

INUIT WELLNESS PROGRAMS IN NUNAVUT 2004-2005



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Munarlhiliqqiikut Inuuhiriknirmullu

Department of Health and Social Services

Ministère de la Santé et des Services Sociaux

INUIT WELLNESS PROGRAMS IN NUNAVUT 2004-2005

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ISBN 1-55325-104-0

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Health
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First Nations and
Inuit Health Branch



Nunavut

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Munanihiqiyikkut Inuuhiqinirmullu

Department of Health and Social Services

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INUIT WELLNESS PROGRAMS IN NUNAVUT



EXECUTIVE SUMMARY

This report provides a summary of the Inuit-specific wellness programs funded by the federal government for delivery in Nunavut for the fiscal year 2004-05.

The programs rely to a greater or lesser extent on community involvement to ensure the programs reflect community priorities and values. They complement services offered through community health centres, public health units, social services offices and wellness centres.

This report sets out the amount spent in each community for the following programs:

- Aboriginal Diabetes Initiative (ADI)
- Brighter Futures (BF)
- Building Healthy Communities / Mental Health (BHC-MH)
- Building Healthy Communities / Solvent Abuse Program (BHC-SAP)
- Canada Prenatal Nutrition Program (CPNP)
- First Nations and Inuit Health Home and Community Care (HCC)

This report provides a summary of the activities undertaken by each of these programs, as well as information about the programs delivered at the territorial level:

- Fetal Alcohol Spectrum Disorder (FASD)
- Tobacco Control Strategy, and
- National Native Alcohol and Drug Addiction.

The actual amount spent on federal wellness programs in 2004-05 was \$11,131,048, an increase of twelve per cent over the 2003-04 level of \$9,764,353.

For more details about all the health programs offered in Nunavut, please refer to the Department of Health and Social Services Business Plan for 2004-05. This is available on line at www.gov.nu.ca/finance/bp/2004.

ATAN'NGUYAP TITIRAQHIMAYAA

Una titiraqhimayuq naittumik turaaqhimayunik Inuinnarnut inuuttiarnirmut atuqtukhanik akiliqtauhimayut Kanatam kavamainnit atuqtauyukhat Nunavunmi ukiungani maniliqiniup uuma 2004-05.

Atuqtukhat ihuaqhihimayut nunallaam ilaunianut taimaa atuqtukhat ihuariangita nunallaami hivulliyukhanut inuqatigiittarnirmullu. Ilagiyait ikayuutikhat piyauvaktut nunallaami munaqhiqarviit, inuliyiyillu inuuttiarnirmut havakviillu.

Uvani titiraqhimayumi naunaiqhimayait qaffitaalat atuqtauvaktut atuni nunallaami hapkununga:

- Nunaqaqqaqhimayut Aungagut Sukarlungnirmut Hanaqijjutikhaq (ADI)
- Inuhaat Iliharviat (II)
- Nunallaqaqtiariami Aanniaqtailinirmut Hananiq / Ihumaliqiniq (BHC-MH)
- Nunallaqaqtiariami Aanniaqtailinirmut Hananiq / Hupluurnikkut Ayuqhautiqaliqiniq (BHC-SAP)
- Kanatami Hingaiyunut Nirittiarniq (CPNP)
- Nunaqaqqaqhimayut Inuinnaillu Aanniaqtailinirmut Angilravingmini Nunallaaminilu Munaqhiyauniq (HCC)

Uvani titiraqhimayumi naittunik illirihimayuq qanuriliurutainnik atuqhimayut hapkunani atuqtkhani, kangiqhijjutikhaniglu atuqtkhanik tunihimayainnik aviktuqhimayuni nunani kavamaita:

- Najjitaqtilluni Aangayaaqattarnirmut Aanniarut (NAA)
- Tipaakurnik Atupallaarnaittumik Qanuriliurut, unalu
- Kanatami Nunaqaqqaqhimayut Taanngakkut Higaarlukkullu Ayuqhautigiyait.

Qanuq anginia atuqtauhimayut akikhanik Kanatami inuuttiarnirmut atuqtukhat imaa 2004-05mi \$11,131,048 taalaq, anglivalliania 12 pusanmik ukiumi uvannga 2003-04mi \$9,764,353 taalauyugaluaq.

Kangiqhittiarumagupkit aanniaqtailinirmut atuqtukhat piyaulaqtut Nunavunmi, qinijjavat Munaqhiliqiyitkut Inuuhiringnirmullu Havaariyaminut Pinahuaqtatik 2004-05mi. Takulaaqtallu qaritauyami uvani www.gov.nu.ca/finance/bp/2004.

SOMMAIRE EXÉCUTIF

Ce rapport présente un résumé des programmes de mieux-être destinés aux Inuit financés par le gouvernement fédéral et offerts au Nunavut durant l'exercice financier 2004-2005.

Les programmes dépendent plus ou moins de l'engagement de la communauté afin d'assurer qu'ils reflètent les priorités et les valeurs de la communauté. Ils complètent les services offerts dans les centres de santé communautaires, les unités de santé publique, les bureaux de services sociaux et les centres de mieux-être.

Ce rapport présente les sommes dépensées dans chaque communauté pour les programmes suivants :

- Initiative autochtone sur le diabète (IAD)
- Grandir ensemble (GE)
- Des communautés en santé/Santé mentale (DCS-SM)
- Des communautés en santé/Programme national de lutte contre l'abus de solvants (DCS-PNLCS)
- Programme canadien de nutrition prénatale (PCNP)
- Programme des soins à domicile et en milieu communautaire des Premières nations et des Inuit

Ce rapport présente également un résumé des activités menées par chacun de ces programmes de même que des informations sur les programmes offerts au niveau du territoire :

- Ensemble des troubles causés par l'alcoolisation foetale (ETCAF)
- Stratégie de lutte contre le tabagisme
- Programme national de lutte contre l'abus de l'alcool et des drogues chez les autochtones

Les sommes dépensées sur les programmes de mieux-être fédéraux en 2004-2005 s'élevaient à 11 131 048 \$, une augmentation de 12 pour cent par rapport au niveau de 2003-2004 qui s'élevait à 9 764 353 \$.

Pour obtenir de plus amples renseignements sur les programmes de santé offerts au Nunavut, veuillez consulter le plan de développement du ministère de la Santé et des Services sociaux pour 2004-2005 disponible à www.gov.nu.ca/finance/bp/2004.

MESSAGE FROM THE MINISTER



Wellness is important to all Nunavummiut. The Government of Nunavut will achieve its goal of healthy communities when we each enjoy physical, mental and social well-being, not just the absence of disease or infirmity

Health Canada funding allows the Department of Health and Social Services to offer many different programs that promote wellness among Inuit. These programs help individuals, families and communities flourish in the face of environmental and external cultural challenges.

I would like to thank the many organizations and individuals who helped deliver these programs over 2004-05. Without the support of community groups, worthwhile projects like school breakfast programs could not be offered.

The success of these programs can be seen in the increase in the type of quality programming developed at the community, regional and territorial level since the programs were first introduced. The capacity of Nunavummiut to develop creative approaches and initiatives has had a forward momentum which continues to prevail.

Hamlet leaders and staff are to be commended for their support for Brighter Futures programming. Community support and direction are critical for the success of these programs. Recognition is also needed for the federal and territorial staff who develop and support both the programs and the communities they serve.

Wellness programs in Nunavut are one way the Government of Nunavut gives practical effect to the principle of inuuqatigiitsiarniq – caring for people and respecting others. Our on-going partnership with Health Canada brings many benefits for Nunavummiut, and to Canada as a whole.

The Honourable Leona Aglukkaq
Minister of Health and Social Services

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INTRODUCTION TO WELLNESS PROGRAMS IN NUNAVUT

This public report on Inuit wellness is focused on the Health Canada Programs that are delivered in Nunavut by the Population and Public Health section of The Department of Health and Social Services. The Department of Health and Social Services provides support and leadership in order to achieve the best results with the funds that are available.

The programs:

- Aboriginal Diabetes Initiative (ADI)
- Brighter Futures (BF)
- Building Healthy Communities / Mental Health (BHC-MH)
- Building Healthy Communities / Solvent Abuse Program (BHC-SAP)
- Canada Prenatal Nutrition Program (CPNP)
- Fetal Alcohol Spectrum Disorder Program (FASD)
- First Nations and Inuit Health Home and Community Care (HCC)
- National Native Alcohol and Drug Addiction Program (NNADAP)
- Tobacco Control Strategy (TCS)

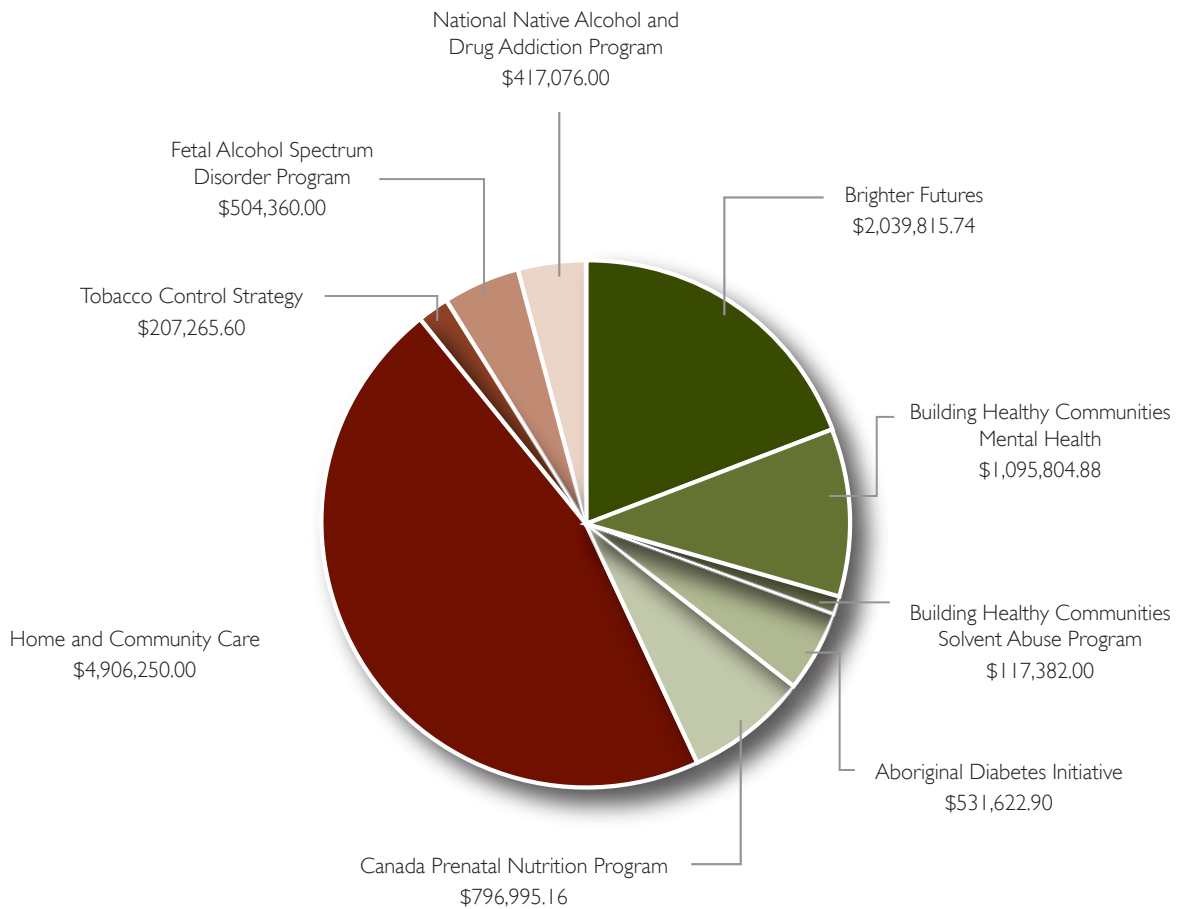
These programs all have different goals, objectives and criteria. Some of these programs, such as Brighter Futures, have been around in excess of 10 years, others, such as the Tobacco Control Strategy, are still new. All of these programs are Inuit specific and are funded by the First Nations and Inuit Health Branch (FNIHB) of Health Canada through the Northern Secretariat. The Northern Secretariat was created to help address the unique needs of Canada north of 60.

Fetal Alcohol Spectrum Disorder, Tobacco Control Strategy and the National Native Alcohol and Drug Addiction Programs are territorial programs. Because these do not incur “community based” expenses, no expenditures related to these programs appear in the community section of this report.

All monetary totals in this report refer to actual amounts spent during 2004-2005.

Inuit Specific Community Wellness Initiatives In Nunavut 2004-2005

Nunavut Wide



ABORIGINAL DIABETES INITIATIVE (ADI)

The Nunavut Aboriginal Diabetes Initiative has several focuses. From participation in an on-line nutrition course to prevention and promotion projects to training opportunities for medical professionals, the ADI program in Nunavut attempts to provide a range of services that centre around community-based projects.

Nunavut ADI projects occurred in 12 communities during fiscal year 2004-05: Cape Dorset, Clyde River, Iqaluit, Pangnirtung, Pond Inlet, Grise Fjord, Kugluktuk, Arviat, Baker Lake, Coral Harbour, Cambridge Bay, Gjoa Haven and Kugaaruk. Communities design and implemented their own diabetes prevention projects that met the specific needs of residents.

Territory-wide activities were successful this past year in providing training to medical professionals in the regions: holding a foot-care workshop for home and community care nurses; developing promotional material to encourage physical activity; partnering with an online nutrition course offered by McGill University; and conducting a Drop-the-Pop campaign for nutrition month to help students choose healthier beverages instead of pop. The number of schools participating in Drop the Pop 2005, nearly doubled with 27 of the 41 schools in Nunavut (66%) participating in 2005, compared to 14 schools in 2004.

A flipchart teaching tool was developed to help health professionals provide education on diabetes. During this year the continuation and expansion of community-based projects was made a priority as was the development of educational materials for diabetes patients (produced in all four languages of Nunavut), and the development of a strategic model for preventing and treating diabetes in Nunavut. Plans for future years include expanding human resources and increasing the access to dietician services, as well as participating in the development of a cross-regional diabetes cookbook for all Inuit in Canada.

The Nunavut Aboriginal Diabetes Initiative is guided by a territorial advisory committee comprised of representatives from the three regional Inuit associations, Nunavut Tunngavik Incorporated, Inuit Tapiriit Kanatami, regional representation from the Department of Health and Social Services, the regional and territorial nutritionists, and the ADI program coordinator.

If you have any questions about ADI please contact:
ADI Coordinator at (867) 975-5762

BRIGHTER FUTURES (BF)

Brighter Futures is a Health Canada program that focuses on aboriginal and Inuit children. It was developed with the coordinated assistance of the communities and government to improve the physical, mental and social wellbeing of the individual, their family and their community. Brighter Futures projects were delivered in every community in Nunavut in 2004-2005. Brighter Futures can make a world of difference in the community.



