

Aboriginal Health Research News

Message from Dr. Malcolm King, IAPH Scientific Director



Farewell to Paul Bélanger

It is with much regret that I announce the departure of Mr. Paul Bélanger, Assistant Director (Ottawa) of IAPH. Paul was with IAPH from November 2011 until

the end of January this year. During this time, he continued to serve the Institute of Nutrition, Metabolism and Diabetes as its Assistant Director. From the early development to the rollout of its components, Paul very capably co-managed the Pathways to Health Equity for Aboriginal Peoples Signature Initiative – CIHR's major commitment to addressing the health inequities faced by First Nations, Inuit and Métis Peoples. Paul also managed the development of our new Institute Strategic Plan, as well as the launching

of a number of IAPH initiatives including our Indigenous Mentorship Network Program.

Paul has taken on a position with the [Office of Research Management Services](#) at the University of Ottawa. Chi Miigwech, Paul.

Jacques Dalton has assumed the role of Assistant Director in Ottawa until the reorganization of Ottawa CIHR staff, which will occur on July 8, 2015.

IAPH's Strategic Plan 2014-2108

IAPH is pleased to announce CIHR approval of our 2014-2018 Strategic Plan, "Wellness, Strengths and Resilience of First Peoples: Moving Beyond Health Equity". With this approval, IAPH will soon publish the Strategic Plan to our website, and continue operationalizing the strategic directions and mechanisms of the Plan. Over the coming years, IAPH will continue to support Indigenous peoples and communities in driving Indigenous health research and knowledge

translation, which will transform Indigenous health research through Indigenous Ways of Knowing and Two-Eyed Seeing, and will play an integral part in moving beyond the concept of health equity to fully realize wellness, strengths and resiliency of Indigenous peoples. Through these directives we will play a significant role in ensuring Indigenous researchers, Peoples and communities are informed, educated and empowered to drive appropriate health research and transform health.

The **three main strategic directions** of IAPH are:

1. First Peoples and Communities Driving First Nations, Inuit & Métis Health Research and Knowledge Translation
2. Transforming First Peoples' Health through Indigenous Ways of Knowing
3. Wellness, Strength and Resilience for First Peoples: Moving Beyond Health Equity

DID YOU SEE IT?!



NHL hockey player Jordin Tootoo talks to CIHR about his family's experiences with mental well-being and resilience

Learn more about the [Circumpolar Mental Wellness Symposium](#), an initiative of the Arctic Council Sustainable Development Working Group.

Catch [Jordin's video](#) about his own experiences with mental well-being and resilience.

CHECK IT OUT!

MNP's OPERATION BLUE SKY: Aboriginal Health Initiative

MNP, LLP has [partnered with HeroX](#) for a new ideation challenge which is designed to improve the health and wellness outcomes within Aboriginal communities.

They are inviting innovators who are compelled to help make the world a better place by identifying solutions to reduce the health inequities of Indigenous peoples. They are offering \$35,000 in prizes to be awarded for creating actionable strategies that address this growing issue. [The challenge](#) is open from March 11, 2015 and closes on August 12, 2015.



MENTORSHIP/TRAINEE CORNER

Inaugural IAPH New Investigator Meeting to take place in Kelowna, June 6-7

As a “kick-start” to an important aspect of our Indigenous Mentorship program, IAPH will be holding a New Investigator workshop in Kelowna, June 6-7. This will immediately precede our spring Institute Advisory Board meeting, and take advantage of the talents of a number of our board members, past and present. The object will be to provide mentorship and guidance to

new investigators who are at the stage of being eligible to apply for CIHR grant funding, but not yet having achieved a major grant of their own. The primary objective of this New Investigator meeting is to provide practical information that will assist Indigenous New Investigators, and New Investigators evidencing Indigenous Ways of Knowing or Two-Eyed Seeing, in strengthening

their research careers. Sessions will focus on grant application and review, community-based research, knowledge translation, and community engagement. Many thanks to all who have agreed to take part in this important capacity development exercise. For more information about this workshop, please contact Jeff LaPlante at jlaplant@sfu.ca.

