Think Tank
What we Heard Report

At the Canadian Institutes of Health Research (CIHR), we know that research has the power to change lives. As Canada's health research investment agency, we collaborate with partners and researchers to support the discoveries and innovations that improve our health and strengthen our health care system.

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THANK YOU!

The Canadian Institutes of Health Research (CIHR) Institute of Indigenous Peoples' Health (IIPH) gratefully acknowledges all who participated in the Think Tank, including Elders, Knowledge Keepers, community representatives, researchers, CIHR partners, and international Indigenous colleagues such as Sámi representatives who shared their experiences and perspectives. Your insights, reflections, and vision have grounded this work in Indigenous knowledge systems and community priorities.

We extend particular thanks to the facilitators, moderators, note takers, the IIPH planning committee, and CIHR staff whose efforts made this gathering possible. The spirit of this Think Tank, rooted in respect, collaboration, and self-determination, will guide IIPH's next steps as we work together to advance Indigenous-led health research across the country and in connection with Indigenous Peoples globally.

Executive Summary

Background

The CIHR Institute of Indigenous Peoples' Health (IIPH) convened a national Think Tank to bring together Indigenous leaders, researchers, community partners, Elders, Knowledge Keepers, and CIHR Institutes to reflect on priorities for Indigenous health research in Canada. The gathering aimed to create a space for open dialogue grounded in Indigenous knowledge systems, lived and living experience, relational accountability, and distinctions-based health priorities. Through plenary discussions, facilitated breakout sessions, ceremony, and visual recording, participants shared insights on both persistent challenges and emerging opportunities across the Indigenous health research landscape.

The Think Tank was designed to support listening and knowledge synthesis rather than consensus-building. Notes and graphic recordings from all sessions were analyzed to identify cross-cutting themes, emerging priorities, and implications for CIHR and IIPH as a health research funding agency. This brief summarizes those insights and highlights key directions for future action.

Key Themes

Seven cross-cutting themes emerged consistently across breakout sessions and plenaries, reflecting shared experiences and priorities across health topics, populations, and geographies.

- Indigenous self-determination must be the foundation of health research.
- Trust is relational, shaped by history, and requires sustained accountability.
- Definitions of evidence must be broadened. Data sovereignty, access, and accountability are systemic issues.
- Funding models are not aligned with community realities.
- Distinctions-based approaches are essential. Capacity building must focus on people, not only projects.

Together, these themes reflect interconnected patterns that shape how First Nations, Inuit, and Métis communities experience health research, and how research systems either enable or constrain Indigenous leadership and impact.

Emerging Priorities

Synthesizing across themes revealed several areas of convergence. Participants pointed toward the need for Indigenous-led governance in health research and preparedness, particularly in contexts of public health and climate-related emergencies. Workforce sustainability and wellbeing emerged as a pressing issue, alongside calls for Indigenous-defined outcomes and measures of research success.

While data sovereignty was a central concern, participants emphasized the importance of Indigenous-owned digital and data infrastructure to operationalize governance and accountability. Intergenerational knowledge transmission was also identified as a core mechanism for prevention, healing, and continuity across research and practice.

Recommendations

The report outlines a set of recommendations focused on actions within CIHR's role as a health research funding agency. These recommendations address five areas of institutional leverage: governance and accountability, funding design and sustainability, research and evaluation, data and digital infrastructure, and workforce and capacity.

Collectively, the recommendations call for strengthening Indigenous governance in health research, aligning funding models with community realities, expanding definitions of evidence, supporting Indigenous data sovereignty, and investing in the sustainability of the Indigenous health research workforce. They are intended to inform future planning, program design, and partnerships across each of CIHR's Institutes.

CIHR Institutes are encouraged to reflect on the learnings emerging from this Think Tank, as outlined in this report, and consider how they may be meaningfully applied within their respective mandates, strategies, and priority areas, as appropriate. In doing so, Institutes are encouraged to engage First Nations, Inuit, and Métis partners in ways that are distinctions-based, respectful, and ongoing, recognizing that Indigenous engagement is essential to advancing ethical, relevant, and impactful health research.

Looking Ahead

This executive brief reflects a moment in an ongoing process of engagement, listening, and learning. IIPH will incorporate the learnings from the Think Tank alongside insights gathered through the national listening tour to inform the development of a strategic plan that aligns with the priorities and calls of First Nations, Inuit, and Métis Peoples across the country.

Together, these processes will support IIPH in strengthening Indigenous-led health research, enhancing accountability, and advancing a strategic direction that is responsive to distinct needs, diverse contexts, and Indigenous ways of knowing.