The Brighter Futures Program aims:

- To make Inuit children, families and communities healthier.
- To be community based – addressing health and wellness priorities that are built on information and needs in your community.
- To be community paced – encouraging active involvement of residents in planning and action.
- To provide a population health approach to care, promotion and prevention.
- To bring together all wellness activities and partners in the community.

Who Can Apply to Brighter Futures?

- Hamlets and Hamlet Councils
- Inuit associations / organizations
- Community-based volunteer organizations (churches, associations)
- Inuit non-government organizations (NGOs)
- Schools
- Individuals

What kind of projects can Brighter Futures Fund?

- Summer camps for children
- Teaching Traditional skills (helping Elders and youth connect)
- Breakfast Programs for schools and Daycares
- Provide funding for wellness staff at schools or hamlets such as Special Needs Assistant or a Community Wellness Coordinator
- Active Living (sports)
- Training (workshops, meetings)
- Other community wellness needs

How can interested candidates apply for funding?

A proposal template can be obtained through the local Hamlet or Municipal office. All proposals require Council approval before being sent to the Regional Health and Social Services Office where they are reviewed by a Regional Review Committee.

Baffin (Iqaluit):	(867) 473-2689
Kivalliq (Rankin Inlet):	(867) 645-2171
Kitikmeot (Cambridge Bay):	(867) 983-4068

BUILDING HEALTHY COMMUNITIES – MENTAL HEALTH

Building Healthy Communities (BHC-MH) is a Health Canada program that focuses on the Mental Health of aboriginals and Inuit. BHC projects were delivered in every community in Nunavut in 2004-2005. In addition to the community driven projects, there were two territorial wide initiatives during this year: Embrace Life Council and ASSIST Training.



The Building Healthy Communities - Mental Health program aims to:

- Aid in the intervention in problems of depression and suicide by community based projects that address critical gaps in mental health services.

Who Can Apply to Building Healthy Communities?

- Hamlets and Hamlet Councils
- Inuit associations / organizations
- Community-based volunteer organizations (churches, associations)
- Non-government organizations (NGOs)
- Schools
- Individuals

What kind of projects can Building Healthy Communities Fund?

- Health Awareness groups (Youth Drop In or Drug and Alcohol support groups)
- Teaching Traditional skills
- On the Land Healing projects
- Funding wellness staff at schools or hamlets such as Special Needs Assistant or a Community Wellness Coordinator
- Community Wellness Radio
- Training (workshops, meetings and conferences)
- Other community wellness needs

How can interested candidates apply for funding?

A proposal template can be obtained through the local Hamlet or Municipal office. All proposals require Council approval before being sent to the Regional Health and Social Services Office where they are reviewed by a Regional Review Committee.

Baffin (Iqaluit): (867) 473-2689
Kivalliq (Rankin Inlet): (867) 645-2171
Kitikmeot (Cambridge Bay): (867) 983-4068

BUILDING HEALTHY COMMUNITIES – SOLVENT ABUSE PROGRAM

Building Healthy Communities (BHC-SAP) is a Health Canada program that focuses on the problems of substance abuse in Nunavut. BHC-SAP projects were delivered in Cape Dorset, Igloolik, Rankin Inlet and in every community of the Kitikmeot Region.

The Building Healthy Communities SAP program aims to:

- Support the communities of Nunavut to reduce the level of solvent addiction
- Increase awareness and understanding about solvent addiction as well as promoting alternative healthier lifestyles
- Strengthen links between the community-based programs and BHC–MH, BF, NNADAP and residential treatment programs
- Provide support to individuals and families in post treatment.



Who Can Apply to Building Healthy Communities – Solvent Abuse Program?

- Hamlets and Hamlet Councils
- Inuit associations / organizations
- Community-based volunteer organizations (churches, associations)
- Inuit non-government organizations (NGOs)
- Schools
- Individuals

What kind of projects can Building Healthy Communities fund?

- Funding wellness staff at schools or hamlets such as Special Needs Assistant
- Organizing a regional Health Promotion Tour dealing with Solvent Abuse
- Training for Wellness Workers
- Projects that aim to identify individuals that are high risk
- Groups that identify issues surrounding solvent abuse in order to reduce the misuse of solvents
- Provide community education and awareness
- Support for individuals that have just completed treatment

How can interested applicants apply for funding?

A proposal template can be obtained through the Regional Health and Social Services Offices.

Baffin (Iqaluit): (867) 473-2689
Kivalliq (Rankin Inlet): (867) 645-2171
Kitikmeot (Cambridge Bay): (867) 983-4068

CANADA PRENATAL NUTRITION PROGRAM (CPNP)

Overview

The Government of Nunavut delivers the Canadian Prenatal Nutrition Program (CPNP) with the purpose of improving the health of pre and post natal women and their babies (up to one year of age). As well, the CPNP strives to augment existing services by providing healthy food to pregnant women, providing nutrition education and screening, and supporting and promoting breastfeeding.

The CPNP in Nunavut operates through two main areas of programming: Coordination & Activity and Community Based Programming.



Coordination and Activity

There were three objectives of the coordination and activity component of CPNP during the 2004-2005 fiscal year:

Objective 1 - Provide a knowledge- and skills-development opportunity to all CPNP community project staff to enhance their skills and knowledge.

During 2004-2005, two regional training workshops were carried out in Nunavut to provide CPNP workers with the opportunity to gain skills in the area of prenatal health and nutrition, breastfeeding, infant feeding, cooking classes, shopping for foods, and nutrition screening. Almost 40 workers were trained during these sessions. The workshop was organized and carried out by Nunavut nutritionists, Health Canada staff, a contract nutritionist, Regional Wellness Coordinators, Regional Health Promotion Officers, Community Health Nurses, Community Healthy Representatives (CHRs) and Elders.

Objective 2 - Provide education & promotion supports for community CPNP projects.

Two main activities were undertaken to accomplish this objective: a breastfeeding promotion campaign, and the McGill Online Nutrition Training.

CPNP supported Breastfeeding Week activities in October 2004, including story writing contests, t-shirt distribution ("I am a breastfed baby") and community 'breastfeeding competitions'. These two initiatives were launched during Breastfeeding Week in October. Nunavut placed first in Canada in a national breastfeeding competition. Participation in Nunavut more than doubled from the 2003 competition. As well, a promotional poster and "breastfeeding bag" campaign were developed. The breastfeeding bags included baby t-shirts, a breastfeeding fact sheet, small disposable camera in a sturdy diaper bag with the logo "Breastfeeding is best for babies and moms!". The bags were distributed to prenatal women through Health Centers.

The McGill Online Nutrition Training course was offered to 35 CPNP workers, along with other community health workers in Nunavut. Topics that were covered included basic nutrition, diabetes prevention, breastfeeding, budgeting for food, teen pregnancy, and preschool nutrition.

Objective 3 - Support communication with advisory group members

The CPNP Advisory Group in Nunavut held three teleconferences and exchanged numerous emails to provide guidance to the program and set direction for future work plans. The advisory group included representatives from Inuit Organizations, Regional Nutritionists' and staff from Health Promotion.

Community-based Programming

Community-based programming included services and activities delivered in and with communities. There were two main objectives that were met during 2004-2005

Objectives 1 - Improve the health of pregnant women and infants through improved nutrition and breastfeeding practices

In 2004-2005, 15 communities in Nunavut received FNIHB CPNP funding through a proposal driven process. H&SS also provided nutrition support to 6 projects funded directly by Health Canada.

Objective 2 - Improve access to nutrition information and nutritious foods.

Nunavut nutrition staff worked with Health Canada and Pauktuutit Inuit Women's Association on the development of the Inuit **Building Healthy Babies** manual. This manual was expected to go to print in summer 2005. Nunavut translated the manual into Inuktitut, next year there are plans to print the manual in Inuinnaqtun.

Funds were put toward the revision of the **Nutrition Fact Sheet Series** for Inuit Traditional Foods. This also included the development of new fact sheets on Vitamin D and Folate, two key nutrients used in the discussion of nutrition with pregnant and breastfeeding women. Fact sheet books will be distributed throughout Nunavut to CPNP programs, health centres, CHR's and schools.

Nutrition Kits (called "**The Blue Nutrition Kit**") were also developed with funding from CPNP and ADI. The kits include a teaching booklet (developed by Nunavut nutritionists) with a focus on prenatal issues, as well as teaching tools such as: food models (plastic fake food), food photo cards, Vitamin D, Prenatal Vitamins, bone demonstration tools, measuring cups and spoons, dice for games, and Nunavut Food Guide Bingo. Further training will take place during nutrition community visits. The 65 kits will be distributed in the summer of 2005 to all CPNP projects, Community Health Representatives (CHRs) and Regional Nutritionists.

If you have any questions about CPNP please contact:

Territorial CPNP Coordinator at (867) 975-5762

FETAL ALCOHOL SPECTRUM DISORDER INITIATIVE FASD– NUNAVUT 2004-05

Introduction

The FASD Initiative is delivered by the Department of Health and Social Services under the direction of the FASD Steering Committee. The Steering Committee includes representatives from the Regional Inuit Associations, Nunavut Tunngavik Incorporated (NTI), Health and Social Services, (Public Health) Department of Education, Department of Justice, Qullit Nunavut Status of Women Council, and community members.

The goals of the FASD Initiative for Nunavut are to:

- Develop and promote a Territorial approach for the prevention, intervention, care and support of individuals affected by FASD
- Create partnerships towards a comprehensive range of services to address the needs of children, families and communities
- Provide community-based training and capacity building in the communities towards a coordinated multidisciplinary approach to FASD
- Increase awareness and acceptance for issues related to FASD
- Share expertise and resources
- Evaluate outcomes and determine best practices for Nunavut
- Build on strength and knowledge in the communities to determine supports and solutions that are culturally relevant

Activities for 2004-05

Health promotion and Prevention

Culturally relevant posters and t-shirts were developed and translated into all the languages. The T-shirts were part of the CPNP Territorial Breast Feeding Campaign, but have been continually used as promotional material at high school presentations, community events, and when ever there is training and discussion about FASD

25 copies (one for each community) of AGES and STAGES, an assessment tool, were purchased. This tool is available in Inuktitut version as well as in English. This tool will help identify children who may be at risk of FASD and begin conversations with families about further investigations.

Three individuals from Nunavut were trained to facilitate Pauktuutit's "Children Come First" in November 2004. These facilitators now have the ability to facilitate a general training workshop in Nunavut.

Banners developed earlier by Health Canada were translated into Inuktitut and Inuinnaqtun and 4-language versions were purchased for each community. These banners will be displayed in a prominent area in each community and also used at community events.



An Interactive Educational CD-ROM was still in development. This was being completed in partnership with Kitikmeot School Operations, the Kugluktuk Pilot Project and Cold Mountain Computing. A Youth Coordinator was hired to work on the CD while being mentored by the FASD Pilot Coordinator and IT coordinator to develop skills and abilities in all aspects of the creative and technical development of the CD. When this is completed, the CD will be distributed throughout the schools and youth centres in Nunavut for youth to utilize. The games and activities in the interactive CD promote healthy life style choices and in a fun way give information about prevention and intervention of FASD.

Kugluktuk Pilot Project

A Pilot Project Coordinator was hired in Kugluktuk. This was initially a temporary position, however due to being unable to fill the position from the community, was continued until March 31, 2005. The presence in the community also helped with the transition period for the new coordinator.

In April 2004 two community members from Kugluktuk participated in Asset Mapping Training and delivered this training in the community in May 2004. Twenty four representatives from the community of Kugluktuk represented all groups in the community. An advisory group was formed and developed an action plan which uses a coordinated community approach to FASD prevention, intervention, education, capacity building and training. The advisory committee met regularly throughout the year and worked through their action plan.

The Youth Coordinator worked closely with the sports organizations, school groups and other community youth groups engaging them in various activities dealing with FASD and other healthy life style choices such as sports night, movie night, and drama groups. Two youth from Kugluktuk participated in Pauktuutit’s “Children Come First” workshop in Rankin Inlet in February 2005, where the Youth Coordinator was one of the facilitators.

On November 15 and 16, 2004, the FASD Pilot Project hosted a youth workshop with Don Burnstick. 140 participants comprised of 100 youth and 40 community representatives participated in the workshops, helping to build capacity for the youth to participate in community events, understand wellness, and develop empathy and knowledge about FASD and how it affects people.

A very successful Wellness Fair was held in the community of Kugluktuk. The goal of the event was to engage community members, create public awareness, share information, and increase access to resources related to FASD and well being. The FASD Pilot Project Team has participated in the completion of 3 DVD’s “Wellness Fair”, “Youth Speak Out” and “Be Free” these CD were translated into four languages and will be distributed to other communities, groups, and other organizations.

A brochure about the Kugluktuk Pilot project was translated into Inuinnaqtun and Inuktitut to be shared with community and groups who wish to begin a project in their community.

Nunavut Wide Initiatives

A contract was signed with CADEC to deliver training via video/tele conferences, community visits, and a Demonstration Clinic. These sessions helped identify what was required in Nunavut for intervention and diagnoses of FASD.

The Steering Committee decided that a community visit and the diagnostic clinic planned for Nunavut by the CADEC team should take place in Kugluktuk, as the community was the most prepared. In preparation, the CADEC team visited the community of Kugluktuk for a training session from February 7- 9, 2005. The Demonstration Clinic scheduled for March 2005 did not go ahead and was rescheduled for September 19th 2005. Further video conferences and telehealth sessions were planned with the CADEC group prior to September 19th 2005. Preparation was also occurring within the community.

Asset Mapping occurred in late January 2005, now that we have approximately 40 people trained across Nunavut we can look at developing more pilot communities within each region.

The FASD Initiative partially funded a “Great Kids Workshop” in Cambridge Bay. Fifteen participants from the Kitikmeot region participated in the workshop. These front line workers need to have the knowledge and skills to deal with the sensitive issues around FASD and the effects on families.

The position of FASD/ECD coordinator was advertised through Government of Nunavut’s Human Resources and received a good response. The successful candidate began working on November 15th 2004.

Training for Professionals in Nunavut

In November 2004 Pauktuutit offered training for 2 individuals from Nunavut to be trained as Facilitators for their “Children Come First” workshop. The FASD Initiative sponsored a 3rd individual to attend this workshop. A youth from Kugluktuk took this training and now Nunavut has three trained facilitators.

These 3 facilitators completed their training in February 2005 by offering a workshop in Rankin Inlet. At this training session approximately 20 individuals from across Nunavut were trained. As of March 31, 2005 Nunavut has approximately 60 individuals who have basic training in FASD as well as some facilitation skills on presenting this information to their community. Support is offered to these individuals who wish to present in their community.