Lived Aboriginal Experience and First Nations, Inuit and Métis Identity

IAPH targets research funds towards increasing the number of health researchers of First Nations, Inuit and Métis (FNIM) ancestry in our strategic funding opportunities. In order to accomplish this, the phrase “lived Aboriginal experience” is used by CIHR in funding opportunities such as the Priority Announcements on Aboriginal Ways of Knowing and Applying the ‘Two-Eyed Seeing’ Model to determine eligibility. The primary intent is to increase the number of First Nations, Inuit and Métis applicants funded in these opportunities, while recognizing that non-FNIM applicants may also meet this requirement through special circumstances as described below.

IAPH considers “lived Aboriginal experience” to be a quality demonstrated by First Nations, Inuit and Métis individuals that are connected with their

community. For non-FNIM people, this experience may be acquired through circumstances such as close relationships and experience with FNIM peoples, living an extended period of time (e.g., 5 years or more) on a reserve, in a Métis or Inuit community, or through similar experience with other Indigenous peoples – e.g., Pacific Islanders, or South American Indigenous peoples.

Applicants are required to indicate “lived Aboriginal experience” to demonstrate their close working relationship with Aboriginal communities and/ or organizations, and finally, describe how their “lived Aboriginal experience” will enhance their approach to research. Failure to include this information will result in being considered inadmissible to these particular funding opportunities. This is done on the Relevance Form portion

of the application.

IAPH is taking this opportunity to reiterate the importance that all applicants indicate their First Nations, Inuit and Métis and/or “lived Aboriginal experience”. When reviewing applications to funding opportunities, we often see applicants omit information about their “lived Aboriginal experience” and sometimes their First Nations, Inuit or Métis identity. The significance of including this information is crucial, as it ensures IAPH is contributing to increasing numbers of FNIM peoples as researchers in Indigenous health and instills faith and trust in IAPH research networks that we are working towards our goals and reflecting our mandate and objectives.

Pathways to Health Equity for Aboriginal Peoples: Implementation Research Teams

Pathways has now begun its full suite of programs with the initiation of a cohort of 9 Implementation Research Team Component 1 grants (IRT1), along with a cohort of 12 Implementation Research Team Component 2 Letters of Intent (IRT2 LOI). [The full applications for Component 2 are due this coming September 15.](#)

As a reminder, **Component 1 team development grants** support research teams to identify promising or effective population health interventions and build relationships with First Nations, Inuit, and/or Metis communities; and

Component 2 enhancement and adaptation grants support research teams aimed at strengthening the effectiveness or scalability of population health interventions through community-informed enhancements or adaptations.

Component 3 scalability grants (yet to be launched) will support research teams to study the scale-up of promising population health interventions across heterogeneous communities and contexts.

Both IRT C1 and C2 launches were very competitive. Congratulations to

those who succeeded in receiving funding, and thanks to all those who submitted applications. Pathways is an ongoing process – Component 1 leading to Component 2, and ultimately to Component 3, designed to roll out in another 2-3 years. Although these initial funding decisions have been made, there are still opportunities to join the Pathways process. To those whose worthy IRT applications did not succeed in the recent competition, we would particularly suggest that you explore the CIHR website’s [Funding Decision Notifications](#) and consider getting in touch with one or more of the teams who did receive IRT funding. Remember, Pathways Component 1 is intended as a team building and engagement exercise, and at the end of the 12-18 month process, the IRT1 teams are expected to develop IRT2 applications. Further, the IRT2 LOIs are still in an active development stage. These next months represent an opportunity for the enhancement of team building, and the development of additional partnerships as the research teams work their way towards the scale-up goals of Component 3.

Please look for a report on our inaugural Pathways Annual Gathering, which took place in Ottawa March 23-25, in our next newsletter.

