

# Pathways to Health Equity for Aboriginal Peoples Annual Gathering

## Funded Projects

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CIHR IRSC

Canadian Institutes of  
Health Research

Instituts de recherche  
en santé du Canada

The Pathways to Health Equity for Aboriginal Peoples (Pathways) initiative aims to develop the evidence base in how to design, offer and implement programs and policies that promote health and health equity in four priority areas: suicide prevention, tuberculosis, diabetes/obesity and oral health.

Pathways is co-led by the following CIHR Institutes:

- Aboriginal People's Health
- Gender and Health
- Musculoskeletal Health and Arthritis
- Population and Public Health

For more information on this CIHR Signature Initiative, visit <http://www.cihr-irsc.gc.ca/e/43630.html> or contact:

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# Operating Grants: Population Health Intervention Research (PHIR)

## OBJECTIVES

The purpose of this funding opportunity is to support the prompt initiation of population health intervention research on rapidly unfolding programs, policies and resource distribution approaches that have been initiated by others (e.g., policy makers) and have the potential to impact health and health equity at the population level. Many such interventions are unfolding and evolving constantly across the country, making the opportunities to initiate research more short-lived than most funding streams can effectively support. They are often planned and funded by community, non-profit, private, and/or public organizations both within and outside of the health sector (e.g., housing, environment and education). However, these efforts lack the embedded mechanisms needed for the rigorous assessment of processes and outcomes, sharing of lessons learned, and application of this knowledge to new program and policy decisions. As a result, they represent a rich but untapped collection of potential “natural experiments” that could benefit from researcher expertise and involvement.

**2012 COMPETITION** - [See results online](#)

### **Understanding the impact of adapting and implementing an evidence-based mental health promotion program: The Mental Health First Aid-First Nations initiative**

*Principal Investigator: Claire Crooks - Centre for Addiction and Mental Health (Toronto)*

*Co-investigators: Jonathan Dewar, Julie George*

**Project Description:** Mental Health First Aid (MHFA) is an evidence-based mental health promotion program demonstrated to increase individuals’ skills and knowledge about how to respond in a mental health crisis. Similar to regular first aid, the goal is not to turn individuals into health care providers, but to give them the skills to recognize a potential mental health crisis and intervene in a way that ensures safety until trained professionals are available. It is currently used across Canada, including in First Nations communities; however, previous evaluation in First Nations in Alberta found a critical need to culturally adapt the course. Over the past two years the Mental Health Commission of Canada (MHCC) has worked with consultants and community partners to adapt the MHFA program to be more culturally appropriate. The adapted program (MHFA-FN) is currently being piloted in three First Nations communities. The pilot process ends in March 2013, but the MHCC is committed to continuing to support the program in those three communities and begin to scale it up to other communities. The proposed research will use a combination of interviews, focus groups, implementation tracking, and surveys to study the implementation of this adapted course and whether it is acceptable to the communities, feasible to implement, and effective in changing attitudes and skills similar to the original course. The research will provide an important evidence base for MHFA-FN as it begins to be scaled up. The evaluation will also look at process issues such as what factors increase a community’s readiness for the course, and to what extent communities further localize the adapted course. The impact of this research process will go beyond MHFA-FN and document challenges and successes of the adaptation process that can help other organizations who are seeking to adapt evidence-based practices for First Nations contexts.

