A Newsletter from the CIHR Institute of Aboriginal Peoples’ Health

Aneen. The past few weeks have been rather eventful: the Truth and Reconciliation Commission of Canada held BC Reconciliation Week in Vancouver; the First Nations Health Authority has commenced operations in BC; and the online edition of the new International Journal of Indigenous Health, formerly the Journal of Aboriginal Health (JAH), was launched. In my opinion, when one steps back and looks at these events collectively, it is difficult to not be utterly impressed with what is happening in British Columbia and the rest of Canada.

The Truth and Reconciliation Commission of Canada (TRC) held the BC Reconciliation Week from September 16 – 22, 2013, here in Vancouver. IAPH staff Nicole Manson and Jeff LaPlante attended two days of events at the Pacific National Exhibition, taking particular interest in the Panels: “Be the Change: Young People Healing the Past and Building the Future” and “Reconciling Indigenous Healing and Health Education Leadership”. On September 22, all of us at IAPH took part in the 4km Walk for Reconciliation held in downtown Vancouver. The walk was preceded by a number of speeches from such dignitaries as Musqueam Elder Wade Grant, AFN National Chief Shawn Atleo and Chief Dr. Robert Joseph. Dr. Bernice A. King, daughter of Dr. Martin Luther King Jr., delivered the keynote address. It was impressive to see the many thousands of people – Aboriginal and non-Aboriginal – taking an interest in reconciliation despite the rainy weather.

Of particular interest to First Nations people in British Columbia this month is the groundbreaking October 1 official transfer of the Health Canada First Nations and Inuit Health Branch (FNHB) BC Region health services and programs to the BC First Nations Health Authority (FNHA), continuing a decade-long journey towards health services that better meet the needs of First Nations children, families, and communities in BC. More information on the FNHA is found further in this newsletter in an interview with Ms. Gwen Phillips, member of the First Nations Health Council’s (FNHC) Interior Governance Caucus.

Relatedly, IAPH is partnering with the Michael Smith Foundation to co-fund Science to Policy Fellowships at the BC First Nations Health Authority. The overall goal of this program is to help foster positive exchanges between health researchers and policy makers, with the aim of establishing and nurturing critical links between policy makers and external researchers in support of evidence-based public policy by providing short-term policy assignments.

The Aboriginal Health Research Networks Secretariat (AHRNets) announced the online launch of the International Journal of Indigenous Health (IJIH) accompanied by an Open Call for Papers. The IJIH, formerly the Journal of Aboriginal Health (JAH), is a peer-reviewed, online, open-access Journal designed to advance knowledge and understanding to improve Indigenous health. The Journal has been re-named to reflect its growing international readership and welcomes submissions from its international audience. Submissions are currently being accepted for Volume 10(1) of the IJIH. Deadline for submission is December 15, 2013. IAPH encourages submissions to IJIH, given its excellent track-record in high-quality publications reflective of the interests of our institute. Please see the IJIH website for more information.

Following up on July’s newsletter, when the 2013 National Gathering of Graduate Students was featured in an article, I wanted to share more details about the SD Award winners and honourable mentions. I am also delighted to note that Robert Henry, the winner of the PhD Analysis Award, has recently published “Brighter Days Ahead”, a book featuring the stories and photographs of the nine individuals who share their experiences of gang involvement for his research. The content is powerful and honest, with themes of resiliency and identity throughout.

From large scale political events involving thousands of Aboriginal and non-Aboriginal peoples, to the creation of the BC First Nations Health Authority, to the launch of the International Journal of Indigenous Health, and to the publication of a book celebrating resilience of youths involved in gangs, these are all positive signs worthy of recognition and hopefully the sign of more to come.

Chi-miigwetch,
Malcolm King, PhD
Profile: SD Award Winners at the 2013 NGGS

Further to a feature on the 2013 National Gathering of Graduate Students in the July edition of our newsletter, IAPH wanted to share more about the winners of the Scientific Director Awards presented at the Gathering. All of the winners evidenced collaboration and partnership with Aboriginal communities in guiding their research.

The Masters Award went to Kimberly Hart, whose project, “A Northern Manitoba Cree Nation’s Perspective on Trauma”, explores how the members of a northern Manitoba Cree Nation perceive, understand, and experience trauma, developing a deeper understanding of trauma from a Cree perspective within a social work setting.

Honourable Mention in the Masters Award category went to Emily Hastings, whose study, “Environmental Exposures, Helicobacter pylori Infection and Gastritis in Canadian Arctic Communities”, looks at how environmental exposures may affect digestive health in northern Canada.

