

EXECUTIVE SUMMARY

STBBIs in Inuit Nunangat: Impacts on Inuit Women, Gender-Diverse Inuit, their Families and Communities

Sexually transmitted and blood-borne infections (STBBIs) are a major public health concern in Inuit Nunangat. STBBIs include infections such as chlamydia, gonorrhea, syphilis, hepatitis B, hepatitis C, and HIV. These infections are primarily transmitted through sexual contact or exposure to infected blood.

While STBBIs affect populations across Canada, Inuit communities experience disproportionately higher rates of several infections compared to the national average. Addressing this issue requires improved prevention strategies, better access to testing and treatment, and healthcare systems that are culturally safe and accessible for Inuit communities.

Inuit Nunangat refers to the Inuit homeland in Canada and includes four regions: the Inuvialuit Settlement Region in the Northwest Territories, Nunavut, Nunavik in northern Quebec, and Nunatsiavut in northern Labrador.

Communities across Inuit Nunangat are often remote and face significant barriers when accessing healthcare services. Geographic isolation, limited healthcare infrastructure, and shortages of healthcare professionals can make it difficult for individuals to access timely medical care. These barriers can delay diagnosis and treatment of STBBIs, which increases the likelihood of complications and further transmission within communities.

Rates of STBBIs in Inuit Nunangat remain significantly higher than those seen in southern Canada. For example, chlamydia and gonorrhea rates in Nunavut are several times higher than the national average. Limited access to regular screening services means infections may go undetected for longer periods of time. In addition, stigma around sexual health discussions can discourage individuals from seeking testing or treatment. In smaller communities where privacy is

limited, individuals may feel uncomfortable accessing sexual health services, which further contributes to underdiagnosis and untreated infections.

Many of the health challenges faced by Inuit communities today are connected to the long-term impacts of colonial policies and systemic inequalities. Historical actions such as forced relocation, residential schools, and the disruption of Inuit governance and cultural practices have had lasting effects on community health and well-being. These policies contributed to social and economic inequalities that continue to influence health outcomes today.

The UNDRIP recognizes Indigenous peoples' right to access the highest attainable standard of health and culturally appropriate healthcare services.³ Similarly, the MMIWG2S+ National Action Plan, which was created in response to the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG), calls for governments to address systemic barriers in healthcare systems that affect Indigenous women and gender-diverse people.⁴

Inuit women and gender-diverse Inuit are particularly impacted by the high rates of STBBIs and by barriers within the healthcare system. Untreated STBBIs can lead to serious health complications such as pelvic inflammatory disease, infertility, pregnancy complications, and increased vulnerability to other infections. For pregnant Inuit women, untreated infections can also pose risks to newborns. These health concerns can place emotional and physical stress on individuals and their families, especially when medical care requires travelling far from home communities.

The impacts of STBBIs extend beyond physical health. Social stigma around sexual health can create barriers to open conversations about prevention, testing, and treatment. Gender-diverse Inuit may experience additional barriers when seeking healthcare services due to discrimination or the lack of inclusive healthcare

³ United Nations. (2007). United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). United Nations. https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf

⁴ MMIWG National Action Plan Core Working Group. (2021). Missing and Murdered Indigenous Women, Girls, and 2SLGBTQQIA+ People National Action Plan: Ending Violence Against Indigenous Women, Girls, and 2SLGBTQQIA+ People. <https://mmiwg2splus-nationalactionplan.ca/eng/1670511213459/1670511226843>

Expand Sexually Transmitted Blood Borne Infection (STBBI) Testing, Screening, and Treatment Services Throughout Inuit Nunangat



environments. These experiences can contribute to feelings of mistrust toward healthcare systems and discourage individuals from accessing care.

Improving access to culturally appropriate healthcare services is essential for addressing STBBIs in Inuit Nunangat. When healthcare services recognize Inuit culture, language, and community priorities, individuals are more likely to feel comfortable accessing care.

Expanding access to local testing, treatment, and prevention services can help reduce infection rates and improve health outcomes. Strengthening healthcare systems in ways that respect Inuit knowledge and community needs can support the overall health and well-being of Inuit women, gender-diverse Inuit, their families, and their communities.

POLICY RECOMMENDATIONS

- **Expand STBBI testing, screening, and treatment services in Inuit Nunangat:** The Government of Canada, provincial and territorial counterparts, and healthcare organizations must increase access to STBBI testing, screening, and treatment services within Inuit communities. This includes expanding local health clinic capacity, implementing routine STBBI screening protocols, and establishing mobile testing programs to reach communities with limited infrastructure.

Prevention resources such as condoms, vaccinations for hepatitis, and harm-reduction programs must be accessible and free within communities. Services must be delivered locally so that Inuit women and gender-diverse Inuit can access care without leaving their families and support systems.

- **Fund and Resource Inuit-led STBBI Prevention and Healthcare Services:** Increasing Inuit representation in healthcare services is important for improving culturally safe care. Governments and healthcare organizations must invest in training and education pathways that encourage and support Inuit women and gender-diverse Inuit in pursuing careers in healthcare, including nursing, community health work, and sexual health education.

Dedicated, sustained funding must be directed toward Inuit-led prevention and treatment programs that build community trust, increase uptake of care, and ensure strategies reflect Inuit values, cultural knowledge, and self-determination. Inuit-led models of care are essential to achieving equitable health outcomes across Inuit Nunangat.

- **Develop and Fund Culturally Appropriate STBBI Education and Prevention Programs:** Sexual health education programs focused on STBBI prevention should be developed in partnership with Inuit communities. These programs must provide accurate, accessible information on STBBI transmission, prevention, testing, and treatment.

Education initiatives must be resourced for long-term delivery, not short-term project cycles. They must be culturally relevant, available in Inuit languages, designed to reduce stigma surrounding sexual health discussions, and be reflective of community realities and cultural values. Community-based programs can encourage open dialogue about sexual health and empower individuals to make informed decisions about their health.

- **Align STBBI Healthcare Policy with UNDRIP and the MMIWG National Action Plan:** All federal and territorial policies addressing STBBIs in Inuit Nunangat must be explicitly grounded in the [UNDRIP](#)⁵ and the [MMIWG2S+ National Action Plan](#).⁶

Inuit organizations and community leaders must be actively involved and resourced to participate in developing and implementing STBBI prevention and treatment strategies, not consulted after decisions are made. Policy frameworks must reflect the right to culturally appropriate healthcare and affirm Inuit self-determination in health governance.

⁵ United Nations. (2007). *United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP)*. United Nations. https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf

⁶ MMIWG National Action Plan Core Working Group. (2021). *Missing and Murdered Indigenous Women, Girls, and 2SLGBTQQIA+ People National Action Plan: Ending Violence Against Indigenous Women, Girls, and 2SLGBTQQIA+ People*. <https://mmiwg2splus-nationalactionplan.ca/eng/1670511213459/1670511226843>

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PAUKTUUTIT
INUIT WOMEN OF CANADA

350 Sparks St., Suite 805
Ottawa, ON K1R 7S8
policy@pauktuutit.ca

Telephone: 613-238-3977
Toll Free: 1-800-667-0749
pauktuutit.ca