

## FOSTERING HEALTH THROUGH HEALING: ENGAGING THE COMMUNITY TO CREATE A POVERTY REDUCTION STRATEGY IN NUNAVUT



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- Ed McKenna, Director, Nunavut Anti-Poverty Secretariat, Department of Economic Development and Transportation, Government of Nunavut
- Natan Obed, Director of Social and Cultural Development, Nunavut Tunngavik Inc.
- Gwen Healey, Executive Director, Qaujigiartiit Health Research Centre
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- Daniel Page, Manager, Adult Basic Education Programs, Nunavut Arctic College
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## ABOUT THE NATIONAL COLLABORATING CENTRE FOR DETERMINANTS OF HEALTH

The National Collaborating Centre for Determinants of Health is one of six National Collaborating Centres (NCCs) for Public Health in Canada. Established in 2005 and funded by the Public Health Agency of Canada, the NCCs produce information to help public health professionals improve their response to public health threats, chronic disease and injury, infectious diseases, and health inequities. The National Collaborating Centre for Determinants of Health focuses on the social and economic factors that influence the health of Canadians. The Centre translates and shares information and evidence with public health organizations and practitioners to influence interrelated determinants and advance health equity.

#### About the case study

Leadership at societal, community, organizational, and individual levels is important in advancing health equity. This is recognized in the National Collaborating Centre for Determinants of Health (NCCDH) report of its 2010 environmental scan, as well an appreciative inquiry that identified factors that support leadership for health equity. The importance of leadership is also outlined in the 2008 Chief Public Health Officer's report, echoing that strong, visionary, and shared leadership is a common trait among jurisdictions that have stepped ahead in health equity work.

To expand on this evidence about effective leadership practices and supporting or limiting factors, the NCCDH has undertaken a Public Health Leadership Initiative. Its purpose is to identify:

- factors that influence effective individual and organizational public health leadership to address the social determinants of health and advance health equity; and
- effective strategies and tools to develop public health leadership for action on the social determinants of health and health equity in Canada.

As part of this initiative, the NCCDH has created case studies to profile examples of effective leadership to address the social determinants of health and health equity in Canada. This case study looks at a shared leadership approach to developing a poverty reduction strategy in Nunavut. Income is a widely recognized social determinant of health. Inadequate income makes it difficult to secure housing, appropriate food, and other resources required for health.<sup>3</sup> The literature is clear that income and education are strongly associated with health<sup>4-5</sup> and that there are consistent gradients of improved health with higher income and education levels.<sup>6</sup>

To many, including the Inuit of Nunavut (Nunavummiut), physical and mental health cannot be separated.<sup>7</sup> While poverty exacts a devastating toll on the health of people in Canada's North, poor mental health can also lead to and exacerbate poverty. The question "What does poverty mean in Nunavut?" is discussed in further detail below; a brief historical outline answers why healing from the wounds inflicted by colonialism is an integral part of the 2012 strategy to reduce poverty in the territory.

This strategy, referred to as *The Makimaniq Plan: A Shared Approach to Poverty Reduction*,8 was formed by an extensive level of collaboration and community engagement. The process first engaged government and Inuit organizations, then expanded the circle to public and non-governmental organizations.

Community engagement has been identified as a promising public health practice to address the social determinants of health and reduce health inequities. The World Health Organization highlights the need to "empower all groups in society through fair representation in decision-making about how society operates, particularly in relation to its effect on health equity, and create and maintain a socially inclusive framework for policy-making" (p24).

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As a strategy to reduce health inequities, community engagement is the process of involving community stakeholders in the development and implementation of policies, programs, and services (p[1]).<sup>11</sup>

#### Setting the stage

In December 2009, the Government of Nunavut introduced its action plan *Tamapta 2009-2013*, <sup>12</sup> with a commitment to reduce poverty in the territory. The plan recognized that collaboration was essential to address the complex challenges presented by poverty, committing to "actively engage its partners, including Inuit organizations, other governments, non-governmental organizations and our business community in the development of programs and policies to support Nunavummiut in their efforts at eliminating poverty" (p11). <sup>12</sup>