## **A New Vision: Dene First Nations Perspectives on Healthy Housing**

*Principal Investigator: Linda Larcombe - University of Manitoba*

*Co-investigators: Kathi Avery Kineu, Lancelot Coar, Pamela Orr, Brian Saulnier*

**Project Description:** Children and adults sleeping on mattresses on the floor in living rooms, moldy walls, broken windows, pails instead of toilets and expressions of despair are frequent images in the Canadian media associated with Manitoba First Nations on-reserve housing. These conditions contribute to an array of respiratory infections, tuberculosis, chronic illnesses and mental illness. The federal government's response or intervention to the housing crisis in the north was to provide funding to communities who qualify and apply to programs through Canada Mortgage and Housing Corporation under Canada's Economic Action Plan. In Manitoba over 30 million dollars flowed through Canada Mortgage and Housing Corporation for new constructions on reserve between 2009 and 2011. Now in 2012, one year after this program ended there still is a crisis where inadequate housing seriously burdens the physical, social, spiritual and emotional health of northern FNs. The two Manitoba Dene communities, Northlands Denesuline First Nation and Sayisi Dene First Nation, identified a lack of vision for housing that integrates their cultural and social values, and practical needs with existing housing policies and programs. The communities are prepared to evaluate the impact and relevance of the Canada's Economic Action Plan program for their community and explore how on-reserve housing stock can meet the need to be sustainable, culturally relevant, safe, and function within the Dene traditional lifestyle. The community lead project will tap into the creative energies of the youth to develop a vision to discover, envision and create culturally relevant housing and change policies to better reflect Dene values. The goal of this program is for the Dene communities to take stock of their housing post Canada's Economic Action Plan and to envision culturally relevant housing that promotes health equity, mental health, and a decreased burden of chronic and infectious diseases.

## **Informing the "Strategy against Tuberculosis for First Nations on-Reserve": Evidence from the "Determinants of TB Transmission Project"**

*Principal Investigator: Richard Long - University of Alberta*

*Co-investigators: Sylvia Abonyi, Paul Hackett, Deanne Langlois-Klassen, Maria Jane Mayan, Pierre Plourde*

**Project Description:** The disparity in TB rates in Aboriginal peoples as compared to Canadian-born "others" resulted in the release, in June 2010, of a highly publicized report of the Standing Committee on Health of the House of Commons; "The Way Forward: Addressing the elevated rates of tuberculosis infection in on-reserve First Nations and Inuit communities". It was followed in March 2012, by the release from Health Canada of a Strategy against Tuberculosis for First Nations on Reserve, hereafter referred to as "The 2012 Strategy". This strategy is meant to evolve to meet the heterogeneous and changing demands of vulnerable reserve communities across Canada. Research, the collection of surveillance data and the engagement of First Nations communities are promoted in The 2012 Strategy. However, the strategy itself has no research arm, no start-up data and no explicit recommendations about how to engage First Nations communities. Both the development and implementation of The 2012 Strategy have the potential to impact health and health equity at the population level. For the purpose of this initiative The 2012 Strategy and the remarkable demographic and geographic disparity of TB on the Prairies constitute a natural experiment. Successful

implementation of the 2012 Strategy on the Prairies will require evidence in combination with stakeholder support. As such, we propose to use the databanks and organizational resources of The Determinants of TB Transmission in the Canadian-born Population of the Prairie Provinces (DTT) project, a mixed-method, prairie-wide CIHR and Health Canada funded project scheduled to end March 31st, 2013.

### **Monitoring & supporting Arctic Char distribution program for pregnant women in Nunavik to improve maternal & child nutrition**

*Principal Investigator: Michel Lucas - Université Laval*

*Co-investigators: Éric Dewailly, Pierre Ayotte, Mélanie Lemire, Gina Muckle, Catherine Pirkle*

**Project Description:** The objective of this research project is to evaluate a risk reduction program proposed by community nurses for pregnant women exposed to food chain contaminants in Nunavik. This program will promote the consumption of Arctic char, by distributing the fish once weekly to pregnant women living along the Hudson Bay. Arctic char contains very few contaminants and is very nutritious. We will evaluate the acceptability of the program to pregnant women, how efficient the program is at reducing contaminant intake (especially mercury), and if the program improves food security and nutrition. Results of this project will help regional public health authorities to recommend or not a generalization of the program to all Nunavik communities.

### **2013 COMPETITION - [See results online](#)**

#### **Housing in the Canadian Arctic: Assessing the impacts of rehousing for Inuit health**

*Principal Investigator: Mylene Riva - Université Laval*

*Co-investigators: Belkacem Abdous, Ross Bailie, Jill Baumgartner Laurie Chan, Éric Dewailly, James Dunn, Mark Goldberg, Richard Menzies, Gina Muckle, Louise Potvin, Thierry Rodon*