In May and June of 2004 eleven health care professionals from Health and Social Services participated in an online course about FASD through College of New Caledonia, BC. Feedback from the participants was excellent.

Nunavut continued to participate in the Canada North West FASD Partnership. There was one face to face meeting in December 200, and regular teleconferences also take place discussing FASD research, intervention, prevention on a national level.

Nunavut’s representative on the Network’s board of directors is Rosie Kagak from Kugluktuk.

If you have any questions please contact
FASD Coordinator (867) 975-5758

FIRST NATIONS AND INUIT HOME AND COMMUNITY CARE

First Nations and Inuit Home and Community Care Program



Goal: to provide basic and community care services that are comprehensive, culturally sensitive, accessible, effective and equitable to that of other Canadians and which respond to the unique health and social needs of Inuit. The program aims to enable people with disabilities, chronic or acute illness and the elderly to receive the care they need in their home communities.

The Nunavut Home & Community Care (HCC) Program provides culturally and appropriate home care services that are holistic recognize that one's needs are social, emotional, physical, and spiritual in nature. HCC aims to preserve and maximize an individual's ability to remain independent at home through care that is accessible, effective, equitable and responsive to individual needs and priorities within the communities. HCC builds self-reliance by strengthening family involvement in care delivery, developing and training staff, and planning and allocating resources wisely.

HCC added rehabilitation services to its program of acute care, chronic care, palliative care, and respite care services. HCC uses needs assessment to determine services for each client. These can be limited depending on the infrastructure in place as well as the human and financial resources available. In 2004-2005 the Program again experienced growth in the number of clients accessing services, with a total of 1098 clients utilizing services.

Ongoing education is necessary to ensure staffs deliver safe care. Literature also recognizes that ongoing education is associated with staff retention. Dialogue is ongoing with Nunavut Arctic College to develop an educational program to certify home care support staff.

Regional Partners and Coordinators meet regularly ongoing to ensure that Inuit issues are presented. On invitation from ITK, two regional coordinators attended an Inuit specific focus group designed to examine implementation of the Program in regions of Canada where Inuit reside.

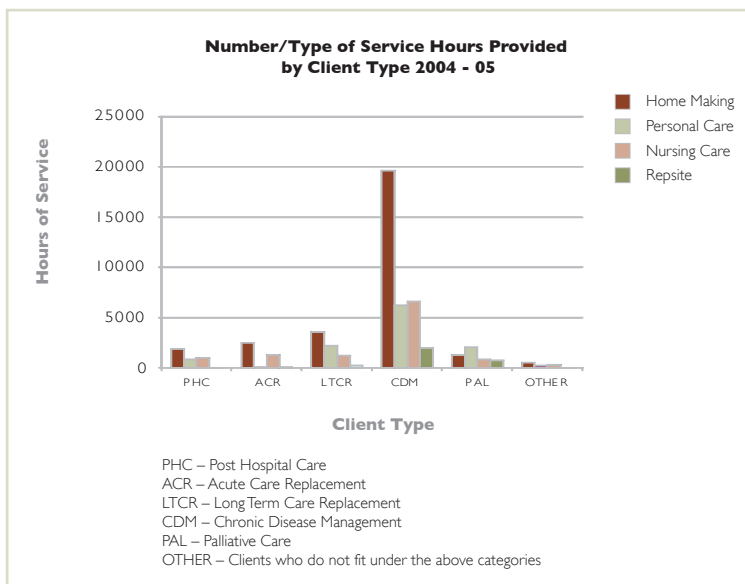
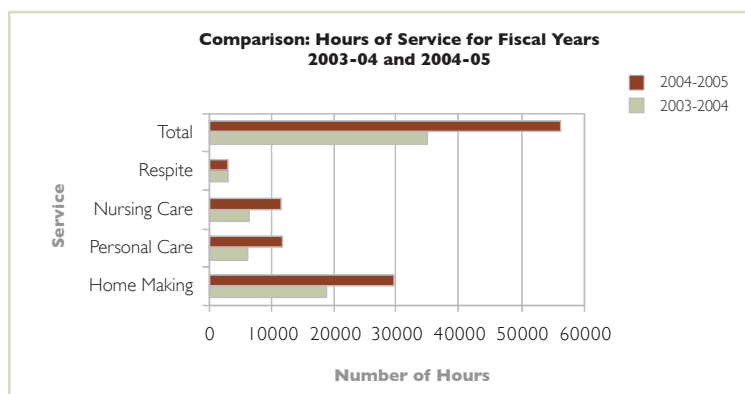
Nunavut is a member of the Canadian Home Care Association (CHCA) board. This liaison with the CHCA provides the Territory with an opportunity to have input into a national voice which promotes excellence in home care through leadership, awareness and knowledge to shape strategic directions.

Working with the Pallium Project has led to the translation of Macmillan, K., Hopkinson, J., Peden, j., Hycha, D. (2004). *A Caregiver's Guide: A handbook about end-of-life care*. Ottawa: Canadian Hospice Palliative Care Association and The Military and Hospitaller Order into Inuktitut and Inuinnaqtun.

For more information, please contact:
Territorial Home & Community Care Manager
(867) 975-5928

Percent Utilization of Services for 2003-04 and 2004-05

Service	2004- 05	2003 -04
Respite	6%	9%
Personal Care	21%	18%
Nursing Care	20%	19%
Home Making	53%	54%



NATIONAL NATIVE ALCOHOL AND DRUG ABUSE PROGRAM (NNADAP)



National Native Alcohol and Drug Abuse Program

Health Canada provided a small amount of funding to Nunavut through the NNADAP stream for treatment and training. These dollars are divided up by region and are used to fund NNADAP workers and Wellness Worker training as well treatment.

NNADAP aims to:

- Support community efforts to reduce the high level of alcohol and other substance abuse
- Build the capacity within the communities of Nunavut to develop and deliver culturally appropriate community based addiction services
- Strengthen links between community based programs and residential treatment.

NNADAP is **accessed** in two ways:

- For treatment, funds are accessed through a referral process that involves multiple steps of approval, by wellness and medical staff:
i.e. a wellness worker recommends treatment for a patient, the patient agrees to go for treatment, the nurse/physician reviews and may approve the referral for treatment to a residential treatment center.
- For projects, proposals are submitted to the Territorial Coordinator of Wellness review by a committee to determine if the proposal fits the mandates of the program and will have a positive impact upon the community/region the project is aimed at.

In 2004-2005

The funds were budgeted for:

- Travel expenses and treatment center costs:

Total for Baffin:	\$90,000
Total for Kivalliq:	\$75,000
Total for Kitikmeot:	\$50,000
- Training \$100,000
- Cambridge Bay Treatment Program \$63,000
- 33 patients were referred to treatment in 2004-05.

Drug and Alcohol Worker Training

From February 22nd until March 4th, the Department of Health and Social Services sponsored a training opportunity for workers in Nunavut who had the responsibility of assessing and referring substance abusers. The course was held in Rankin Inlet. The workers included: Alcohol and Drug Workers employed by the hamlets, entry level Social Workers, and Wellness Workers. The course was a two week module from the Nunavut Arctic College Social Services Program, entitled "Assessment and Referral". All participants were eligible for a college credit by passing the exam at the end of the course.

The nineteen participants came from all three regions:

Kitikmeot	3 participants
Kivalliq	9 participants
Baffin	7 participants.

Cambridge Bay 28-Day Treatment Program

The need for treatment programs for individuals was identified on many occasions in the community. The practice of sending clients to Hay River either one at a time or in groups seems to not be the best way to address the alcohol and drug issues people are facing. The environment is foreign and does not enable participants to set up realistic follow up planning and resource searches back at home.

Because the Cambridge Bay Wellness Centre had been running one and two week healing/workshops for the past 1 ½ years, it was felt that this centre was ideally prepared at this time to offer a treatment program to 12 women in Cambridge Bay. The Hamlet of Cambridge Bay offered the use of a beautiful facility which served as the residential area for clients, as well as residential space for night staff. The Hamlet provided housing for the facilitators as well as classroom space for the group work.

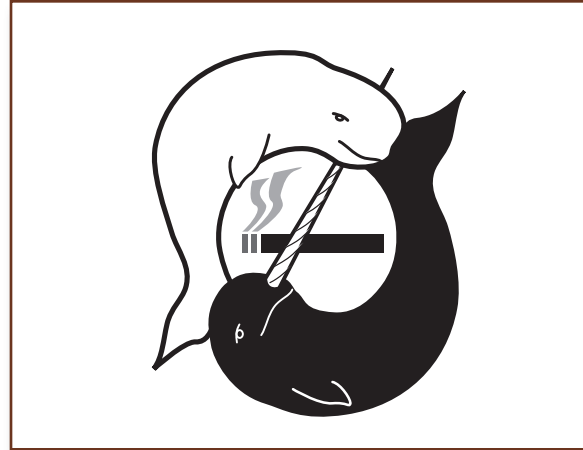
Four program spaces of the 12 were taken by women from the other Kitikmeot communities, the other 8 were filled with women from Cambridge Bay.

Overall the program was positive experience for the Wellness Centre and for the community. It was found to be a tremendous amount of work and all of the forms, protocols, etc needed to be developed. These developed materials can now be utilized for future treatment programs. Of the 12 women who started the program, 9 completed the entire cycle.

TOBACCO CONTROL STRATEGY

Goals of the Nunavut Tobacco Reduction Strategy

- Provide leadership and co-ordination across the territory.
- Reduce exposure to environmental tobacco smoke among Nunavummiut
- Reduce the number of cigarettes sold in Nunavut by 50% in 5 years
- Reduce the smoking rate among Nunavummiut youth and pregnant women by 50% in 5 years
- Increase access to cessation programs and aids in the community



Annual Program Activity Report:

PREVENTION

MYATT activities support and develop youth capacity and facilitation

The Minister's Youth Action Team on Tobacco (MYATT) was very productive in 2004-2005. Monthly teleconferences were held to share ideas and information as well as plan events for each of the youth's communities. New this year: each MYATT member developed and implemented a tobacco reduction project in their community. This initiative took a great deal of leadership and motivation from the youth. The Tobacco control program congratulates the youth on their hard work and dedication to reducing tobacco in Nunavut.

During National Non Smoking Week (January) and World No Tobacco Day (May 31), the MYATT youth teamed with their local Community Health Representatives (CHR's), teachers, principals and other supporting community representatives to undertake various projects in their communities such as radio interviews, making posters, and doing presentations in their schools.

The MYATT annual conference was held in Iqaluit November 11th-16th, 2004. Workshops were held by the staff of Health and Social Services, as well as with a hired consultant, who trained the youth in minimal contact tobacco intervention techniques. This training gave the youth the tools to speak with friends and loved ones who express interest in reducing their tobacco intake.

Distribution of materials

The Department of Health and Social Services distributed various resources and other information to communities (posters, pamphlets, etc). Full packages of pamphlets, posters and other resources were sent to every health centre in Nunavut, every CHR in Nunavut, CPNP programs as well as all the members of MYATT and many schools that have requested information.

Promotional items created

- Stickers: “Kissing a smoker is like kissing an ashtray” and “Be an individual, be smoke free”. These stickers were developed to appeal to youth.
- Air fresheners for cars: “Welcome to my smoke free car”. These air fresheners display the new Nunavut tobacco program logo and were given out to the various taxi companies in Nunavut. These items were given out at events such as trade shows and other special events.

CESSATION

Smoke Screening 2

To help celebrate National Non-Smoking Week (third week of January), a pan territorial initiative involving the Departments of Health and Social Services of the Governments of Nunavut, the Northwest Territories and Yukon joined to create the videos and guides titled “Smoke Screening”. This project gives students in Grades 6-12 the chance to view 12 of the best tobacco education ads from around the world, and then select the one they feel is the most effective. The ads selected for the Smoke Screening video take a variety of approaches toward the issue of tobacco. The goal is to draw attention to some of the negative consequences of tobacco-use and encourage viewers to think critically about the decision to smoke or chew tobacco. This tool is an easy to use educational tool for teachers use. For the second consecutive year 100% of teachers stated they want smoke screening back in their schools next year. Plans are underway for Smoke Screening 2005-2006.

Minimal Contact Tobacco Intervention Training

This workshop was delivered in Rankin Inlet, NU in February, 2005. Three participants per community in the Kivalliq region were selected. This multidisciplinary group of Community Health Representatives (CHR’s), Canadian Prenatal Nutrition Program workers (CPNP) and Home Care (HC) workers learned Minimal Contact Tobacco Intervention techniques. The goal was to ensure a unified understanding, cooperation and repetition of tobacco cessation messages between communities and disciplines. This type of multidisciplinary intervention technique has been proven to double quitting rates among smokers compared with no intervention from their health care providers. Minimal contact intervention only takes three to five minutes and all participants felt they would be able and willing to take the time to share their new knowledge with the client.

PROTECTION

Tobacco Control Facilitator

A position was created for a Tobacco Control Facilitator to work in partnership with the Tobacco Reduction Specialist. The two positions compliment each other and provide a sounding board, cooperation and an enhanced enthusiasm while working together. More projects were able to be completed and the program has expanded its vision and focus.

Partnership building and distribution of resources throughout Nunavut

The program has been working on increasing partnership with the Inuit organizations in Nunavut. The goal is to have more collaboration between our organizations and to keep communications open. These partners make valuable contributions to the evolution and sustainability of various aspects of the program by providing culturally relevant information. This partnership encourages further cooperation and interaction between the various organizations to continue to work on tobacco reduction projects in tandem.

The tobacco control initiative has also been working with other divisions within the Department of Health and Social Services to share costs, collaborate on projects, and share opportunities for training staff, when possible.

The Tobacco Reduction Specialist has participated as a member of the national Tobacco Control Liaison Committee and the National Network of Quitlines Steering committee. The Tobacco Control Facilitator attended and presented at the National Conference for Youth and Young Adults in February 2005. Nunavut's tobacco program was represented by the facilitator and 3 MYATT representatives.

Tobacco Cessation Quit Kits

Various promotional materials and tobacco cessation information were developed and incorporated into a tobacco cessation quit kit. These self-help kits were designed to be a resource for health care and CPNP workers in the territory to assist Nunavummiut to quit using tobacco products. Two series of the quit kits were developed; a kit for the general public and a kit for pregnant parents. These kits have the information translated into Inuktitut as well as some materials into Inuinnaqtun and French.

Leadership in developing smoke-free spaces and further tobacco controls in Nunavut

The following initiatives have been undertaken this fiscal year to assist in the promotion and operation of the Tobacco Control Act as well as the education of Nunavummiut on Nunavut's Tobacco Reduction Strategy

Regulations

The Department of Justice has been of great assistance in advising and preparing all necessary legal documents to draft regulations for the Tobacco Control Act and will be ready for approval in 2006.

