LETTERS TO THE MJM

How many will it take?

Dear editors,

"He who kills himself is running after an image that he built of himself. One never kills himself only to exist.."

-André Malraux French writer (1901-1976)

Last January, Quebec's National Public Health Institute published a portrait of the suicide status in the province. The media coverage highlighted the main conclusion that the overall annual suicide rates were decreasing and that in the urban part of the province, they were now quite similar to those in France or Switzerland. However, very little has been said about the situation of some specific communities, like the Innu people living in Nunavik, the territory at the northern end of the province of Quebec. In fact these people are the ones with the highest rates of suicide in the world.

In the year 2000, the worldwide suicide rate was estimated at 14.5/100,000 inhabitants (1). In Quebec, for the 2000-2004 period it was 17.3/100,000 inhabitants while Nunavik's rate was of 117.3/100,000 inhabitants, a rate almost 10 times greater than the one in Montreal (2). The majority of the Innus committing suicides are young men aged between 15 and 24 years old (3). For instance, out of 14 villages, there is one with only 350 inhabitants and in which as many as three people, or close to 1%, committed suicide in 2004. Between 2002 and 2006, they were eight of them in that village alone. That situation led Upaluk Poppel, Representative of the Inuit Circumpolar Youth Council, to comment: «If the populations of 'mainland' Canada, Denmark and the United States had suicides rates comparable to those of their Inuit populations, national emergencies would be declared. »

The problem first emerged 25 years ago. To inform the international community about what was happening to the Innu people, some international organizations like the Movement for Tribal People, also named Survival, published some reports to expose the local government's inaction. Things have not really improved since - they are, in fact, getting worse. Suicide is now the cause of almost 20% of the deaths among the Innus. A 2004 survey showed that 35% of people older than 15 answered that they already thought about committing suicide compared to 23.9% in a similar 1992 survey, an

Health Indicators:

Age distribution: 35.1% of the Nunavik people are less than 15 years old compared to 16.2% for the Province of Quebec (6)

Life expectancy: Men are expected to live 60.1 years (7) and women are expected to live 67.7 years (8) (men 76.7 and women 82.1 in Quebec)

Highest level of education: 55% of Nunavik adults Inuit have not completed their high school studies compared to 31.3% for the province (9).

Cost of life: Items are 50 to 55% more expensive in Kuujjuaq than they are in Montreal and 60 to 70 % more expensive in Saluit, the furthest north city of Quebec (10).

Average Income: The average income in Nunavik is \$19,054; the median income is \$14,311 (respectively \$27,125 and \$20,665 in the province).

Housing Condition: In 2006, 49% of Nunavik households were overcrowded with 12 to 15 persons living in a house (11). In fact, 25.5% of families were waiting for a new one. In June 2005, the Canadian government, the Quebec government and the Makivik society concluded a five-year program to built 275 new houses. It represents 11% of the needs. With the actual fertility rate, the situation will get worst if no additional money is invested (12).

Violence exposure: More than half of the children in Nunavik live in a household where at least one person has violence and alcohol consumption problems. Rape rates are 37 times higher in Nunavik than in the rest of the province (12).

Drugs consumption: In 2004, a survey objective that 60% of the population admitted taking drugs. This is four times higher than anywhere else in Canada (13).

Alcohol comsumption: More than a quarter of alcohol consumers admit drinking 5 or more drinks on a single occasion on a weekly basis. To try to solve the alcoholism problem (14), in many Nunavik villages, local regulation said that 24 beers or four bottles of wine are the maximum a citizen can buy for one month. Even though the existence of this law, smuggled alcohol allows people to drink more than what is expected. For example, a single illegal bottle of wine can be sold for as much as 300\$ (14). This illegal traffic has an important social impact.

Human Development Index: The United Nations placed Canada number 4 among 192 nations in 2006. In 2001, the same formula was applied to Nunavik which ranked 76 (15).

11 points increase. More than one Innu out of five admitted having already attempted suicide (20.8%) compared to 12.5% in 1992) (4). Even though the situation is quite alarming, very few studies about this are found in the literature (3).

All kinds of reasons have been suggested to explain the situation (3): the historical wound, the changes in the way of living, the loss of cultural identity, the lack of acknowledgment of their culture, the differences between what the young ones see on the internet or on television and what they are living in the Innu context, and other health indicators (such as the ones in the following box). None of these reasons alone can explain the situation. A suicide in Nunavik is at least as complex as it is anywhere else in the world and to believe that their suicide rates have always been high is totally wrong. In 1990, in a short review, Thorslund (5) notes a 15-fold increase in the suicide rate between 1944 and 1968. It confirms this is a recent problem and therefore it cannot be considered as "cultural" or "traditional".

