

# UNITED NATIONS SPECIAL RAPPORTEUR on the RIGHTS OF INDIGENOUS PEOPLES' and the CIRCUMPOLAR INUIT HEALTH STEERING COMMITTEE (CIHSC) Engagement Session

**September 10, 2020**

UN Special Rapporteur on the Rights of Indigenous Peoples' - Francisco Cali Tzay, ICC  
International Chair - Dalee Samboe Dorrough  
CIHSC Chair - Minnie Grey  
CIHSC (Canada) - Tina Decouto  
CIHSC (Greenland) - Gert Mulvad  
CIHSC (Alaska) - Percy Ballot  
CIHSC (Alaska) - Mary David  
ICC Alaska Executive Director - Kelly Eningowuk  
ICC Chukotka President - Liubov Taian  
CIHSC (Chukotka) - Alexander Ivanov  
CIHSC (Chukotka) - Raisa Zootova  
ICC Health Coordinator – Selma Ford

**Introduction by Dalee:** Please to host the call. Thankful UNSR has time to join us for this discussion. Thank CIHSC members for joining and for years of service and particularly Minnie as chair. All have same objective of safeguarding our communities and maximize health and wellness of each Inuk in our communities and maximizing the health and wellness of every Inuk in all of our communities collectively. Incoming special rapporteur have a long history of advocacy for all Indigenous Peoples' and forthcoming study on COVID-19 and its impacts on Indigenous Peoples'. Her hope that through this dialogue – we make connections in regards to the pandemic but also recognize that he will address many issues will be addressed in our favor (Arctic) and Indigenous all over the globe.

## **Roundtable Intros:**

- Minnie – Have been chair since its inception. Thank you for the opportunity. CIHSC created in 2012 and role is to advise ICC on relevant health issues pertaining to our member's countries (AK, CN, GL, and Chukotka). Under different government regimes but have in common – serious challenges among many things – health - mental and physical. A challenge to keep our work going because of distance but technology helps. Face-to-face annually – pandemic forced postponement of Circumpolar Health Summit-sharing around mental health and youth. Will happen in future once able to freely travel again. Dialogue like this give us a voice to these challenges.

- Tina - work for Nunavut Tunngavik Incorporated in social and cultural development focuses on the right for Inuit to participate in social and cultural policies and method for delivery of those. Health and well-being is central to that.
- Percy – from Buckland, Alaska with a population of about 3-4 thousand people at Manilaq. Tribal president for 20-30 years – 700 members. Started addressing pandemic early through quarantine and travel ban. Before pandemic had epidemic of suicide – in his village 5-6 suicides in 2 years. This pandemic brought population closer together. As bad as it is no suicides since start of pandemic
- Mary – Nome Alaska. Inupiaq, Nome Eskimo community tribal member and part of tribal council. 20 recognized tribes, 16 rural communities – 26 k square miles pop of 9700 – 75% are Alaska Native with 3 distinct group.
- Gert – Greenlander but not Inuk. Family health Doctor for 30 years in Greenland. CIHSC since started and involved in a lot of health network in the Arctic.
- Dalee – Elected as ICC chair in July 2018. History of involvement in international Indigenous human rights on behalf of ICC and Indigenous Peoples generally. Met UNSR decades ago in relation to UNDRIP and had opportunity to be in academic community as Political science professor University of Alaska Anchorage. ICC garnered strong reputation in relation to UN initiatives including in area of human rights. Pleased to join Sami council in letter of support for Francisco as UNSR – opportunity to advance our work and issues with open line of communication with UNSR.
- Francisco – thank Dalee and ICC. Mayan from Guatemala and have long time working for Indigenous Peoples right in UN. Experience being a diplomat for Guatemalan government – has 5 daughters and 1 son. Experience going this kind of work and here for to listen and hope to be close to Indigenous peoples – have to be together as Indigenous peoples