Legislation Signs

Four mandatory retailers' signs were developed to support the tobacco control act. Each sign had a message that was translated into the four languages.

Enforcement

Discussions have taken place with the City of Iqaluit and the GN's liquor enforcement division; to date they will not be assisting in enforcing our act. The RCMP has agreed to respond to complaints related to the act. Other funding options will be assisted next fiscal year.

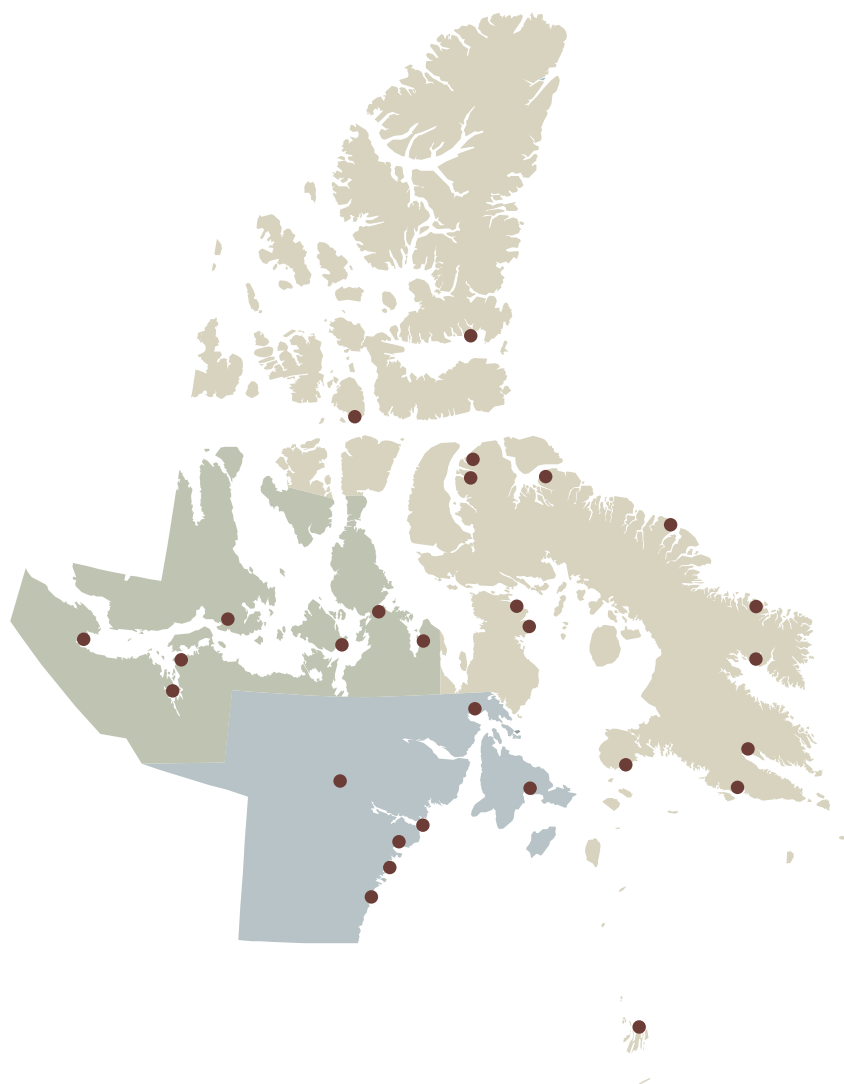
Distribution of the Tobacco Toolkit for Retailers

A Tobacco Toolkit was produced to assist retailers and their employers to comply with the Act. The toolkit was created in English, French, Inuktitut and Inuinnaqtun and has been sent to every retailer in Nunavut.

If you have any questions please contact

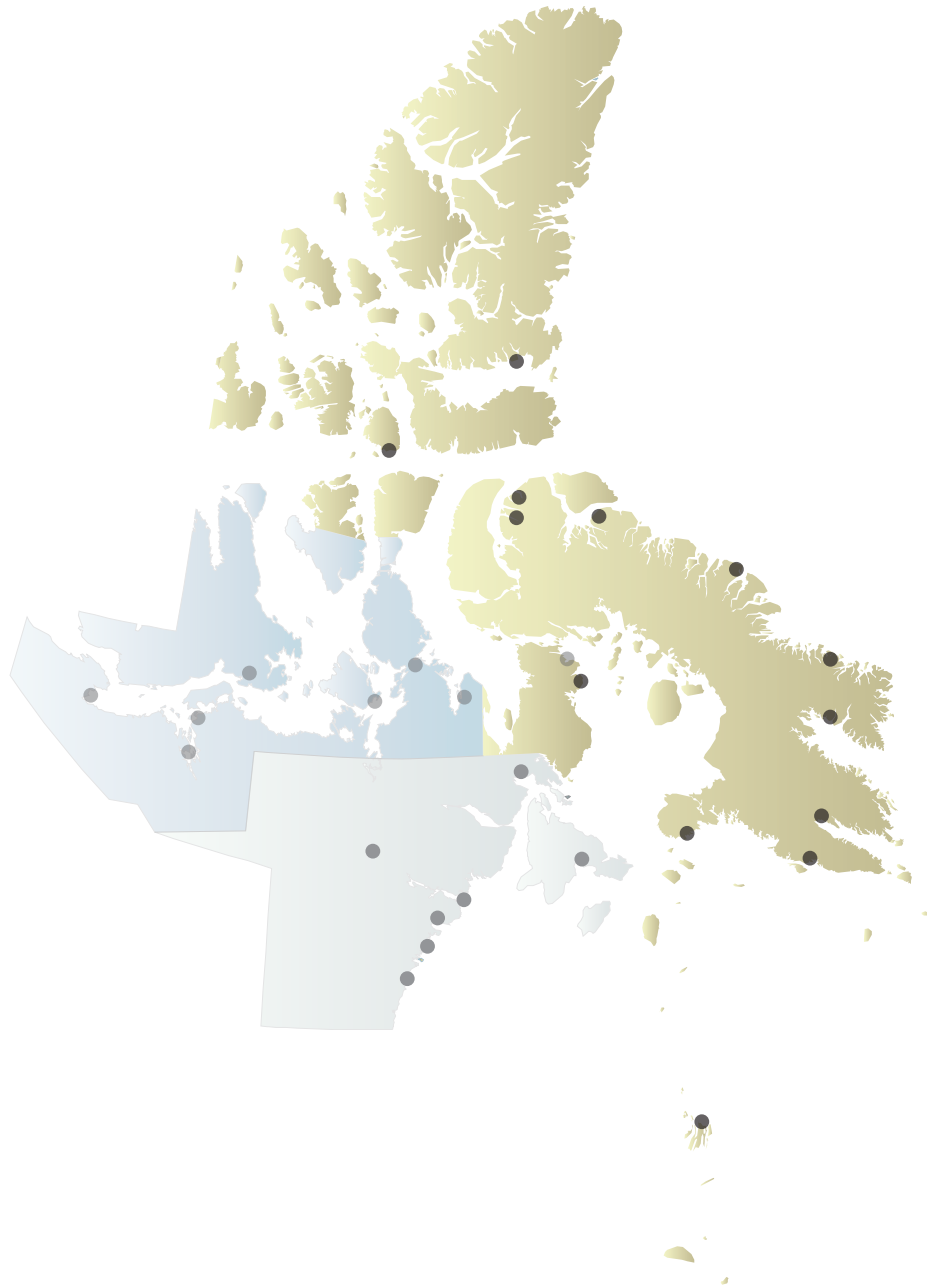
Tobacco Reduction Specialist
(867) 975 5767

INUIT SPECIFIC COMMUNITY WELLNESS INITIATIVES IN NUNAVUT 2004-2005



INUIT WELLNESS PROGRAMS IN NUNAVUT

QIQUIQIANI (BAFFIN) REGION



QIKIQTANI (BAFFIN) REGION

Brighter Futures

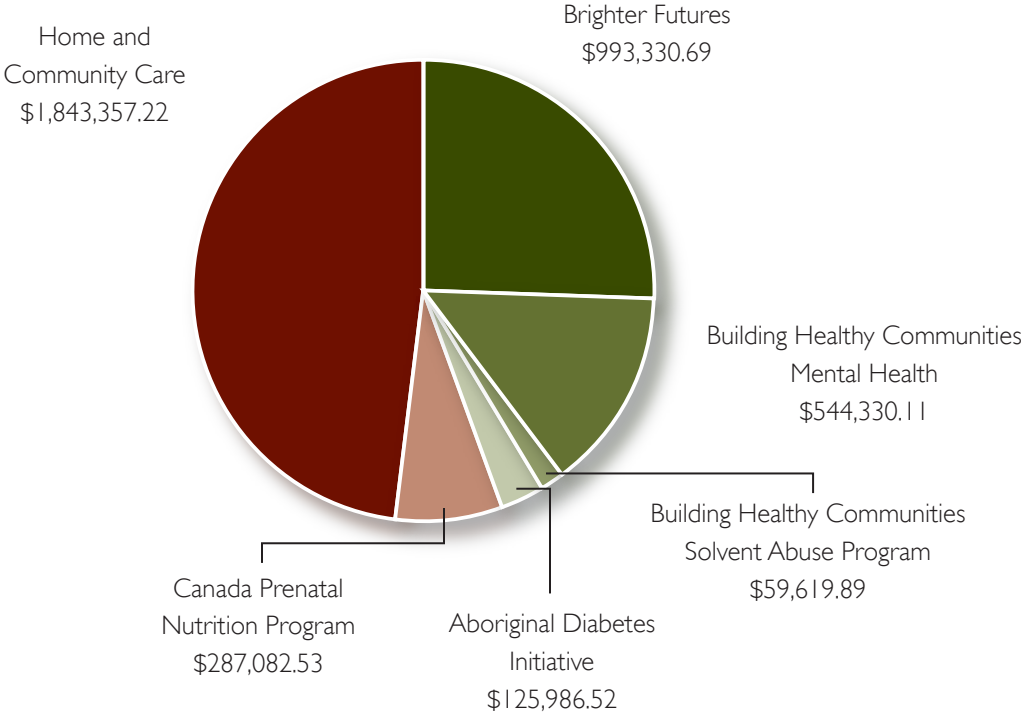
Building Healthy Communities – Mental Health

Building Healthy Communities – Solvent Abuse Program

Aboriginal Diabetes Initiative

Canadian Prenatal Nutrition Program

Home and Community Care



ARCTIC BAY



Brighter Futures

- Community Wellness Coordinator
- Arctic Bay 2004 Summer Camp

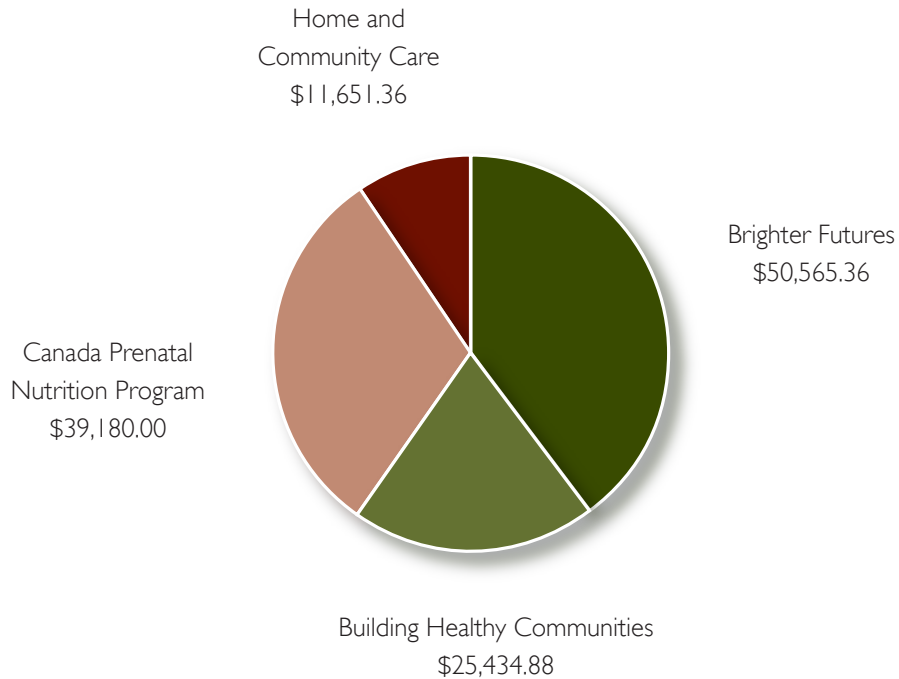
Building Healthy Communities

- Community Wellness Coordinator
- Dream Catcher North of 60 Tour
- Friendship Centre
- HIV/AIDS Education Program
- New Year's Nirivikjuaq 2005
- Pangaggijjiq Nunavut Quest

Canada Prenatal Nutrition Program

Home and Community Care

QIKIQTANI (BAFFIN) REGION



CAPE DORSET



Brighter Futures

- Bantam Hockey Tournament
- Mini Soccer Program
- Coral Harbour Bible Conference
- Saipaaqivik Daycare Society
- Sam Pudlat and Peter Pitseolak Breakfast Programs

Building Healthy Communities

- Wellness Project

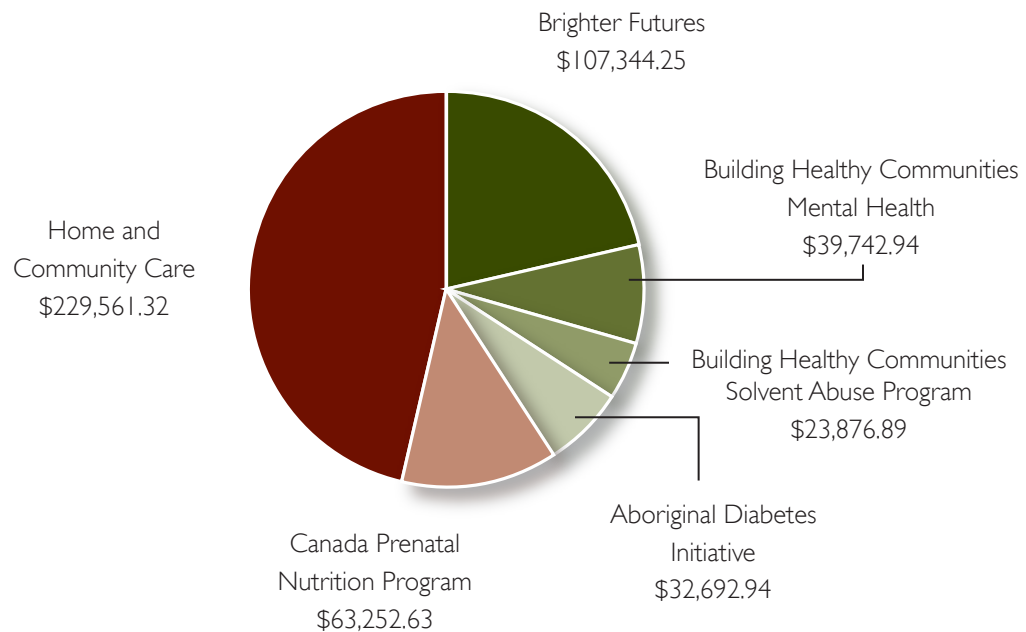
Building Healthy Communities – Solvent Abuse Program

