

OBSERVATIONS ON HEALTH SERVICES

DELIVERY IN NORTHERN LABRADOR

BY

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OBSERVATIONS ON THE HEALTH SERVICES DELIVERY SYSTEM IN NORTHERN LABRADOR

BY

O.J. RATH, M.D., M.P.H., M.S.

During the period April 11 to 15, 1977, four Medical Officers from Medical Services Branch visited a number of settlements in Northern Labrador, with a view to obtaining firsthand information regarding the health delivery system to the Native people in that particular area. These Medical Officers were as follows:- Dr. O.J. Rath, Senior Consultant, Indian Health, from Program Development, Dr. H.B. Brett, Principal Medical Officer in Program Management, Dr. L. Hirtle, Regional Director, Atlantic Region, and Dr. D. Waldron, Programs Medical Officer in the Atlantic Region.

The communities visited were:

Irrelevant Northwest River, Irrelevant Davis Inlet and Irrelevant

Dr. Anthony Paddon, employed by the International Grenfell Association, facilitated our visits to the various communities and took time out from his busy schedule to accompany us. It should be noted that Dr. Paddon has been employed by the International Grenfell Association since 1946; he is planning to retire in approximately six months.

We spent the night of April 11 at Northwest River and proceeded on the morning of April 12, by Beaver Aircraft, to Irrelevant. We overnighted at Irrelev and proceeded to Davis Inlet on April 13. From there we went to Irrelevant and returned to Northwest River. April 14 was spent at Northwest River and spent the night at Irrelevant. On the

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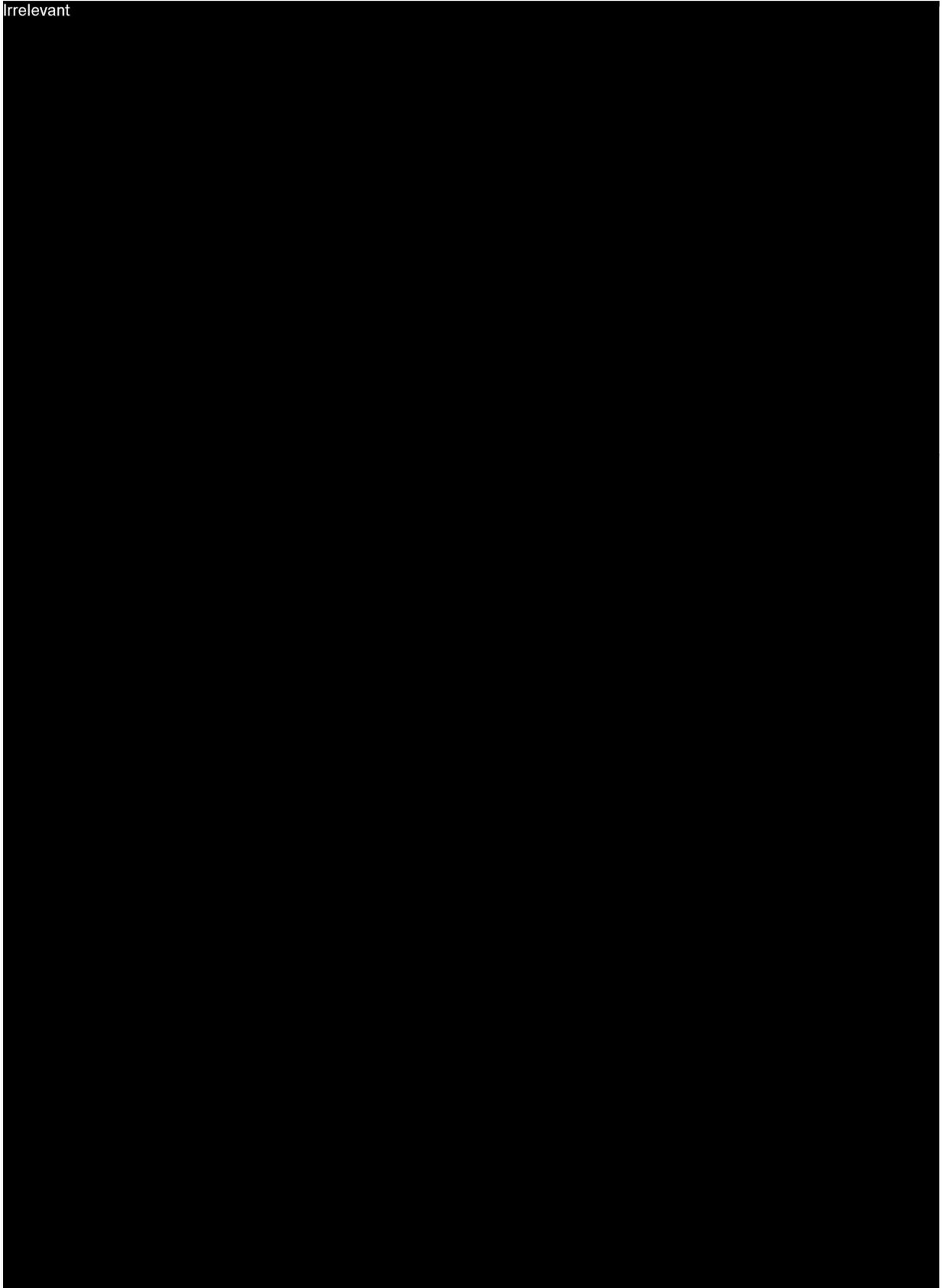
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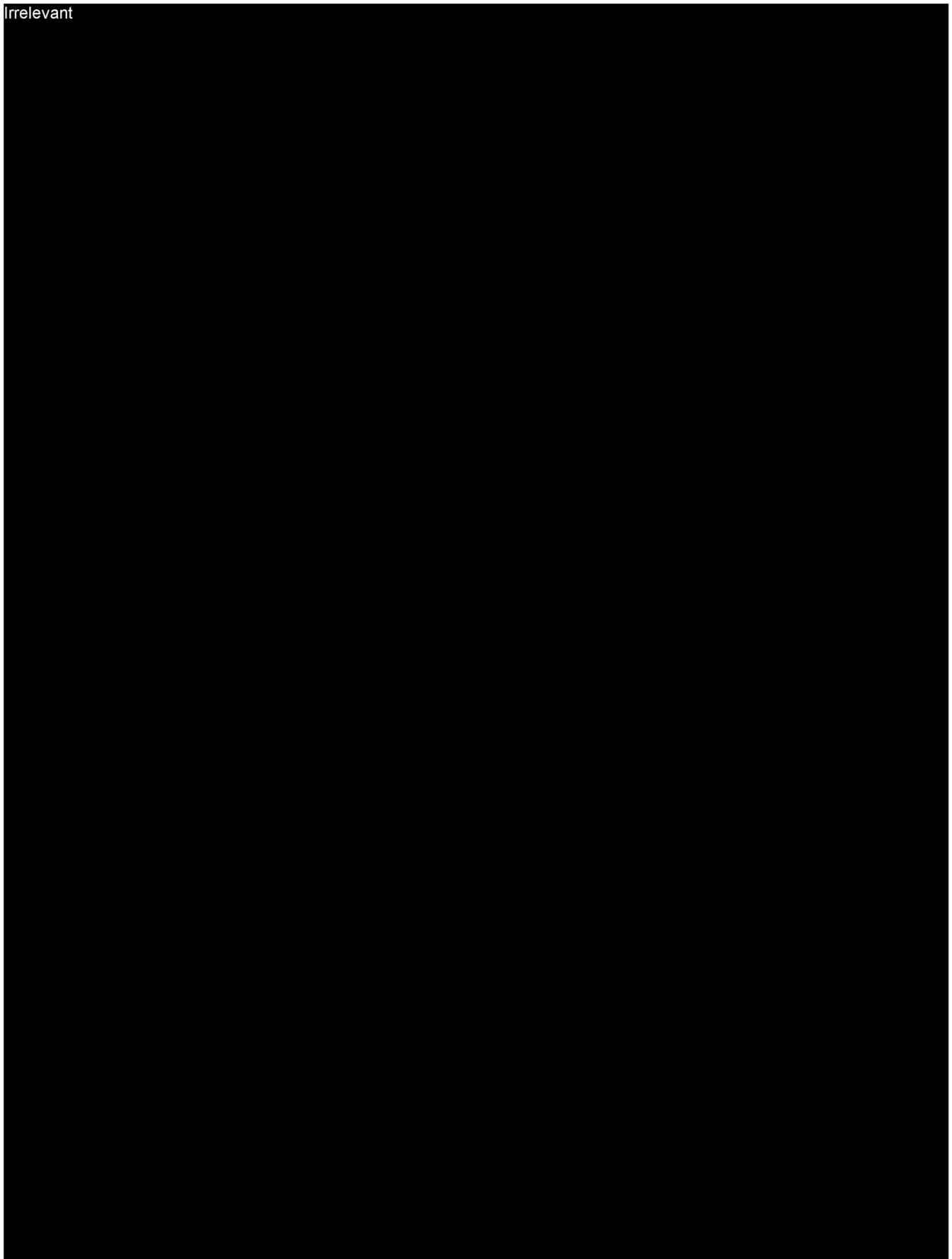
It should be noted that the IGA acts as the agent for the Government of Newfoundland to provide health services in Northern Newfoundland and along the coast of Labrador. In the area we visited, Northwest River was the headquarters for health services delivery in Northern Labrador.

In the following report I will outline my observations regarding the various communities in the order in which they were visited.

