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Building *Nunavut* Together
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Department of Health
Munaqhiliqiyitkut
Ministère de la Santé

Tobacco Control and Smoke-Free Places Act Review: What We Heard from Nunavummiut

Department of Health
Government of Nunavut
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Table of Contents

Acknowledgements	3
Executive Summary	4
Background	4
Public Consultations Process	6
What We Heard	7
Conclusion	18

Acknowledgements

The Government of Nunavut (GN) wishes to acknowledge all the people, communities, and organizations that contributed their thoughts and personal experiences during these consultations.

Executive Summary

When the *Tobacco Control Act (TCA)* was introduced in 2003, Nunavut was a leader in Canada in tobacco control. However, despite updates to the smoking laws in 2018¹, the Act has remained largely unchanged since 2003, while tobacco control legislation in other jurisdictions has continued to evolve. Partly because of this, tobacco-use rates in the rest of Canada have significantly decreased, whereas Nunavut's tobacco-use rates remain high. In fact, Nunavut's tobacco-use rates are four times higher than the Canadian average.

In November 2018, the Department of Health (Health) began the process of updating its tobacco control legislation as part of its strategy to lower tobacco-use rates. Health proposed a replacement for the *TCSFPA*—the *Tobacco and Smoking Act (TSA)*—that would be better able to reduce tobacco use rates and protect the health of Nunavummiut.

Health received feedback on the new Act through in-person and remote consultations. From February to May 2020, Health staff visited Taloyoak, Gjoa Haven, Rankin Inlet, and Chesterfield Inlet and solicited feedback remotely from Nunavummiut and stakeholders across the territory. In addition to obtaining feedback on the proposed amendments, the consultations also provided an opportunity for Nunavummiut to identify their own priorities for tobacco control.

This report is a presentation of the feedback provided by Nunavummiut during those consultations. That feedback can be categorized into three themes:

1. People want more emphasis on education for adults and parents;
2. People want more emphasis on enforcement; and
3. People are supportive of the proposed amendments.

Every effort has been made to capture the diverse viewpoints provided by Nunavummiut. For clarity, this report does not reflect every comment; rather, it focuses on the most common issues and perspectives that were shared across communities. This information has informed the development of the legislation.

Background

The *TSA* outlines how, where, and by whom tobacco can be used and sold in Nunavut, who is responsible for monitoring tobacco retailers, and what the consequences are for failing to adhere to these regulations. Legislation and regulatory enforcement are part of a comprehensive tobacco control program that supports Nunavummiut through education, community outreach, and tobacco cessation services.

The overarching goals of Health's Tobacco Reduction Program (TRP) are as follows:

- Prevention: encouraging Nunavummiut to never start using tobacco;
- Protection: protecting Nunavummiut from second-hand smoke;

¹ At which time the *TCA* was renamed to the *Tobacco Control and Smoke-Free Places Act (TCSFPA)*.

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- Denormalization: influencing attitudes around tobacco use so that it is no longer considered the norm in Nunavut society; and
 - Cessation/Reduction: encouraging and helping Nunavummiut who want to reduce or quit tobacco.

In October 2018, Nunavut's *Cannabis Act* and the *Cannabis Statutes and Amendments Act* both introduced significant changes to Nunavut's tobacco control legislation in the form of increased no-smoking buffer zones, new smoke-free places, and an updated definition of smoking that includes tobacco, cannabis, and vaping. These were the first changes made to the tobacco control legislation in 15 years, and they were important steps towards reducing tobacco use in Nunavut.

