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- ▣▣ [Home](#)
- ▣▣ [Top Stories](#)
- ▣▣ [Health Topics](#)
- ▣▣ [Health Assoc.](#)
- ▣▣ [Women](#)
- ▣▣ [Men](#)
- ▣▣ [Children/Teens](#)
- ▣▣ [Pregnancy/Infants](#)
- ▣▣ [Seniors](#)
- ▣▣ [Columnists](#)
- ▣▣ [Nutrition](#)
- ▣▣ [Fitness](#)
- ▣▣ [Pain Relief](#)
- ▣▣ [You Said it](#)
- ▣▣ [Spin Doctors](#)

- ▣▣ **TOOLS:**
- ▣▣ [Disease Database](#)
- ▣▣ [Drug Database](#)
- ▣▣ [Alt. Health](#)
- ▣▣ [Dictionary](#)
- ▣▣ [Herbal](#)
- ▣▣ [Encyclopedia](#)

Inuit suicide rates put health-care workers on alert

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By MARLENE HABIB -- Canadian Press

TORONTO (CP) -- A study released Tuesday that found increased suicide rates among Inuit in northern Quebec urges health-care providers to focus on patients' mental as well as physical well-being.

Suicide rates in Nunavik, a region of 14 villages along the shores of northern Quebec, rose between 1982 and '96, said the study in the current Canadian Medical Association Journal. Like other Inuit areas, Nunavik is rife with alcoholism and other social problems.

"Our results indicate that frontline medical personnel in Nunavik are in a position to detect people at high risk for suicide," concluded the study by a Montreal research team and Stephen Hodgins, former director of public health in Nunavik.

Often, however, health workers don't always determine which patients are at risk because they don't present with psychiatric illness, the authors noted.

Suicide rates among Inuit across Canada are "alarmingly high" because of such factors as rapid social and cultural change, poverty and geographic isolation, the study says.

It noted that the overall Inuit suicide rate between 1987 and '91 was nearly four times higher than that in the general population. In Nunavik, which has a population of about 8,900, the suicide rate between 1987 and '94 was 6.5 times higher than that in the rest of Quebec.

About one-third of the 71 Nunavik Inuit between ages 12 and 50 who had died by suicide over a 14-year period had been in contact with medical personnel at least a month before their death, the study found.

Most of the victims were single males between 15 and 24.

Several studies have examined suicide among Inuit in Alaska, the Northwest Territories and Greenland.

The Montreal study, however, involved a larger sample, comparing the 71 suicide victims to a control group of 71 Inuit. Researchers reviewed the medical charts of both groups, assessing their medical and psychiatric histories, childhood and

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family history, and use of health-care services.

They found the number of suicides rose from four in 1983 to 13 in '96.

The suicide victims had more lifetime contacts with health-care services than the control subjects.

A large proportion of those committing suicide had used such services within a month before death, but their visits were for reasons not related to psychiatric illness or considered serious, such as delayed growth or hearing loss as a result of ear infections which are common in the region.

As a result, researchers led by Dr. Laurence Kirmayer of McGill University's psychiatry department urged health-care workers to look out for patients who may be suffering mental-health problems like depression. They include patients with "psycho-social problems," such as family neglect, abuse and marital problems.

Suicide risk assessment could also form part of a periodic health exam, they suggested.

Serge Dery, Nunavik's current director of public health, said the study's release is timely.

A regional committee is touring Nunavik to hear from youth, elders and others before forming a mental-health action plan, Dery said on the line from Kuujuaq, the largest of the 14 Nunavik villages.

"We don't want to talk just about suicide, but about how to achieve positive mental health," said Dery.

Dery is waiting for the committee's findings and recommendations before talking about solutions. But he suspects that cultural differences may be hampering health-care providers' efforts.

"You have cultural differences between Inuit youth and health-care providers who are mostly white people" from Montreal. These differences, added Dery, may be breaking down communication between workers and patients.

Dery said youth are also suffering from identity problems -- getting more removed from traditional activities like hunting, fishing, sewing and carving -- that may be harming their mental health.

One answer, he said, may be for communities to bring youth together with elders who can teach them such skills and "give them back their identity."

Health Canada says Inuit have lower life expectancies, higher infant mortality rates and higher rates of death by accident, suicide and violence than the rest of the population.

A 1999 report by Health Canada and the Assembly of First Nations called the state of native mental-health services in Canada "intolerable," with all levels of government failing to provide urgently needed care.

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