The PhD Proposal Award went to Diana Campbell. Her research, “Integrating Aboriginal, Quantitative, and Qualitative Methodologies to Develop Appropriate Determinants of Health in a Mi’kmaq First Nation Community” involves a small Nova Scotia Mi’kmaq community who wanted to know how effluent pumped from a nearby pulp mill since 1967 into a water body adjacent to their community has impacted the health of their families and their community.

Honourable Mention in the PhD Proposal Award category went to Deanna Bickford, whose project, “Dakota Winter Counts as a First Nations Way of Sharing Knowledge for Health” involves exploring traditional means of capturing and translating Dakota Ways of Knowing (Dakota winter counts) towards health knowledge.

Robert Henry won the PhD Analysis Award for his research on Indigenous male gang identity, “Through an Indigenous lens: Indigenous male gang identity on the prairies”. Robert’s work relates his unique study on Indigenous male gang identity to inter-generational trauma. Robert has recently published “Brighter Days Ahead”, a book featuring the stories and photographs of nine individuals who share their experiences of gang involvement. The content is powerful and honest, with themes of resiliency and identity throughout.

Honourable Mention in the PhD Analysis Award category went to Hasu Ghosh for her work, “Diversity, Disparity and Diabetes: Voices of Urban First Nations and Métis People, Health Service Providers and Policy Makers”, in which she focuses on perceptions surrounding Type 2 diabetes and its prevention among First Nations and Métis community people and health service providers and policy makers.

Online Launch of the International Journal of Indigenous Health

AHRNetS recently announced the online launch of the International Journal of Indigenous Health (IJIH) accompanied by an Open Call for Papers. Prior to its closure in 2012, the National Aboriginal Health Organization (NAHO) transferred the Journal of Aboriginal Health (JAH) to AHRNetS: AHRNetS will continue to publish the Journal (Volume 10 onwards) under its new name — International Journal of Indigenous Health.

This peer-reviewed, online, open-access Journal was established to advance knowledge and understanding to improve Indigenous health. The Journal seeks to bring knowledge from diverse intellectual traditions together with a focus on culturally diverse Indigenous voices, methodologies and epistemology. The Journal has been re-named to reflect its growing international readership and welcomes submissions from its international audience.

The Journal Editorial Advisory Board gratefully acknowledges the financial contributions of the National Collaborating Centre for Aboriginal Health in supporting the transition of the JAH to IJIH and publication of its first Volume in 2014.

Volume 9(2) a Special Issue in Inuit Health published by NAHO Inuit Tuttaringat and NASIVIK NEAHR, will be available on the IJIH website once released. Volumes 1 – 9(1) of JAH are available on the IJIH website, and will also remain on the NAHO JAH website until 2017.

Submissions are currently being accepted for Volume 10(1) of the International Journal of Indigenous Health, Deadline for submission is December 15, 2013. Please see the International Journal of Indigenous Health website for more information.
The First Nations Health Authority – A new way of delivering health care for BC First Nations

Following several years of negotiations with the federal and provincial governments, First Nations in British Columbia have created a new First Nations health authority to take over the administration of federal health programs and services currently delivered by Health Canada’s Pacific region First Nations & Inuit Health Branch (FNIHB). The First Nations Health Authority (FNHA) is the first and only provincial First Nations health authority in Canada. The FNHA is reforming the way health care is delivered to BC First Nations through a phased transfer of responsibilities from FNIHB to the FNHA. The transfer began in July 2013 and concluded on October 1, 2013, with all FNIHB-BC Region functions being assumed by the FNHA such as primary care, public health, environmental and community health programs.

IAPH recently spoke with Ms. Gwen Phillips, member of the First Nations Health Council’s (FNHC) Interior Governance Caucus, on the inception and work of the FNHA. The FNHC, an associated political body of the Health Authority, has a mandate to look at the broader determinants of health and start leading the transformative change enacted by FNHA. Gwen provided some background, offering that the FNHA journey started around 2004-2005 when a health blueprint was established for BC and attached to the Transformative Change Accord, which came into existence from the demise of the Kelowna Accord. It was acknowledged that change was required in structure. First Nations needed a secure, stand-alone, governed entity to truly implement transformative change, so a structure was created in consultation with BC First Nations that would advance the health blueprint and relationship-building on the ground.

According to Gwen, a significant component of that structure was the broader relationships at work, and the FNHC concluded that it was necessary to transform relationships before systems could be transformed, ultimately creating “...an infrastructure that can better relate to regional institutions that are conducting research in support of well-being for First Nations people.” This infrastructure reflects a focus on well-being or the outcomes of health rather than a reduction of a gap in health status. Gwen noted that, “closing a gap is not good enough for us and in fact in looking at the concept of well-being from a First Nations perspective, it’s a lot broader than just not having a disease.” Gwen added that the FNHA is creating a different cultural organization that will allow for change in the policy and the structures through which resources are administered and managed, to ultimately better use those resources.