Aboriginal Diabetes Initiative

- Diabetes Education and Awareness Initiative

Canada Prenatal Nutrition Program

Home and Community Care



CLYDE RIVER



Brighter Futures

- Resource Technician
- Breakfast Program
- Archive Council Nunavummi Inaugural
- Community Wellness Coordinator
- Easter Feast
- Community Wellness Coordinator

Building Healthy Communities

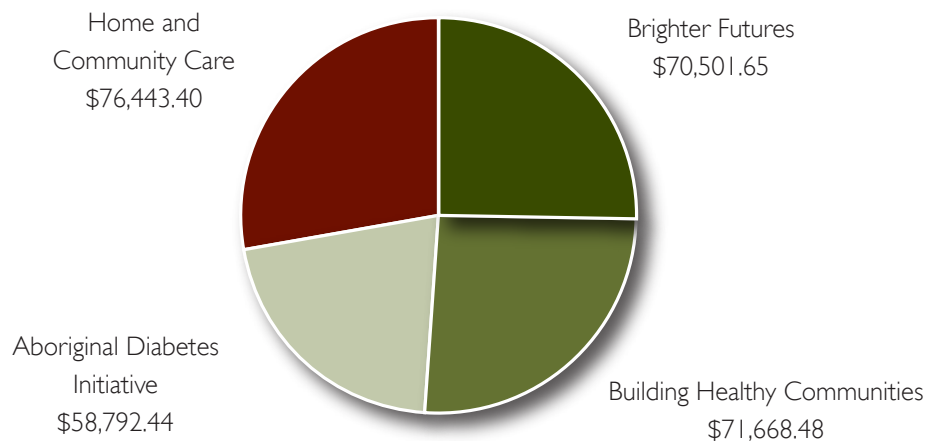
- Suqqakut Society
- CASP Conference
- Ataata Ammalu Irniq Nunami

Aboriginal Diabetes Initiative

- Ilisaqsivik Society Fitness Program
- Nunavut Quest

Home and Community Care

QIJIQTANI (BAFFIN) REGION



GRISE FJORD

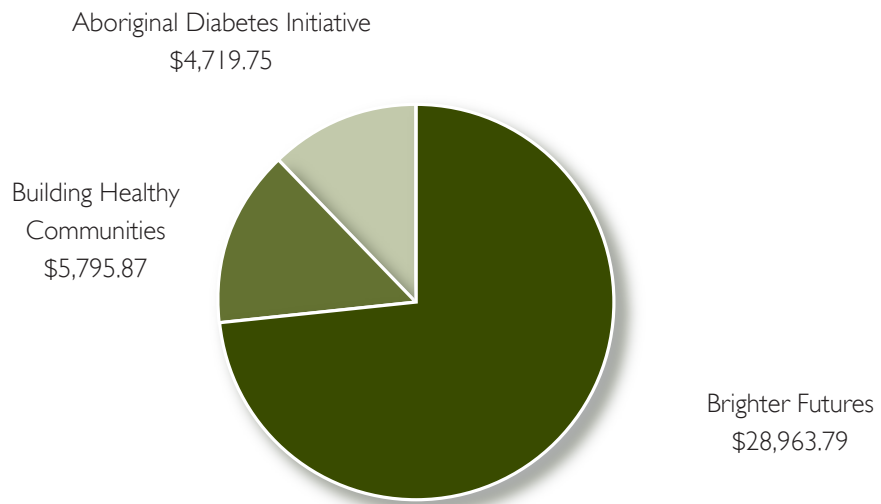
Brighter Futures

- Snack Program (Daycare)
- School Snack Program

Building Healthy Communities

- Christmas Celebrations

Aboriginal Diabetes Initiative



HALL BEACH

Brighter Futures

- Community Enhancement Project
- School Breakfast Program
- Tutoring Assistant
- Caribou and Fishing Project

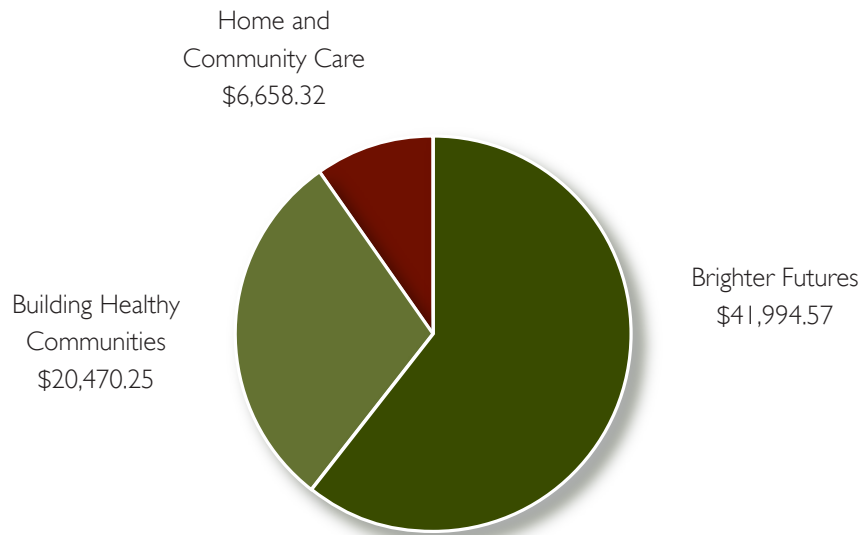
Building Healthy Communities

- Job Placement Program
- Community Clean Up Project
- Elder's Centre Co-ordinator
- Nunavut Quest
- Embrace Life Conference

Home and Community Care



QIKIQTANI (BAFFIN) REGION



IGLOOLIK

Brighter Futures

- Community Wellness Coordinator
- Breakfast Program
- Student Support Counsellor
- Special Needs Support Workers

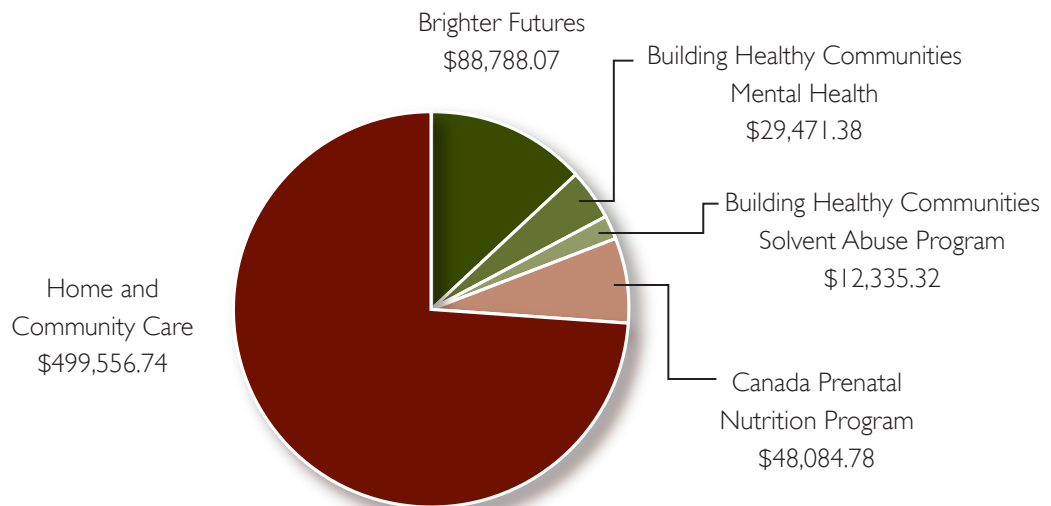
Building Healthy Communities

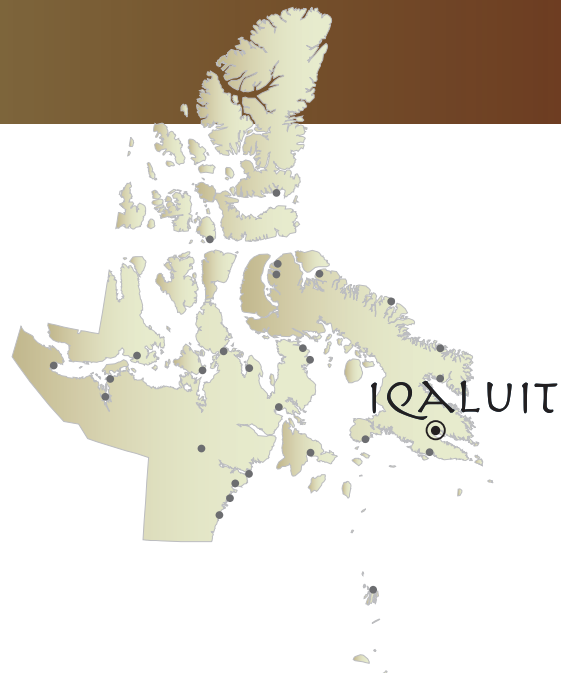
- Community Wellness Coordinator

BHC (Solvent Abuse Program)

Canada Prenatal Nutrition Program

Home and Community Care





Brighter Futures

- Community Wellness Coordinator
- DEA Breakfast Program
- Earth Day Canada
- Atii Fitness Centre
- Read to Succeed
- Greenlandic Kayaking Championship
- Iqaluit Youth Land Programs
- Sprouts – Growing up Healthy
- Music Camp
- Learn to Skate – Learn to Excel
- Youth Committee Sewing Program
- Violence Intervention Program for Youth
- Iqaluit-Pickering Ontario School Exchange Trip
- Healthy Snack Program – Nanook School
- Gordon Robertson Education Centre High School
- Inuksuk Volleyball Trip
- Iqaluit Youth Soccer
- Yoga for Teens
- Safe Homes for Children
- Iqaluit Music Society
- Canadian Power Lifting Championships
- Abe Okpik Healthy Snack Program
- Makkuttkkuvik Cooking Club and Snack
- Hip Hop Teens Issues Focused Workshop

Aboriginal Diabetes Initiative

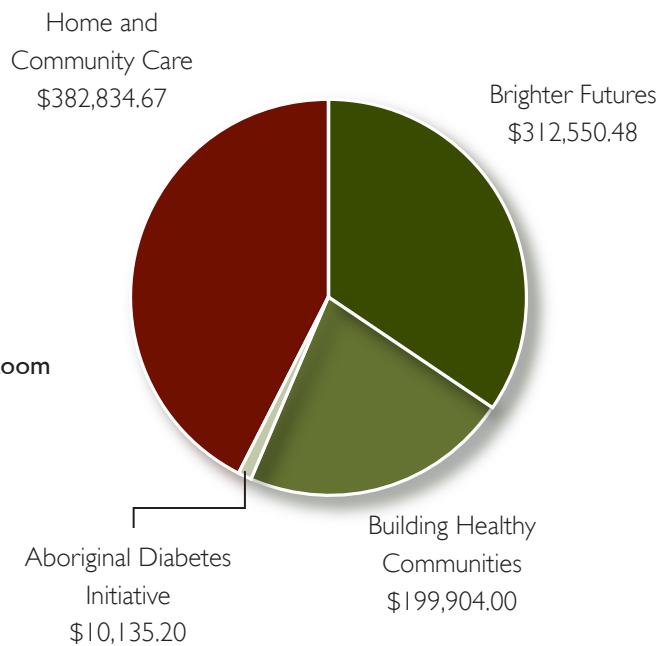
- Judo – John Howard Society
- Public Health

Home and Community Care

CIKLOTA NI RBXIEFBNA REGION

Building Healthy Communities

- Qaqqiq Theatre Company
- Elder's Gathering 2004-Kangirsujuaq
- Qayuqtuvik
- Nunavut Stars Summer Hockey Camp
- Student Tutor/Counsellor – Student Assistance Room
- Nunavut Breast Cancer Educational Kit Launch
- Yoga in the Schools/Yoga in the City
- Christmas Games
- Toonik Tyme
- Youth Inner Healing Conference



KIMMIRUT

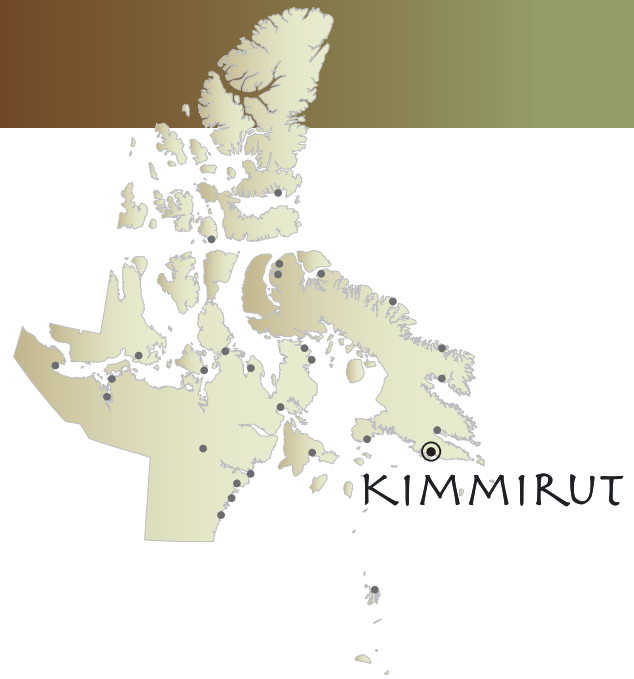
Brighter Futures

- Itsutiit Camp Project
- Tutoring Project
- Breakfast for Healthy Learners
- Summer Day Camp

Building Healthy Communities

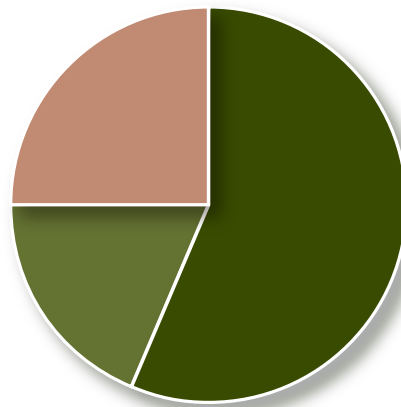
- Building Support between Generations

Canadian Prenatal Nutrition Program



Canadian Prenatal
Nutrition Program
\$13,257.19

Building Healthy
Communities
\$9,927.31



Brighter Futures
\$29,987.36

PANGNIRTUNG



Brighter Futures

- Alookie School Breakfast Program
- A Healthy Start
- Precious Children's Daycare
- Youth Program
- Elder's Tea Program