Assembly of First Nations' First Nations Mental Wellness Continuum Framework

On January 28th, 2015, the Assembly of First Nations officially and publicly released the *First Nations Mental Wellness Continuum Framework*. The Framework was unanimously endorsed and ratified at the AFN Annual General Assembly in July 2014. Development of the Framework was guided by the First Nations Mental Wellness Continuum Advisory Committee, in partnership with the AFN and Indigenous Mental Health Leaders, and involved a wide range of regional and national First Nation health and wellness networks, regional engagement sessions with First Nations, a strategy session with First Nations leadership, a national gathering, and a federal discussion session.

The First Nations Mental Wellness Continuum Framework identifies ways to enhance service coordination among various systems and support culturally safe delivery of services. The Framework is comprised of numerous layers and elements and includes health system supports like governance, research, workforce development, change management, self-determination, and performance measurement. The foundation of the Framework is culture and at its centre is the interconnection between mental, physical, spiritual and emotional behaviour. Key themes of the Framework include Community Development and Ownership, Quality Health System and Competent Service Delivery, Collaboration with Partners, and Enhanced flexible funding investments.

The overarching goal of the Framework is to improve mental wellness outcomes for First Nations by describing how programs can be more cohesive and effective within a comprehensive mental wellness system for First Nations. A continuum of care forms the basis for this system and the Framework guides communities to better plan, implement and coordinate their mental wellness programs and services based on their own priorities.

"We know that community solutions are the key to our success and we know that First Nations cultures must be central and foundational to addressing substance use issues and promoting wellness for individuals, families, and communities," said Assembly of First Nations Ontario Regional Chief Stan Beardy who leads the efforts on the AFN National Executive in the area of health. "First Nations people are taking our health into our own hands, but achieving the envisioned continuum of mental wellness will require sustained leadership, commitment and collaboration by all parties. We look forward to continued leadership and support across the continuum of care and among provincial, federal and territorial programs."

For more information on the First Nations Mental Wellness Continuum Framework, [please visit the AFN website](#).

Funding Results

Team Grant: Boys' and Men's Health - Advancing Research to Improve Boy's and Men's Health

On behalf of the partners for this Initiative - CIHR Institute of Gender and Health; Ontario HIV Treatment Network; Canadian Foundation for AIDS Research; HIV/AIDs Research Initiative; Public Health Agency of Canada; and CIHR Institute of Aging - IAPH would like to congratulate the successful applicants on their success in the "Team Grant: Boys' and Men's Health - Advancing Research to Improve Boy's and Men's Health" competition. The funded applications were published last fall on the CIHR website.

The purpose of this Team Grant is to support teams of experts composed of health researchers and knowledge users to conduct research to address health challenges affecting boys and men. This funding opportunity requires close collaboration between researchers and knowledge users to facilitate effective translation of the knowledge to be generated into programs, interventions, and evidence-informed policy decisions.

IAPH is delighted to see the range of study that will be conducted through this initiative, including **Janice Bailey's team (U Laval) "Father's lasting influence: Molecular foundations of intergenerational transmission of the paternal environment"** which will assess abnormalities due to organochlorine exposure among Inuit populations, who have a

high body burden of environmental contaminants through air, water, soil, and food, which may contribute to the major health disparity between them and non-Aboriginal Canadians.

Moving forward on one of the key requirements in the Funding Opportunity, annual meetings of funded teams, planning with collaborators for the first annual meeting will begin in early 2015. This meeting and those following it will provide the foundation for ongoing networking and knowledge exchange among funded teams, and will facilitate the development of a meaningful evaluation plan for the Boys' and Men's Health Research Initiative.



Project Profile

Research Chair in Substance Abuse Releases Products Brochure

Last fall, to mark National Addictions Awareness Week, the office of the University of Saskatchewan Research Chair in Substance Abuse released its products brochure highlighting a variety of educational materials and tools directed at front-line addiction service providers in Saskatchewan and elsewhere. The on-line version of the products brochure is available on the [Addiction Research Chair's website](#) and workshops, fact sheets, videos, posters and publications are all available free of charge on the website.