However, more needs to be done Nunavut's tobacco-prevalence rates are high when compared to rates both nationally and globally and keeping legislation up to date is critical to addressing this. Smoking prevalence in Nunavut among those 16 years of age and older is 74%: more than four times the Canadian rate of 16%.² The tobacco-prevalence statistics for Nunavut youth are particularly concerning: 51% of Nunavut youth aged 12-19 smoke, which is more than six times the Canadian rate of 7.7%.³

In addition, youth vaping is a problem that has quickly increased in severity across the country over the last few years. From 2017 to 2019, the number of Canadian youth aged 16-19 who have ever vaped rose to 40.6% from 29.3%. During the same time period, the rates of weekly vaping rose to 12.3% from 5.2%. Finally, the number of Canadian youth vaping more than 20 times a month has jumped from 1.8% in 2017 to 5.7% in 2019.⁴ Although there is no data available on vaping rates in Nunavut, consultation feedback from students, teachers, and health care providers across the territory indicates that vaping is becoming increasingly popular with children and youth.

Any discussion of substance use must also address the social determinants of health. Intergenerational trauma, overcrowded housing and homelessness, food insecurity, and experiencing abuse are all factors that increase the likelihood that someone will use tobacco.

Up-to-date legislation is an important tool to help lower Nunavut's tobacco use rates and protect people's health. To decrease the tobacco-use rates in Nunavut and regulate vaping products, Health drafted the *TSA*, which can be organized into four themes:

² These statistics (74% and 16%) are taken from two different surveys: the LQAS Health Survey and the Canadian Community Health Survey (CCHS), respectively. Although the CCHS does measure smoking rates across Canada, including Nunavut, the LQAS methodology leads to more accurate sampling. For example, the LQAS surveys Nunavummiut in person and in their preferred language, while the CCHS does so over the phone and in English and French. The LQAS results are also in line with the latest Inuit Health Survey; Canadian Community Health Survey, 2018; LQAS, 2016.

³ Canadian Community Health Survey, 2014.

⁴ Hammond, Rynard, and Reid. 2020. "Changes in Prevalence of Vaping Among Youths in the United States, Canada, and England from 2017 to 2019," *JAMA Pediatrics*. Accessed July 2, 2020. doi:10.1001/jamapediatrics.2020.0901

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1. Protect Nunavummiut from second-hand smoke;
 2. Prevent people, particularly children and youth, from using tobacco;
 3. Reduce the visibility of tobacco products; and
 4. Regulate emerging products.

Public Consultations Process

In compliance with article 32 of the Nunavut Agreement, Health consulted with Nunavummiut on the development of the *TSA*. Health solicited feedback through two avenues:

- In-person consultations via townhall and stakeholder meetings with Elders, students and youth, school staff, health care professionals, health and wellness workers, hamlet office staff, and tobacco retailers; and
- Remote consultations via e-mail, telephone, telehealth, call-in radio shows, and comment cards.

Health also collected unsolicited feedback through the public responses to online news stories.

Health invited Nunavut Tunngavik Inc (NTI) to participate in the consultations. Representatives from NTI provided feedback on the consultation plan but were unable to join the in-person consultations.

The consultations had several objectives:

- Encourage Nunavummiut and stakeholders to provide feedback on the *TSA*;
- Encourage Nunavummiut and stakeholders to identify their own priorities for tobacco control;
- Ensure that the *TSA* supports priorities in the government mandate and reflects Inuit Qaujimajatuqangit principles and Inuit societal values; and
- Solicit feedback on changes to smoking laws introduced through consequential amendments in Nunavut's *Cannabis Act* and the *Cannabis Statutes and Amendments Act* in 2018.

In February 2020 Health began the consultations, which were scheduled to take place in three waves:

1. February 10-14, 2020: in-person consultations in the Kitikmeot (Cambridge Bay, Taloyoak, Gjoa Haven);
2. February 24-28, 2020: in-person consultations in the Kivalliq (Rankin Inlet and Chesterfield Inlet) and in Qikiqtarjuaq; and
3. March 2020: townhall in Iqaluit and remote consultations across Nunavut.

Because of severe weather in Cambridge Bay and the passing of a community member in Qikiqtarjuaq, those consultations had to be cancelled. The initial plan was to re-schedule the meeting in Qikiqtarjuaq, however the outbreak of COVID-19 in March 2020 prevented Health from rescheduling and holding a townhall meeting in Iqaluit.