**Project Description:** A large proportion of Inuit households live in inadequate housing conditions. In 2006, 39 and 49 percent of the population in, respectively, Nunavut and Nunavik reported living in overcrowded houses, vs. 3 percent of non-Aboriginal Canadians. These poor housing conditions are compromising population health and communities' capacity for social and economic development. Studies have shown that rehousing may improve health directly or indirectly through psychosocial pathways. To date few studies have assessed the health impacts of rehousing in Aboriginal communities, and none among the Inuit. Set in Nunavik and Nunavut, this interdisciplinary project aims to examine whether rehousing - by reducing exposure to overcrowding and improving housing quality - is associated with better health directly, and indirectly through psychosocial pathways. This intervention focusses only on the social housing sector. In the Canadian Arctic, 60 percent of the population in Nunavut and over 90 percent in Nunavik live in social housing. Single-person and family households will be recruited to the study; within households, all adults aged 18 years and older will be invited to participate. Data will be collected 4-6 weeks prior and 15-16 months after rehousing. Questionnaires will assess: housing conditions; mental and physical health, and stress; psychosocial factors, and socioeconomic information. Objective health measurement (blood pressure) will also be taken. This project will provide novel evidence pertaining to health and psychosocial impacts of rehousing, in relation to changes in overcrowding and housing quality. This type

of project has been identified as required to build effective evidence-based cases justifying greater investments in affordable housing in the Arctic. Evidence will be integrated in the formulation of housing strategies currently underway in Nunavik and Nunavut. This project has been developed in collaboration with regional housing and health organizations.

## Applied Public Health Chairs - Pathways

### OBJECTIVES - [See results online](#)

CIHR and the Public Health Agency of Canada have partnered to fund Applied Public Health Chairs (APHC). The APHC program supports innovative population health research that improves health equity for citizens in Canada and around the world. This can be achieved through interdisciplinary collaborations and mentorship of researchers and decision makers in health and other sectors.

Pathways funded Applied Public Health Chairs as a means to support Aboriginal health research in Canada. Public Health Chair researchers funded under the Pathways Initiative solely focus on population health intervention research relevant to Aboriginal Peoples' health and address one or more of the four Pathways exemplars (oral health, tuberculosis, diabetes/obesity, suicide prevention). Chairs take part in the Pathways meetings and related activities as a means of leveraging their work and that of other Pathways investments. Overall, the Pathway-related Chairs will contribute to building the knowledge base, mentoring, and increasing researcher capacity in cross-cutting themes that are relevant to one or more of the Pathways exemplars.

### Applied Chair in Resilience and Childhood Obesity

*Jonathan McGavock - University of Manitoba*

**Project Description:** Children raised in low socio-economic environments are more likely to become overweight or obese, particularly First Nations youth. The program of research outlined here is designed to develop pragmatic after school programs that protect youth living in poverty from excessive weight gain. We are also trying to understand what school-level factors contribute to the protection against obesity in children who experience dramatic declines in household income.

### Clearing the Pathways to Health Equity: CIHR Applied Public Health Chair in Indigenous Health Information and Knowledge Systems

*Janet Smylie - St. Michael's Hospital (Toronto)*

**Project Description:** Aboriginal people in Canada experience a high burden of illness compared to the general Canadian population. In this research Chair Program, Dr. Smylie proposes to work with Aboriginal health leaders, health researchers, and Aboriginal communities. Her goal is to make sure that health research projects aimed to address the health problems for Aboriginal peoples build on Indigenous leadership, worldviews, knowledge, and practices.

## Team Grants: Circumpolar, wellness, resilience and suicide prevention (Arctic Council)

### OBJECTIVES - [See results online](#)

In the Arctic, Indigenous peoples have experienced numerous challenges associated with rapid changes and historical policies, including: threats to language and culture; erosion of traditional support networks; and changes to traditional diet and communal food practices. These challenges, often coupled with a sustained lack of economic opportunity, due, in part, to relative geographical isolation, have contributed to poor social and health outcomes. Perhaps most poignantly, the Finnish and Swedish Saami, Alaskan Indigenous Peoples and Canadian Inuit have all experienced increases to the youth suicide rates over the last four decades.

In relation to the broad array of interventions currently being used in Arctic regions to promote resilience and well-being, there is a need to understand which interventions are most promising, with whom and under what circumstances. (i.e. Have they been evaluated? What is the evidence-base? How have communities and community leaders been involved in shaping these interventions? How culturally appropriate are they? How can approaches be compared across other states/ jurisdictions/ settings/ populations?)

