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Inuit Tuttarvingat



National Aboriginal Health Organization (NAHO)
Organisation nationale de la santé autochtone (ONSA)
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The Role of Housing as Determinant of Health for Inuit in Canada

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Inuit Tuttarvingat



Ottawa, Ontario
March 11, 2009

Cathleen Knotsch and
Morgan Akalehywot



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The Project

Title:

Health and Housing Realities for Inuit – series

Approach:

Community-Based Research To Inform

Rationale:

“Housing is not the only issue, but all issues relate to housing”



Project Design

Developed a **two-year project** to accommodate the recommendations received from working group (reports on Web site)

Four **research papers** and bibliography

- Housing and Inuit Health, annotated bibliography
- Housing as a Determinant of Inuit Health (in process)
- Homelessness and Shelters (in process)
- A National Profile of Inuit Housing
- History of Inuit Housing and Communities

A **national workshop** on Inuit housing

Continuous networking with the **working group**



Project Methods

A mix of methods and techniques for research and analysis :

- Document review and analysis
- Questionnaire
- Semi-structured open-ended interviews with key individuals
- Statistical and demographic analysis
- Policy analysis
- Historical research
- Use of visual materials (photos) and quotations



Six Key Objectives

Consider a contextual and long-term view as the main approach for analysis

Provide documentation of Inuit housing realities for use by Inuit organizations and governments

Help territorial/provincial/national government officials understand the issues

Provide information on concepts and evidence linking housing quality with diseases and health status

Provide statistics concerning Inuit housing

Communicate effectively key factors of Inuit housing (realities, needs)



Housing Realities for Inuit

***“Housing is not the only issue, but
all issues relate to housing”***



Realities for Inuit

- Cold climate
- Crowded homes
- Housing shortage
- Aging dwellings requiring repair
- Long waits for social housing
- Homelessness is hidden
- Poverty
- Travel to access medical services



Linking Housing and Health

In the literature, three primary aspects of linking poor housing and poor health outcomes are identified:

- (1) overcrowding, dampness and moulds
- (2) sanitation
- (3) basic housing quality



Linking Housing and Health

- Public Health Agency of Canada: Housing is best understood as impacting health through the physical environment, as the built environment has been demonstrated to impact both physical and mental health and well-being
- Impacts via: Housing quality, indoor air quality, accesses to sanitary water and waste facilities and community infrastructure
- Categories for literature review: Housing and Public Health Framework, Canadian Mortgage and Housing Corporation (Dunn 2004)



Linking Housing and Health

Physical and Design Characteristics of the House

- Indoor-air quality / Ventilation
- Chemical Exposures
- Biological Exposures
- Home Safety
- Sanitation
- Culturally Appropriate building
- Environmental Tobacco Smoke



Linking Housing and Health

Social and Psychological Features of the House

- Crowding (e.g., study by Tester 2006- health problems associated: colds, coughs, influenza, cramped muscles, cold sores, tuberculosis, skin problems, lack of sleep, anger, depression)
- Housing Satisfaction and Social Support Networks



Research to Provide Evidence

- Example: Research study to explore the relation between environmental indoor air quality and lower respiratory tract infection in Inuit children (Kovesi, *CMAJ* 2007;177:155-60)
- It is unclear whether crowded housing and inadequate ventilation are risk markers (reflecting association) or risk factors (reflecting causation) for respiratory tract infection in children (Orr, *CMAJ*)



Research to Provide Evidence

- Lacking, for example: Well-designed community studies to determine the full spectrum of infectious causes of respiratory tract infection in Inuit children
- Needed, for example: Assessments and studies on housing envelopes and appropriate ventilation technologies (new technologies, cold climate technologies, changing climate)



Research to Provide Evidence

- Treating factors influencing health status as competing or in hierarchies may prevents us from delivering contextual analysis (e.g., studies concluding that socio-economic status has a stronger link to health than housing has to health - what does this mean in the Inuit context ?)
- Housing and education: Starting from current situation of crowded homes, how will we research options for improving educational attainment?



Homelessness and Health

- Realities: Limited availability of housing for Elders, few shelters and transition houses
- Realities: key characteristic of homelessness in Inuit regions is that it is **hidden**. Homelessness is hidden because Inuit cultural values are making sure that those who have houses will share them with those who have no house
- Realities: Where to go? Need to leave community, major disruption of day-to-day life



Homelessness and Health

- What comes first?
- To remain in an overcrowded state is not sustainable. In the coming two decades a large young population will be looking for housing in communities already plagued by chronic overcrowding.
- Part of this project is looking at number and characteristics of shelters and transition houses



Homelessness and shelter

A Total of 24 shelters identified

7 in Nunavut

2 Inuvialuit region

4 Nunavik

1 Nunatsiavut

10 in Hubs outside of
Inuit Nunaat

Most funded via
provincial/territorial
programs and donations

3 receive direct federal
funding



Housing of Tomorrow

Inuit children under 6 years living in

- crowded dwellings: 49% Inuit Nunaat; 59% Nunavik
- dwelling requiring major repairs: 29% Inuit Nunaat; 45% Nunavik (2006 ACS)

“Housing is not the only issue, but all issues relate to housing”



THANK YOU

CONTACT Cathleen Knotsch
Email: cknotsch@naho.ca
Phone: 613-760-3509

Web site: www.naho.ca/inuit

Housing documents are posted at:

<http://www.naho.ca/inuit/e/healthfactors/>