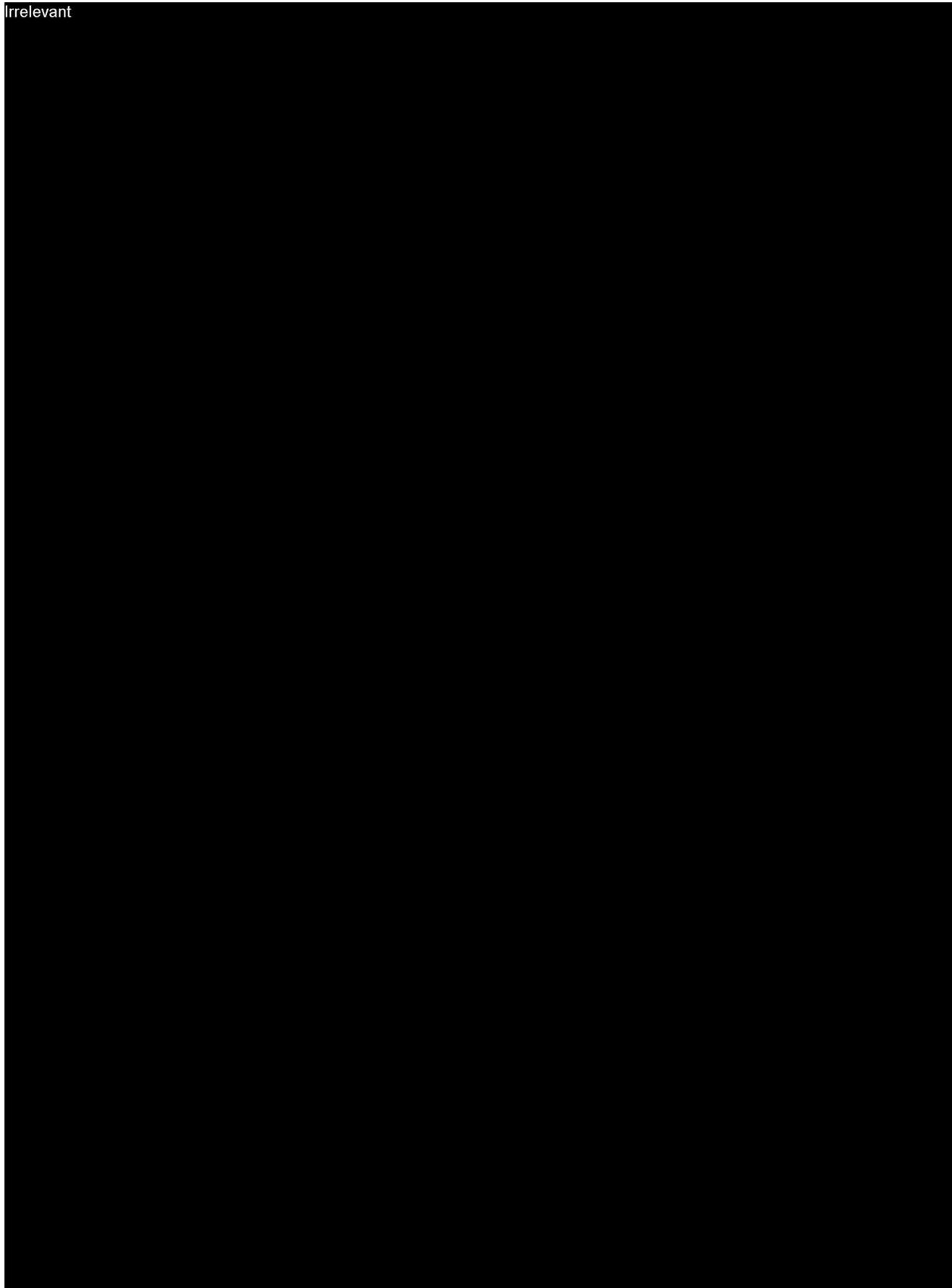
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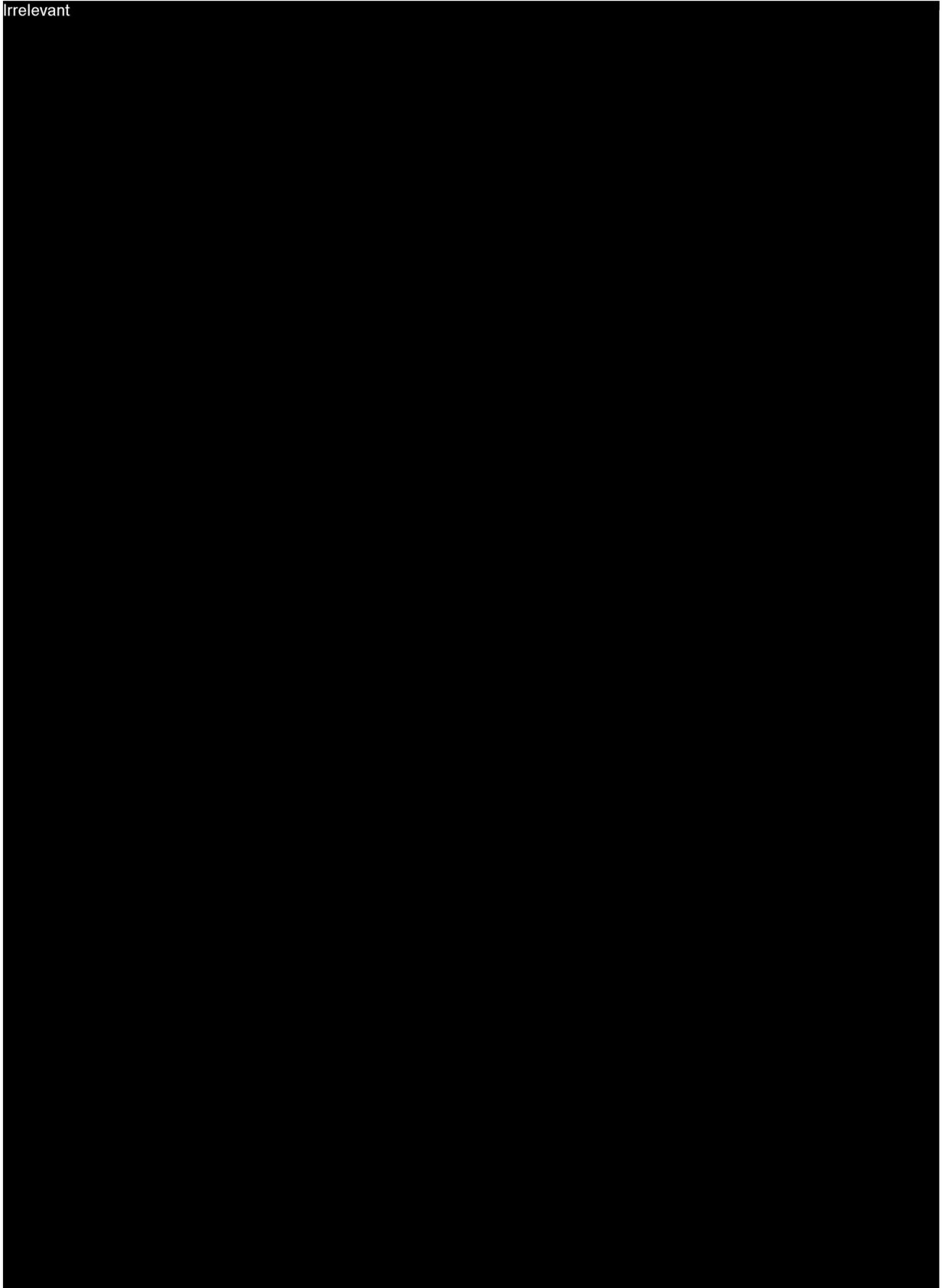
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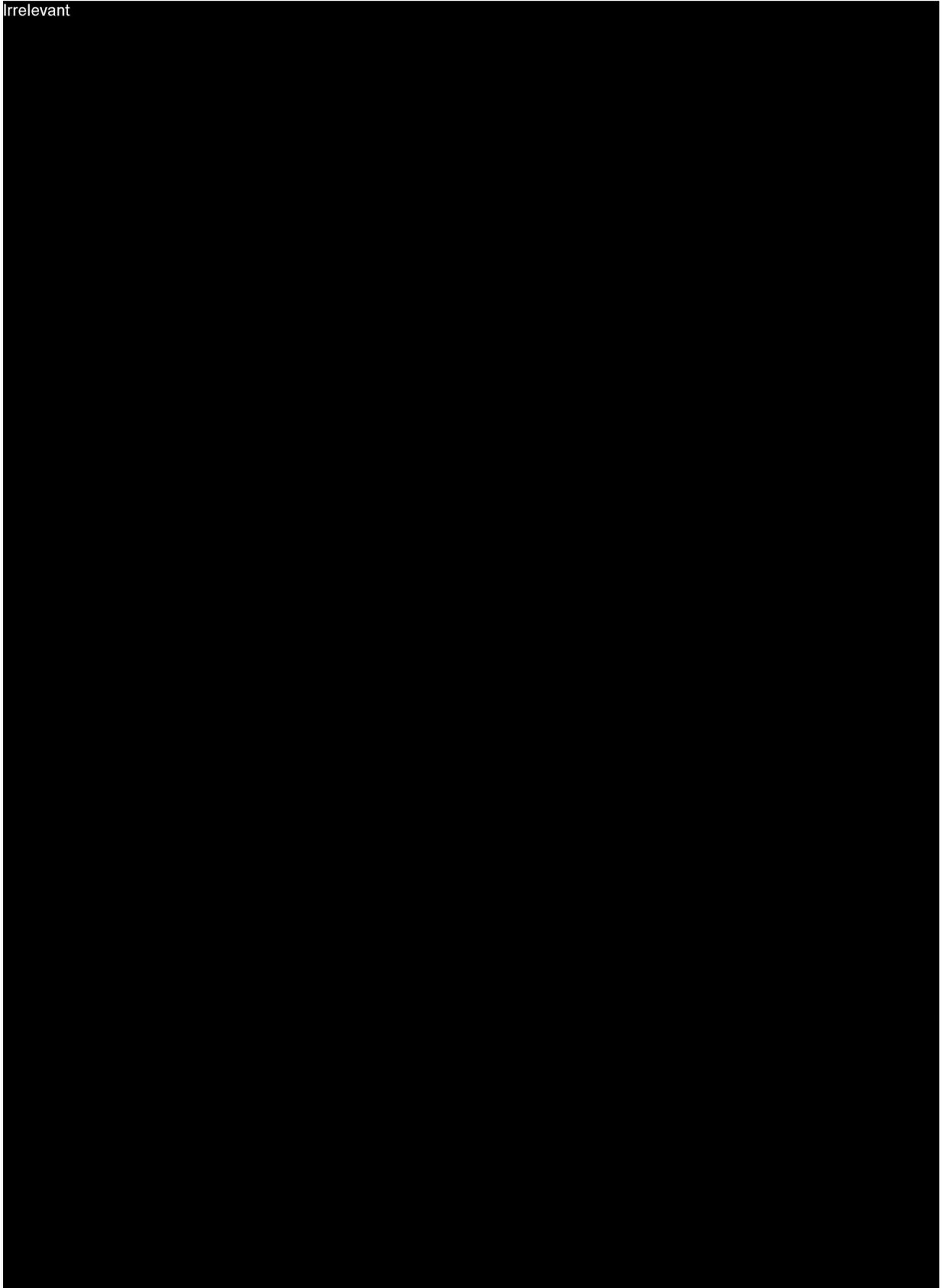
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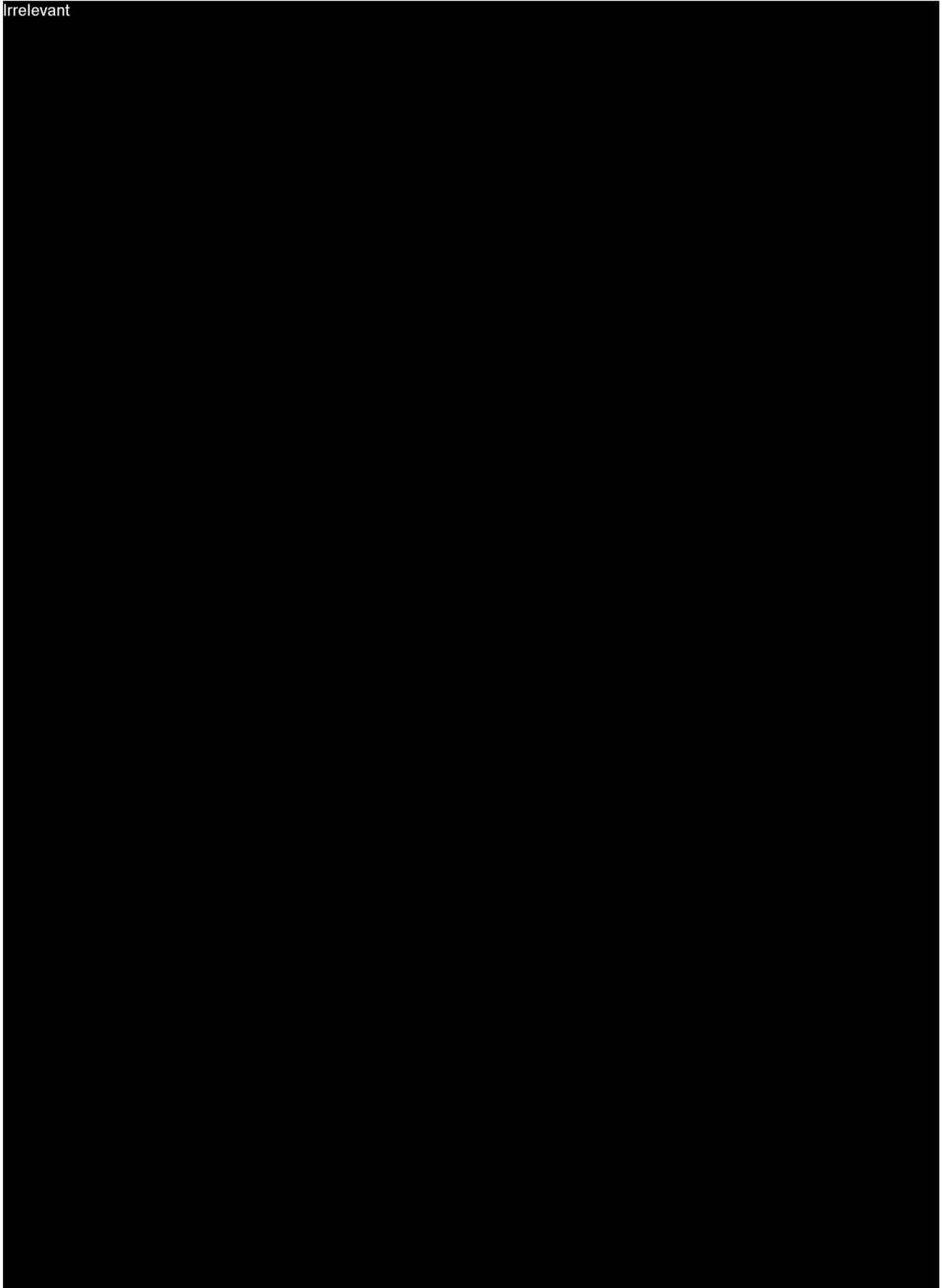