The Nunavut Department of Economic Development and Transportation coordinated the development of a poverty reduction strategy, with Ed McKenna leading the process as Director, Nunavut Anti-Poverty Secretariat. Almost immediately, Nunavut Tunngavik Inc. (NTI) stepped up to the government's challenge for collaboration and publicly stated its intention to work on this endeavour, 13 with Natan Obed, Director, Social and Cultural Development, leading their efforts. The role of NTI is to ensure that promises made under the Nunavut Land Claims Agreement are carried out. Specifically, Article 32 of the agreement stipulates that the government must give Inuit "an opportunity to participate in the development of social and cultural policies, and in the design of social and cultural programs and services, including their method of delivery" (Art. 32.1.1).14

Ed McKenna and Natan Obed became the driving forces behind the strategy's development.

Both felt that a public engagement process was essential to moving forward. They were clear that a poverty reduction strategy must reflect not only the interests of the government and Inuit organizations but all individuals and organizations that would be working together to implement it. "We want people to see their ideas reflected in the plan. Past consultations in Nunavut were seen, more or less, as a process of collecting information. People's views were not reflected in the decision-making, and they become dissatisfied," said McKenna.

Inuit have survived for generations through a strong culture of self-reliance. Public engagement is an opportunity to get back to Inuit ways of solving problems, Inuit Qaujimajatuqangit (IQ). This refers to a body of Inuit beliefs, unique cultural insights, and indigenous knowledge that includes concepts of collaboration, consensus, acquiring skills and knowledge, serving others, environmental stewardship, and being resourceful.<sup>7</sup> Putting them at the centre of the poverty reduction plan process reconciles the distinct differences between Inuit forms of governance and the current political process in Nunavut. Colonial systems that replaced traditional self-reliant practices are still keenly felt and are believed by many Nunavummiut to have contributed to the root causes of poverty.

In Inuktitut, Makimaniq means "empowerment" or "standing up for yourself." *The Makimaniq Plan: A Shared Approach to Poverty Reduction* was developed through an extensive, inclusive process that took over a year to complete. It resulted in legislation, passed May 15, 2013, of the *Collaboration for Poverty Reduction Act.*<sup>15</sup>

This case study details the process used to develop the plan, identifying both challenges and strengths. To provide further context, the case study begins with a brief history of the people of Nunavut.

#### A brief history

Nunavummiut have undergone profound social, economic, and cultural changes over a very short time, and they continue to live with the consequences. 16 Before 1950, Inuit life revolved around the land that supplied most of their food, clothing, and shelter. Families, ranging from five to thirty people, followed hunting herds and moved to fishing grounds by dog team or boat. After 1950, the Canadian government created permanent settlements, or "hamlets," throughout the territory, ostensibly to support their efforts to educate Inuit children, provide medical treatment, and supply financial support. Inuit moved to these settlements, some voluntarily, others to join their school-aged children or other family members. Undoubtedly, some Inuit felt coerced to relocate.

Prior to their move to settlements, Inuit lived a harsh life and struggled at times to have sufficient food and deal with injury and illness. However, the concept of poverty was foreign to them. 17 Hardship was cyclical and shared by all members of the community. People pooled their knowledge and skills to overcome adversity. Life in the settlements inflicted a different kind of deprivation. Without ready access to the land, Inuit had a difficult time obtaining the country foods so important to their physical, emotional, and mental

health. By the 1970s, many people had fallen into alcohol and substance abuse, with families paying the consequences, including physical and sexual abuse, the neglect of children, and poverty.

The Qikiqtani Truth Commission (QTC)—an Inuitsponsored and led initiative for the Qikiqtani Region of Nunavut<sup>a</sup>—indicated that the rapid changes in the 1950s, 60s, and 70s created a dependence on government and produced a power imbalance between Inuit and the government. While resettlement to permanent hamlets may have begun as a way to remedy deprivation, it can equally be seen as its cause.<sup>17</sup>

QTC states a belief shared by many in the territory that, "Acknowledgment of the pain Inuit suffered because of misguided government decisions is an important part of the process needed to heal individual wounds, bridge misunderstandings and inspire forgiveness within families and between cultures" (p1). 18 Healing plays a big role in the concept of health to Nunavummiut. It is one of six themes in *The Makimaniq Plan*, in which "wellness" is cited 12 times, but the word "health" only appears once. Healing is a holistic concept felt to be critical to empowering Inuit to create a more promising future for themselves.

