EVALUATION OF THE HEALTH AND SOCIAL SERVICES SYSTEM IN NUNAVIK: THE USERS' PERSPECTIVE

AS PART OF THE 2021 NUNAVIK REGIONAL CLINICAL PLAN



What were the main objectives of this evaluation?

- This evaluation primarily sought to:
 - Accurately document the Inuit perspective of Health and Social Services provided for them;
 - Better understand the improvements Inuit would like see to ensure a more accurate response to their needs.

What was the context of this project?

 This project was conducted as part of the elaboration of the Nunavik Regional Clinical Plan, so that service planning puts greater emphasis on the users' perspective.

What was the methodology of this assessment?

- A mixed assessment methodology was used, combining the results in three phases:
- 1. An online survey among the population;
- 2. Comments gathered during individual interviews:
- 3. Group interviews.

What were the principal results of the population survey?

- The expectations of most respondents appeared to be relatively well met when it comes to the health care system, namely in terms of the users' perspective of the referral system, user-provider communication, as well as safety and cultural safety of the services;
- However, a considerable number of respondents reported believing they do not have the same level of access to care as the residents of other regions of Québec.

What were the principal findings of the individual interviews?

- The relational aspect of health (Inuuqatigiitsianiq) was reported as central to the interviewees' vision of health, and this appeared to extend to their attachment to the traditional territory, as well as to the quality of the trust established between users and caregivers.
- The effects of colonialism were stated as having greatly affected the population's state of health in the past. Its consequences are perceived as the main source of mental health issues, addictions and violence, fundamentally affecting the population's health to the present day.
- Aspects of the health care system which are most appreciated include the pertinence and effectiveness of services, the fact that they are provided free of charge, as well as the fact that they provide access to qualified personnel; on the other hand, aspects of the system most often identified as requiring improvement were the users' feelings of insecurity, the lack of cultural safety of services, and the gaps in the continuity of care.

Of all the topics identified by the participants of Phases 1 and 2, which ones were the priorities of the focus groups (Phase 3)?

- The exercises of establishing priorities led to the following order of issues:
 - The poor access to mental health services and the urgent need for healing;
 - The importance of promoting healthy lifestyles for children and young families;
 - The improvement in the attitude of workers from outside the territory and need for training for both Inuit and non-Inuit personnel;
 - The need for addressing issues related to the quality of patient care services and improving the retention of experienced and qualified personnel
- Several solutions were proposed in relation to these issues, including:
 - Improving the access to mental health and addiction services, as well as the possibility of hiring more natural helpers, and psychosocial workers;
 - Reinforcing cultural safety, equity in access, continuity, quality and safety of services;
 - Developing more community-based services providing support to families;
 - The strategy most often mentioned as the number one priority for action was the increase in the number of Inuit caregivers.



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What are the top three recommendations based on the results of this evaluation?

1. Improving access to healing and mental health services

- The intergenerational impacts of Nunavik colonial past on the health of the Inuit population are still strongly felt today; further, services are deemed clearly insufficient to adequately respond to the needs of individuals suffering from the psychological distress, mental health and addiction problems resulting from the effects of complex trauma.
- There is thus an urgent need to set up a full continuum of mental health services, including holistic healing services, prevention and promotion programs in the area of mental health, addictions, and support to young families, as well as front-line clinical services for detection, diagnosis and care for common psychosocial difficulties.
- Hiring, training, and adequately supporting Inuit staff will enable deployment of services accessible at all times, and in all the communities, while ensuring interventions are consistent with Inuit values and practices.

2. Reinforcing the cultural safety of services

- Considering the importance of relationships in the definition of Inuit health and wellbeing, we understand why the creation of a relationship of trust between caregiver and user is essential to the Inuit users' perception of what constitutes quality of care; for many, the attitude of non-Inuit workers need be characterized by empathy, respect and openness toward the Inuit culture and the communities' local realities.
- Improvement of cultural safety of services will therefore require the implementation of multiple, yet complementary strategies, including:
 - The reinforcement of the key role played by Inuit staff in the direct service delivery, whether as professionals, paraprofessionals or natural helpers;
 - More attention need to be given in the selection and training of non-Inuit workers, to ensure they understand and value the principles of decolonization, self-determination of Inuit and cultural safety of services.

3. Developing a complete continuum of care in Nunavik

- The people consulted all mentioned that they would like to see more services delivered in their community, not only to limit transfers to the South for health reasons, but also to improve the efficiency of follow-up and the quality and continuity of services within the communities.
- To do so, two complementary strategies should be applied:
- Improving the availability of service in the region, including the full scope of basic, primary health care services, and the development of some of the most commonly used specialized services;
- Increasing the support to users in navigating services at all levels of their trajectory of care, ensuring continuity of information between various service providers in the South and in the region.