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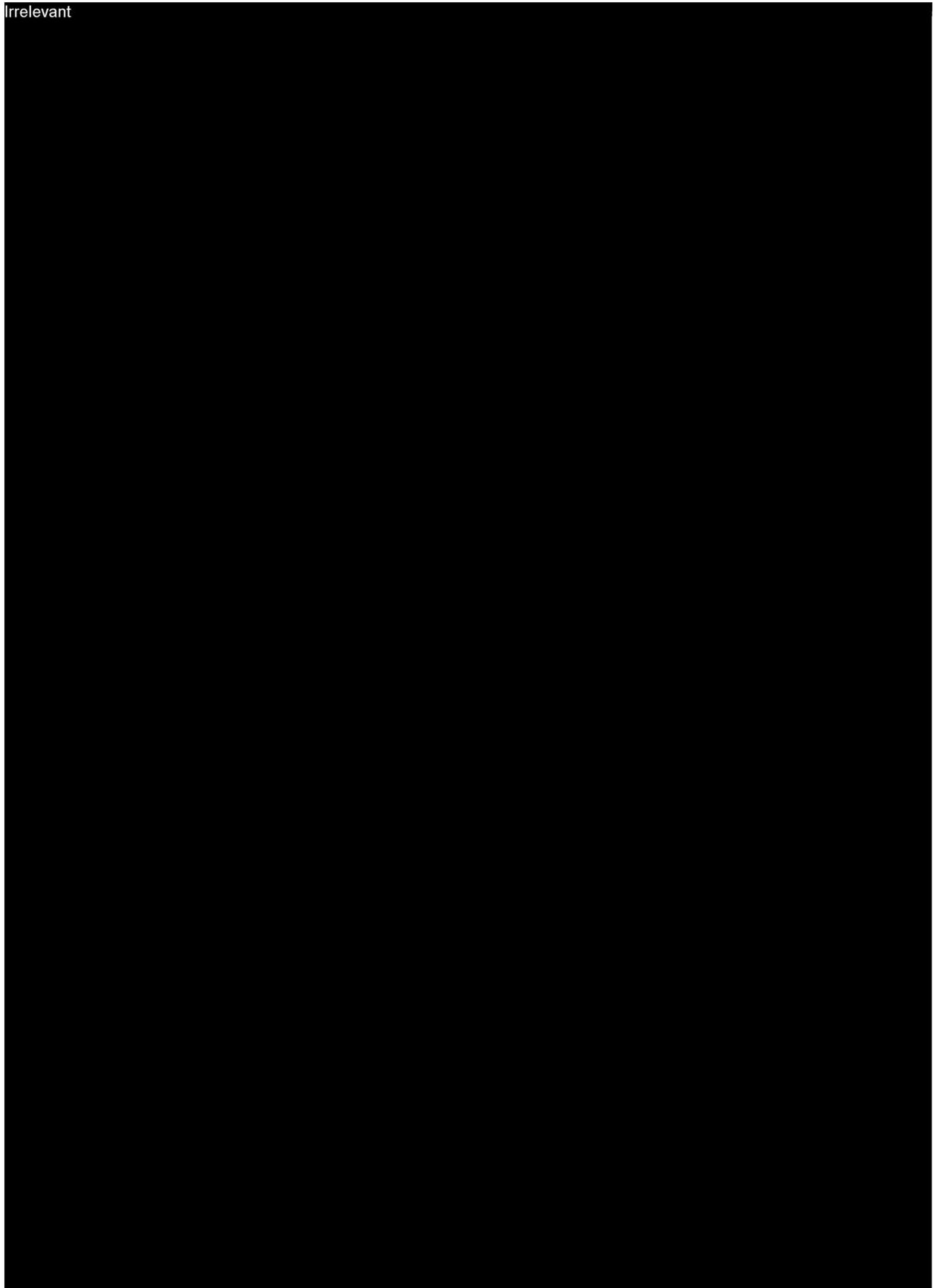
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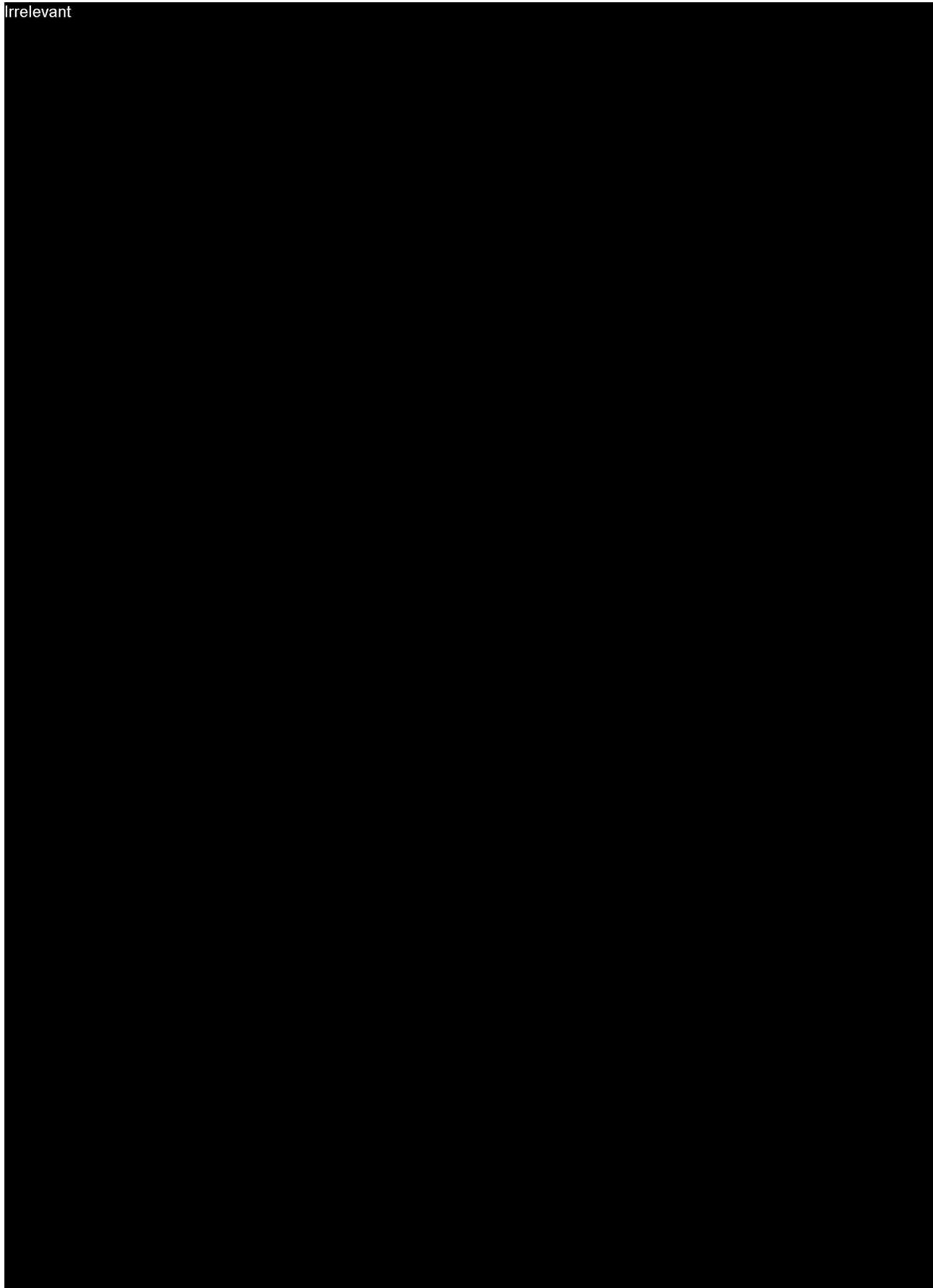
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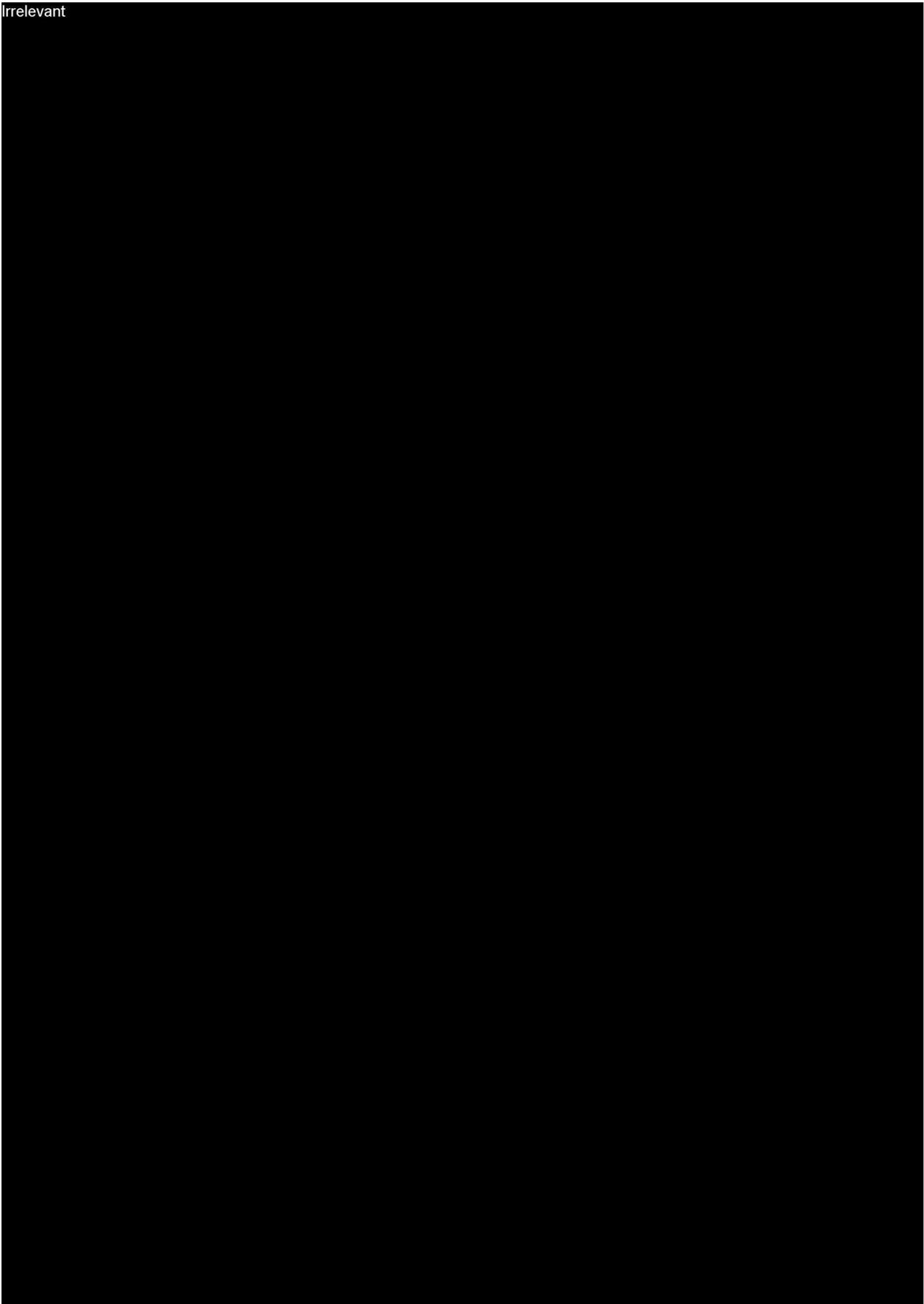
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DAVIS INLETPopulation:

In the community of Davis Inlet, which is situated 180 air miles slightly Northwest of Northwest River, there are 275 people, 244 of which are Indian people, belonging to the Naskapi and Montagnais Bands. These people are related to the Naskapi and Montagnais Indian people in the Province of Quebec. The people are not registered as Indians as defined by the Indian Act. These Indian people are also related to the Indian people at Northwest River.

The Indian people at Davis Inlet are endeavouring to become Registered Indians so that they will benefit from the terms of the Indian Act and the programs which the Department of Indian Affairs and Northern Development provide.

Health Facilities and Services:

There is a small Nursing Station which is relatively new, but is in very poor condition. The equipment at the station needs to be upgraded. There is one clinical nurse, who provides primary care for the community and refers patients with which she cannot deal to Northwest River Hospital. This station is operated by the IGA and has an establishment of one nurse. This nurse is expected to work seven days a week and be on call twenty-four hours a day; in addition to this she has to also clean the Nursing Station and do her own cooking.

The Nursing Station has a well with a pressurized water system. The raw sewage is piped into the bay.

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Community Facilities and Services:

School -

Primary grades are taught in this community. Students wishing to go to high school have to go to Northwest River or further South.

Store -

Operated by Labrador Services and I understand that the variety of foods is very limited.

Air Services -

Single-engine aircraft land on the ice in the Winter and water in the Summer. There are no navigational aides. There is no airstrip.

Communications -

The Nursing Station has a radio and she can contact the "outside" on a regular basis.

Roads -

There are no roads to or from the settlement. There are trails within the community. Mode of transport is by snowmobiles and boats.

Church -

Roman Catholic.

Liquor Outlet -

None, but liquor is imported from the Southern part of Labrador.

Housing -

The housing is in very poor condition and it was noted that many of the houses were vandalized. Several new houses were under construction, but these were poorly planned and have no water supply or sewage disposal, even though the houses have a hot water heater, a toilet and bathtub, which cannot be used.

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There is a housing shortage in this community and many of the old houses are beyond repair.

Water Supply -

There is waterhole on the side of the hill several hundred yards away from the nearest house, which is the only water supply in the community, with the exception of the Nursing Station. The waterhole was about a foot and a half in diameter and several feet deep and water had to be dipped out with a dipper - it would take about ten minutes to obtain one bucket of water. The water is then carried by bucket to the houses. There were a couple of other water sources in the community, but these have dried up. There is a small brook, about a mile from the village, where some of the villagers obtain their water.

Sewage and Waste Disposal -

Private residences dump their raw sewage and solid wastes out the back door. In the Winter it freezes, so that it does not create too much of a problem, but in the Spring and Summer a real health hazard is created by this method of disposal. There was some evidence that garbage was dumped on the ice in the bay, but, generally speaking, garbage was dumped out behind the houses. There were no containers visible for garbage collection since there was no system for garbage collection.

Health and Social Problems:

Practically the whole community is on welfare. Alcoholism and alcohol abuse is the major social and health problem in this

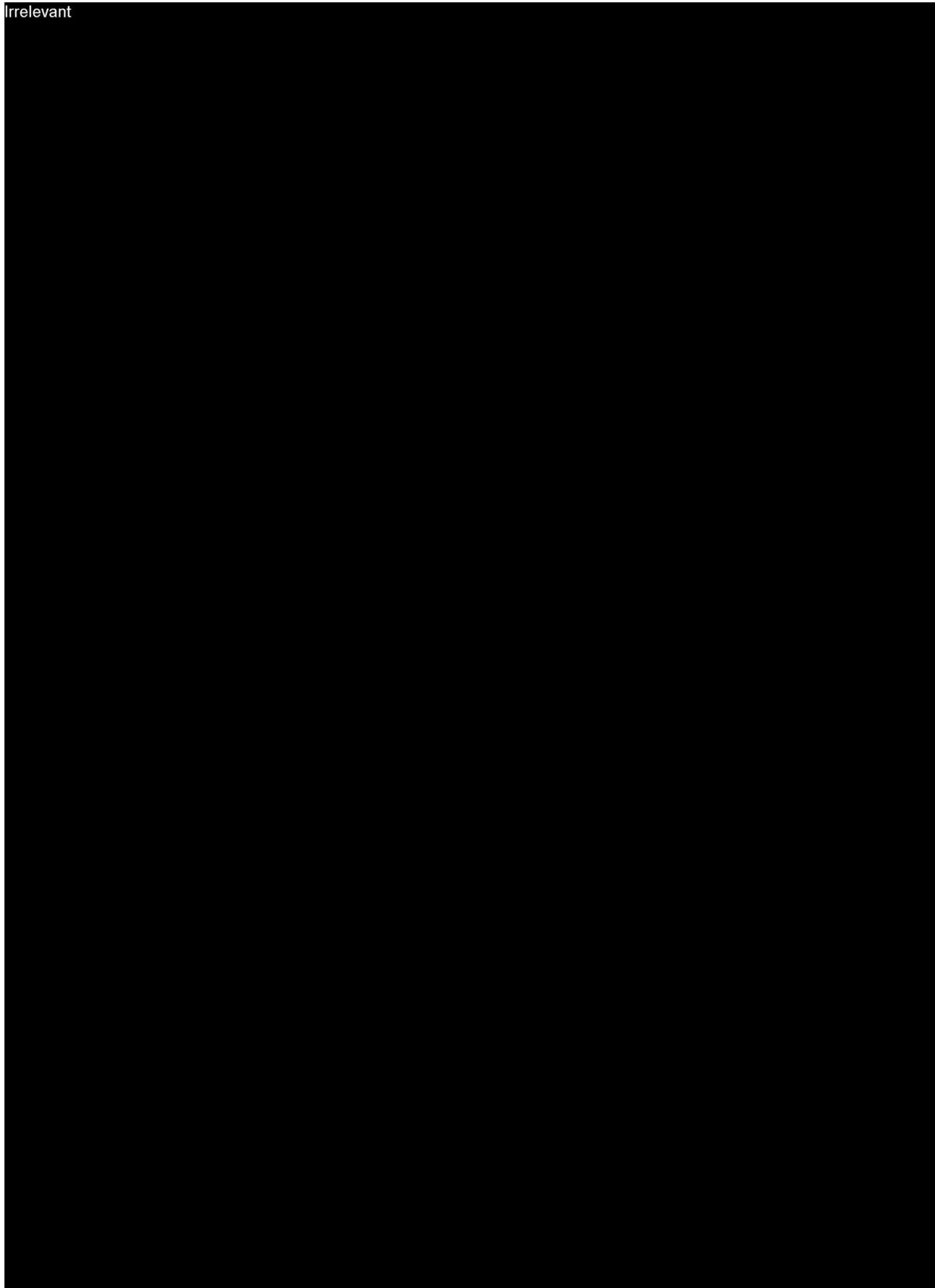
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community. At the present time there are fourteen cases of tuberculosis under chemotherapy in the settlement. Some time ago they had a considerable outbreak of tuberculosis, which has been brought under control. There are numerous upper and lower respiratory infections, as well as otitis media, amongst the children. There are skin infections, as well as pediculosis. Most of the diseases are related to the lack of a sanitary environment, the lack of an adequate water supply, the lack of sewage disposal and the lack of adequate housing.