#### What does poverty mean in Nunavut?

Selecting an objective and consistent measure of poverty is challenging anywhere and perhaps more so in Nunavut, a region relatively new to a cash economy. *Tamapta 2009-2013* focuses on meeting "basic needs," including those listed below. Related social determinants of health are noted in brackets:

- Affordable, healthy food, safe water, and a home (Income and social status; physical environments)
- Safety (Physical environments)
- A sense of belonging and purpose (Social environments)

<sup>&</sup>lt;sup>a</sup> The Qikiqtani Region of Nunavut is the most northern and eastern section, once known as the Baffin Region.

- Family support and friendship (Social support networks)
- Education and opportunities to learn (Education and literacy)
- Communication in our preferred language (Culture)
- Personal responsibility
   (Personal health practices and coping skills)
- Pride in our culture, our languages, and in who we are (*Culture*)
- Stewardship of our environment and wildlife (Physical environments)
- Access to the land for personal growth and sustenance
- Opportunities for fun, recreation, and cultural activities

Using more widespread indicators of poverty and its effects, it is clear that poverty is a pervasive problem in Nunavut: (*unless otherwise noted, all references are from* Understanding Poverty in Nunavut<sup>17</sup>)

- Income disparity is more extreme in Nunavut than anywhere else in Canada.
- Half of the population of Nunavut receives income support for at least a portion of the year.
- Almost 60 per cent of the population lives in public housing.
- Nearly 70 per cent of Nunavut's pre-schoolaged children live in households rated as food insecure and 15 per cent of children will experience at least one day in the year when they do not eat.
- High school graduation rates in Nunavut reached an all-time high in 2010, at 39.5 per cent. The Canadian average for high school graduation is 75 per cent.
- The death rate from suicide among Inuit has increased significantly over the past 30 years and, at 120 per 100,000 people, is now 10 times the Canadian average.<sup>19</sup>

- The infant mortality rate in Nunavut is 12.1 for every 1,000 live births. The Canadian average is five (2005-2007 data).
- Cigarette smoking (daily or occasional smokers age 12 and over) in Nunavut is 62.3 per cent, compared to 22.1 per cent in the rest of Canada. The percentage of people exposed to second-hand smoke in Nunavut is 17.6 per cent, versus 6.2 per cent in the rest of Canada.

For the public engagement process, neither the government nor the Nunavut Anti-Poverty Secretariat provided an objective definition of poverty. Instead, they opted for subjective views regarding "the condition we experience when our basic needs are not met" (p5).20 Even economic reports from the region avoid strictly monetary measures of poverty, noting that "poverty is about more than just money. Economic well-being, human capabilities, and social inclusion must have equal parts" (p6).17 This view of poverty falls closely in line with that of health equity which "involves the fair distribution of resources needed for health, fair access to the opportunities available, and fairness in the support offered to people when ill" (p5).21

According to one influential elder, Louis Angalik, in Nunavut, "Poverty is something that is deliberate. We have way too many resources to be in this situation. We have bad planning or deliberate bad planning, if we still have poverty." To overcome poverty, *The Makimaniq Plan* takes a broad view to "help individuals, families, communities and our society improve our health and wellbeing. Mental health, self-esteem, and personal and cultural identity affect our relationships, education and development, access to employment, and ability to participate in the community" (p4).8

#### The Public Engagement Process

Beyond the government's commitment to collaborate on development of the anti-poverty strategy, Ed McKenna and Natan Obed felt strongly that the process not only consult residents, but that it be led by residents. Ed identified a Public Engagement Process, a detailed approach developed by Canada's Public Policy Forum, described as "a new way of thinking about how governments, stakeholders, communities and ordinary citizens can work together to achieve complex, societal goals."22 This approach was successfully used by the Government of New Brunswick to prepare its poverty reduction strategy in 2009. 23-24 According to The Makimaniq Plan, "The essence of this process is respect for community perspectives, capacity and self-determination" (p1).8

The Nunavut Anti-Poverty Secretariat became a partner in the Public Policy Forum's Public Engagement Project, wholly buying into the concept that complex problems required novel, integrated solutions. They wanted to see what suggestions families, businesses, and governments would make and how they could "build a sense of collective ownership and responsibility in which everyone works together to find and deliver solutions" (p5).<sup>25</sup> The process was also tailor-made to integrate traditional Inuit ways of doing things with governance in contemporary society.