The ultimate goal is to enable communities across Arctic States to develop and implement new activities/interventions and/or to enhance or improve upon existing activities with the confidence of a body of evidence behind them.

### **RASP: Resilience and Suicide Prevention project**

*Principal Investigator: Eduardo Chachamovich - Douglas Hospital Research Centre (Verdun, Québec)*

*Co-investigators: Minnie Grey, Laurence Kirmayer, Stephanie Lloyd, John Stuart Jr., Gustavo Turecki, Lisa Wexler*

**Project Description:** The RASP project aims to assess the process and outcomes of three suicide prevention and wellness promotion initiatives in the Arctic. This proposal is a collaboration between Alaska and two Canadian Arctic communities in order to identify and investigate promising interventions in those fields. Researchers and community members will study the ASIST training in the Inuvialuit Settlement Region, the Community Liaison Wellness Worker program in Nunavik, and the Teck John Baker Youth Leaders (TJBYL) Program in Alaska. A mixed method approach will be used. Results will generate a full report with detailed recommendations on how to improve the interventions and scale them up to other Arctic regions in the globe.

## **Mental Well-Being and Suicide Prevention in Circumpolar Regions: Developing the Evidence Base and Identifying Promising Practices**

*Principal Investigator: Susan Chatwood - Institute for Circumpolar Health Research (Yellowknife, NWT)*

*Co-investigators: Peter Bjerregaard, Gunn Heatta, Michael Jong, Siv Kvernmo, Anne Silviken, Kue Young, Priscilla Ferrazzi, Gwen Healey, Vanessa Hiratsuka, Jim Martin, Jenny Tierney*

**Project Description:** Promoting mental well-being and preventing suicide is a high priority among circumpolar regions. A systematic synthesis of what has been done and what works and does not work across the Arctic will enable circumpolar regions to learn from one another. We have assembled an international team of researchers, administrators, and clinicians in partnership with regionally based community organizations and Indigenous-controlled health care agencies to summarize regional patterns, trends and determinants; create an inventory of existing programs and services; and conduct detailed case studies of innovative approaches in 5 regions, with the potential for replication, adaptation, and scaling-up by other regions.

## **Partners for Engagement and Knowledge Exchange (PEKEs)**

**OBJECTIVES** - [See results online](#)

In order to better engage First Nations, Inuit, Métis and Urban Aboriginal communities and strengthen Pathways' impact, Pathways provided funding to Aboriginal organizations to enable them to take on the role of Partners for Engagement and Knowledge Exchange (PEKEs). PEKEs will enable meaningful engagement of First Nations, Inuit and Métis peoples, communities and organizations within the Pathway Initiative. Indigenous voices, Ways of Knowing, and culture will be enhanced by involving the PEKEs.

The PEKEs will play a central role in linking and facilitating interactions among the Implementation Research Teams (IRT's) and the Applied Public Health Chairs with Aboriginal communities, other Pathways funded researchers, and policy makers and partners. The overall goal of the PEKEs is to facilitate Pathways researchers in scaling up interventions across communities and translating the findings into policies and improved health.

### **First Nations Health and Social Secretariat of Manitoba**

*Coordinator: Wendy McNab Fontaine*

#### **Who**

The First Nations Health and Social Secretariat of Manitoba (FNHSSM) (as proposed by the Assembly of Manitoba Chiefs), was the only regional body to be chosen as a Partners for Engagement and Knowledge Exchange (PEKE) because of the outstanding outreach and relationships established across Canada and internationally. The FNHSSM partnership includes: University of Manitoba,

University of Winnipeg, Diabetes Integration Project, University of Victoria, Indigenous Physicians Association of Canada, Aboriginal Nurses Association of Canada, National Collaborating Centre for Aboriginal Health, Saint Elizabeth, National Aboriginal Council of Midwives, Manitoba Health, Public Health Agency of Canada, First Nations and Inuit Health Branch, Te Atawhai o te Ao: Independent Maori Institute for Environment and Health and Whakauae Research for Maori Health and Development

### **Issue**

Our project is defined by wholistic health, based on the strengths of our peoples, and will not be defined or divided by the four pathologies identified in the CIHR call. The FNHSSM PEKE will engage traditional knowledge keepers and researchers to explore the literature on knowledge translation and exchange, implementation research and scalability, extract useful concepts and processes and reframe these from an Indigenous knowledge's perspective. The FNHSSM and their partners are each committed to moving from promising practices to knowledge exchange and action in communities.