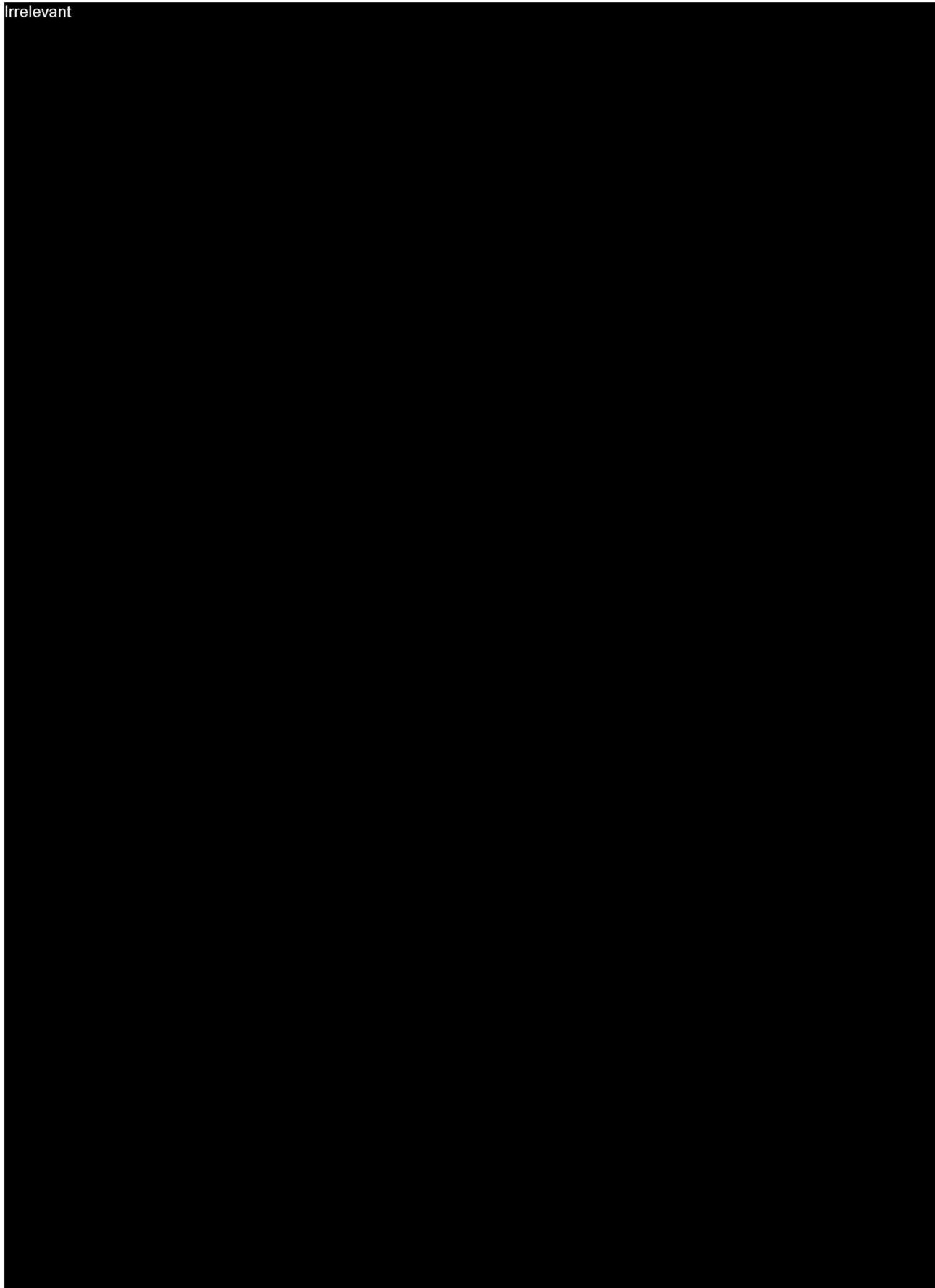
General:

The visiting physicians met with the Chief and a Councillor of the Band to discuss some of the health problems. One gets the impression that the Council is very apathetic and does not know how to go about improving the situation they are in. It would seem that this Band needs considerable assistance in every way, in order that they might improve their lifestyle.