Building Healthy Communities

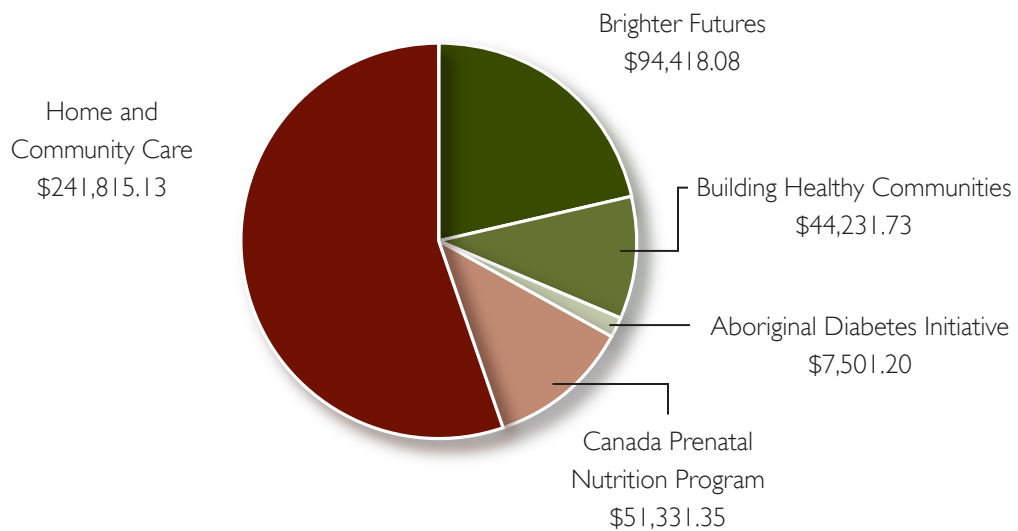
- Suicide Prevention Coordinator
- Summer Land Program
- Youth Outings
- Easter Festivities

Aboriginal Diabetes Initiative

Canada Prenatal Nutrition Program

Home and Community Care

QIKIQTALUK (BAFFIN) REGION



POND INLET

Brighter Futures

- Ulaajuk School Breakfast Program
- Community Wellness Coordinator

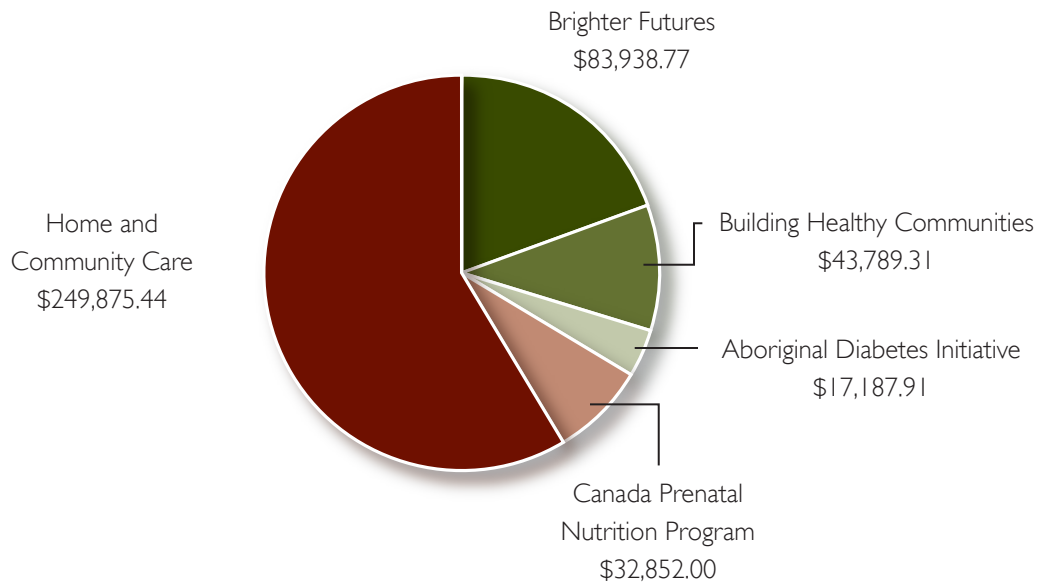
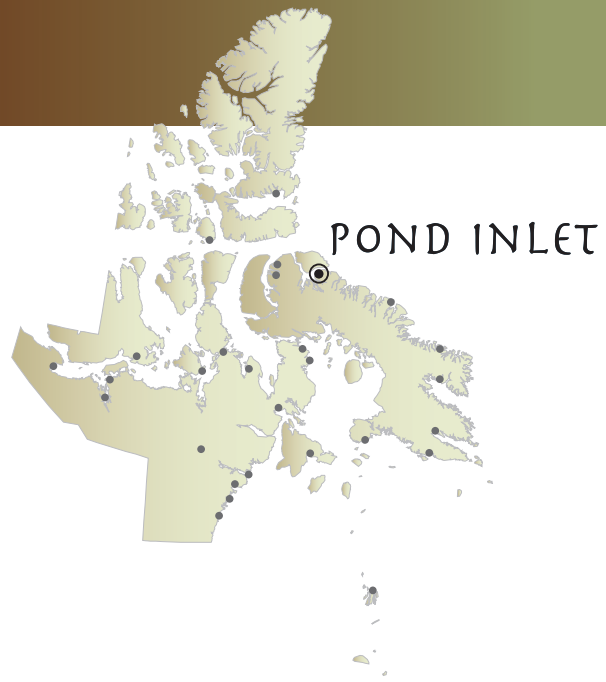
Building Healthy Communities

- Nassivik High Reading Room
- Community Wellness Coordinator

Canada Prenatal Nutrition Program

Aboriginal Diabetes Initiative

Home and Community Care





Brighter Futures

- Tutoring Assistance
- Piqitatarvik Daycare Lunch Program
- Land Skills Training
- Annual Bible Conference
- Cultural Inclusion Program
- School Breakfast Program

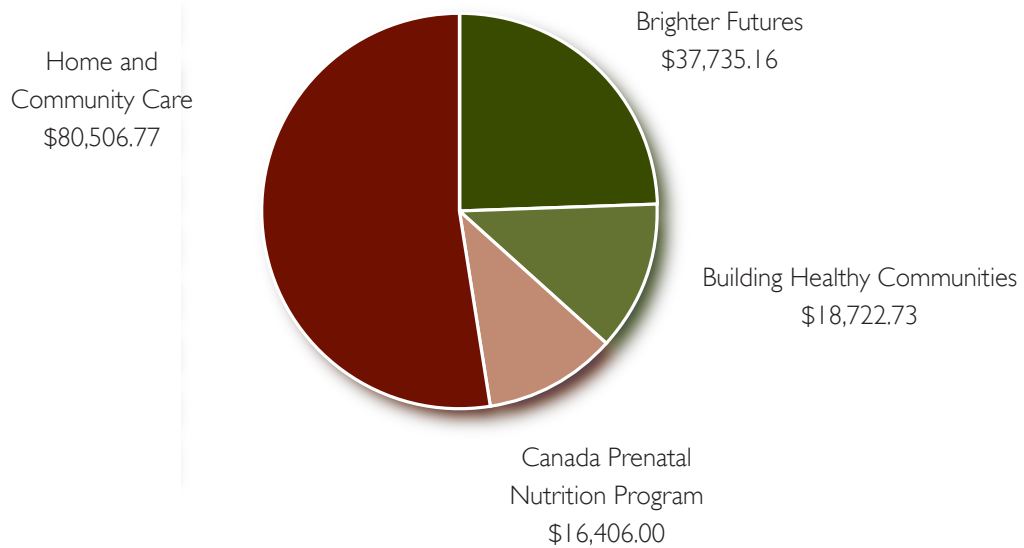
Building Healthy Communities

- Cultural Inclusion Program

Canadian Prenatal Nutrition Program

Home and Community Care

QIKIQTANI (BAFFIN) REGION



RESOLUTE BAY

Brighter Futures

- Jewellery Making Workshop
- Bible Conference
- Cultural Fair 2005

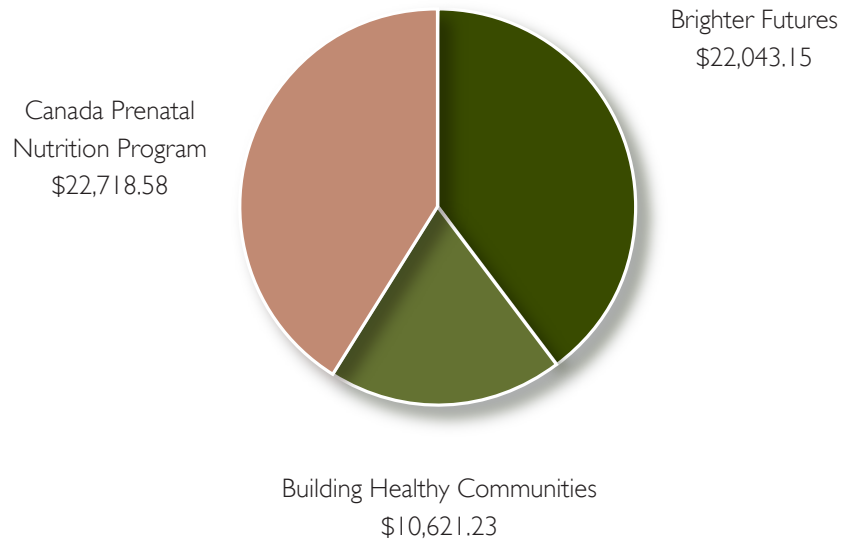
Building Healthy Communities

- Qamartalik School Snack Program
- Easter and Game Feast

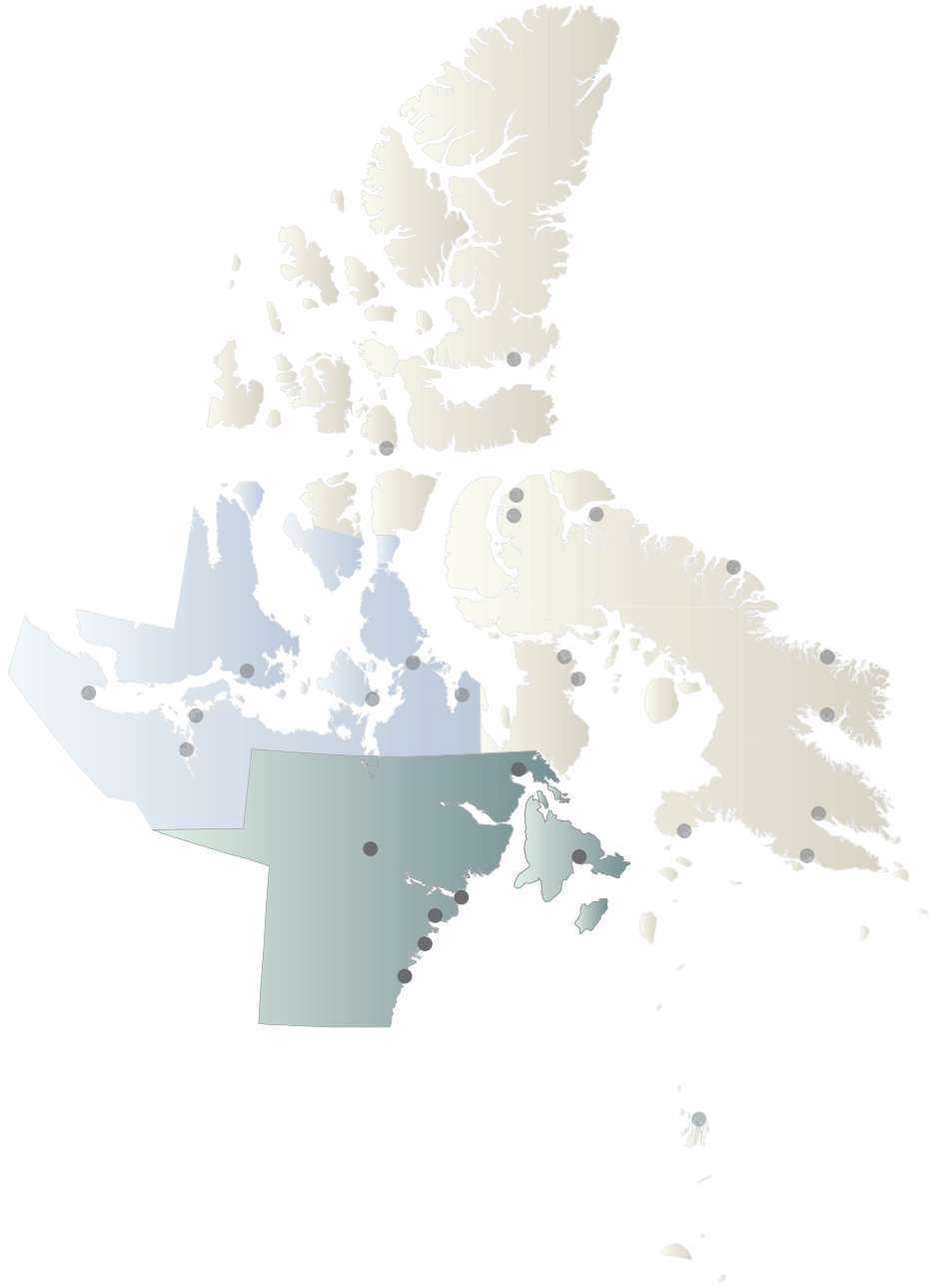
Canada Prenatal Nutrition Program



QIKIQTANI (BAFFIN) REGION



KIVALLIQ REGION



KIVALLIQ REGION

Brighter Futures

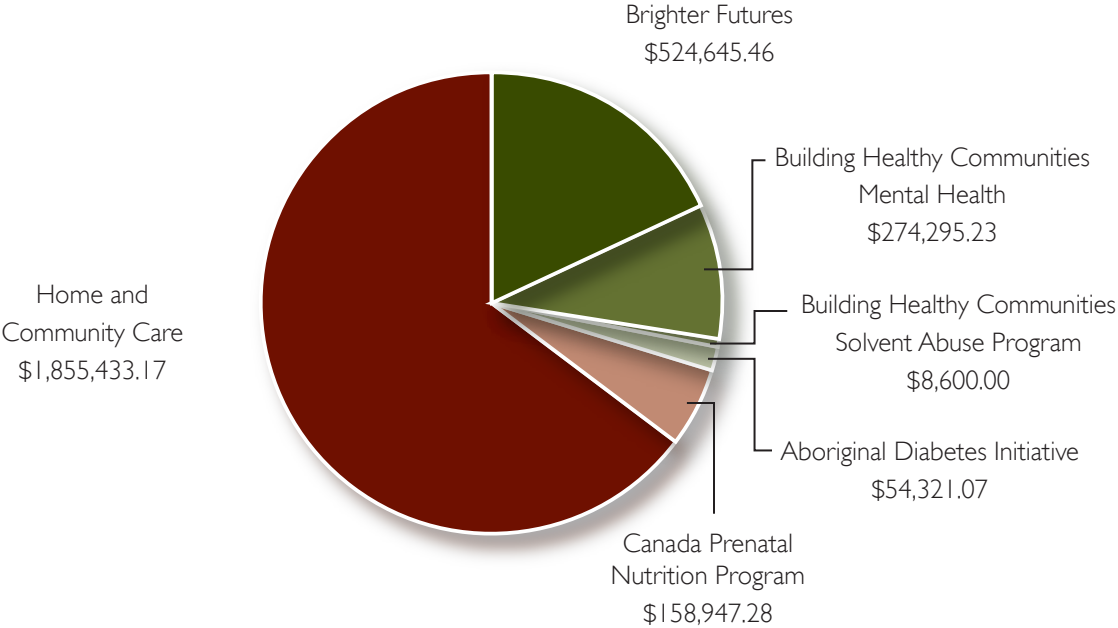
Building Healthy Communities – Mental Health