### **Approach**

What we are proposing is to link elements of research, education, quality improvement, and Knowledge Translation and Exchange tools (electronic communications, web-based solutions) to facilitate the transfer of knowledge across stakeholders (traditional knowledge keepers, communities, providers, researchers and decision-makers) to: improve the quality and utility of research undertaken in communities; shift research from a focus on documenting the problem, to wise practice intervention research to inform and improve practice; learn from providers and inform providers of advances that might support their practice; and link community voice and research output with decision-makers, to ensure that evidence informs policy decision-making. The FNHSSM PEKE will bring together traditional knowledge keepers, service providers, researchers and decision-makers to share learning from this process, and encourage the framing of wise practices through this conceptual lens.

### **Impact**

As a team we will go beyond individual diseases to address health in a wholistic way, Pimatiziwin, walking in balance. We intend to strategically mobilize existing networks. The FNHSSM PEKE does not require the creation of a new mechanism, but rather focus on better utilization of existing networks and information exchange opportunities.

Our goal is to instill HOPE in the future of Manitoba First Nations and other Indigenous communities nationally and internationally, by implementing effective health interventions that improve health and also promote a positive outlook on the contribution of traditional ways of healing in the pursuit of wholistic health.

## **National Association of Friendship Centres**

*Coordinator: Catherine Graham*

### **Who**

The NAFC is democratically governed, status blind and is accountable to the federal government and directly to the urban Aboriginal community. Established in 1972, the NAFC is a network of 116 Friendship Centres from coast-to-coast-to-coast. Friendship Centres are Canada's most significant off-reserve Aboriginal service delivery infrastructure, achieving 2.6 million points of contact nationwide annually. In 2011- 2012, Friendship Centres across Canada delivered over 1,493 programs and services to approximately 700,000 urban Aboriginal people.

### **Purpose**

The goal of the NAFC-Pathways-PEKE is to ensure that Friendship Centres are meaningfully and ethically engaged throughout the course of the Pathways initiative. To ensure this, the NAFC will focus on the following:

- Building community capacity to partner in Pathways research.
- Building capacity of community to turn research into action by supporting the development and implementation of community specific knowledge mobilization plans.
- Building researcher capacity to understand and respect the urban Aboriginal research environment.
- Brokering and supporting research relationships between Friendship Centres and IRTs.
- Promoting urban Aboriginal research opportunities among post secondary students.
- Supporting and facilitating the scale-up of interventions.
- Contributing to knowledge translation and dissemination activities.

### **Partners**

The NAFC-Pathways-PEKE defines partnership as encompassing three levels of engagement.

Full Partners are those who have a direct interest in the PEKE. They will participate in guiding the activities of the PEKE and will play a key role in engaging at the community level. The NAFC-Pathways- PEKE will engage 117 Friendship Centres and representatives from Provincial Territorial Associations as full partners. Full partnership has been limited in this way to ensure that the PEKE process remains community centred and driven.

Collaborators are those organizations or institutions who play a role in achieving health equity at the national level. They may be called upon to provide subject area expertise and will assist in knowledge mobilization. The NAFC-Pathways-PEKE is currently collaborating with the Centre for Aboriginal Health Research at the University of Victoria and will seek to collaborations with other relevant organizations or institutions as work progresses.

Stakeholders are those organizations who will either be impacted by Pathways research outcomes or who may have the potential to participate in the scale up of interventions. Their main role will be to review and disseminate knowledge translation materials. Those organizations that consider

themselves as potential stakeholders are welcome to contact the NAFC-Pathways-PEKE manager to discuss opportunities.

### **Impact**

The NAFC-Pathways-PEKE will impact Friendship Centres in two key ways. First, through their participation in Pathways related activities Friendship Centres will be in a position to guide research and leverage findings to advocate for additional program and service funding. Second, Friendship Centres will have the opportunity to develop or increase their capacity to participate in and/or conduct research within their communities.