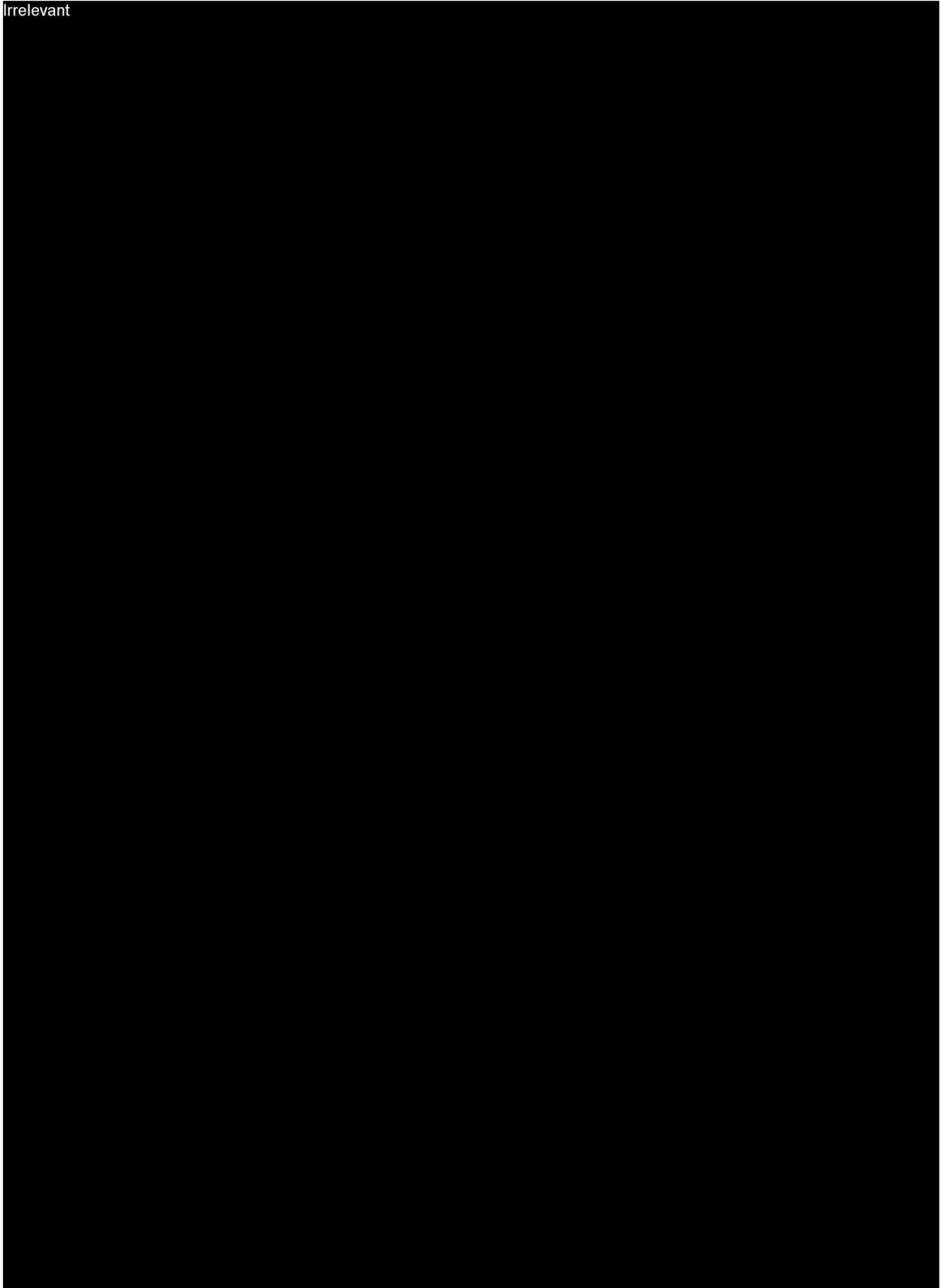
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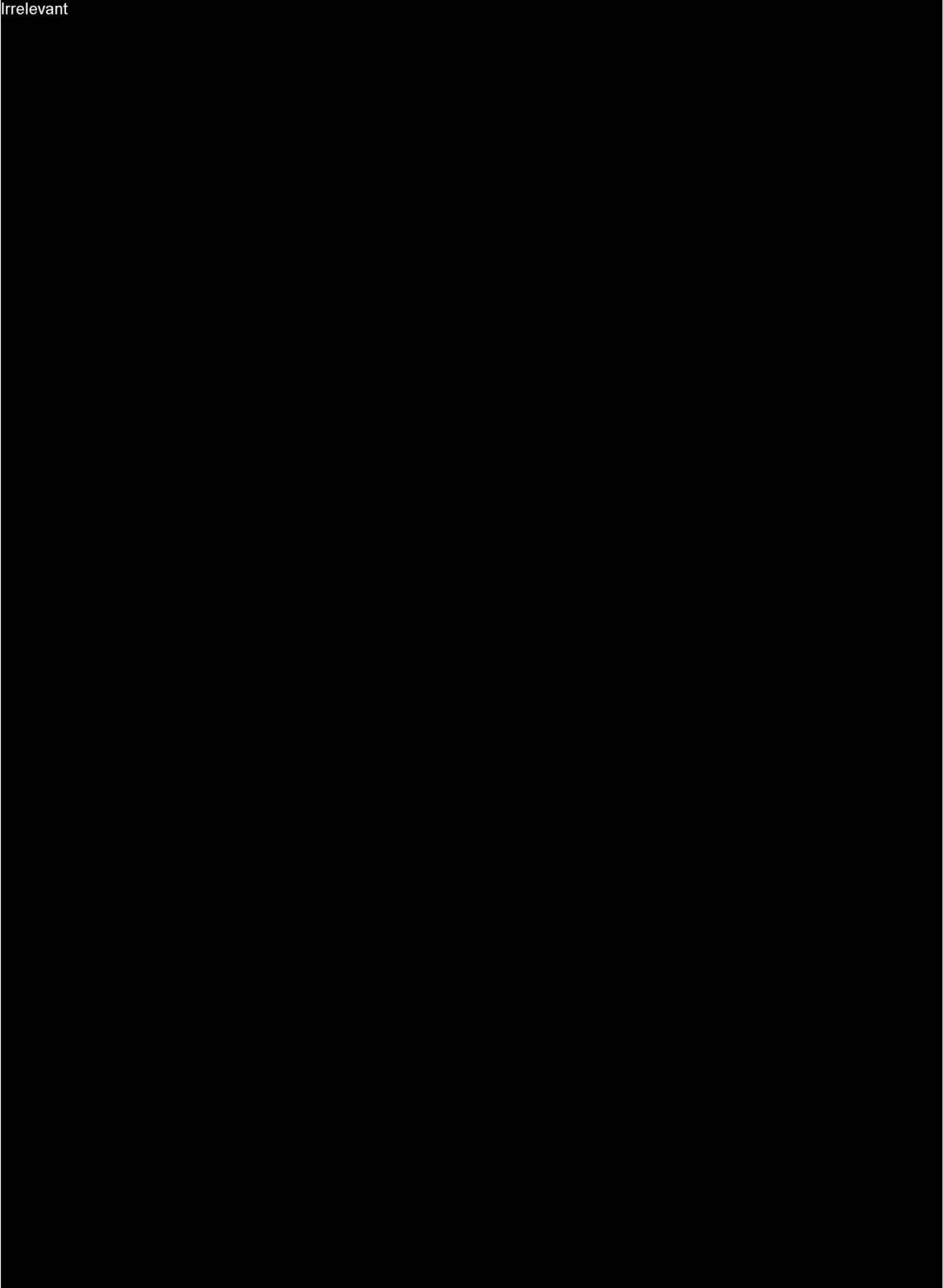
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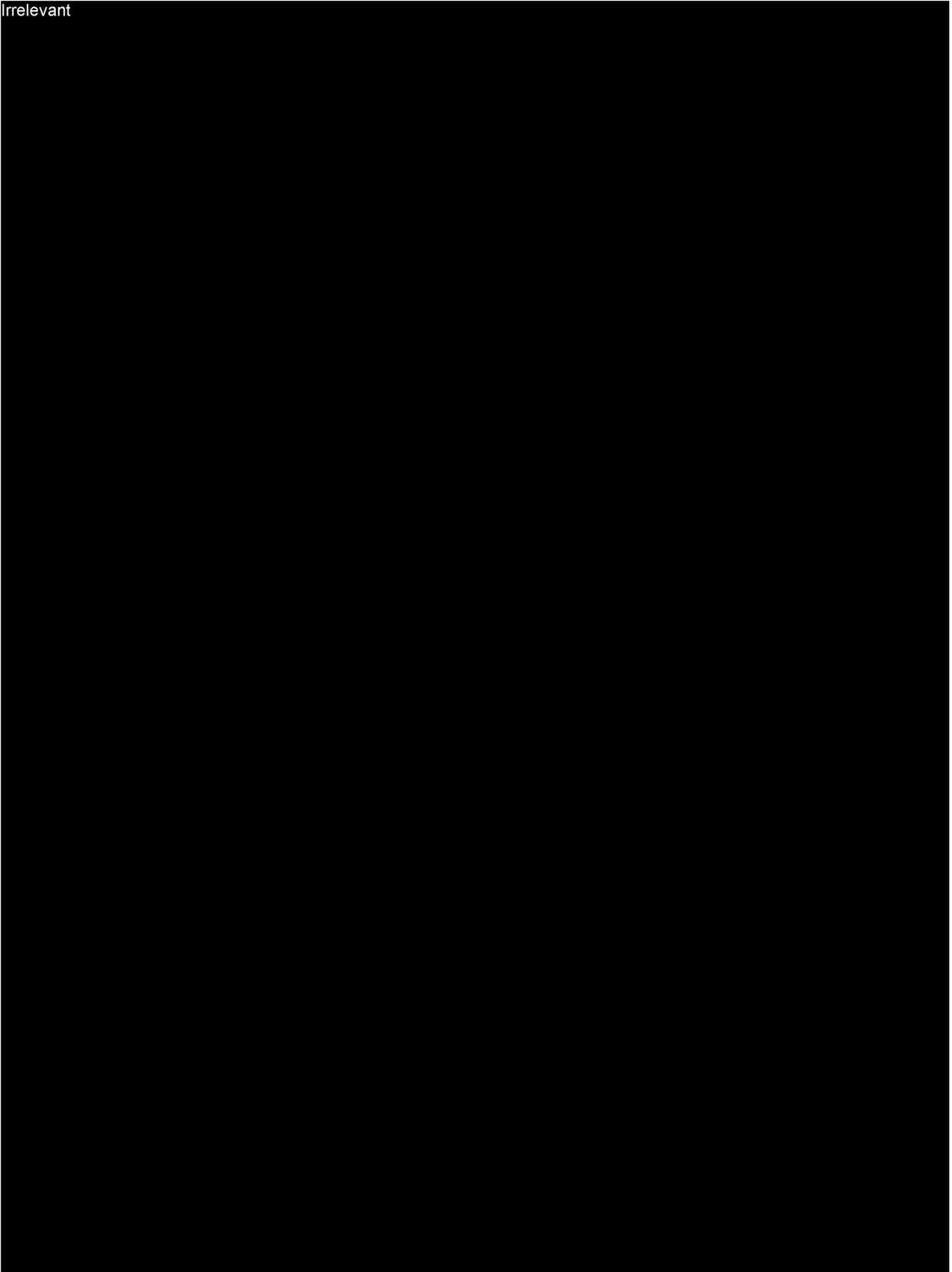
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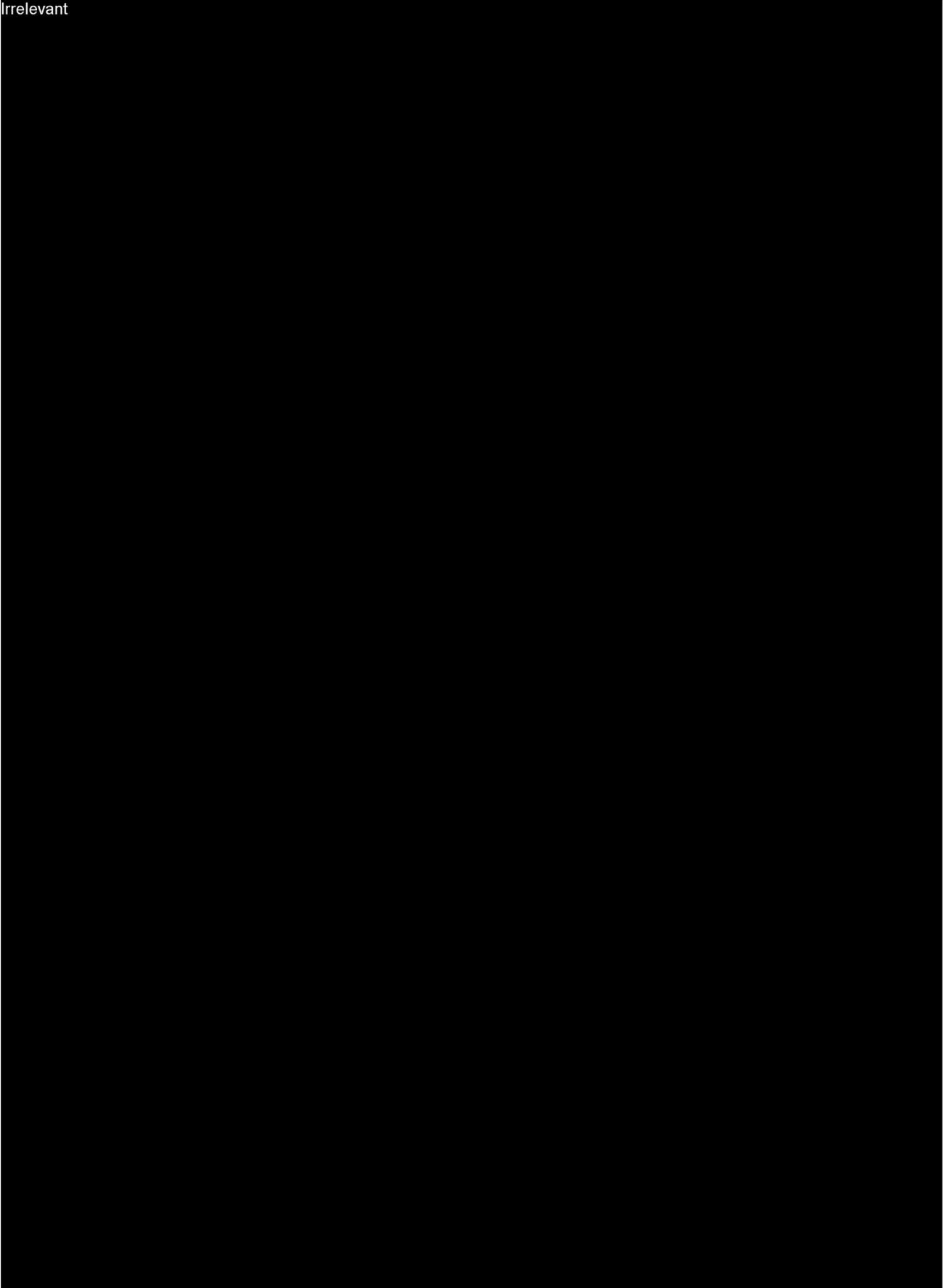
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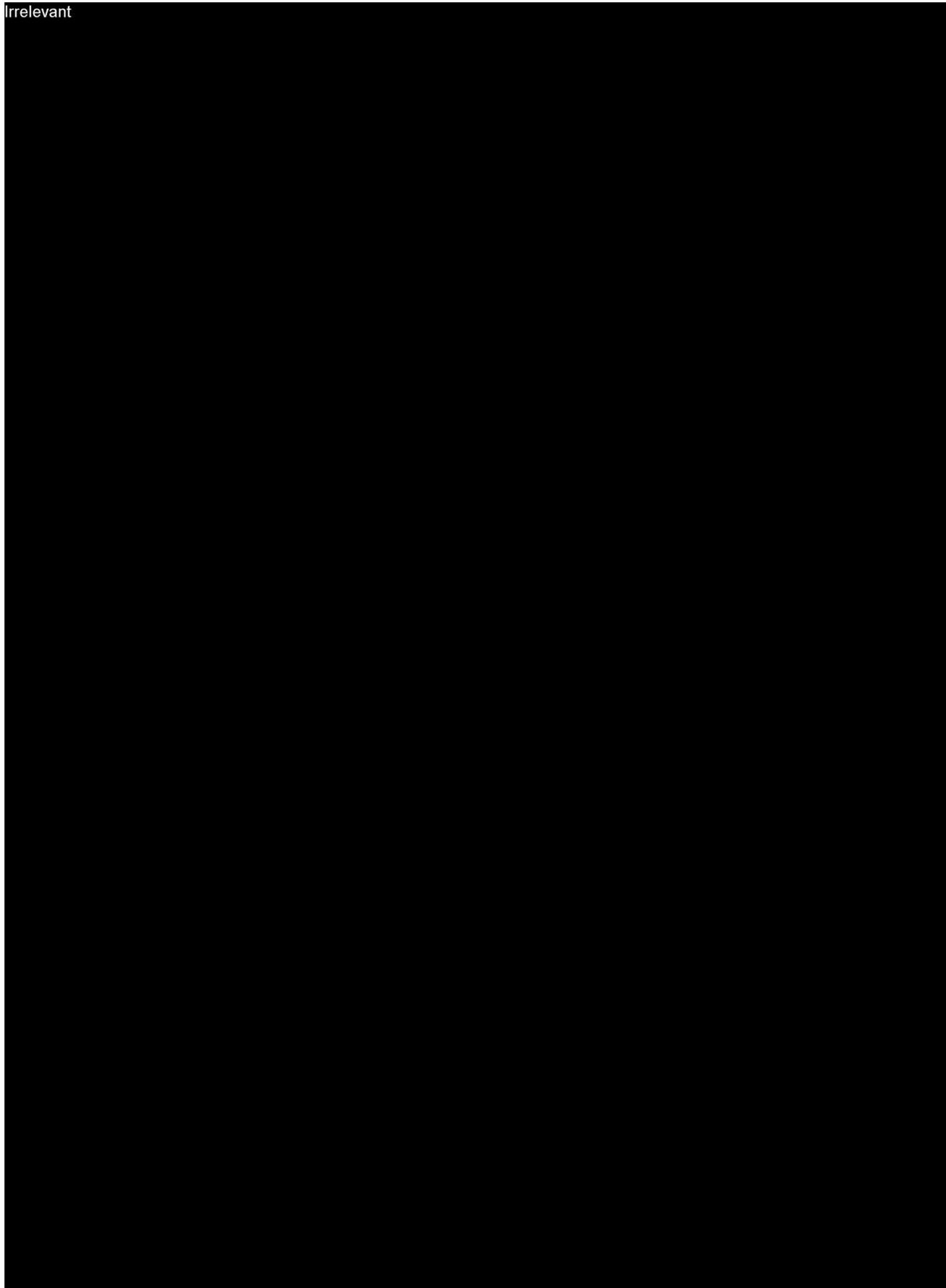
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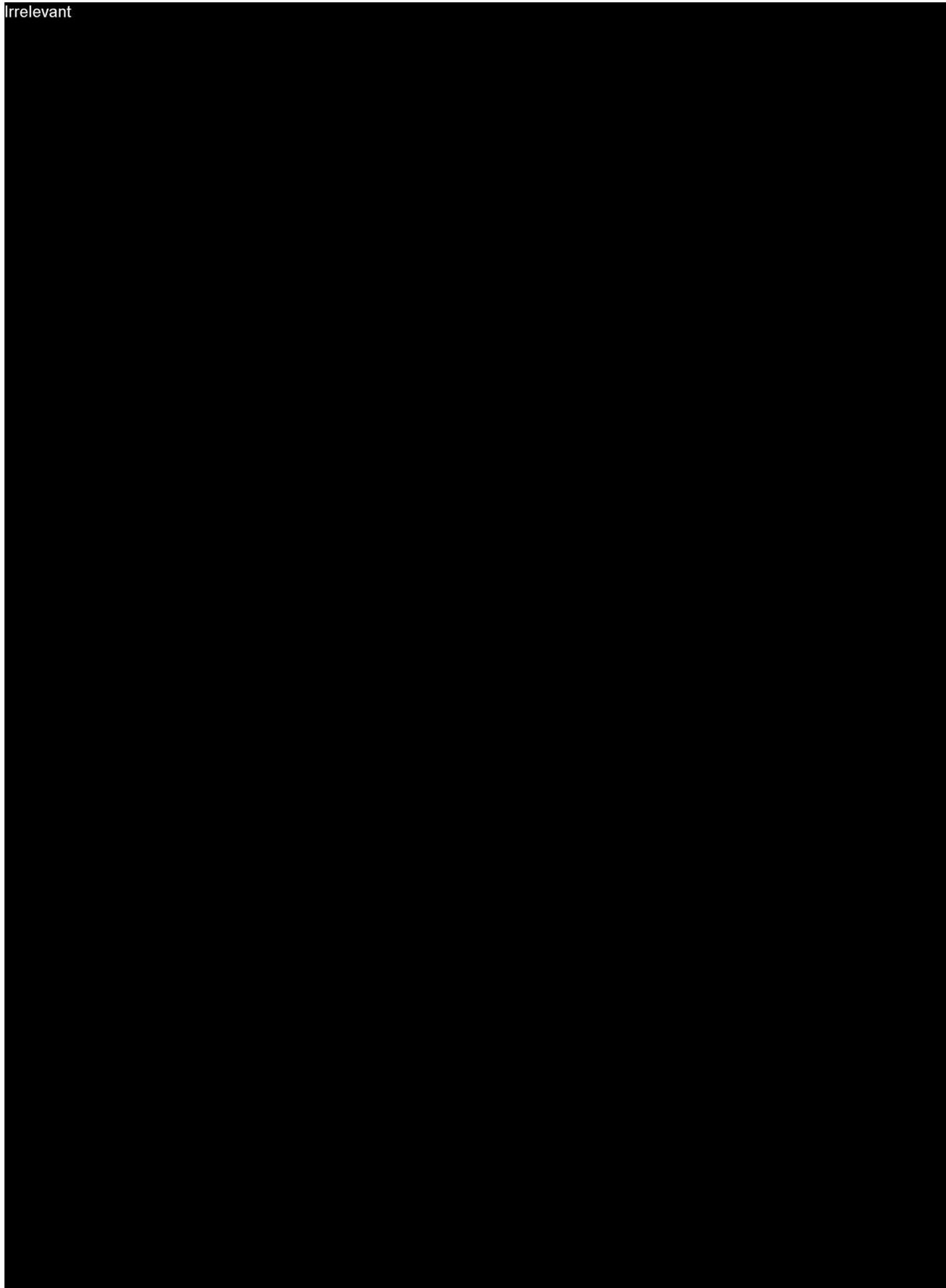
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NORTH WEST RIVER - INDIAN COMMUNITYPopulation:

The population of the Indian community is 537. The community is situated at the end of the road to Goose Bay and is connected by cable car to the non-Indian community across the river. The Indian people here are Naskapi and Montagais. Both these groups speak the same Indian language and these people are related to the Naskapi and Montagais in the Province of Quebec. The people here are not Registered Indians, but Indian Affairs has employed an Indian person from this community to obtain information on each Indian family, with a view to registering the Indian population so that they will come under the terms of the Indian Act. The Indian name for this community is Sheshatshit.

Health Facilities and Services:

There are no health facilities within the community itself, but they are available across the river at the North West River Hospital. A Public Health Nurse, employed by the IGA, visits the community to provide some services. No out-patient clinics are held in the Indian village. There is poor communication between the health facility across the river and the Indian community.

Community Facilities and Services:

There is a Band Council for the Indian village and also the Naskapi Montagnais Innu Association. Mr. Tony Penashue is the Vice-President of the Association and Mr. Anthony Jenkinson (non-Indian) is the Executive Director of the Association. Mr. Bart Jack is the Chief of the Band and is also involved in the local Indian association. The Indian association includes Davis Inlet and the Indian community at North West River. It would appear that both the Council and the Association are becoming more aware of their problems and are beginning to make specific demands.

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The group from Medical Services Branch met with the Association and Band members and I will be reporting on this meeting in another section.

Air Services -

There is an airstrip across the river, as mentioned previously.

Roads -

There is a road to Goose Bay from the Indian community.

The Indian community has very few vehicles, including snowmobiles, in view of the fact that they do not have sufficient funds to purchase vehicles.

Store -

There is a small store in the Indian community and they also utilize the Hudson's Bay store across the river.

School -

There is a school which teaches the primary grades. If the children wish to proceed to high school they can go across the river or be sent to a more Southern location where high schools are available.

Church -

Roman Catholic. The whole community, apparently, is Roman Catholic.

Liquor Outlet -

There is no liquor outlet within the community, or across the river, but they have ready access to alcohol from Goose Bay.

Recreation -

Some hockey and football are played in appropriate seasons, but this is not too well organized. There is a small community

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"centre", which is a rundown old building and filthy inside, where movies are shown on a regular basis. This "centre" also has a dilapidated pool table. It should be mentioned that the school in the Indian village has a large gymnasium, but the school board (which has no Indian representation on it) has refused the use of the gymnasium after school hours, despite frequent requests.

Alcohol Abuse Centre -

An alcohol abuse centre is being organized and is under the sponsorship of Non-Medical Use of Drugs Directorate from our Department in Ottawa. This Directorate is sponsoring a program for three years at \$54,000 per year. A centre has been developed from an old building which is being renovated to provide an office for consultation, as well as some recreational and rehabilitational facilities.

Mr. Alan Palett, a social worker employed by the IGA, is assisting the Indians to organize this project. There are two Native Counsellors and one Native assistant on the staff of this program. They are now trying to organize an Alcoholics Anonymous type program and they also give individual and family counselling services. Alcoholism is a very major problem and it is recognized as such by the Indian people.

Housing -

Mr. Tony Penashue, Mr. Anthony Jenkinson and two other members of the Indian community escorted the Medical Services

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Branch team through the community, to show the sad state of affairs that exists at this location. The original houses in this community were constructed in 1965 and houses have been added in subsequent years. The original houses are mainly dilapidated, inadequate, filthy hovels, in which no human being should be asked to live. We were taken inside some of the houses, which were very small for the size of the family, filthy, due to the lack of water, over-crowded, one small stove was expected to heat the whole house. None of the houses had a water supply or sewage disposal, even of the most primitive type. Most of the houses are deteriorating rapidly, due to lack of maintenance.

Water Supply -

There is only one potable water source for this community of 537 people and this is centrally located at the Mission. The Mission developed the well and has permitted the Indian people to use it. The water has to be hauled by bucket or small barrel to the various houses. There is a pond behind the village, approximately a half mile distant, from which contaminated water is taken for washing purposes. Here again, there is no means of transporting the water except by bucket.

Sewage and Waste Disposal -

Raw sewage and solid wastes are dumped behind the houses since there is no place to put the sewage or garbage. No garbage containers were visible, so that not even the solid, burnable garbage was burned. It was stated that in the Spring

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there was an attempt at cleaning up the community, but,
as you can imagine, this would be a very difficult process.

Health and Social Problems:

The majority of Indian people are unemployed and are on Provincial welfare. Alcoholism and its associated ills is the major problem in this community. Some steps are being taken to try and improve the situation through the Alcohol Abuse Counselling Service.

The other health conditions are those which are usually associated with dreadful environmental conditions.

General:

This is an Indian community, which is just becoming aware of its major health and social problems and are endeavouring, through various means, to improve the situation. Since there is no economic base for this community, they require considerable assistance in improving the basic requirements for life. This community receives little or no support from the non-Indian community across the river; in fact there is antagonism between the two, as mentioned previously. Although there is a school board, there is no Indian representation on the board of the school which teaches Native children exclusively. I think this in itself indicates in what regard Indian people are held by the non-Indian people of the area.

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MEETING WITH NASKAPI MONTAGNAIS INNU ASSOCIATION

AND BAND COUNCIL - APRIL 14, 1977

Drs. Hirtle, Waldron, Brett and Rath represented Medical Services Branch. There was no representation from the IGA, since Dr. Paddon had another meeting at Goose River at the time. The Chairman was Mr. Tony Penashue. Mr. Anthony Jenkinson of the NMIA and Chief Bart Jack were the chief spokesmen at the meeting. The items discussed were as follows:

1. The Naskapi Montagnais Innu Association presented a letter dated April 13, 1977, addressed to Drs. Brett, Rath, Hirtle and Waldron, outlining 12 specific concerns of the Association.

They were as follows:

1. When registration of the Labrador Naskapi Montagnais occurs, who will provide health services for Indian/Inuit?
2. If it is to be Medical Services Branch of the Department of National Health and Welfare, will provision of these services be delayed until registration actually occurs, or will they be provided on the "entitled to be registered" status of Labrador Naskapi Montagnais before that time?
3. Does the Federal Government support the idea of regional and local health councils having executive function? We understand there is precedent for this elsewhere in Canada.
4. Will the Federal Government encourage and aid, financially and administratively, the following:
 - a) International Grenfell Association withdrawal from the role of provider of medical services and Federal Government input.

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- b) Indian and Inuit translators/interpreters and health workers.
 - c) C.H.R. program to be held in Labrador.
 - d) A health clinic for the Indian village of Sheshatshit on the south side of North West River.
 - e) Nursing stations for Rigolet and Postville.
 - f) Increased consultant service for Labrador.
 - g) Improved facilities e.g. x-ray machines, lab. facilities, incubators, at present nursing stations.
 - h) Increased staff complement - Registered nurses.
5. Will the Federal Government aid construction of airstrips, water and sewerage systems, adequate housing, and a garbage disposal system?
6. If the Federal Government will, when can we expect action on these matters?
7. Again presuming a willingness on the part of the Federal Government to assist, would such assistance also take the form of providing resource people, such as sanitation engineers, nutritionists, etcetera?
8. Will the Federal Government aid free medically authorized transportation to any provincial center?
9. Will the Federal Government provide the "Outpost Camps Program" and "Family Packs" to Labrador Inuit and Labrador Indians?
10. Will funding and resources be provided by the Federal Government for Alcohol Rehabilitation Programs of Indians and Inuit in Labrador?

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11. Will the Federal Government encourage apt reorganization of a secondary care center in Northern Labrador?

12. If North West River is to remain the secondary care center and acute care referral center for the Northern Labrador coast will the Federal Government undertake to bring the hospital up to the standards of its other Medical Services Branch hospitals at Inuvik, Frobisher Bay and Moose Factory: with the construction of a proper strip with IFR/ILS facilities, a proper O.R. with necessary staff to include an anaesthetist and the other improvements necessary to provide adequate secondary care services? (A copy of the letter is enclosed in this report as Annex 'C'.)