## COUNTRY COVID-19 UPDATES

### Mary David

- Covid is very challenging in remote and rural. Spread could happen quickly if no appropriate response. 66 new cases on Sept 9. Since start of pandemic had 54 confirmed and currently 9 active.
- Some areas have huge impact on COVID and other health disparities we experience:
  - Dire need for water and sewer infrastructure (including maintenance of those)
    - 277.4 m \$ water and sewer need
    - 370 homes that remain without potable water
    - 451 lack water and sewer
    - 5 communities with no running water and sewer
    - 10 communities face ongoing challenges providing adequate services and some communities lack reliable infrastructure to provide service need
    - At start of pandemic 7 communities faced a water shortage

- Housing
  - Experience highest rates of poverty, overcrowding and substandard homes in Alaska and the US.
  - High cost of construction and energy and living
  - Dept of housing 1386 estimated home shortage in her region
  - Pop is growing 10-20% each decade and housing not keeping up
  - Multiple families and generations in one home
  - High percentage of income spent on housing
  - Cost of building a basic home \$600, 000 – 1m dollars
- Mental Health and well-being
  - Had to adjust to “new normal” - challenges of Covid had impacts on mental wellness
  - Remote area where transportation is mainly by small aircraft. For major health issues in a small village one must travel to the hub community and anything more major have to be addressed 500 air miles away in Anchorage
  - When Covid impacted region it impacted health care delivery so now MH services offered exclusively by telehealth – those with limited access to a phone they are provided a phone.
  - During this pandemic experienced more suicidal behavior and deaths by suicide.
  - Increased depression and anxiety due to Covid because of social isolation – local hospital noticed increase in emergency room visits
  - Travel restrictions impacted community
- Children and Families
  - Pre-Covid saw about 72 kids (53 sexual abuse cases, 10 physical abuse 1 neglect 14 witnessed violence) for same period last year. Since Covid have seen 49 kids (39 sexual abuse cases, 5 physical abuse cases, 12 witness to violence cases). Afraid that the reports are not occurring – pre Covid reports were from mandatory reporters. Currently referrals are from police department and Alaska state troopers
  - Domestic violence increases – travel restrictions preventing some abuse victims traveling to where shelters are available.
  - Social isolation, economic stress, depression,
  - Grief and loss changes because of restrictions – burials, celebrations of life etc. no longer permitted

### **Percy Ballot**

- In Anchorage 2346 cases, 25 deaths in Anchorage
- 5891 cases in the state 42 deaths

- In Percy's region – 73 cases, 41 cases were travel related
- Cases seem to be declining but still a concern with one death yesterday from Covid
- Have been isolating in Buckland since May and travel restrictions
- Also doing innovative things: allowing families to isolate at local facilities if needed, families can go off on the land to help with social distancing
- Even though have these challenges communities, families and individuals have been brought closer together

### **Tina Decouto**

- Covid highlighted and exasperated current and ongoing human rights situations by many INDIGNEOUS and especially Inuit
- Before Covid we worked on issues i.e. TB, Suicide, poverty, education, language, FS and sovereignty
- Nunavut home to 20 k Inuit and fortunate no COVID cases but should and individual contract the virus ability and tools to isolate and protect community is limited because of issues i.e. housing, homelessness, TB, and MH
- For decades Nunavut faced massive rates of homelessness and overcrowding and it masks an even wider homelessness problem.
- Senate standing committee on Aboriginal Peoples released report on housing crisis as significant public health emergency
- Nunavut housing report, 10 years ago, identified the need for 3500 units – investments have barely kept up
- Concern for those living in overcrowded situations has deepened due to covid
- IN relation to TB – also a public health crisis in Nunavut – outbreaks have occurred in all regions of Nunavut in 2017 100 Nunavummiut were diagnosed with TB – indication of how quickly covid 19 can spread
- Within the broad strokes of advocacy – NTI efforts have focused on providing on Inuit led and Inuit specific community based health delivered in our language (i.e. partnered with other regional Inuit organizations to hold healing gatherings that brought Inuit from other communities together where they can address trauma and healing together because for Inuit in Nunavut and Inuit knowledge (IQ) connections with family and community is critical to our wellbeing. Covid 19 affects our ability to connect with community and family. Had to re-think how to support communities in continued healing in the absence of being able to gather in groups.
- Exploring how to utilize e-mental health in this new reality of covid – how to provide healing, counseling and trauma
- Can discuss and bring forth issues – happy Alaska referred to basic infrastructure like sewer and water – need long term plan to address basic infrastructure the most Canadians have access to.
- One community could not ensure safe water – drinking water