### **Native Women's Association of Canada**

*Coordinator: Amy Nahwegahbow*

### **Who**

The Native Women's Association of Canada (NWAC) has been the nationally recognized voice of Aboriginal women since 1974. NWAC is made up of twelve Aboriginal women's organization called Provincial, Territorial Member Associations (PTMA's) that are spread across Canada with a collective goal to enhance, promote, and foster the social, economic, cultural and political well-being of First Nations and Métis women within First Nation and Canadian societies. NWAC works to preserve Aboriginal culture, achieve equality for Aboriginal women, and have a say in the shaping of legislation directly affecting Aboriginal women, their families and communities.

NWAC's mission is to help empower women by being involved in developing and changing legislation which affects them, and by involving them in the development and delivery of programs promoting equality for Aboriginal women. As a leader both domestically and on the international stage, NWAC works to improve the human rights of Aboriginal women and is dedicated to promoting gender equality issues through research, policy, programs, and practice. Through activism, education, policy analysis and advocacy, NWAC works to advance the well-being of Aboriginal women and girls, as well as, their families and communities.

NWAC has 40 years of experience in advocating for and actively participating in initiatives geared toward improving the health and well-being of Aboriginal women. NWAC has developed strong connections with grass roots women, knowledge holders, and is a mechanism by which Aboriginal women voice their concerns and create lasting change.

### **Purpose**

The NWAC PEKE will help facilitate a receptive environment for collaboration between IRTs and Research Chairs with Aboriginal women, communities, policy makers and partners for the implementation of the CIHR Pathways Program, while also advancing NWAC's priorities and objectives in health.

THE NWAC PEKE will help enable learning across research teams and communities - support the translation of research findings into policies, scale-up community interventions, and improve health outcomes among Aboriginal women and their children (families). The NWAC Advisory Committee is an essential element to facilitating community involvement and oversight in the exchange of knowledge, and includes key role of Elders and youth as advisors on Committee.

### **Issue**

Aboriginal women represent a disproportionate number, in comparison to non-Aboriginal women, with ill health and chronic disease in Canada. The fact that the majority of Aboriginal women are caregivers in their communities often raising their families single handily and are in most cases subject to poverty and violence is a major concern.

### **Approach**

The NWAC PEKE places the unique experiences, challenges and needs of Aboriginal women and their children at the center of its work. Women are the heart of the Aboriginal family and NWAC has longed seen women/mothers as being the true knowledge holders, health care decision-makers and health-care providers for their families throughout the life span. Aboriginal families represent the most powerful forum for preventing, mitigating, healing from and or living with tuberculosis, dental caries, obesity/diabetes, and suicide.

The NWAC PEKE supports the full participation of Aboriginal women and applying a cultural framing that reflects Aboriginal ways of knowing, their histories, and current realities and circumstances. NWAC will apply a CR-GBA to the research framework, methodology and tools, monitoring and evaluation - to integrate a gender perspective to better understand how women and men differ often very significantly in patterns of illness, risk factors, treatments and social contexts that will lead to better health outcomes.

NWAC PEKE supports a community-based participatory research approach that will encourage positive, respectful, mutually beneficial research, as well as, to improve the culture and practice of health research with Aboriginal Peoples.

### **Impact**

Assessing the impact of tuberculosis, dental caries, obesity/diabetes and suicide on the lives of Aboriginal peoples, women in particular, will shed light on the social and economic costs of healthy living for our communities and the governmental bodies responsible for addressing Aboriginal health.

This project will equip families with the knowledge and strategies to improve their immediate surroundings where they live and raise their children, and provide them with avenues and alternatives to the provision of nutritious foods and healthy family role models that will ultimately translate into the healthy adult lifestyles and reduced risks related to all four pillars.

# Operating Grant: Pathways Implementation Research Teams Component 1

## OBJECTIVES

The Pathways Implementation Research Teams Component 1 (IRT C1) Funding Opportunity supports the overall goal of Pathways to develop a better understanding of how to design, implement and scale-up interventions that will improve Aboriginal health in at least one of the following four exemplars: Suicide, Diabetes/Obesity, Tuberculosis, and Oral Health.