Extensive public engagement is a challenging process, and Nunavut's geography poses additional barriers. The territory has a population of just over 34,000 people, 85 per cent of whom are Inuit, spread over two million square kilometres.<sup>26</sup> While over 7,000 people live in the capital city, Igaluit, the majority of communities

are not accessible by road and access by air is often cost-prohibitive. To support the initiative, the Nunavut Literacy Council's Communications Manager, Anna Ziegler, was seconded to the Nunavut Anti-Poverty Secretariat for six months.

The Public Engagement Process involved four key stages of activity:

- Community Dialogues on Poverty Reduction (Winter 2011)
- Regional Roundtables for Poverty Reduction (May to June 2011)
- 3. Poverty Summit (November 2011)
- 4. Program Delivery (ongoing)

Throughout the public engagement period, Ed McKenna and Natan Obed co-chaired a monthly gathering of interested individuals and organizations, known as the Nunavut Roundtable for Poverty Reduction, to discuss various aspects of the process. Roundtable membership was open to Inuit organizations, other governments, non-governmental organizations, and businesses with a desire to contribute toward the reduction of poverty in Nunavut. Membership varied from meeting to meeting and included around 15 organizations. Decisions about issues or topics for discussion were left to the group. In October 2012, the Government of Nunavut and NTI signed a Memorandum of Understanding to establish the Roundtable on a permanent basis.<sup>27</sup>

## 1. Community Dialogues on Poverty Reduction (Winter 2011)

A Community Dialogue Toolkit was developed to guide the public engagement. It explained the process simply as: Learning from each other.

Building on our strengths. Working together for a common cause. Being involved in the decision-making.<sup>20</sup>

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Discussions about poverty and how it could be reduced were held in each of Nunavut's 25 communities—at community centres, kitchen tables, on the radio, at elders' meetings, and even through a youth photo-voice project. The community facilitators were trained in the dialogue process by the Nunavut Anti-Poverty Secretariat using an adult education approach. Each community was encouraged to work through the dialogues in a way that best met their needs, and also to ensure that they created opportunities for building consensus—listening to others and learning from each other. In designing the community workshops, considerable care was taken to create a safe place for people to have meaningful engagement. Some used creative incentives to bring people out, for example, a raffle for gasoline held in Arctic Bay.

The facilitation questions were framed in a positive light, building on community strengths and a vision of life without poverty. At the same time, people provided their unfiltered views of what poverty is and how it feels to live in poverty. According to Anna Ziegler, "The discussions provided a small aspect of community healing, as people discovered common values and a will for action together."

The information gathered during the dialogues was transcribed by a team from the Nunavut Anti-Poverty Secretariat and NTI, made public in regional reports, and carried forward to the Regional Roundtables.

## 2. Regional Roundtables for Poverty Reduction (May to June 2011)

Regional Roundtables were held in Cambridge Bay, Rankin Inlet, Pond Inlet, and Iqaluit, and they involved both community members and those with expertise in poverty reduction policy and programs. The aim was to review the ideas gathered through the community dialogues and propose options for action.

A policy forum was also held, to mixed reviews. Some participants were impressed at how the facilitators brought forward community views and included community members in a safe and respectful forum of discussion. Others thought the forum should have been limited to policy experts, noting that policy makers are sometimes not able to speak openly in public settings about some of the substantive issues required to form meaningful partnerships, due to organizational considerations. They felt that the presence of non-policy people diminished the value of the experience.

Given the personal nature of poverty and need for healing, discussions were at times quite heated. The process took time and could get quite emotional, but was seen to add an important component of healing to the process. Natan Obed noted, "Healing is the key to poverty reduction." Some participants were uncomfortable with the process or "free-wheeling" aspects of the discussions, both at the Regional Roundtables and at the ongoing Roundtable for Poverty Reduction. They felt meetings should have begun with a presentation of the facts, with those living in poverty there to contextualize the issue. In contrast, others expressed that this same meeting format was in fact an appropriate approach that considered cultural safety and respectful relationship building. It was perceived as being aligned with the Inuit belief that people's options are limited to the resources they have at any one time, including their current state of mind and wellness.

