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Building *Nunavut* Together  
*Nunavut* liuqatigiingniq  
Bâtir le *Nunavut* ensemble

# Minister of Health's *2023 Public Health Act Annual Report*



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## MEMBERS OF THE LEGISLATIVE ASSEMBLY OF NUNAVUT:

I am pleased to submit the 2023 *Public Health Act* Annual Report to the Legislative Assembly.

The *Public Health Act* requires the Minister to prepare an annual report within six months of the end of each calendar year and table the report in the Legislative Assembly during the first sitting of the Assembly after each report is prepared.

The report must outline reportable events, outbreaks, public health emergencies, and inspections completed under the *Public Health Act*.

This report covers the period from January 1, 2023, to December 31, 2023.

Respectfully submitted,

Hon. John Main  
Minister of Health



## PUBLIC HEALTH PROGRAMS

In Canada, there are six commonly accepted functions related to public health programs:

- Population health assessment.
- Health surveillance.
- Health protection.
- Health promotion.
- Disease and injury prevention.
- Emergency preparedness and response.

Recognizing that many of these are interconnected, this annual report focuses on health surveillance and health protection, specifically for communicable diseases and environmental health.

## PUBLIC HEALTH EMERGENCIES

Under the *Public Health Act*, the Chief Public Health Officer (CPHO) of Nunavut may recommend to the Minister that a public health emergency be declared if additional special measures, such as public health orders, are needed to protect the public health and prevent, remedy, or mitigate the effects of the emergency.

No public health emergencies were declared in 2023.

## REPORTABLE EVENTS & OUTBREAKS

Under the *Public Health Act*, reportable events include the occurrence of communicable diseases and zoonotic diseases. Outbreaks are cases of a condition, usually a communicable disease, that are linked by person, place, or time, with a rise in the number of cases.

Table 1 on the following page outlines all the communicable diseases that were reported in Nunavut for 2023. Following the table, the report provides additional details on certain communicable and zoonotic diseases that occurred in 2023.



**Table 1: Communicable Disease Count for 2023**

<b>Communicable Disease</b>	<b>Count*</b>
Chlamydia	1510
Gonorrhea	727
Influenza A and B	645
COVID-19	407
Methicillin-resistant S. aureus (MRSA)	261
Respiratory Syncytial Virus (RSV)	230
Syphilis	116
Norovirus	44
C. difficile	27
Campylobacteriosis	17
Invasive Group A Streptococcal infections	13
Giardiasis	13
Salmonellosis	11
Rotavirus	11
Chicken Pox (Varicella)	9
Invasive Streptococcus pneumoniae infections	8
Shigellosis	<5
Invasive Haemophilus influenzae infections	<5
Hepatitis C - Unknown	<5
Typhoid	<5
Brucellosis	<5
Neonatal Group B Streptococcal infections	<5
Hepatitis B - Known carrier	<5
Hepatitis C - Acute	<5
Trichinellosis (Trichinosis)	<5
Yersiniosis	<5
Cryptosporidiosis	<5
Hepatitis C - Known carrier	<5
Hepatitis B - Acute	<5
Toxoplasmosis	<5
<p>*These are preliminary counts. On an annual basis, Health validates its data related to communicable diseases. This process is not complete for 2023. Major changes are not anticipated.</p>	



## COVID-19

For 2023, there were 407 confirmed cases of COVID-19 in Nunavut. COVID-19 is now part of seasonal respiratory surveillance including flu and RSV.

## Tuberculosis (TB)

There were 67 diagnosed cases of TB in Nunavut in 2023. See Table 2 below for more information.

Year	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
# of Total Cases	52	83	44	54	101	57	54	34	77	53	67

\*Health does not release community-level TB data outside of outbreaks, as it could inadvertently identify and stigmatize individuals and groups.

A TB outbreak in Pangnirtung declared on November 25, 2021, remains ongoing. Health issued the public health advisory when contact tracing was no longer adequate to identify all cases involved. A Community Wide Screening (CWS) was held in Pangnirtung between September and December 2023. The CWS achieved 96% of its goal to complete initial screening for 1,200 people in the community; this covered roughly 60% of the whole community.

During 2023, TB outbreaks were also declared in Pond Inlet in March and in Nauyasat in May.

There are public health staff in all outbreak communities dedicated to TB follow-up, including testing people with symptoms of TB, medication administration and TB screening for people who have had close contact with a person with active TB. The teams consist of Direct Observation Therapy (DOT) workers, nurses, and paramedics.