## Minnie Grey

- So much in common with all these challenges and the pandemic
- Extreme overcrowded housing an issue – when had cases of covid in Nunavik
- Covid arrived in Nunavik in March with 17 cases in total – 15 cases in 1 community and 2 in another
- Worked hard to ensure the virus was not spreading and were very fortunate the community with 15 cases were in 1 family
- Large families living in one house is an issue during the pandemic but were able to get through without any deaths
- Of 17 cases only 1 hospitalization
- Housing a big issue – 1000 people on waiting list for housing
- TB also a big issue – most pre-occupied with before covid
- Last 10 years over 500 cases of TB – one community was very much hit
- With pandemic been very hard to provide regular services and everything had to be put on hold
- 2 small on hospitals (1 on each coast) and had to undergo major changes – every day services were reduced and had to be reorganized to be able to have a cold, warm, hot zones
- Situation was disruptive and chaotic at that time – had to lock down their region to stop more cases from coming in
- Learned how to work closer together – regional orgs and leaders
- Regional organization responsible for civil security of Nunavimmiut
- Regional Emergency Preparedness Society was set up and NRBHSS invited to work with them – made a lot of guidelines and directives to restrict travel as well as isolating communities. Travel was halted – only essential and patient, humanitarian reason was travel permitted
- Local emergency response teams created in each community – mayors activated = weekly zoom and conference calls
- Housing org worked and provided covid houses in each community
- Covid free now so travel is back up and running – lessened travel restrictions – still vigilant about who is coming in to region
- PH authority testing each passenger returning from south and must travel 2 weeks before flying to Nunavik
- Concentrating on preparing for 2<sup>nd</sup> wave – hospitals need to take back daily services now have chosen Kuujjuaq location for covid positive patients to come if needed. Kuujjuaq gymnasium set up with 30 beds, negative pressure tents and other equipment needed for covid treatment

- Impacts of how covid has impacted us as a people – very social, traditions are that we eat together, want to help each other during deaths, supportive of one another (extended families), limited access to people
- MH – 1<sup>st</sup> week of pandemic frontline services noticed decrease in requests due to fear of covid
- Had some positive impacts – brought families back together, can get out on the land more and became a big part of dealing with covid – became therapy and continues to be so and health authority made sure to help each household on food security for example
- Food vouchers were provided to elders and those more vulnerable
- Gas and food vouchers were provided to those in need to help them get out on the land
- Have learned a lot from the pandemic – distress and anxiety has changed our way of life as far as being a community but also some positives as mentioned

### **Gert Mulvad**

- Many things in common
- Happy for Minnie's way of starting presentation – important to learn from crises
- Learning process – we in the Arctic are some best ones who know about crisis
- In Greenland everything has been affected by covid – not just health system
- 56 k inhabitants on this very huge island – 90% are Inuit – 5 regions with a hospital in each region – 17 towns with small health facilities – 18 villages around the coast
- For last more than 10 years have self-government
- The economy in Greenland comes from fishery. It is affected by some crew coming from abroad and bringing COVID--19
- Tourism is another big income but has been shut down due to the COVID situation
- Some same problems with mining industry, and Research project and monitoring project.
- Big gap between rich and poor in Greenland which brings a big mental health problem
- Had 17 confirmed cases of covid and all them in Nuuk in beginning of pandemic – most were people who traveled in Europe – more wealthy people – so isolation was not a problem for them.
- Some cases in other towns was also possible to isolate so we do not see any local transmission of the infection
- No community transmission but all were from travel
- Had to lock down for many months so society was closed to those from abroad as well as inter community travel.
- Do not have testing facility, but now 8 towns in Greenland have testing facility, facility to handle infected people with problems they have to be transported to Nuuk or to Denmark, but with a local transmission we will run out of staff.
- Big impact on sport and cultural activities especially for young people
- Impacts as same as other ICC countries