Despite these unexpected events, efforts to consult with Nunavummiut and stakeholders remotely continued as planned. The following stakeholders were reached remotely before and during the pandemic:

- All Government Liaison Officers (GLOs) and Community Health Representatives (CHRs) received pre-paid envelopes with consultation documents and comment cards. Nunavummiut could fill out a comment card, and GLOs/CHRs would mail all feedback to the TRP. This option was outlined in every public communication effort;
- A public service announcement (PSA) outlining consultation dates and methods for submitting remote feedback was sent to all GN employees;
- CHRs went on the radio and outlined consultation dates and methods for submitting remote feedback;
- Health emailed various stakeholders including:
 - Regional Wellness Program Coordinators (to share with their networks);
 - Department of Education (to forward the request to education staff);
 - Ilisaqsivik Society;
 - All the TRP's consultants and partners, including Atiigo Media, Argyle/Context, the Canadian Cancer Society, and Cancer Care Ontario;
 - All Health staff, including CHRs, mental health staff, Environmental Health Officers (EHOs), and members of the tuberculosis team;
 - Director of Pharmacy Operations, Northwest Company;
 - The Senior Coordinator for Health Programming in Arctic Bay, Baker Lake, Clyde River, and Sanikiluaq;
 - The Recreation Coordinator and Director of Healthy Living in Cambridge Bay;
 - Senior Administrative Officers (SAOs) and Mayors; and
 - GN Deputy Ministers (to share with their networks).

What We Heard

Health received a substantial amount of feedback during the consultations, which can be organized into the three following categories: education, enforcement, and support for proposed amendments.

1. Education

It quickly became clear during the consultations that Nunavummiut want Nunavut's tobacco-use rates reduced. Tobacco is deeply personal and causes strong emotions for a lot of Nunavummiut. Many individuals expressed that they are tired of walking through clouds of second-hand smoke, of seeing friends and family sickened by tobacco-related disease, of cigarette butts polluting their land, of seeing parents buy tobacco for their underage children, and of watching others struggle with a lifelong addiction to nicotine. This feeling towards tobacco was woven through almost all the feedback Health received.

“As a non-smoker, I hate trying to get into the [grocery store] while people stand under the ‘no smoking sign’ by the front doors smoking their cigarettes.”

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- Remote feedback

“How many children suffer second-hand smoke that blows right in their face because their parent is smoking?”

- Remote Feedback

“They [cigarette butts] are actually poisons that are being released by individuals in the environment.”

- Remote feedback

“Even parents are buying their underage kids snuff. It’s us parents who provide to our kids.”

- Elder

“I want to share what I experienced as a smoker. It affects your health. I’m supporting the tobacco reduction program [...] I don’t want my fellow people to go through what I have experienced. It is very hard. I’ve quit and I am tobacco-free now. My health is getting better.

- Elder

“The smell of smoke is bad inside GN [subsidized housing] units [...] Smoke often seeps in through the washroom fans/vents.”

- Remote

In the spirit of reducing tobacco-use rates, participants from every stakeholder group suggested focusing more on education. They noted that tobacco use in Nunavut is normalized, and the primary goal of education is to highlight that this taken-for-granted behaviour is addictive and harmful and that there are supports available to quit.

“Educating children about the risks associated with using tobacco products starting at a young age may be appropriate considering the young age many youth start using these products.”

- Remote feedback

“Education is key; the objective is compliance [with laws that protect others from second-hand smoke], not prosecution.”

- Remote feedback

Some community members went into greater detail about the kinds of education programming they would like to see:

“Associate the cost of 1 pack a day with images of the following:

1 week = \$175. Maybe show a picture of a shopping cart full of healthy food, or 25 gallons of gas, or something like that

1 month = \$700. Maybe show a large flat screen TV. Or a Remington rifle

1 year = \$8,400. Maybe show an ATV or snowmobile

10 years = \$84,000. Cost of a tiny home or a few boats or a few trucks.”