The "Options for Action" that arose from the Regional Roundtables were documented in reports that formed the basis of the Poverty Summit.

#### 3. Poverty Summit (November 2011)

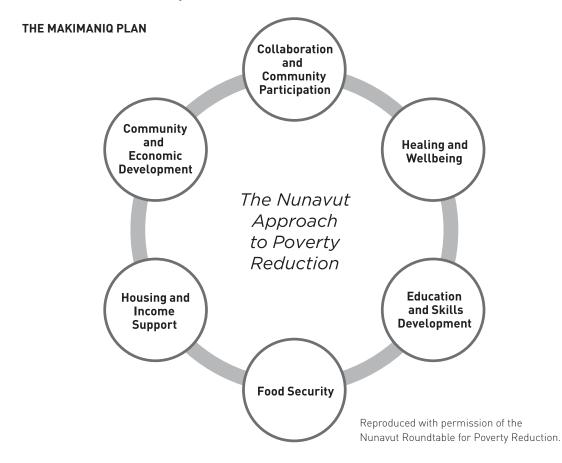
The Poverty Summit took place over three days in Iqaluit with the goal of preparing a plan of action drawn from the best options to reduce poverty presented at previous discussions, meetings, and roundtables. Broad representation was sought among politicians, citizens, members of non-governmental organizations, and business people, most of whom had participated in earlier discussions.

After two days of discussion, a small team worked overnight to develop a draft poverty reduction strategy for the participants to consider on the final day. The participants of the Summit agreed on the draft, which, unchanged, was released jointly by the Government of Nunavut and NTI in February 2012 as *The Makimanig Plan*.<sup>28</sup>

The Summit was designed to ensure that all voices were heard and not just those of

government representatives or the "privileged few." Everyone had the same speaking platform. One small discussion group included the premier, a senior executive with a major company, and someone who had lived through poverty. All ideas were on the table, each with its champion. "It was a difficult process," admitted Ed McKenna. "No one really knew what would happen."

In the end, the six themes in the strategy came up organically through the process. They emerged, independently, in a number of communities. While the themes discussed at the regional roundtables were wide open, organizers saw so much convergence that they adopted them as the framework to be worked from at the Summit. Participants were tasked with prioritizing the issues and developing solutions that had not been tried before and that required cooperation between relevant groups.



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#### 4. Program Delivery (ongoing)

After development of The Makimania Plan, the Nunavut Anti-Poverty Secretariat focused on developing the Collaboration for Poverty Reduction Act. 15 The legislation, which passed with unanimous support in May 2013, ensures that the work of poverty reduction goes beyond the term of any one government. As Natan Obed noted, "Governance is the key to ensuring that the plan is successful." Improved relationships between groups and cultures are the central theme of the legislation. The Act requires the Government of Nunavut to "participate as a partner" with others on the Nunavut Roundtable for Poverty Reduction to implement The Makimaniq Plan and prepare a five-year poverty reduction action plan for 2014-2019. As Ed McKenna noted, "[The] key is that by working with other organizations, you transcend the limitations of your own."

While important, the writing of the Act was time-consuming and took energy and focus away from implementing the strategy. The Makimaniq Plan was designed to distribute effort among the many groups involved, but during this stage partners heard little about what was going on or where progress was being made. The ongoing communication required to keep up momentum was lacking. Given the gap in progress, some

community members became skeptical. One elder said, "The Makimaniq Plan finally gave people voice, they said what they needed to, but is that enough to make it work?"

Efforts are most certainly continuing. When The Makimaniq Plan was announced, the government and NTI committed to reform the rent scales for public housing and to establish a culturally relevant pilot program for addictions treatment.<sup>29</sup> The following initiatives are also underway:

■ Community Wellness Plans - Coincidental to the development of the poverty reduction strategy was the release of six community wellness plans, as pilot projects for the territory. While separate, the process was relevant to the themes of The Makimania Plan as it gave communities a platform to create community wellness plans on their own terms. For example, if a community wanted to include a hockey rink in its plans for a healthy community, it was up to them to work with the government and other stakeholders to achieve that goal. Community Health Development Coordinators continue to support the development of community wellness plans throughout the territory. The plans will link into implementation of The Makimaniq Plan.