2. Registration of the Indian population, so that they will come under the terms of the Indian Act. At the moment the Indian people of Labrador do not come under the Indian Act and for this reason they are now attempting to become Registered. Indications are that it is likely that the Department of Indian Affairs and Northern Development will permit the Indian community of North West River and Davis Inlet to become Registered.
3. Dental Care - The existing agreement is not clear as to what dental services should be covered under the Health Agreement. This requires clarification.
4. The Indian people would like to have emergency medical packs available for people leaving their settlement to go hunting or fishing. At the present time the IGA bills the Band for such

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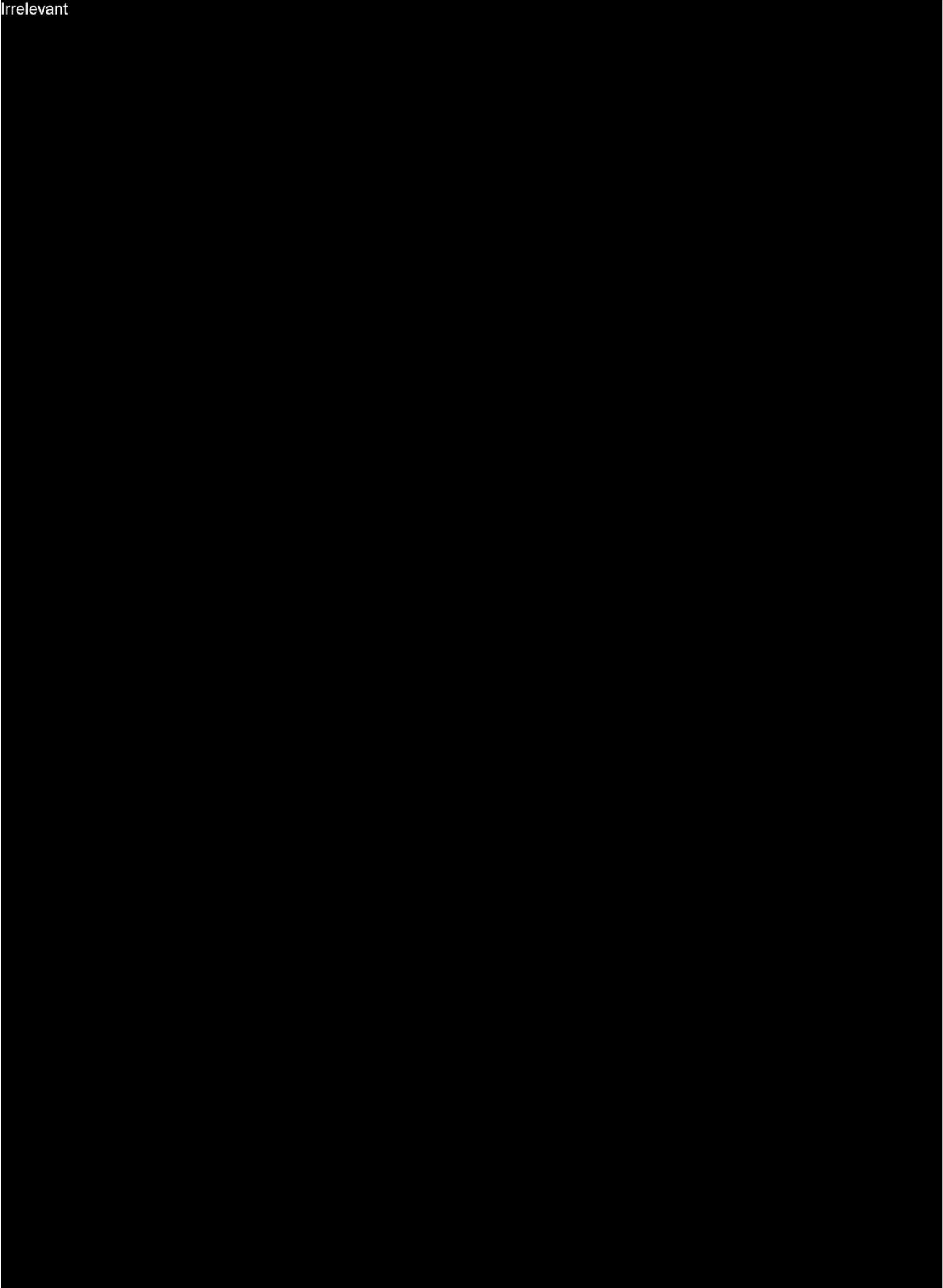
drugs and the Association feels that this may be considered as double billing on the part of the IGA.

5. The purpose of the visit of the Medical Services Branch staff was explained by Dr. Brett. Dr. Rath explained the existing Indian Health Policy. Dr. Hirtle explained the general agreement between Canada and Newfoundland, as well as the Health Agreement. Many of the elders still do not understand the terms of the Health Agreement.
6. One of the elders stated that this meeting was the first time any doctors from any health service had discussed the problems with the Indian people directly.
7. The International Grenfell Association was the subject of some critical comments, mainly by Chief Bart Jack and Mr. Anthony Jenkinson. It was stated that the IGA didn't discuss health problems with the people; that the IGA were "blackening" Dr. Peter Sarsfield's name, in view of the fact that the IGA thought that Dr. Sarsfield's report was highly critical of the IGA; the IGA would not release their financial statement to Dr. Peter Sarsfield when he was conducting the study of health services in Labrador; the IGA was charging the Indian and Native people for dental care, glasses and third-party requests for physical examinations; the IGA dental services were inadequate.
8. Chief Bart Jack suggested that a more detailed study of health services be undertaken at this time by Dr. Peter Sarsfield and three or four Indian and Inuit assistants. The Medical

Services Branch group felt that such a study would not be warranted, in view of the fact that we already had Dr. Sarsfield's report to use as a base line document.

9. The Indian group suggested that the recommendations of Dr. Sarsfield be implemented as soon as possible. It was pointed out that, since the Province of Newfoundland was deeply involved in this matter, discussions with the Provincial health authorities were essential.
10. It was decided to hold a tripartite meeting between the Province of Newfoundland, the Federal Government representatives and Native representatives in the near future, after Dr. Sarsfield's report had been translated into Indian and Inuit languages. We were advised that the Department of the Secretary of State had given the Natives \$10,000 to have the report translated in the two Native languages. The purpose of the proposed tripartite meeting would be to discuss the report and prepare recommendations on a course of action to be taken by the Province of Newfoundland and the Federal Government. This would have the effect of involving the Native people in developing a Federal/Provincial agreement for health services for the Native people of Labrador.

Irrelevant



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GENERAL COMMENTS

The International Grenfell Association is a voluntary agency and is the agent of the Government of Newfoundland, to provide health services in Northern Newfoundland and certain sections of Labrador. The health delivery service this organization has provided is primarily treatment oriented and there is evidence that very little has been done by this organization in public health. There is a Director of Public Health Programs, based at St. Anthony, who is supposed to head up the public health program for the area.

The conduct of the public health program seems to be almost completely divorced from the treatment services. Where there are public health nurses, they are not expected to be involved in any aspect of treatment services, whereas ideally the public health staff and the treatment staff should work hand in glove and interchangeably on a continuous basis.

It is recognized that the IGA, which receives its operational funds from the Province of Newfoundland, has been trying to do the best they can to provide a health delivery service, but one gets the impression that they are working under a very stringent budget.

It was difficult to assess the health status of the various communities since there were no health statistics available. We have to be guided by general observations and comments by the various people that were interviewed. Although our observations, of necessity, were rather superficial in scope, the evidence of our eyes was sufficient to indicate the great need for improved public health services, as well as social and environmental needs of the Native people.

ANNEX 'A'

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DISTRIBUTION OF INDIAN AND INUIT POPULATION
 IN LABRADOR AND NEWFOUNDLAND ISLAND IN 1976
BY SETTLEMENT * INCLUDED IN FEDERAL PROVINCIAL AGREEMENT

<u>INUIT</u>	<u>NATIVE</u>	<u>NON-NATIVE</u>	<u>TOTAL</u>
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Labrador:	Irrelevant		
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INDIAN

Labrador:	North West River	537	500	1,037
	Davis Inlet	<u>244</u>	<u>31</u>	275
		<u>781</u>	<u>531</u>	

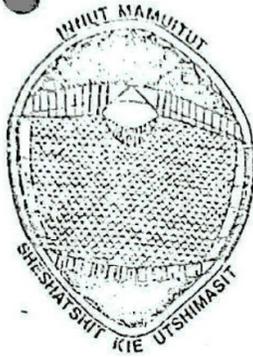
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TOTAL 1,283

*Information obtained from Department of Indian Affairs and Northern Development.

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ANNEX 'C'



NASKAPI MONTAGNAIS INNU ASSOCIATION

POST OFFICE BOX 78
NORTHWEST RIVER, LABRADOR
Tel: (709) 946-8353

April 13/1977

To: Dr Brett, Dr Rath, Dr Hirtle & Dr Waldron

From: The Board of Directors of the Naskapi Montagnais Innu Assoc.

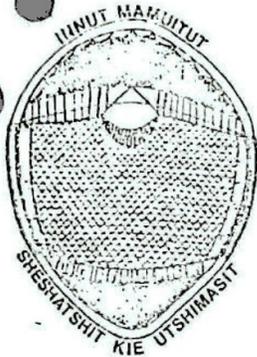
The NMIA had been informed of your visit in a recent letter from the Minister of National Health and Welfare. It is assumed that this visit by NHW senior advisors is in response to the recently submitted Northern Labrador Health Survey.

Several areas of specific concern are felt to be essential and we would be grateful for clarification on these points from your Government:

1. When registration of the Labrador Naskapi Montagnais occurs who will provide health services for Indian/Inuit?
2. If it is to be Medical Services Branch of the Department of National Health and Welfare, will provision of these services be delayed until registration actually occurs, or will they be provided on the 'entitled to be registered' status of Labrador Naskapi Montagnais before that time?
3. Does the Federal Government support the idea of regional and local health councils having executive function? We understand there is precedent for this elsewhere in Canada.
4. Will the Federal Government encourage and aid, financially and administratively, the following:
 - a) International Grenfell Association withdrawal from the role of provider of medical services and Federal Government input.
 - b) Indian and Inuit translators/interpreters and health workers.
 - c) C.H.R. program to be held in Labrador.
 - d) A health clinic for the Indian village of Sheshatshit on the south side of Northwest River.
 - e) Nursing stations for Rigolet and Postville.
 - f) Increased consultant service for Labrador.

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NASKAPI MONTAGNAIS INNU ASSOCIATION

POST OFFICE BOX 78
NORTHWEST RIVER, LABRADOR
Tel: (709) 946-8353

- g) Improved facilities e.g. X-Ray machines, Lab. facilities, incubators, at present nursing stations.
- h) Increased staff complement - Registered nurses.
5. Will the Federal Government aid construction of airstrips, water and sewerage systems, adequate housing, and a garbage disposal system?
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We look forward to your answers to our enquiries,

Yours sincerely

Anthony Penashue
Anthony Penashue, Vice-President
NMIA.