The FNHA is also participating in a Data Governance Initiative through which First Nations will collaboratively set standards and acquire and distribute the tools and instruments in First Nations communities to do real-time administrative data collection that would allow them to have better information available to all the tripartite parties for planning and investment purposes. The Initiative will enable FNHA to secure a research agenda that is legitimately sanctioned by the Nations. FNHA hopes to create a roster of research topics of interest to BC First Nations that researchers and grad students can access in order to conduct First Nations health research that is determined by First Nations rather than researchers.

Elaborating further on the new direction that FNHA is taking, Gwen says that the Authority is “...moving into an investment structure, a huge shift” and that it is necessary to “...define the investment and look for the expected returns.” The FNHA hopes to establish a set of outcome statements attached to the broader determinants of health so that those outcome statements become investment streams. “More critically, we will have the ability to report to ourselves on those indicators and produce reports that prove we have better outcomes for the people.” The FNHA is creating standards and accountability mechanisms. ‘Reciprocal accountability’ will be utilized, whereby all parties are accountable to common outcomes as well as to each other. “It’s no longer the funded organization accountable to the funding organization; it’s more so that they’re all accountable to the outcomes to be achieved from that funding.”

FNHA Science Policy Fellowships

The CIHR Science Policy Fellowships (SPF) Program was created in 2011 and has grown to include numerous partners such as the Michael Smith Foundation for Health Research and British Columbia Ministry of Health, among others. The overall goal of this program is to help foster positive exchanges between health researchers and policy makers, with the aim of establishing and nurturing critical links between policy makers and external researchers in support of evidence-based public policy by providing short-term policy assignments.

The Department of Policy, Planning and Strategic Services (PPSS) of the First Nations Health Authority has submitted proposals; one is a proposal for developing a policy framework and strategies to inform the potential creation of a Research Ethics Board pertaining to research on health and wellness services and programs for First Nations and Aboriginal peoples in British Columbia. The second proposal is for an evaluation framework for their current community planning process and emerging Regional Health and Wellness Plans, which will support the development of indicators that can be adjusted to meet community and regional needs.
Research with Impact

In 2009, CIHR-IAPH, the National Health and Medical Research Council (NHMRC) (Australia) and the Health Research Council (HRC) (New Zealand) renewed their partnership to jointly support cross-country, multidisciplinary, multi-sectoral research, building on existing networks of researchers to reduce the burden of chronic disease in Indigenous people. This tripartite initiative aligns with two of IAPH’s strategic goals — international partnerships and addressing critical health issues. Under the International Collaborative Indigenous Health Research Partnership (ICIHRP) funding opportunity, Dr. Herenia Lawrence, University of Toronto, is collaborating with oral health researchers in Australia and New Zealand to address the issue of childhood cavities, which is a significant problem for Indigenous populations in the participating countries.

In the “Baby Teeth Talk” study, Dr. Lawrence’s team, the Canadian arm of the project, has successfully recruited over 500 pregnant First Nations women living in urban and on-reserve communities in Ontario and Manitoba as participants. This 5-year study promotes good dental care during pregnancy and uses Motivational Interviewing (MI) and Anticipatory Guidance (AG) to counsel mothers on caring for their children’s teeth. Study participants have all given birth, and fluoride varnish is being applied to their babies’ teeth twice a year for 3 years by Aboriginal health workers associated with the project. At the same time, mothers continue to receive MI and AG in an effort to address their dietary and oral health concerns.

The study was highlighted in a Globe & Mail article last year, as well as at an international Indigenous conference in Auckland, New Zealand.

ICIHRP also seeded and cemented longer term partnerships with NZ and Australia, two natural international partners for IAPH who share an interest in collaborating on capacity development and potentially suicide prevention.

Funding Opportunity Reminder

IAPH would like to remind you that the following funding opportunities are currently open for application.

**Fellowship: Fall 2013 Priority Announcements**

Application deadline: November 15, 2013

- Aboriginal Research Methodologies
- Research in First Nations, Métis and/or Inuit Health

**Science Policy Fellowships (Winter 2013 Competition)**

Application deadline: December 16, 2013

CIHR-IAPH has partnered with the Michael Smith Foundation to fund Fellows undertaking policy assignments at the BC First Nations Health Authority. Full competition

More information on this program can be found on the CIHR website.

The 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.