- Remote feedback

However, most of the feedback on the need for more education was specific to adults providing tobacco to youth and smoking while pregnant or while carrying a baby in an amauti:

“Community based education geared towards parents, for example at Head Start programs, radio campaigns, at community events, etc. could be helpful in decreasing the number of parents providing tobacco products to their children, thereby decreasing the number of youth who start smoking.”

- Remote feedback

“Need more education for pregnant women to encourage quitting.”

- Remote feedback

“Young people smoke and drink alcohol. They should be taught how to be healthy when they are having baby [...] How would you tell them about smoking during pregnancy?”

- Townhall meeting

Participants also highlighted a need for more education on the effects of cannabis use:

“More work to be done to spread the message that cannabis should also be smoked outside the house.”

- Health care professional

“Big problem is weed, especially since it became legal. People have the mentality that they can just do it anytime, anywhere. If someone was looking for help with cannabis, who do they even call? Where do we get help?”

- Hamlet staff

Many participants were concerned about youth tobacco use and exposure to second-hand smoke and stressed the need for Health to focus more attention on educating adults about the harms of youth tobacco use, smoking while pregnant, and giving tobacco to minors. Participants, especially health care professionals, also highlighted the importance of providing more education on the effects of cannabis use.

2. Enforcement

While Nunavummiut are supportive of more education on the health effects of tobacco use, there was also a clear demand for more enforcement, particularly in the townhall meetings and remote feedback. Indeed, one recurrent theme in this feedback was frustration with the perceived lack of enforcement of tobacco-related legislation:

“I have never seen anyone enforce smoking rules. Do they actually hand out tickets or fines or do anything at all ever when it comes to these buffer zones?”

- Remote feedback

“If enforcement is not full time, then how will people change their smoking habits? What’s the point if we want to change the law but we don’t have anybody to enforce it?”

- Townhall meeting

“When I was in the manager position [at a retailer], I was diligent—I was doing my best to train my staff on the rules around smoking, but there was no payoff really. I didn’t see any signs of enforcement.”

- Townhall meeting

Other participants expressed their belief that smoking laws would be difficult to enforce or pointless to enact because tobacco use in Nunavut is so normalized:

“Community members might be a bit cynical about new rules being put in place when their communities are having a hard time complying with the current rules.”

- Remote feedback

“Enforcement can be difficult because as soon as people are out of sight they will start smoking on their Ski-Doo, ATV, etc.”

- Elder

“It’s hard to imagine how you would enforce a smoking ban on ATVs, snowmobiles, and boats. Who would enforce it?”

- Remote feedback

Several participants recognized the importance of combining education and enforcement:

“You could go with a tiered approach to enforcement, where people who break smoking laws are given a choice:

- 1. Go to a health centre to learn about smoking cessation and tobacco control;*
- 2. Volunteer at a community event;*
- 3. Pay a monetary fine.”*

- Remote feedback

“We need enforcement officers with the high rate of smoking in Nunavut to enforce and educate Inuit.”

- Remote feedback

“[Enforcement officers] should have capacity—not necessarily ticketing, but education.”

- Remote feedback

“It would help that enforcement officers were in the community full time so they can also educate people on tobacco.”

- Townhall meeting

“I believe that hiring the [enforcement] officer—at least temporarily until it’s denormalized—would help.”

- Townhall meeting

3. Support for proposed amendments

Overall, participants from all stakeholder groups were strongly in favour of the proposed amendments, which is consistent with the fact that participants generally supported reducing Nunavut’s tobacco-use rates.

“Hope it [the new legislation] comes into force soon.”

- Remote feedback

“Good going, would be great to see that number [tobacco-prevalence rate] severely reduced.”

- Remote feedback

“I agree with all the proposed changes in general and think they should be implemented in full.”