As seen in the health's indicators box, there are a lot of social problems in Nunavik and many of them directly affect children. Johnny Oovaut, the mayor of the village Quataq, recently deplored the fact that some inhabitants prefer buying smuggled alcohol then feeding their children (15). His colleague, Muncy Novalinga, mayor of Puvirnituq, a village where five suicides and one murder happened during the six first months of 2008, added that when boxes of illegal alcohol arrive in his town, many people drink in the streets and those become unsafe for the children to play (15). In 2007, the Quebec's Commission des Droits de la Personne et des Droits de la Jeunesse reported that the Nunavik children's fundamental rights were violated: the right to integrity, the right to dignity, the right to protection, to security and to parental guidance (11). How can we expect the suicide situation to get better if the children's hopes for the future are already affected by the violation of their rights?

On the positive side, the Quebec Innu population is very young; two thirds of them are under the age of 29. Much can be done but there is no time for racism and narrow thoughts. Some of the solutions are presented by the Nunavik people themselves: finding a solution for the housing problem, promoting detoxification programs, facilitating social, sportive, cultural and traditional activities for the young ones, providing meeting centers for the teenagers and promoting education among the community (4). However, a true governmental implication is necessary to allow those solutions to be initiated. This will not happen unless social pressures are applied. The Innu people alone do not have the political power to make it happen because of their geographic isolation and their small number. We have to help the government remember that these people exist and that they need help.

We are aware that the Innu suicide problem is complex and we do not think that our summary is complete. However, we believe that informing the community is an important step and that it must be done for action to be taken before it will be too late for many other Innus.

Sincerely, Eric Mercier and Marie-Ève O'Reilly-Fromentin Medical Students, Université Laval,

Quebec, Canada

REFERENCES :

- Krug, E.G., L.L. Dahlberg, J.A. Mercy, A.B. Zwi and R.Lozano, World report on violence and health. Geneva, SWI : World Health Organization. 2002
- Institut National de la Santé Publique du Québec. Cited March 29th 2008. http://www.inspq.qc.ca/Santescope/.
- Boothroyd LJ, Kirmayer LJ, Spreng S, Malus M, Hodgins S. Completed suicides among the Inuit of nothern Quebec, 1982-1996 : a case control-study. CMAJ 2001;165(1) :749-55.
- Quanuippitaa. Institut National de la Santé Publique du Québec. Cited April 3rd, 2008. http://www.inspq.qc.ca/pdf/ publications/658_esi_sociodemo.pdf.
- 5. Thorslund J. Inuit suicides in Greenland. Artic Med Res 1990;49:25-34.
- Institut National de la Santé Publique du Québec. Cited April 3rd, 2008. http://www.inspq.qc.ca/Santescope/element.asp? NoEle=698
- Institut National de la Santé Publique du Québec. Cited April 3rd, 2008. http://www.inspq.qc.ca/Santescope/element.asp? NoEle=709
- Institut National de la Santé Publique du Québec. Cited April 3rd, 2008. http://www.inspq.qc.ca/Santescope/element.asp? NoEle=710
- Institut National de la Santé Publique du Québec. Cited April 3rd, 2008. http://www.inspq.qc.ca/Santescope/element.asp ?NoEle=703
- Santé Canada. Cited April 3rd, 2008. http://www.hcsc.gc.ca/ahc-asc/media/nr-cp/2000/200b_20bk2_f.html
- 11. Commission des droits de la personne et des droits de la Jeunesse, Enquête portant sur les services de protection de la jeunesse dans la baie d'Ungava et la baie d'Hudson, Nunavik : Rapport, conclusions d'enquête et recommandations, Avril 2007
- Statistique Canada. Cited April 3rd, 2008. http://www12.statcan.ca/francais/census06/analysis/aboriginal/ crowded.cfm
- Quanuippitaa. Institut National de la Santé Publique du Québec. Cited April 14th, 2008. http://www.inspq.qc.ca/pdf/ publications/resumes_nunavik/francais/ConsommationAlcoolD roguesEtUtilisationDesJeuxDeHasard.pdf
- Presse Canadienne, Contrebande d'alcool: des dirigeants du Nunavik demandent l'aide de Québec, Published June 8th, 2008, cited June 15th, 2008. (http://www.matin.qc.ca/articles/ 20080608175350/contrebande_dalcool_des_dirigeants_nunavik _demandent_laide_quebec.html)
- Ann Silversides. The North 'like Darfur', Canadian Medical Association, October 23, 2007

Eric Mercier is a 4th year medical student at Université Laval in Quebec City, Canada. He is primarily interested in emergency medicine.

Marie-Ève O'Reilly-Fromentin is a 4th year medical student at Université Laval; her interests are internal medicine and oncology.