



Aboriginal Health Research News

Message from Dr. Malcolm King, IAPH Scientific Director

CIHR Signature Initiative: Pathways to Health Equity for Aboriginal Peoples



Dr. King with Minister Aglukkaq announcing the Pathways Signature Initiative in Iqaluit, Nunavut

Pathways Ministerial Announcement

This last month has been very eventful for IAPH, and I am very pleased to report to you a new major research funding opportunity called Pathways to Health Equity for Aboriginal Peoples. Some of you might have heard about this initiative over the last year, but now I have the honour of talking about it with the broader community. IAPH and co-leads the Institute of Population and Public Health (IPPH) and the Institute of Gender and Health (IGH) have been working very hard to develop a CIHR Signature initiative that would be sufficiently powered to impact the health inequities affecting Aboriginal Peoples.

The Harper Government recognizes the importance of this initiative. On National Aboriginal Day (June 21st) from Iqaluit, the Honourable Leona Aglukkaq, Minister of Health and myself announced a \$25 million, 10-year initiative entitled "Pathways to Health

Equity for Aboriginal Peoples". Simultaneously, the Honourable John Duncan, Minister of Aboriginal and Northern Development and CIHR President Alain Beaudet announced the funding at the Odawa Native Friendship Centre in Ottawa.

In addition to the Pathways initiative, we also highlighted the recently awarded funding to Dr. Colleen Dell and Ms. Carol Hopkins for their project entitled "Honouring Our Strengths: Indigenous Culture as Intervention in Addictions Treatment", which was funded under the Aboriginal Health Intervention competition.

What is Pathways?

Pathways to Health Equity for Aboriginal Peoples is a focused CIHR Signature Initiative

led by IAPH and co-led by IPPH and IGH. Pathways' overall goal is to develop a better understanding of how to implement and scale up interventions and programs that will address Aboriginal health inequities. Pathways will fund implementation science to address four targeted, timely, and important health inequities affecting First Nations, Inuit and Métis (Aboriginal) peoples – namely suicide, tuberculosis, obesity and oral health.

The root causes of poor health—the social determinants of health—are frequently responsible for poor health outcomes generally, and they have particular impact on the health of Aboriginal Peoples. Gaps in Aboriginal health status result from complex interactions among social determinants of health.

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From left to right: Ms. Carol Hopkins, Executive Director, National Native Addictions Partnership Foundation; Dr. Colleen Dell, Research Chair in Substance Abuse, University of Saskatchewan; Mr. Greg Rickford Parliamentary Secretary to the Minister of Aboriginal Affairs and Northern Development, for the Canadian Northern Economic Development Agency and for the Federal Economic Development Initiative for Northern Ontario; the Honourable John Duncan, Minister of Aboriginal Affairs and Northern Development; Mr. Pete Bernard, Elder, Algonquins of Pikwākanagān First Nation; Dr. Alain Beaudet, President of CIHR; Mr. John Henri Commanda, President, Odawa Native Friendship Centre

SD Message (cont'd)

In addition to these determinants of health, Pathways will also address Aboriginal determinants such as language and culture, connection to the land, historical trauma, and spiritual and mental disconnectedness from the community. The definition of indigeneity is inherently social, and includes major elements of cultural identity. Being isolated from aspects of this identity is widely understood to have a negative effect on indigenous health.

These Aboriginal determinants of health must also be taken into consideration with the more traditional social determinants of health, be they distal (historical, political, social and economic), intermediate (community and family, health services) or proximal (health behaviours) in the design, implementation and scale-up of interventions.

At the core of the Pathways initiative is a focus on finding ways to scale up and adapt existing health programs to the diverse needs of Aboriginal communities, where values, traditional

knowledge, and history vary greatly. To this end, Pathways-funded researchers are expected to work closely with health stakeholders and partners in First Nations, Métis and Inuit communities. In this way, they can share knowledge and best practices in a respectful, cooperative way that will lead to health policies and practices that will make a real difference to the health of our Peoples.

Implementation and scaling up of interventions and programs in Suicide, Obesity, Tuberculosis, and Oral Health will lead to the following objectives:

1. Enhanced understanding of how to implement multilevel and scalable interventions that will contribute to reducing health inequities facing Aboriginal Peoples;
2. Improved health of Aboriginal Peoples across the four priority areas through adaptation and use of the interventions;
3. Better understanding of how to reduce health inequities and how this new knowledge can be adapted and applied to other populations

and in other contexts (reverse innovation, reciprocal learning);

4. Increased research capacity in the area of implementation science related to the health of Aboriginal Peoples and other vulnerable populations.

Implementation science aims to improve our understanding of what works, for whom and under what circumstances, and how interventions can be adapted and scaled up in ways that are accessible and equitable. In a future newsletter, we will be describing implementation science in greater detail.

The Pathways funding opportunities should be of great interest to Aboriginal communities, the research community, and our many dedicated partners. I encourage you to stay abreast of this initiative over the next few months, we will be providing more in-depth information of Implementation Science and the Pathways initiative.

CIHR-IAPH Funding Results

IAPH would like to congratulate the recipients of the following Priority Announcement funding opportunities for IAPH-related research and activities.

Planning Grants

Anita Benoit and Mona Loutfy (Women's College Hospital - Toronto)

Nadine Caron, Travis Holyk and Sean Maurice (U Northern BC)

Margot Latimer (IWK Health Centre - Halifax)

Mary Jane Warner (York U)

Dissemination Events

Brenda Cameron, Andrew Cave, Diane Conrad and Cora Weber-Pillwax (U Alberta)

Hani El-Gabalawy (U Manitoba)

Tracey Prentice (U Ottawa)

Jeffrey Reading (U Victoria, BC)

Doctoral Research Award - Quantitative Research

Jennifer Leason (UBC)

Alanna Mihic (U Toronto)

Nathaniel Pollock (Memorial U)

Sana Shahram (UBC)

Diana Withrow (U Toronto)

IAPH Mandate

IAPH 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.

Available Funding from CIHR

IAPH is pleased to announce the launch of the following [Fall 2012 funding opportunities](#) that support health research for First Nations, Inuit, and Métis peoples across Canada.

- Operating Grant: First Nations, Inuit and/or Métis Health (Bridge Funding)
- Knowledge Synthesis Grant: Aboriginal Health Knowledge Synthesis
- Doctoral Research Award: Aboriginal Research Methodologies
- Doctoral Research Award: Quantitative Research in First Nations, Métis and/or Inuit Health
- Planning Grants: First Nations, Inuit or Métis Planning Activities
- Dissemination Events: First Nations, Inuit, and/or Métis Knowledge Dissemination Activities
- CIHR Journalism Awards
- Operating Grant: Ethics
- Operating Grant: HIV/AIDS Community-Based Research
- Doctoral Research Award: HIV/AIDS Community-Based Research
- Catalyst Grant: HIV/AIDS Community-Based Research

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