- Remote feedback

“Overall I think the regulations are a great step in the right direction.”

- Remote feedback

Below is feedback specific to the proposed amendments.

Amendment 1) Protect Nunavummiut from second-hand smoke

This theme included proposals to make a number of GN public housing units smoke free and prohibit smoking in vehicles with people under 19 years old. These proposals generated the most feedback. The feedback received was strongly supportive and similar to the feedback provided at the consultations for cannabis legalization in 2018.

“It’s a good idea [to ban smoking in GN public housing] as it is better to smoke outside.”

- Elder

“Even on a skidoo or ATV, second-hand smoke can affect kids.”

- Elder

“[...] banning smoking in vehicles with kids would help protect people from second-hand smoke.”

- Youth

“GN public housing units should be smoke-free.”

- Youth

“As is the case in most of the world, smoking should be outlawed in all NHC units, be it social housing or staff housing.”

- Remote feedback

Some participants, while supportive of the smoking ban in public housing, noted that the GN would need to be careful to avoid harming people in the process:

“Start with some number and grandfather in existing tenants.”

- Remote feedback

“Makes sense as long as it isn’t to punish people but to give people the option of a smoke-free home.”

- Hamlet staff

These comments offer important insight. While tenants have a right to enjoy their home without being exposed to a neighbour’s second-hand smoke, Nunavut’s housing crisis and high levels of poverty mean evicting tenants—or even levying fines—for smoking in their units could be harmful.

Other participants questioned the GN’s capacity to enforce a ban on smoking in vehicles with minors, even if they were not necessarily opposed to the idea:

“Great ideas but enforcement piece is going to be tough.”

- Health care professional

“It’s hard to imagine how you would enforce a smoking ban on ATVs, snowmobiles, and boats.”

- Remote feedback

“Although the rule around not smoking in vehicles with those under 19 is working in many jurisdictions, I’m not sure who will attempt to enforce the rule.”

- Remote feedback

However, support for these proposed amendments was not universal:

“[This is] going too far. The GN is a public entity and the facilities that they run must be barrier free [...] this could cause people to feel bad or shameful about themselves.”

- Hamlet staff

“Some people smoke in their house, we can’t tell them to quit smoking.”

- Elder

“I don’t think that there should be a ban on open vehicles like snowmobiles or four-wheelers. Feels as though people are at risk of exhaust fumes and that it does not make sense to ban smoking on these types of automobiles.”

- Hamlet staff

Amendment 2) Prevent people, particularly children and youth, from using tobacco

Feedback on the proposed amendments to ban the sale of flavoured chew tobacco and the use of chew on school property was very supportive across all demographics and stakeholder groups. Most respondents noted that the high chew tobacco-use rates among children and youth are evidence that measures like the ones proposed are needed:

“Chew is big in [our community], especially among young people. See it all the time among young females.”

- Health care professional

“Chewing tobacco is very popular, especially among teenagers and athletes.”

- Health care professional

“There shouldn’t be chew in the schools because the kids spit it everywhere.”

- Elder

“Kids smoke tobacco because of the flavour. It boomed big time when the flavoured tobacco came.”

- Townhall meeting

“It would help if we got the flavoured snuff off the shelf, because even young girls are into chew.”

- Townhall meeting

“Taking away flavours would definitely help in not getting another generation addicted to tobacco.”

- Hamlet staff

“Agree that it [flavoured chew] is attractive and acts as easy first step.”

- Youth

“Young kids want the flavoured chewing tobacco. We should ban all flavours.”

- Elder

Most store managers noted that they no longer sell flavoured chew, sometimes for moral reasons, but largely because Co-Op and the North West Company do not stock the products nationally. However, this does not mean other retailers in Nunavut are not selling flavoured chew. Yet, even in communities where flavoured chew is not available for sale, young people are still finding ways to access it:

“There is also the problem with mail order chew.”

- Townhall meeting

“People are definitely getting chew from the mail.”

