

COVID-19 and Inuit Nunangat: Research, Responsibility & Infrastructure Inequality

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SINCE THE END OF 2019, the novel coronavirus and the disease it causes, COVID-19, have dominated news cycles and social media. It has changed the way we move through the world (or don't). The changes to our daily routines range from the cancellation of meetings, vacations, weddings, and even funerals. But, with good reason. Johns Hopkins University [data](#) shows that over 700,000 people have been infected with COVID-19 globally, with over 35,000 deaths as of publication.

Since the virus arrived in Canada, Inuit have been and are acutely aware of its possible impact on our communities.

FROM THE GLOBAL TO THE LOCAL

Community leaders, governments, and organizations in Inuit Nunangat, the Inuit homelands, have responded to COVID-19 in unique and context-specific ways. For instance, the Government of Nunavut released the tightest travel restrictions in Canada, with a ban on travel for everyone except residents and critical workers, and mandatory [14-day pre-boarding self-isolation](#).

On the individual community level, towns such as Coral Harbour and Cambridge Bay in Nunavut and Nain, Hopedale, and Rigolet in Nunatsiavut have issued statements asking non-essential travelers to refrain from visiting in order to lessen the likelihood of spreading the virus, and requesting residents self-isolate for 14 days upon entering the community by plane or snowmobile (Transport Canada has also banned all cruise ships from operating in Inuit Nunangat this summer).

Inuit Tapiriit Kanatami [has called for](#) Inuit to be considered a high-risk group in the federal government's response to the crisis. And, Nunavut Tunngavik Incorporated has also [invested heavily](#) in clean water to support effective hand-washing in Nunavut.

Respect for elders is a deeply important part of Inuit culture. These decisions by authorities in Inuit Nunangat recognize the immense harm that this pandemic could have on community members, particularly Elders who are most at risk.

In addition, there are health and social issues faced disproportionately by Inuit that can increase susceptibility to COVID-19. In a recent World Tuberculosis Day statement, the Qikiqtani Inuit Association highlighted how inequities in social determinants of health leave Inuit more at risk for both tuberculosis and COVID-19. For example, conditions such as overcrowded living spaces can increase rates of transmission.

This is why it's so critical that Inuit are prepared for what's to come.

In this Brief, we consider the importance of research and Northern research responses to the pandemic, but also some infrastructure challenges that must be addressed to ensure the health and well-being of Inuit.

NORTHERN RESEARCH RESPONSES TO COVID-19 AND PERSONAL ACCOUNTABILITY

Research plays a significant role in health, social, and economic development in Inuit Nunangat. We have some of the leading research organizations in Canada (and globally) doing groundbreaking work with communities in Inuit Nunangat. The ethics of these collaborative research approaches is more critical than ever.

For Jessica, as a PhD Researcher preparing to return to Nunatsiavut for fieldwork, the COVID-19 situation has presented an unprecedented conundrum. Qualitative researchers are accustomed to contemplating ethical dilemmas: positionality in the community, ensuring participants feel comfortable withdrawing from research, and so on. A global pandemic is not something we have been trained to consider.

However, it is in unpredictable times that we see the strengths of community-based Northern research come into the limelight.

For an increasing number of us, the North is our home. We have often relocated to the south for education, but our communities remain at the forefront of our minds, especially in a time of crisis. It is for this reason that we must make difficult decisions and do our part to lessen the impact of COVID-19 on the North.

Fortunately, Northern research institutions were quick to lead by example and cancel research activities that could have put community members in danger.

Qaujigiartiit Health Research Centre, based in Iqaluit, **suspended** non-essential travel and gatherings to reduce the risk of exposure to staff and their families, and to reduce the possibility that staff could act as a pathway of transmission of the virus into our communities.

The Labrador Institute, based in Happy Valley-Goose Bay, has closed. Before that, they **cancelled** gatherings and meetings, future travel for staff, and required those returning from travel to self-quarantine for two weeks upon their return before it was required by governments. They are also urging researchers from other institutions not to travel to Labrador for the time being and are supporting individuals who might need documentation to justify this decision.

Similarly, The Canadian High Arctic Research Station (CHARS) in Cambridge Bay **has taken precautionary measures** by cancelling visits, suspending the use of public spaces, postponing outside researcher support services, suspending travel, and encouraging public health measures.

As Dr. Max Liboiron, Associate Vice-President (Indigenous Research) at Memorial University **highlighted**, COVID-19 requires us to reconsider the influence of our presence and work on communities in a pandemic context. In particular, our possible impact on Elders, who are at an elevated risk of harm due to their age.

