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INTRODUCTION

Tobacco use is the primary cause of avoidable death in Canada and globally [1]. In Nunavut, current estimates reveal that 59% of Nunavummiut over the age of 12 years smoke daily [2] – a rate three times higher than the national average and the highest smoking rate of any Canadian jurisdiction. The use of tobacco remains the single most preventable cause of morbidity and premature mortality in the territory. The Government of Nunavut (GN) Department of Health (Health) has indicated the need for committed action to end tobacco-related morbidity and mortality, and improve the population’s health. In line with Health’s mandate; “to promote, protect and enhance the health and well-being of all Nunavummiut”, the Nunavut Tobacco Reduction Framework for Action and Implementation Plan were developed to reduce the health effects of tobacco smoking on the population and it is hoped that in the future tobacco use amongst Nunavummiut will be eradicated. Concrete progress has been made on the Tobacco Reduction Framework for Action Implementation Plan with over half of the action items currently underway.

The economic cost attributable to tobacco use in the territory was greater than \$48 million in 2013 [3] with approximately 66 million cigarettes were sold in Nunavut in 2013 generating \$16 million in territorial tobacco taxes (GN 2013). This is greater than the anticipated corporate tax of \$12.5 million in revenue within the same period [4]. The high rate of smoking has imposed a substantial socio-economic burden such as financial cost to families, increased healthcare expenditures by the Government, productivity losses to workers and poor life expectancy among Nunavummiut. Our comprehensive tobacco control efforts must be renewed continuously if significant advances are to be made and if we are to ultimately end the harmful use of tobacco in the territory.

Over the last two decades, tobacco use in Nunavut has been clearly identified as a cause of morbidity, disability and premature death. More than 50 medical conditions are known to be associated or caused by tobacco use [5]. The tobacco smoke generated by active smokers known as Environmental Tobacco Smoke (ETS) has been linked to adverse health outcomes in pregnancy such as low birth weight, premature birth, sudden infant death syndrome (SIDS) [6,7,8,9] and high rates of respiratory illness among infants [10]. Notably, mortality from SIDS in Nunavut was 6.3 times greater than the rest of Canada from 1990 to 2000 [11]. In addition, a study conducted by Banerji and colleagues in 2009 found that Nunavummiut infants had the highest reported rate of hospital admissions globally for lower respiratory tract infections, estimated to be about 306 admissions per 1,000 infants [12]. Fifteen percent of Inuit children aged 6 to 14 have presented with chronic ear infections which has also been linked to ETS exposure [13].

Given the overwhelming body of evidence supporting the link between tobacco exposure and adverse health effects in vulnerable populations (pregnant women, children, and the elderly) the GN created, and is implementing the *Nunavut Tobacco Reduction Framework for Action 2011 – 2016* to address this public health epidemic. The implementation priorities outlined in the Framework are as follows:

- Encourage Nunavummiut who do not smoke, never to start
- Protect Nunavummiut from ETS
- Influence attitudes around smoking so that it is not considered the norm in Nunavut
- Encourage and help Nunavummiut who want to stop smoking

With sustained implementation of the territory's tobacco control programs and policies, Health maintains its focus on reducing prevalence rates by 2016.

CURRENT STATUS OF TOBACCO CONTROL ACT OPERATIONS

In 2004, the GN passed the *Tobacco Control Act* with the primary aim of reducing access to tobacco products among youth, and ensuring well-being of Nunavummiut by promoting smoke free public places and worksites. This was followed by the formulation of a clear, coordinated Framework for Action. It is significant to note that robust enforcement of the legislation is required to reduce tobacco use and is considered to be a best practice. Many Canadian jurisdictions that have focused on enforcement and legislation have seen a substantial reduction in smoking rates.

In the 2013-2014 fiscal year, progress was made towards addressing tobacco enforcement. The GN's implementation plan included actions to support the regulatory enforcement of the Tobacco Control Act by strengthening the workforce of the Health Protection Division. Furthermore, an environmental scan was conducted across Nunavut by Environmental Health Officers (EHOs) and priority areas for attention were identified. The 2012 goal of enforcement of the Tobacco Control Act and recruitment of the Territorial EHO position has partially been achieved. It is anticipated that with a full complement of staff by the end of the current year, we will be closer to achieving this goal.

STRATEGIC PROGRAMS IMPLEMENTED TO REDUCE TOBACCO USE

Community awareness programs

A diversity of Tobacco awareness programs and activities such as the Atii Game show, Time to Quit Contest, Blue light bulbs campaigns, School Poster Contest, Community Feasts, Health fairs and tobacco reduction radio programs were implemented in the following Nunavut communities: Arviat, Baker Lake, Grise Fiord, Hall Beach, Igloolik, Pond Inlet, Resolute Bay and Sanikiluaq.

Protecting youth from tobacco through increased education

Health undertook a number of health promotion programs directed towards behavioral change. The aim was to prevent the initiation of smoking by children and youth. Below is a list of programs and activities that Health supported in the 2013-2014 fiscal year:

- *Youth Tobacco Awareness Video (YTAV)* workshop: In partnership with the Health, Nunavummiut youth worked with a team of video makers to create a 30 second tobacco video public service announcement (PSA). The final products were brought into line with the main messages of the Tobacco Has No Place Here (THNPH) campaign and employed in various aspects of the mass media campaign (e.g. as movie trailers, on YouTube, and as part of an educational DVD for schools).
- In September 2013 GN commenced the execution of Phase 3 “*Tobacco Transformations*” *School/Community Workshop Tour* in three Nunavut communities: Kugluktuk, Naujaat (Repulse Bay) and Resolute Bay. This workshop integrated anti-tobacco health promoting practices with art, dance and film-making projects for high-school students over the course of a week.
- *Smoke Screening* and *Get Reel* - two anti-tobacco programs for students from grades 5 to 12 were implemented in all three Canadian territories. *Smoke Screening* provides a short anti-tobacco message in a format that engages students whereas *Get Reel* invites students to create their own Northern anti-tobacco TV advertisement.
- *Tobacco Youth Action Teams* engaged Nunavummiut students in grassroots awareness programs to prevent the initiation of tobacco use.

NEXT STEPS

The GN must ensure that those responsible for developing and implementing comprehensive tobacco control programs and activities have adequate resources, capacity and support to carry out the planned outlined activities effectively. Recommendations for areas of work in 2014/15 include:

- 1) Development of an enforcement work plan for Nunavut.
- 2) Provision of new Health Warning signage and educational materials for retailers in Nunavut who sell tobacco.
- 3) As part of the GN's comprehensive tax review, continue to work with the Department of Finance to identify and reduce tax disparities between different tobacco products (e.g. between cigarettes, loose tobacco and chew)

CONCLUSION

The GN has consistently reiterated its commitment to reducing tobacco-related illnesses in the territory. A territory-wide tobacco reduction program (Nunavut Tobacco Reduction Framework for Action) is underway, and currently in its third year. To date, Health has implemented over 50% of planned activities outlined in the Framework for Action. The end of 2013-14 saw positive strides in driving the tobacco reduction agenda forward with the hiring of key staff to implement action plan activities and the beginning of a comprehensive midpoint evaluation of the Framework.

Sustained progress that will lead to reducing the uptake of tobacco use, encouraging people to quit smoking and lowering prevalence rates will not happen in the short term. What is needed is continued commitment to accelerate ongoing efforts; maintaining consultation and engagement of Nunavummiut in tobacco reduction efforts; coordinating multi-sectoral approaches; and implementing all proposed recommendations in the Tobacco Reduction Framework for Action Implementation Plan.

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