children and youth aged 2 to 18 in Nunavut are not being met by the GN and Government of Canada. These needs include adequate housing, food security, reliable social services, childcare, and access to equitable, Inuitspecific education developed in equal partnership with Inuit communities. The GN and Government of Canada's failure to meet these needs constitutes a failure to uphold the basic human rights of Nunavut's citizens, and comes at particularly severe cost to the health and well-being of Inuit children and youth. The constitutional rights of Inuit under the NLCA have also been compromised when, in 2008, the Education Act was passed into law without Inuit participation pursuant to NLCA Article 32. These failures help preserve the dispiriting legacy of paternalism and colonialism that have always characterized relations between Inuit and government. Instead, the GN should capitalize on the invaluable opportunity that is Nunavut by working closely with Inuit to develop policy that accurately reflects where our people wish to be in terms of wellness.

Nunavut is an Inuit society inhabited primarily by Inuit, where the first language of the majority population is the Inuit language. Accordingly, what is valued and has status in Inuit society and how the wellness of individuals and communities is conceptualized differs significantly from southern Canada. These differences are what Inuit fought to preserve through the creation of Nunavut, and they must be incorporated into policy-making in order for Inuit to control changes in our lives.

This report has described major social challenges affecting the status of Inuit children and youth in Nunavut and in doing so has highlighted throughlines that connect seemingly disparate public policy areas. These through-lines include correlations between educational attainment and social and economic outcomes, housing, mental health, and food security, and the long-term social and economic benefits associated with quality childcare programs. By doing so, we have illustrated the need for coordination in policy-making and service delivery by the appropriate GN departments, as well as the importance of investing in services that have been undervalued to date.

The present day living conditions experienced by many Inuit are unacceptable, underscored by a disturbingly high rate of suicide that reflects the hopelessness and frustration of too many of our people. Living conditions are largely shaped by policy, but Inuit continue to be marginalized from participation in the development of policies that affect our everyday lives. Power imbalances between Inuit and government have always existed, and today's social challenges largely stem from decisions made by government without our consultation, and which have done little to reverse the effects of socially, culturally, and psychologically damaging choices made on our behalf.

Inuit must be in control of our lives if we are to control our futures, including decision-making about what is best for our children, and what is needed to

fulfill their needs. The GN has the power to facilitate a more cooperative working relationship with Inuit organizations, communities, and the Government of Canada, based on an attitude of humility and mutual respect. Our voices are needed at the table in order to help improve the health and well-being of our children and youth.

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