This becomes even more complicated when, for some of us, the North is home and we may feel the desire to return and spend time with our friends and families during a period of uncertainty. However, it is our accountability to our families and communities that should encourage us to follow physical distancing and self-isolation advice from public health professionals and not travel to communities that may not have the ability to respond to a widespread COVID-19 outbreak.

INFRASTRUCTURE CHALLENGES AND THE LEGACY OF COLONIALISM

COVID-19 is also a reminder of the longstanding infrastructure gaps in Inuit communities.

Inuit live in some of the harshest conditions on this planet. Our ancestors were fiercely strong and adaptable, as is easily noted in the persistence of our culture and way of life.

For Inuit, colonialism has meant systemic coercion in an effort to force Inuit abandon semi-nomadically lifestyles (alternating between seasonal hunting and camps) and move into permanent settlements for the ease of administration of colonial policies. Though the history of contact across Inuit Nunangat varies, the consequence of being coercively and forcibly settled has resulted in similar outcomes: exposure to diseases like tuberculosis, deeply inadequate housing and sanitation, a lack of access to healthcare, and meager community facilities. The historical legacy of tuberculosis, the Spanish Flu, and the knowledge of the barriers already faced by Inuit makes the infrastructure gaps even starker in the face of the COVID-19 crisis.

Healthcare systems in the North have long been considered inadequate by researchers, providers and patients due to the lack of available services and facilities. There are chronic shortages of healthcare professionals in many communities which increases the risk of exhaustion and burnout for those working during crises. Insufficient staffing and underfunding of key medical services in Northern health centers also increase reliance on Southern Canada. This reliance on travel to urban centers in the South leads to an increased risk of exposure, possibly exacerbating an already tenuous situation.

COVID-19 once again reminds us that, if/when the virus enters Inuit Nunangat, the system we have in place could be overwhelmed with the number and severity of cases.

Social resources are also needed to support the most vulnerable during this pandemic. Over half (51.7% in 2016) of Inuit in Inuit Nunangat **live in overcrowded homes**, making social distancing or self-isolation impossible for many. Further, homeless community members are particularly vulnerable, and overburdened shelters are at risk of increasing transmission of COVID-19. The high cost of living in Inuit communities also means that lifesaving soap and disinfectant cleaners could be financially out of reach to some.

On an international level, the Inuit Circumpolar Council has called attention to this by recognizing that a lack of basic infrastructure such as sewer and running water in some communities and aging/deteriorating systems in others that put Inuit at higher risk of exposure to communicable diseases.

Measures put in place to control COVID-19 by other jurisdictions are challenging to implement in the North due to infrastructure limitations. Many organizations are quickly adapting to a work-from-home model to ensure they can continue running while crowded office spaces are considered unsafe. However, the limited and outrageously expensive internet options in the North (in addition to a lack of home computers) means that for some, working from home may be an insurmountable challenge. This applies to all those students trying to finish their college or university semester as well.

Some internet providers are making changes, for example Northwestel has recently **waived some internet bandwidth caps**, and increased monthly caps for others, including the Inuit communities of Iqaluit, Arviat, Rankin Inlet, Cambridge Bay, Ulukhaktok, Paulatuk and Sachs Harbour. While this is a welcome change for some, the quality and cost of internet and telephone connections in many Inuit communities still remains inaccessible, and is even **possible** that overuse could incapacitate the internet system for all users in the North.

Telecommunications infrastructure in the North is often criticized by individuals and businesses, and the COVID-19 pandemic brings those criticisms into sharp focus.

POST-PANDEMIC IN INUIT NUNANGAT

Inuit are no strangers to health crises, and previous devastating pandemics are still within relatively recent memory. The 1918 Spanish Flu pandemic devastated Northern Labrador, where our families are from, killing one-third of the Inuit population. As Kenn Harper writes, Inuit were spared from the first wave of the flu due to its emergence before the shipping season opened. However, the second wave in autumn devastated families and entire communities, most severely Okak.

As such, and in spite of the devastation, Inuit have a history of responding to infectious disease pandemics and will persist through COVID-19.

COVID-19 presents unique challenges for Inuit Nunangat, and because of this we have seen unprecedented steps taken by Inuit regions and communities. There is no doubt that COVID-19 will change the way we assess risk in research and live in the North for years to come. We may need to work even harder to advocate for increased health and social support in the form of better healthcare facilities, services, housing, and communications infrastructure that meets the needs of communities.

It is up to all of us to consider how pandemics shape and are shaped by health and infrastructure inequity in Inuit Nunangat.