#### Nunavut Food Security Coalition and Strategy

- Food plays a central role in Inuit culture. Not only is it vital for health and wellness, access to wildlife and country foods opens the door to a close cultural connection with tradition, language, and learning between youth and elders. The Nunavut Food Security Coalition was formally established in June 2012. The Coalition consists of representatives from seven Government of Nunavut departments and four Inuit organizations, with the goal to create collective ownership of its work leading to sustained action on food security. The Nunavut Food Security Symposium was held in January 2013, and a strategy and action plan are being developed.
- Nunavut Arctic College Program Building on the Makimaniq public engagement process, a two-week module was developed and incorporated into a number of courses within the Adult Basic Education program at Nunavut Arctic College. Dan Page, manager

of the program, participated in the process and saw an excellent opportunity to engage his students. He said, "Project-based learning has become an inherent part of teaching. The module incorporates community and Inuit values into learning a variety of skills." For example, "Preparing for Change" prepares people to address changing values in the North. The module takes students through the community workshop process. Students determine a project where they can apply the process in their home communities. Some of the projects have included food security, redistributing clothing, and using various media to discuss solutions to poverty. The program is meaningful to students and often results in acknowledgement from their home communities. It has increased school attendance and retention. The approach has been deemed so successful, in fact, that the Board of Governors of the college has mandated that it be integrated throughout the college.

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#### Addressing/overcoming challenges

To some participants, the extensive public engagement process used to develop *The Makimaniq Plan* was very impressive. Given past history, working from the community up, rather than having government policy developed behind closed doors and presented as a "fait accompli" to the public, was seen as an excellent way to move forward. Others were not so sure. The palpable tension in some meetings, a lack of sustained communication with partners and the public, difficulties in recruiting and training facilitators from all communities—all presented challenges.

reduction – The public engagement process in Nunavut highlighted a significant hurdle that must be incorporated in a poverty reduction approach. "The number one issue we heard from people is that healing is the key to poverty reduction," said Natan Obed. "At first, it seemed radical to relate healing to poverty reduction. It certainly was not part of government discourse, as it is now. Initial talk was all about economics and jobs. That is not the reality that came out of the meetings," echoed Anna Ziegler.

There has been a fundamental breakdown in how Inuit live and how they traditionally heal each other. It is our biggest challenge.<sup>11</sup>

NATAN OBED, NUNAVUT TUNNGAVIK INC.

In Inuit tradition, physical health is nested in a more holistic conception of wellness. The body and spirit are always treated together. Although physical health did not come out as a theme in the discussions, it was related positively with being out on the land and negatively with substance abuse, crowded housing, and food shortages. "Mental health and wellness are key to any progress," said Natan Obed. "The rates of suicide, incarceration, violence, etc.— all point back to historical trauma and the lack of healing opportunities."

Until individuals can reconcile the deep grief within them, they will continue to struggle.

BETHANY SCOTT, QIKIQTANI INUIT ASSOCIATION

Public engagement process - The process used in Nunavut incorporated core aspects of Inuit aajiiqatiqinirq, including understanding the position and thought of each individual present. Although some people described the meetings as "free-for-alls," the process was intentional in that it was designed to build consensus through collaborative solution seeking. The alternative would have been a more prescriptive approach, with set agendas and decision-making processes. As a result, real debate took place within the meetings, and the process created the space for participants to "work it out" on their own. It was an approach in which there was no voting and the majority did not win out. The process did result in people feeling uncomfortable at times, but also ensured that the group arrived at its own decisions.



No one need fear the process. It does not threaten the role of public servants in being accountable to both the minister and the public.

ED MCKENNA, DIRECTOR,
NUVAVUT ANTI-POVERTY SECRETARIAT

For some, especially those that did not understand the core Inuit principle of aajiiqatiginirq, the process appeared to lack rigour. However, Cabinet approval received at the outset ensured that the process continued to proceed. It is well known that public servants can be hindered in this type of public engagement by government protocols that limit what can be said publicly and by whom. It is generally difficult for public servants to speak hypothetically and openly about what a department may or may not do-especially if they are not the decision-making authorities. With such a wide-open process, there was a risk that demands would be made on government that they could not meet. That did not, in fact, happen. People did not expect the government to meet all their needs, but they did expect better choices and more involvement of citizens in decision-making, which the public engagement process delivered.