A brochure highlighting the outcomes of studies undertaken by the Research Chair is now available and it will be delivered to all front-line addictions workers in Saskatchewan and ultimately shared with a wider audience. Outcomes of studies are shared through a variety of formats like music videos, recipes, posters and community workshops, and offer evidence-based support and encouragement for service providers in the substance abuse workers field in Saskatchewan and across the country. Everything is available for free download on the website.



CIHR News

CIHR Strategic Plan 2014/15 - 2018/19

The Canadian Institutes of Health Research (CIHR) are proud to announce the publication of their [new Strategic Plan](#) and [companion brochure](#).

[Health Research Roadmap II: Capturing Innovation to Produce Better Health and Health Care for Canadians](#) (Roadmap II) builds on Canada's reputation as a world leader in health research excellence, and embraces new ways of working with partners and stakeholders through a dynamic framework for research investment. It sets three strategic directions that will enable CIHR to provide researchers with the freedom and autonomy to pursue new ideas, mobilize research communities to focus on health priorities that are relevant to Canadians, and maximize the value and impact of its investments.

IAPH would like its community to pay particular attention to Research Priority B (under Strategic Direction 2), which is "Health and Wellness for Aboriginal Peoples". It acknowledges the long-standing gap in health status between Aboriginal and non-Aboriginal peoples in Canada and reinforces CIHR's commitment to supporting the health and wellness goals of Aboriginal peoples through contributions to evidence-informed, culturally sensitive, health and social policies and interventions.

If you would like print copies, please do not hesitate to contact Caroline Kay, CIHR's Publications Production Coordinator, at 613-957-6136, or publications@cihr-irsc.gc.ca.

Discover Canada's largest research platform on aging and health

The first major data release from the Canadian Longitudinal Study on Aging (CLSA) is underway. The CLSA data provide an opportunity for research into the many interrelated determinants of health, as well as conditions such as diabetes, obesity and depression. The longitudinal data will also allow researchers to explore the impact of non-medical factors, such as social and economic changes, on health outcomes from mid-life to older age.

For more information, or to apply for access, visit www.clsa-elcv.ca.

The **CIHR Institute of Aboriginal Peoples' Health** fosters the advancement of a national health research agenda to improve and promote the health of First Nations, Inuit and Métis peoples in Canada, through research, knowledge translation and capacity building. The Institute's pursuit of research excellence is enhanced by respect for community research priorities and Indigenous knowledge, values and cultures.

Ethics in Research: A Science Lifecycle Approach

The workbook "[Ethics in Research: A Science Lifecycle Approach](#)" consisting of a Knowledge-to-Action/Ethics framework and a series of scenarios where an ethics lens is applied and discussed is now available on the CIHR website.

This material is intended to fill an educational void by assisting young and senior investigators to develop the skills and attitudes that will help to identify and address ethical issues inherent in their work throughout the research life cycle.

The KTA-E kit goes beyond issues related to human subject protection and offers an interactive open-ended scenario-based approach that can be adapted to those circumstances where other supporting material is lacking.

Two video captures are already available and a webinar is in the works.

- [video capture of an event at Western University](#)
- [webcast on ethics in research](#)

Because of the dynamic nature of health research, unexpected ethical challenges continually arise; users will therefore be able to offer feedback on current case studies and propose new scenarios through the dedicated email: ethicsedu@cihr-irsc.gc.ca to ensure the continuing relevancy of the Workbook.

CONTACT US

[Malcolm King, PhD, FCCP](#)
Scientific Director

[Jeff LaPlante](#)
Institute Project Officer

[Cynthia Stirbys](#)
Assistant Director - Burnaby

[Mélanie Bergeron](#)
Project Officer

[Jacques Dalton](#)
A/Assistant Director - Ottawa

[Nicole Manson](#)
Finance & HR Manager

[CIHR-IAPH Website](#)