

Inuit Children's Health Shaped by Their Environment

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Over the past years, Inuit child safety has been set as a priority in our health system in order to ensure equitable access to health care services. Not too long ago, I was offered the opportunity of doing a clinical observership in Nunavik, Québec. I came prepared with knowledge regarding their culture but little did I know about the reality to which I would be exposed.

Children account for more than half of the Inuit population and many Inuit children live in unsanitary conditions. Representing the community's future, they begin their lives with poorer health than other children in Canada.¹ This discrepancy is highly correlated with social determinants such as nutritional inadequacy,² family and social condition, and household income.³ Housing conditions are the focus of this article as it is a specific social determinant at play that I was able to witness during my internship. It is a public health concern that should be brought to attention, and the reality of this issue concerns not only Nunavik but also other aboriginal communities across Canada. Early exposure to environmental pathogens can impact their health in the short term – for example: infections – as well as in the long run with chronic diseases.

Housing security's impact on health is an issue that is known and recommendations exist which guide regional housing authorities and help the prosperity of communities. WHO⁴ recommendations help evaluate the burden of the environment on our health. In their guide, they expose the correlation between household crowding and tuberculosis, second-hand smoke and respiratory diseases, and indoor dampness and asthma onset in children. Other conditions have been described but these particular ones are the most represented in the Inuit population.

During my internship, I participated in home-visit services with a nurse and I was struck by the way the Inuit were living. The indoor air was damp and polluted with cigarette smoke. As the average number of children per family is around four or more,⁵ household crowding is very common. Children are exposed to forgotten dirt, moisture, and dwellings that need repair.

These alarming conditions are compromising the health of Inuit youth and can lead to chronic diseases such as ischemic heart disease, asthma and lung cancer in adults.⁵ Indoor air pollution from second-hand smoke is linked to respiratory disease. In many of the Inuit family's homes, smoking is a habit as 58% of Inuit in the North smoke cigarettes and 46% of the Inuit started smoking at age 14 or younger.⁶ Hence, Inuit children are frequently exposed to second-hand smoke. It creates indoor pollution, which increases not only the risk for infections but also respiratory disease. In a damp and polluted environment, children are more prone to develop allergies and asthma.⁴ The pollution creates inadequate ventilation, which is also correlat-

ed with a higher risk for infectious disease transmission such as tuberculosis.^{4,5} Tuberculosis is an important cause of premature mortality and is much more prevalent in the North⁷ than in southern territories in Canada.

Moreover, household crowding is correlated with an increased prevalence of tuberculosis, as the crowding increases the frequency and duration of contacts among individuals, which helps spread the disease.^{5,8} Thirty-six percent of Inuit children are living in a crowded environment (more than one person per room) and 29% live in dwellings requiring major repair.⁴ The health of Inuit children aged from two to five is especially related to housing conditions.⁴

We need ongoing monitoring in Inuit communities or large population-based studies to better manage the health of Inuit children. More research needs to assess not only the diseases induced by poor housing but also the impact it has on the development of Inuit children. In 2016, the regional housing authorities are still in need of financial help to address this issue.⁹

This housing crisis endangers a generation of Inuit children. Too many children are affected by poor housing security and the impact it has on their health is critical. This problem has been going on since the creation of Inuit sedentary communities and we need to keep our promise of health equity among children in Canada. If it is not remedied now, Inuit children will not have a fair chance of thriving in Canada's future because of the consequences of poor housing conditions on their health.

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