Overall, I think what happened was messy and necessary and has contributed to a real shift in politics in Nunavut.

ANNA ZIEGLER, NUNAVUT LITERACY COUNCIL

■ Working in silos - "Collaboration and community participation" was identified as a theme in the community consultations and was written into the title and requirements of the Collaboration for Poverty Reduction Act. Enacting this principle is far more challenging than naming it. As noted in the NCCDH's report What Contributes to Successful Public Health Leadership for Health Equity,<sup>2</sup> the development and use of strong facilitation skills is integral to the leadership required for real change. A change that involves a shift in how people and organizations think and work; how health care and education are delivered: and how business is conducted. As Ed McKenna explained, "It means creating much better understanding between cultures, and expanding the type of people and parts of society involved in developing solutions. Only a shared understanding of the issue will create improved outcomes to transform society."

The Makimaniq Plan proposed establishing committees in every community, composed of representatives of government departments, regional Inuit associations, and community organizations engaged in poverty reduction. A territorial organization would support the initiatives of local networks. McKenna strongly believes that this community approach will help break down the government silos that stand in the way of progress. To many, the cooperation shown between the Government of Nunavut and the NTI in the development of the strategy was notable, and they fully support its continuation.

- **Communication Communicating across** cultures and broad distances created a number of challenges. For example, when seeking facilitators in each community, invitations were faxed to hamlet councils inviting them to suggest someone. In some cases, the letters just "fell off the fax machine" and weren't responded to. In others, the trips to Igaluit for training were "awarded" to someone as a perk, rather than a job role he or she would need to carry out. A little late in the process, the Nunavut Anti-Poverty Secretariat assigned two staff members to phone people directly and explain the process. They realized that every person who came to the community dialogue and regional roundtable discussions needed to feel a direct connection to the event. Communicating with Inuit culture in mind was essential to establish the respect and trust needed to move forward.
  - Some felt the process was limited by a lack of information about what poverty is, what actions can successfully reduce it, and what programs are already in place to address it. At the community level, it was hard to understand what was going on in other parts of the public engagement process. Even at the Poverty Summit itself, communication was an issue. With the focus of organizers on the strategy itself, little time was left to craft messages for the general public. After a long, inclusive collaborative process between many partners, the Government of Nunavut issued media releases on its own, focusing on the areas of greatest importance to it, but not necessarily the Summit as a whole. For example, while anti-poverty legislation was clearly an important step forward and within the government's mandate, it had not been discussed with participants at the Summit.

- Skills and training The quality of any consultation with a community is reliant on the capacity of those facilitating. In this case, community facilitators had little experience and most came to the training sessions thinking they were simply participating in the workshop, with no responsibility afterwards. Poverty is a complex topic to discuss in any community at the best of times, putting the facilitators in a difficult position.
- Distance Working in a large, remote territory created huge challenges. The Nunavut Anti-Poverty Secretariat went to great lengths to involve the entire territory, engaging every hamlet in the public engagement process. Despite this, it was difficult to get representation from all stakeholders. For example, while the regional Qikiqtani Inuit Association was involved, its two sister organizations, representing other regions, could only participate in local consultations. Travel to Iqaluit from the Kitikmeot Region, for example, takes two days.
- Continuity of players Planning for the engagement process was often invested in a specific person within organizations, yet the population in Nunavut is quite transitory. This is an ongoing issue that sometimes interfered with efforts to move the process forward and may slow implementation efforts as well.
- Plan provides a broad picture of the six key areas to be addressed to reduce poverty in Nunavut. While some areas have been further fleshed out, outcome indicators have yet to be established. Some existing public health indicators may contribute to establishing indicators for areas such as suicide, social housing, and food security that are culturally specific to Inuit. It is difficult to measure success unless baseline measures are in

place. Indicators that are representative of a more collective, holistic wellness paradigm will be important, remembering that these are described differently by different groups depending on their contexts and the issues which impinge on their well-being. As Natan Obed points out, "It is important to have a very holistic and wide lens on the issue of poverty, including its evaluation and outcomes. It is difficult to be pushed into measures of success with very short timelines. This relies on the ability of all stakeholders to respect the issues and not demean it by saying it will be resolved by doing a few small things."