Building Healthy Communities – Solvent Abuse Program

Aboriginal Diabetes Initiative

Canadian Prenatal Nutrition Program

Home and Community Care





Brighter Futures

- Small Steps Intervention Program
- Healthy Moms/Healthy Babies Program
- Qitikliq Breakfast/Snack Program
- Levi Angmak Soup and Breakfast Program
- 1st Arviat Girl Guides Unit
- Arviat Youth Piliriatgiit

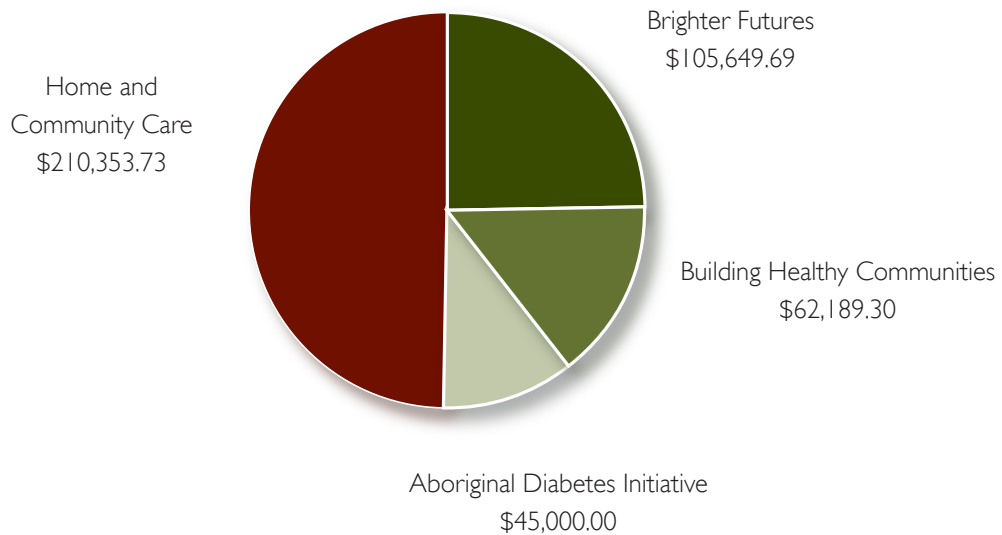
Building Healthy Communities

- Science Fair
- Science Club
- AYP-Suicide Prevention Hike 2004

Aboriginal Diabetes Initiative

Home and Community Care

KIVALLIQ REGION



BAKER LAKE

Brighter Futures

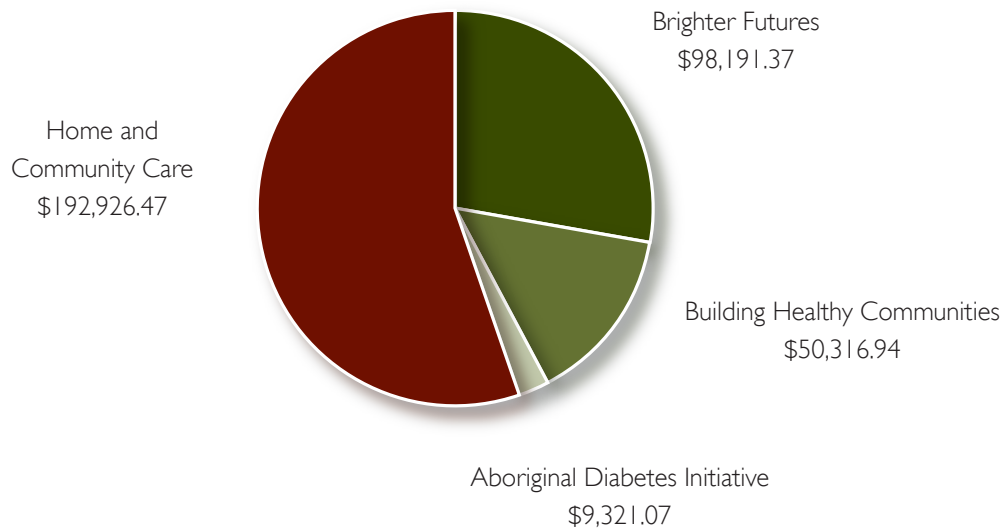
- Pilot Project Mentoring
- Nutrition Program
- Pangnaqtit

Building Healthy Communities

- Drop In Center
- Pilot Project Mentoring

Aboriginal Diabetes Initiative

Home and Community Care



CHESTERFIELD INLET

Brighter Futures

- Community Drop In Center
- School Breakfast/Snack Program

Building Healthy Communities

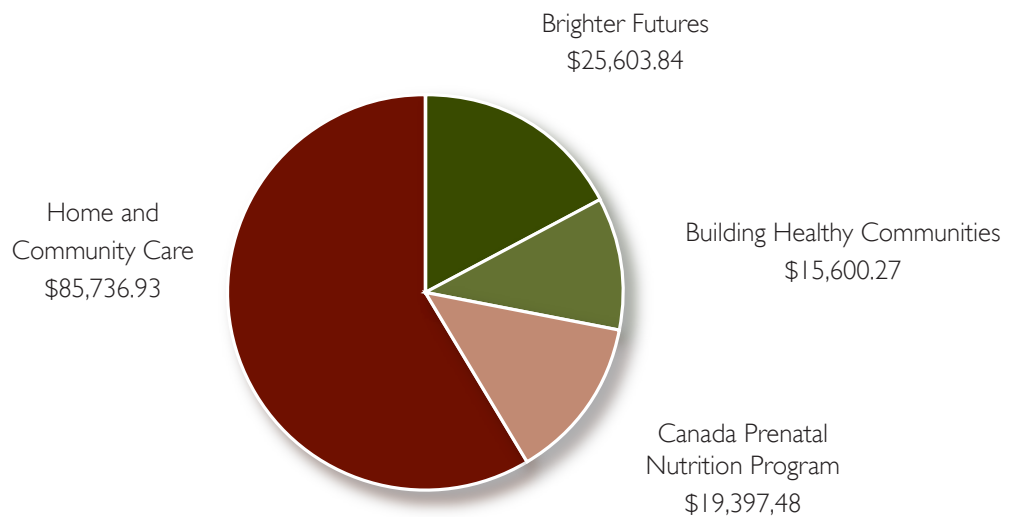
- Drop In Center

Canadian Prenatal Nutrition Program

Home and Community Care



KIVALLIQ REGION



CORAL HARBOUR



Brighter Futures

- Spring Camp
- Sivuniksavut Day Care
- Snack Program - Sakku School
- Katitapaat Wellness Committee
- Caribou Hunting Program
- Bearded Seal Hunting
- Elders and Youth 2004
- Bring Community TV
- Fox Skin Cleaning

Building Healthy Communities

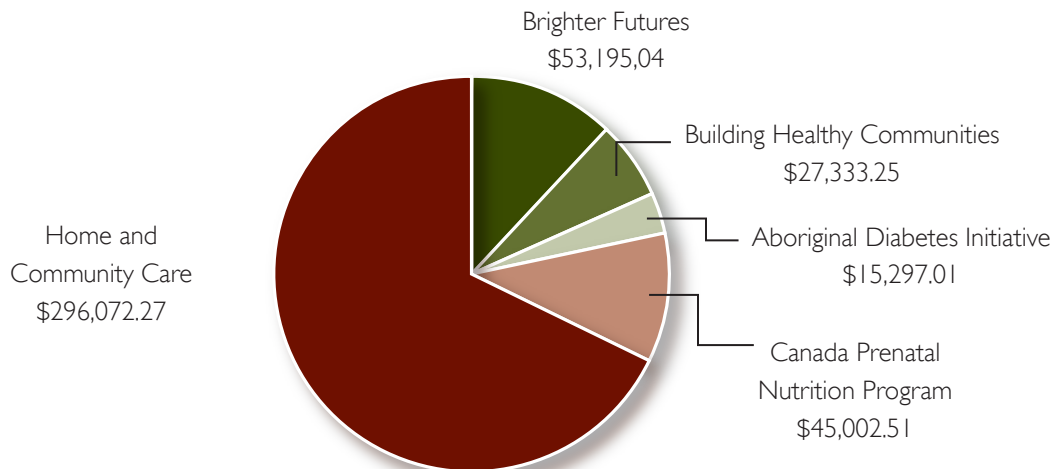
- Knitting Instruction Program
- Sewing Instruction Program
- Tom Jackson Suicide Prevention

Aboriginal Diabetes Initiative

- Diabetes Awareness Enhancement Program

Canada Prenatal Nutrition Program

Home and Community Care



RANKIN INLET



Brighter Futures

- Breakfast Program
- Summer Breakfast and Snack Program
- Drop in Center

Building Healthy Communities

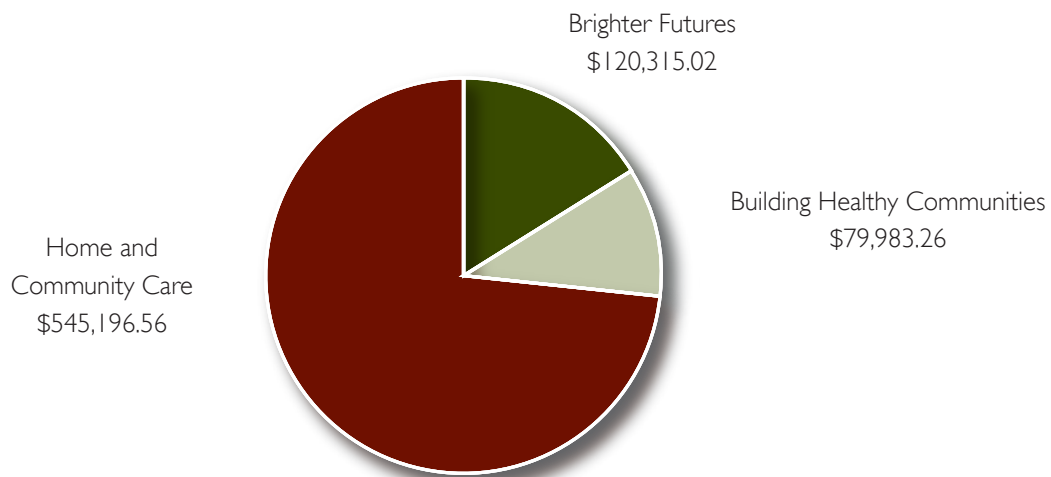
- DARE Canada
- Drop In Centre
- Fishing Derby 2005
- Drum Dance Festival
- Ikajutit
- CBC National News
- Girl Guides of Canada

Aboriginal Diabetes Initiative

- Winner of the Territorial “Drop the Pop” Contest

Home and Community Care

KIVALLIQ REGION



REPULSE BAY

Brighter Futures

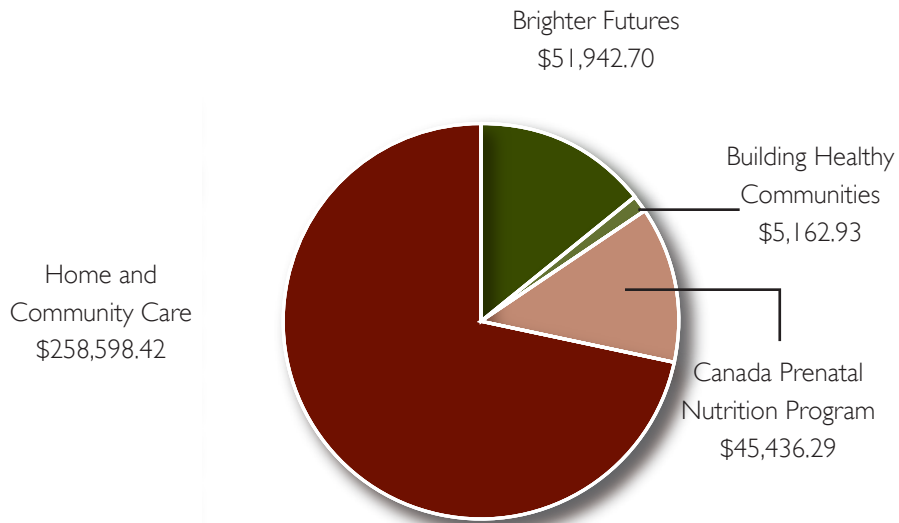
- Breakfast Program
- Stay in School Recognition
- Sewing Instruction