Most TB infections in Nunavut involve the lungs (pulmonary). High TB rates in the territory are impacted by various social determinants of health and socio-economic factors such as:

- Overcrowded housing.
- Population demographics (younger population), poor nutrition, and high rates of smoking.
- A colder climate that can lead to more time indoors, increasing the chances of spreading the infection to others.

### Syphilis

The syphilis outbreak in Nunavut is ongoing. For 2023, there were 116 new cases of confirmed syphilis infections reported. Health continues to follow the rates of syphilis closely and implements public health follow-up of all cases to keep the rates as low as possible.

While new infections of syphilis appear to have somewhat reduced from 2020-2022, this must be considered in the context of the COVID-19 pandemic, including travel and gathering restrictions, and possible changes to health care service delivery during COVID-19. However, since then, syphilis infections have surged in 2023.

See Table 3 for more information.

Table 3: Syphilis cases by region from 2012 to 2023				
Year	Qikiqtani	Kitikmeot	Kivalliq	Total
2012	30	<5*	<5*	30+
2013	59	<5*	<5*	59+
2014	94	<5*	<5*	94+
2015	37	8	23	68
2016	23	10	88	121
2017	16	6	87	109
2018	34	0	76	110
2019	63	0	45	108
2020	26	<5*	20+	50+
2021	41	<5*	8+	53+
2022	48	<5*	9+	58+
2023	88	13	15	116

\*Health does not release case counts under 5 due to privacy reasons and a + is included to account for these in the total.  
 Counts may be underestimated due to ongoing follow-up required for some case report forms.

### ENVIRONMENTAL HEALTH PROGRAM

The Environmental Health Program is designed to protect the public by addressing issues such as food safety, drinking water quality, sanitation, pest control, contaminants, and diseases in animals that can affect people, such as rabies. The Environmental Health Program is carried out by certified Environmental Health Officers (EHOs) in each region. EHOs have the authority to enforce the *Public Health Act* and regulations, along with the *Tobacco Control Act*. They carry out inspections to ensure compliance.



### Community Visits

In 2023, EHOs conducted 26 community visits and carried out a total of 902 facility inspections. Health aims to conduct environmental health inspections of facilities twice a year. This is sometimes not possible because of staffing challenges and/or delays that occur due to weather conditions or lack of accommodations in the community.

See Table 4 for visits that took place in 2023.

Table 4: Site visits conducted by community in 2023	
Community	Visits
<b>Qikiqtani</b>	
Arctic Bay	June
Clyde River	August
Grise Fiord	November
Igloolik	January
Iqaluit	Position is based in Iqaluit, and inspections are conducted regularly
Kimmirut	December
Kinngait	January
Pangnirtung	Position is based in Pangnirtung, and inspections are conducted regularly
Pond Inlet	November
Qikiqtarjuaq	May
Resolute Bay	September
Sanirajak	September
<b>Kivalliq</b>	
Arviat	March, June
Baker Lake	May
Chesterfield Inlet	No site visits due to lack of accommodations
Coral Harbour	February, April
Nauyasat	February, June
Rankin Inlet	Position is based in Rankin Inlet, and inspections are conducted regularly
Sanikiluaq	March, September
Whale Cove	No site visits due to lack of accommodations
<b>Kitikmeot</b>	
Cambridge Bay	Position is based in Cambridge Bay, and inspections are conducted regularly
Gjoa Haven	February, July
Kugaaruk	February, June
Kugluktuk	March, July
Taloyoak	June





**Food Premise Inspections**

Many routine inspections are conducted on food premises. If an EHO identifies infractions on a food premise, a written inspection report is provided to the owner/operator that details regulatory infractions and non-compliant public health conditions present at the time of inspection, as well as actions necessary to resolve those infractions or conditions.

The majority of infractions are rectified during the inspection, however the EHO can take the following actions if warranted:

- Give a verbal order, followed by a written one, regarding a health hazard.
- Seize and destroy food that could put the public’s health and safety at risk.
- Close a restaurant if a health hazard exists that can affect the health of the public.

See Table 5 below for food premise inspections, including the number of violations.

Table 5: Environmental Health Food Premise Inspections conducted in 2023	
Total number of food premise inspections	384
Number of inspections with no infractions	236
Number of inspections with at least 1 infraction	148
Number of inspections with at least 1 critical infraction	85
Total number of critical infractions*	141
*The same restaurant inspection may be accounted for more than once. For example, one inspection may have resulted in 1 infraction and 2 critical infractions.	