- Hamlet staff

Respondents had little feedback on the proposal to grant EHOs the capacity to revoke a tobacco retailers licence for committing infractions, like selling tobacco to minors. Other than offering support for that proposed amendment, a few Elders noted that parents supplying tobacco to minors will remain an issue:

“Also, sometimes as parents we buy tobacco to our children even if they are underage.”

- Elder

Several respondents also suggested employing “secret shoppers”—minors posing as adults and trying to buy tobacco—to see which retailers are not following the law:

“[...] use sporadic but regular local enforcement (secret shoppers small fines like even \$10 or \$20) to scare people into following the laws.”

- Remote feedback

“If not already implemented then do secret shopper or more secret shopper type systems to check that these locations follow rules and do not sell to minors. Then if they do not pass suspend licenses for those locations and enforce it.”

- Remote feedback

Finally, one respondent suggested that retailers should not be permitted to deliver tobacco because it reduces the likelihood that the customer will be required to present identification:

“Not allow places with delivery to sell tobacco products as the drivers do not check or care of legal age of the buyers.”

- Remote feedback

Amendment 3) Reduce the visibility of tobacco

The proposals under this theme received nearly unanimous support. Regarding the proposed ban on tobacco price advertising signs, only store managers offered feedback. They noted that these signs were either against company policy or that they believed they were already illegal.

While Health did not expect opposition to the removal of price advertising signs, the removal of health warning signs is less intuitive and had the potential to meet resistance. However, across the board, respondents were receptive to the “out of sight, out of mind” logic behind the proposal—that these signs can actually encourage people to purchase tobacco by putting tobacco use into the foreground:

“Very supportive of these measures. Support the out of sight out of mind approach. See how this could be especially impactful for children.”

- Health care professional

“As someone who smokes, warning signs don’t help at all.”

- Hamlet staff

“I understand how they could trigger cravings.”

- Store manager

“If they didn’t see the signs, they wouldn’t remember to buy cigarettes.”

- Elder

Several respondents also expressed frustration with colleagues taking smoking breaks during work hours:

“As a GN employee, I feel that smoking is almost encouraged in our workplace culture. There is no control over it. People taking one or two smoke breaks per hour can easily amount to thirty annual days per year in lost time and productivity. As a non-smoker, I see smokers getting an excuse to leave the office on a regular basis, with no repercussion.

I see two options that could be introduced in upcoming policy changes:

- 1. Ensure supervisors are enforcing a “smoking during coffee breaks only” policy; or*
- 2. Reward non-smokers, who are not wasting hundreds of hours per year on smoke breaks, with additional annual days.”*

- Remote feedback

“Increase non-smokers annual leave credits or decrease smokers annual leave credits since they spend number of hours smoking all together in one-year period.”

- Remote feedback

“No more smoking during working hours.”

- Remote feedback

Amendment 4) Regulate emerging products

This theme includes prohibiting flavoured herbal shisha and regulating vaping products. Elders, health care professionals, townhall participants, and store managers were largely supportive of Health’s proposal to regulate vaping products:

“Regulations are a great step in the right direction, especially around emerging products and limiting the concentration of nicotine in these products.”

- Remote feedback

“Vaping should be banned or regulated as it can be more tempting to youth with flavoured products.”

- Remote feedback

“19 is the best age [better than the existing age of purchase of 18]. Also, it’s good to ban all flavours.”

- Elder

“Flavours have a big influence, kids want that. Flavours are added to tobacco, alcohol, etc.”

- Elder

“Vaping should be banned. Is there a certain amount of nicotine they can sell per package?”

- Townhall meeting

“I hope we never sell them in stores here in [our community].”

- Anonymous

“Vaping has become a major problem in schools, as young as grade 9 and 10.”

- Health care professional

Store managers were also aware of the danger posed by vaping and were happy to forgo potential sales in favour of protecting the health of Nunavummiut:

“They’re just another addictive substance.”