## Elements of success and strengths of the approach

Creating a plan and passing legislation to reduce poverty in such challenging circumstances clearly shows that the partners involved did a number of things right. Among them are:

■ Following Inuit ways - Creating consensus among government, Inuit and community organizations, and the many individuals involved was a remarkable feat. Many credit the multisectoral and community engagement approach that was used and laud those involved for being able to create trusting relationships. The open invitation to participate in discussions is unparalleled in consultation in the territory. The process used in developing The Makimanig Plan reflects a commitment to work according to IQ principles and required an understanding of IQ ways of working and the opportunity to make it a reality. According to Anna Ziegler, "The Inuit way of decision making focuses on sharing and consensus. A great deal of cultural sharing and learning went on through this process."

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The Makimaniq Plan resulted from an incredible process. I wish that other departments and agencies would carry out this type of true public engagement.

DAN PAGE, MANAGER, ADULT BASIC EDUCATION PROGRAM, NUNAVUT ARCTIC COLLEGE



BETHANY SCOTT, QIKIQTANI INUIT ASSOCIATION

#### A strength- and asset-based approach -

The public engagement process identified and built on community strengths, orienting the tenor of meetings towards solutions.

This was seen as particularly important in Nunavut, where colonization has positioned Inuit ways as "problems that Western ways would fix." Anna Ziegler explained that the engagement process embraced communities and Inuit culture as assets to build on, rather than following the "deadening, pathologizing approach to social conditions that people are used to."

The asset-based approach also helped overcome the common message that there is just not enough money, time, or people to do what needs to be done. It encouraged people to recognize what they had and what they could work with. "It made the conversations fun, filled with energy instead of making people feel defeated and angry," according to Anna Ziegler.

FOSTERING HEALTH THROUGH HEALING



- Face-to-face meetings Given the harsh climate and vast geography of the territory, people from different communities have few opportunities to come together in person. The effort to make time and provide a supported dialogue space for face-to-face meetings for people from different sectors paid off, as seen by the open and hopeful communication that resulted.
- engagement process as a shared venture between the Government of Nunavut and NTI was a winning strategy. Both groups felt they have never had such success or satisfaction in meaningful collaboration. Many of those involved felt that same authentic, genuine investment. Although there were tensions between people, and differing views of how things should be done, this was capitalized upon to find middle ground or bring about a more creative solution to an issue.
- leadership The Nunavut process provides many examples of strong, shared, and visionary leadership. In particular, Natan Obed and the NTI, in accepting the government's invitation for collaboration, played a key leadership role. A long-term Nunavut resident, Ed McKenna had a vision of shared leadership, engagement, and collaboration. As the instigator of the public engagement process, his leadership was contagious, and it was augmented by his being very well respected both in the community and in government. A key to driving the agenda forward was a belief by the leaders that change was indeed possible and that people are capable of finding ways to bring about that change.

Strong vision coupled with respected



# 2

## **QUESTIONS**

### TO CONSIDER

- How do you successfully engage members of your community, non-governmental organizations, other levels of government, and other partners to help you identify issues related to poverty? What indicators or information do you use to measure that success?
- Have you used or participated in a shared leadership approach to addressing the social determinants of health? How might the public engagement approach used in Nunavut inform your efforts to more fully engage partners through shared leadership? What are some next steps or actions you are thinking about taking?
- Which groups are you working with that are at greater risk of poverty due to historical trauma? What role does healing play in your approach to engaging with those members of the community?

■ How do you consider differences in cultural beliefs when engaging with the community?

What approaches or strategies do you use to create safe, welcoming, and empowering spaces (i.e., cultural safety) when engaging with the community so that outcomes result from power with rather than power over?

For more information on cultural safety, download this publication from the National Collaborating Centre for Aboriginal Health (NCCAH):

Cultural Safety in First Nations, Inuit and Métis Public Health: Environmental Scan of Cultural Competency and Safety in Education, Training and Health Services

Available from: www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/88/CIPHER\_report\_EN\_web.pdf

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