### **Liubov Taian**

- Located far from other large cities so fortunately have not had a severe impact of covid
- Population 50 k – 174 cases of covid – 167 have recovered – 3 deaths (1 of which was Indigenous)
- Mostly affecting people who have come from outside the region and not residents of the region
- Hunting, fishing, gathering is continuing
- Governor of Chukotka extended period of protective measures to September 30

### **Alexander Ivanov**

- Chukotka has been touched by covid in a lesser degree because of remoteness
- Majority of patients are predominantly tourists and travels from the mainland
- Eastern Chukotka seaboard virtually did not see any cases of covid among the resident population
- Government renders all possible economic and social support
- Despite the virus life continues with natural way of life
- The virus has united them as a single front – had many volunteers to help
- In beginning problem with medication but has been resolved and now there is enough medications
- Regular season campaign against flu has begun and pneumococcal infection
- Hope together we can overcome this pandemic

### **Raisa Zootova**

- From onset of pandemic measures were implemented immediately
- Used powerful administrative body to fight the virus and governor has included himself in process as well as federal managing body
- All public schools were closed and students transferred to online educational system
- Used regional hospital to deploy temporary hospital for 25 patients
- Purchased oxygen and respiratory equipment
- 25 sets of lung ventilators to have on hand if needed stocked up on nasal and throats swabs as well
- Testing was done on healthy population as well
- Allocated 1 vehicle for patients with flu like symptoms
- Regular reception of patients was not impacted much
- Cancelled preventative service of doctors
- Organized in a careful manner the monitoring of covid patients who are in isolation
- Have seen primarily been symptom free positive cases

## **Francisco Cali Tzay**

- Report paragraph 17 used info we sent – Indigenous peoples' in their collective memory are marred by pandemics and disease such as small pox, measles, - spread by colonizers and was sometimes devastating in their communities – especially impacts experience
- Respiratory infection, HIV, AIDS, malnutrition already persistent in many communities
- Environmental degradation, contamination, extractive industries
- 6 paragraphs from our info we shared
- Confirms what he will report to the human rights council – info from Indigenous orgs and people
- Took info and from other Indigenous orgs – high number of suicides that are taking place in Indigenous communities particularly in US and Canada
- Official visit to Greenland stopped due to covid – already invited by Danish government once covid is over
- Everything shared (specifically Minnie) – gave him info to support what he has been saying: Indigenous families are big and only with family can we overcome this pandemic. States do not take into account the cultural issue of Indigenous families are not just nuclear but include extended family. Indigenous peoples from Panama said the same thing – they explained when patients brought to hospital and isolated they said covid didn't kill my cousin it was the isolation and some decided not to send family members to hospital – using traditional and modern medicines
- Common issues affecting and common positive issues helping our people
- Situation in Russia same as other Indigenous Peoples'
- Very appreciative of giving our time
- All info is reflected in report to GA
- Youth are playing a big role in passing the message about the pandemic in Indigenous languages – because a big problem is a lot of the covid information is available only in the official languages
- Inequality, gap between rich and poor is growing at this time
- Social distance in Spanish talks about the difference in class (rich vs. poor) so physical distance should be used – the language used is can be very dangerous
- He will do a follow up study on covid next year

## **Closing Remarks – Dalee Samboe Dorrough**

- You can see we have extraordinary diversity between our counties but at the same time common problems and are shared by Indigenous Peoples' everywhere
- Uneven treatment within our distinctive political arenas
- Diversity ICC has had to work with in the past more than 40 years – common to Indigenous Peoples across the globe
- Happy he used the inform provided on the call and in writing before the call



- If there are gaps or additional info required he can call upon the CIHSC
- Look forward to the report and future collaboration on a host of other issues
- Liubov is the vice chair for ICC Chukotka and other leaders will get this info
- Health Summit – Minnie and Selma can keep him updated on this event and other important documents from CIHSC
- Host of other things ICC involved in – Lancet Commission on Arctic Health – Minnie mentioned covid document
- Will be certain to alert UNSR on issues from within the AC
- Hope that the can make country visit to GL and all ICC countries in the future