Building Healthy Communities

- Anglican Youth
- Traditional Drum Dance
- Traditional Sewing

Canada Prenatal Nutrition Program

Home and Community Care



SANIKILUAQ

Brighter Futures

- Breakfast Program

Building Healthy Communities

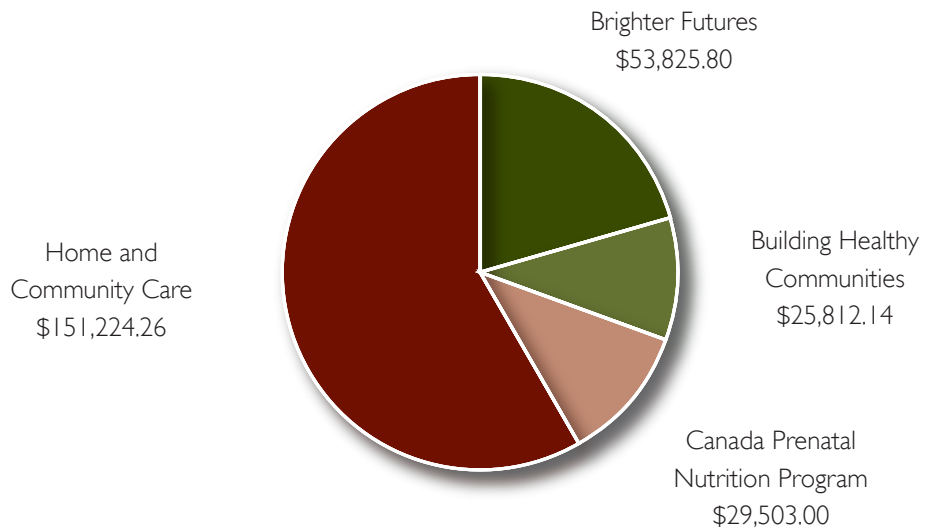
- High Risk Kids

Canadian Prenatal Nutrition Program

Home and Community Care



KIVALLIQ REGION



WHALE COVE

Brighter Futures

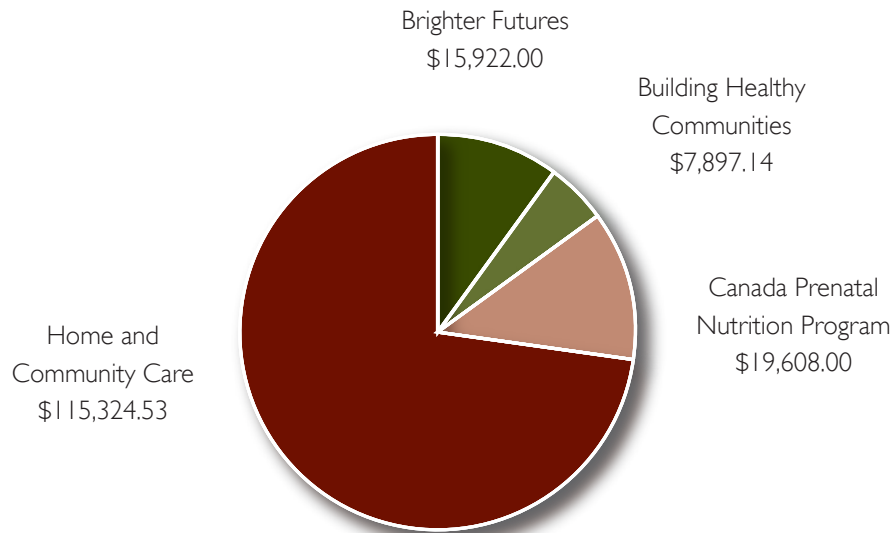
- Moms and Tots
- Girl Guides Camp
- 4 Day Caribou/Calf Hunting
- Breakfast Program
- Community Feast
- Elders Recording

Building Healthy Communities

- Drop In Centre

Canadian Prenatal Nutrition Program

Home and Community Care



KITIKMEOT REGION



KITIKMEOT REGION

Brighter Future

- Regional Great Kids Workshop

Building Healthy Communities – Mental Health

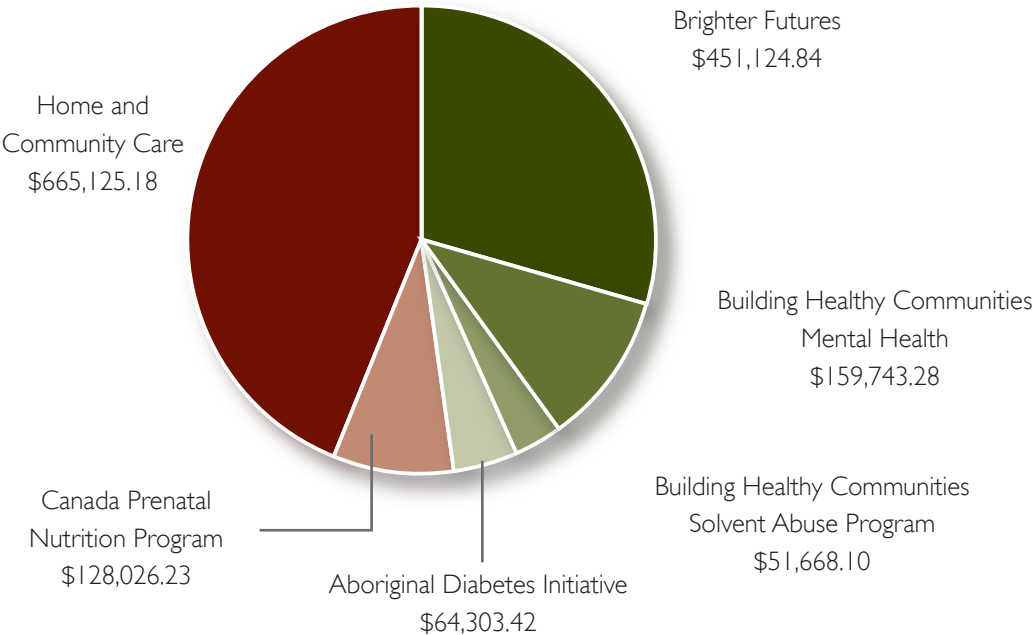
Building Healthy Communities – Solvent Abuse Program

- Region Wide Kitikmeot Tour

Aboriginal Diabetes Initiative

Canadian Prenatal Nutrition Program

Home and Community Care



CAMBRIDGE BAY

Brighter Futures

- Community Wellness Coordinator
- Community Events

Building Healthy Communities

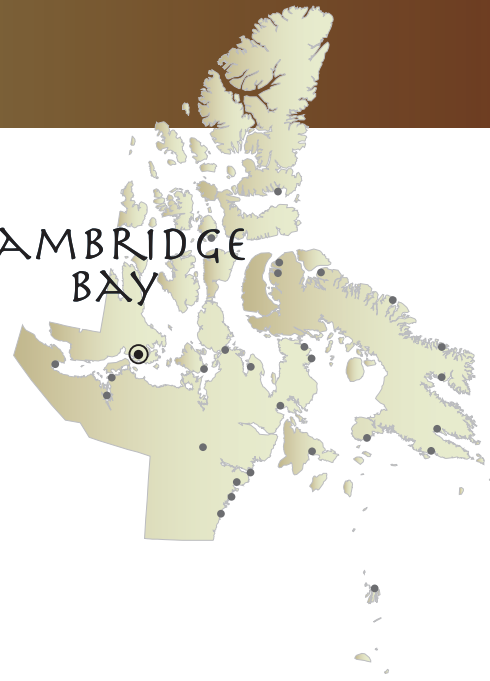
- Elder's Honoraria
- Community Events
- Family Counselling and Training
- On the Land
- Youth Development Activities

Aboriginal Diabetes Initiative

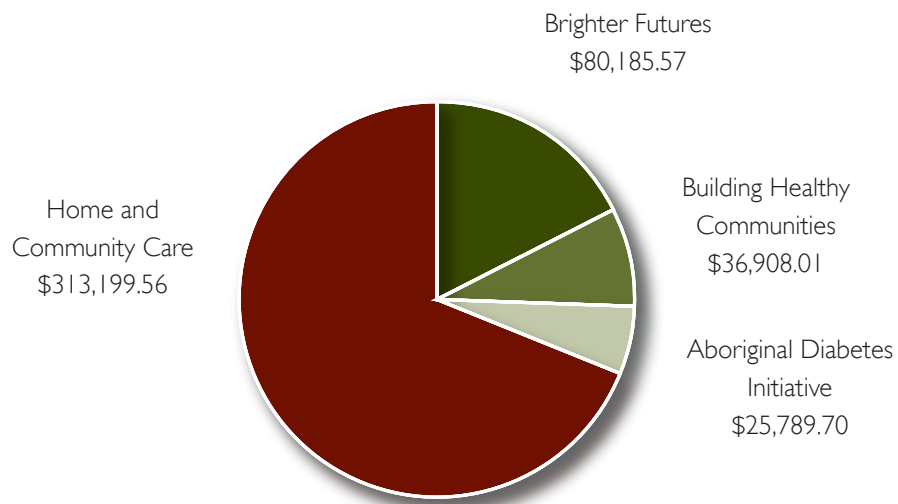
- Healthy Stores
- Elder's Lunch
- 28 Day Program

Home and Community Care

CAMBRIDGE BAY



KITIKMEOT REGION



GJOA HAVEN



Brighter Futures

- Community Radio
- Gjoa Haven Food Project
- Ublakulaak School

Building Healthy Communities

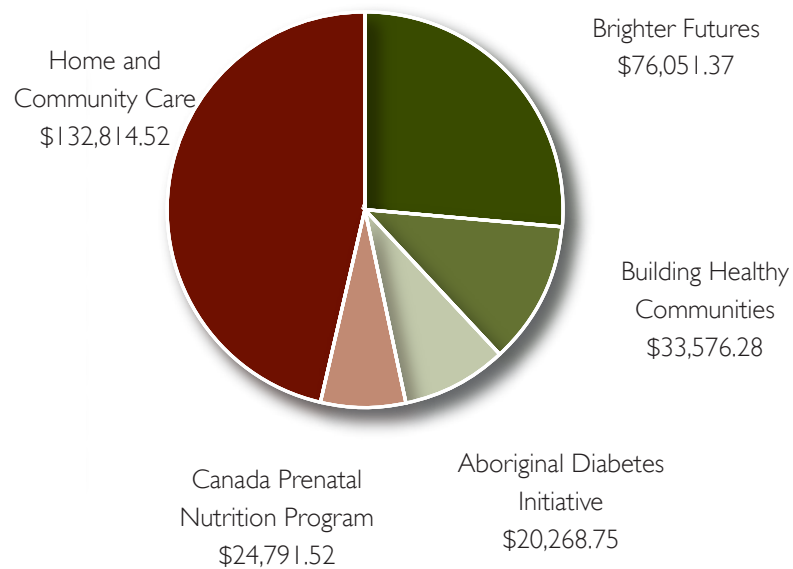
- Tungatiit Committee
- Community Food Bank
- Family Violence Workshop
- First Aid Course

Canadian Prenatal Nutrition Program

Aboriginal Diabetes Initiative

Home and Community Care

KITIKMEOT REGION



KUGLUKTUK



Brighter Futures

- Wellness Coordinator
- Child Development

Building Healthy Communities

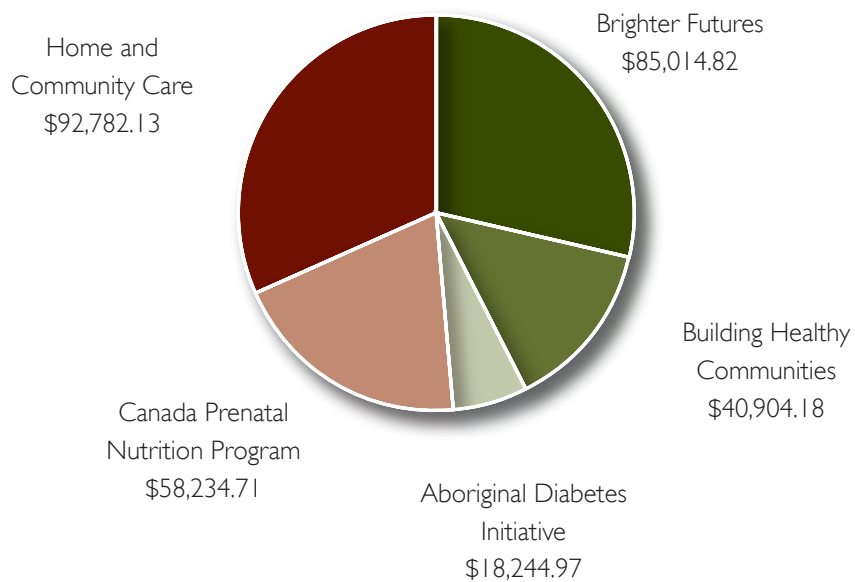
- Training Workshops
- Elder's Committee Evenings
- Youth and Elders

Canada Prenatal Nutrition Program

Aboriginal Diabetes Initiative

Home and Community Care

KITIKMEOT REGION



KUGAARUK



Brighter Futures

- Community Wellness Coordinator
- Community Events
- Workshops and Training
- Wellness Committee

Building Healthy Communities

- Workshops and Training
- Elder's Program
- Community Events
- Youth Program

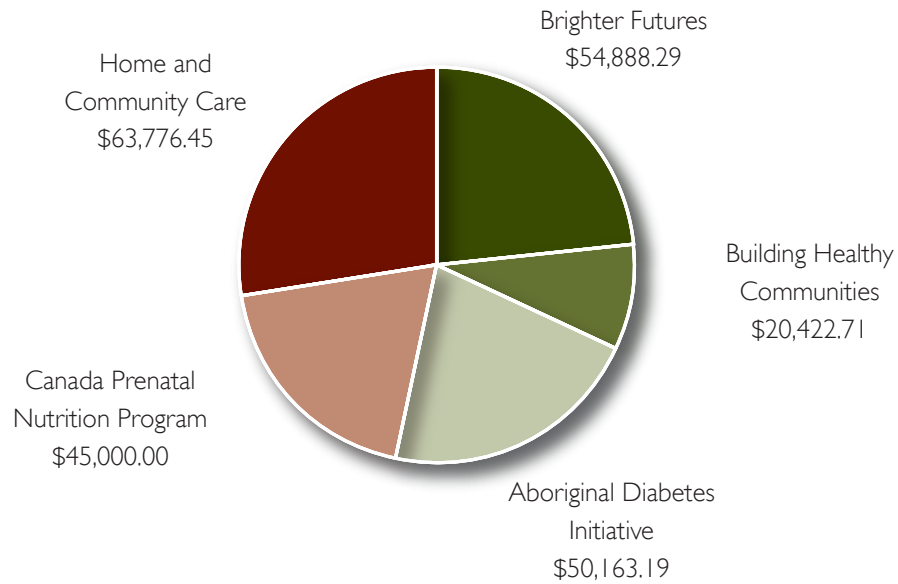
Aboriginal Diabetes Initiative

- Kugaaruk Mentorship Program

Canada Prenatal Nutrition Program

Home and Community Care

KITIKMEOT REGION



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Brighter Futures

- Food Bank
- Traditional Cooking

Building Healthy Communities

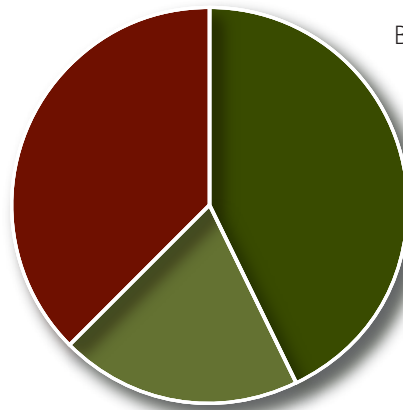
- Family Skills Program
- Traditional Culture

Home and Community Care



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Home and
Community Care
\$52,960.55



Brighter Futures
\$61,059.85

Building Healthy
Communities
\$27,932.10