- Store manager

“I believe vaping is dangerous.”

- Store manager

This position from store managers is consistent with retailers’ decision across the territory to voluntarily stop selling vaping products until new regulations are in force after the Chief Public Health Officer sent them a letter in November 2019 outlining the risks of vaping.

Although vaping is becoming more popular in Nunavut, it does not appear to be as prevalent as it is in the rest of North America. Respondents offered a few insights into why this might be:

“I think that money keeps vaping from being a bigger issue at school—kids simply can’t afford them.”

- School staff

“Smoking is still very normalized in [our community]; as a result vaping hasn’t broke through. Regulation would help keep it that way.”

- Health care professional

While the proposed regulations received strong support and people believed it would be a good step towards keeping vaping rates in Nunavut under control, feedback from youth and school staff indicate highlight the need for more education:

“Vaping is better than smoking.”

- Youth

“We don’t [...] mind the tobacco flavour and will order the flavours from down south.”

- Youth

“I get people to order my pods from down south.”

- Youth

“People buy vapes online and bring them [to Nunavut] from down south.”

- School staff

Not all feedback on the vaping amendments was supportive:

“Disagree with the proposals to prohibit advertising of vaping products, to ban flavours in vaping products and to limit the concentration of nicotine in vaping products.

The potential for vaping products to contribute to tobacco harm reduction will be constrained if smokers are unable to learn about these products or have difficulty accessing them, or if features of the products themselves are unduly restricted.”

- Imperial Tobacco

“I think it’s a huge mistake to make regulated vaping products inaccessible or less accessible to Nunavummiut [...] Regulated vaping products are demonstrably safer [...] than cigarettes [...] vaping removes the impacts of second-hand smoke which protects children and people in multi-family residences.

A single 5% nicotine concentrated Juul pod, which has the same amount of nicotine as a pack of cigarettes and takes the average consumer 1-2 days to consume, costs approximately \$5.50. This is a 75% reduction in cost which is vital to low income families who would otherwise prioritize cigarettes over more important purchasing.

Please focus on harm reduction, and not a reactive campaign against anything tobacco. It is insanity to ban Juul products because of their health impacts but continue to sell cigarettes [...] banning the sale of regulated vaping products forces people to buy unregulated and potentially dangerous products online which creates more harm. People have the right to make stupid decisions, but let’s make it easier for them to make the less stupid decision.”

- Remote feedback

However, it should be noted that in the past, the tobacco industry resisted any efforts to make tobacco less accessible and reduce tobacco use rates.

Conclusion

Tobacco affects most people's lives in Nunavut, and the feedback obtained during the consultations shows that Nunavummiut are largely supportive of a variety of efforts to reduce prevalence and harms of tobacco. In addition to informing the development of the new Act, the findings from this report will be used to improve existing efforts in education and programming. The conclusions drawn from this feedback are as follows:

1. People want more emphasis on education for adults and parents

Nunavummiut were concerned with adults supplying tobacco to minors and parents smoking around their children. These community members highlighted how harmful tobacco use and second-hand smoke are and hope to see education initiatives that make those harms clear. Education is an important piece of Health's tobacco-reduction approach, and this feedback will guide future initiatives.

2. People want more emphasis on enforcement

Several community members said they dislike having to walk through second-hand smoke in public and think the existing smoking laws should be more strongly enforced. This sentiment was also common during the consultations on cannabis legalization in 2018. The creation of a stronger enforcement system is a priority for Health with the new legislation.

3. People are supportive of the proposed amendments

The feedback received during these consultations showed that the majority of Nunavummiut strongly support the additional measures Health wishes to implement to better protect Nunavummiut's health. Some respondents offered suggestions and alternatives, which were insightful and sensitive to the socio-cultural conditions in Nunavut. While Nunavummiut were for the most part supportive of the proposed changes, it is important for Health to adopt a nuanced approach to ensure the range of perspectives that were shared with the Department are reflected in the legislation.