The focus of research supported through this funding opportunity will be on population health interventions, defined as: policies, programs and resource distribution approaches that have the potential to impact health and health equity at a population level.

Through the linked components of this funding opportunity, IRTs will conduct research to identify promising or effective interventions (Component 1 grants), enhance and/or adapt interventions to strengthen effects, equity, or reach, (Component 2 grants) and understand factors that facilitate or hinder scale-up (Component 3 grants).

**Funding Results:** [General funding pool](#), [Oral Health](#), [Suicide Prevention](#), [Obesity/Diabetes](#), [Tuberculosis](#)

## ORAL HEALTH

### **Tui'kn (Passage) to Oral Health: A community-led research partnership to improve oral health in Unama'ki**

*Principal Investigator: Mary McNally - Dalhousie University (Nova Scotia)*

*Co-investigators: Sharon Rudderham; Debbie Elaine Allison Martin, Darlene Anganis, Stacey Lewis, Jennifer MacDonald, Laurie Touesnard, Ashlee Cunsolo Willox, Margot Latimer, Jennifer MacLellan, Debra Matthews, Robert Schroth*

**Project Description:** For the past 10 years, the Tui'kn Partnership, a health-centered partnership comprised of the five Mi'kmaq First Nations communities of Unama'ki (Cape Breton), Nova Scotia, has been working to improve health and quality of life for its people. Very high rates of preventable hospital admissions for dental conditions have been discovered within the communities. This concerning data led the Tui'kn Partnership to engage with researchers to address this problem. Together, we plan to build a strong collaborative team that will use a “two-eyed seeing” approach to create solutions that will reduce oral disease and improve overall health for people living in Unama'ki First Nations.

## SUICIDE PREVENTION

### **Building Resilience in Fraser Valley First Nations Youth**

*Principal Investigator: Adrienne Chan - Fraser Health Authority (Surrey, BC)*

*Co-investigators: Heather McDonald, Leslie Bonshor, Wenona Victor, Hugh Brody, Dan Reist, Dave Schaepe*

**Project Description:** This project develops a team and an Indigenous research approach to explore youth suicide prevention in First Nations youth. In order to develop the team and our approach, we will forefront Indigenous ideas as we create our processes and train the team. The project will develop and pilot a youth resiliency strategy with Seabird Island Band with their Youth Council. Building youth resiliency will be protective against suicide. The goal is to examine lessons learned through the project so that the resiliency strategy can be adapted for other First Nations communities. The project draws on Indigenous ways of knowing as they are lived in Seabird Island community. We will be engaging youth; elders; community agencies working with children, youth and families; health agencies; and prevention programs, to ensure that we have a full and broad perspective on suicide prevention. There will be ongoing collaboration, knowledge seeking, and knowledge exchange.

### **Partnering with Elders to Improve Mental Health Outcomes of Indigenous People Living in a Canadian Inner City**

*Principal Investigator: George Hadjipavlou - University of British Columbia*

*Co-investigators: Jennifer Dehoney, Naomi Dove, Doris Paul, Daniele Behn Smith, Alexandra King, David Tu, Colleen Varcoe, Annette Browne, Betty Calam*

**Project Description:** Mental health problems are over-represented amongst Indigenous people in Canada, particularly in those living in inner cities. This is reflected in persistently elevated rates of suicidal ideation, suicide attempts and deaths by suicide. These elevated rates of mental illness and suicide result from a complex mix of historic and ongoing economic, social, and political factors, including the forced disconnection of Indigenous people from their lands and traditions. Mental health care in inner cities has generally not been well adapted to serve the needs of Indigenous clients. In 2013 the Vancouver Native Health Society began a pilot project employing Coast Salish Elders to provide direct patient care at their inner city clinic. With new provincial funding this program is being expanded over the next three years. This research proposal aims to (1) examine the implementation of this Elders program as it scales up, (2) evaluate the effectiveness of this intervention on mental health outcomes, including suicide prevention, and (3) assess the feasibility of further scale up and transfer to other urban centers. Indigenous ways of knowing and seeing will guide the research methods and the interpretation of results. The team conducting this research is comprised of community members (Elders, physicians, program administrators) and academic researchers. The team has a depth of lived First Nation and Métis experience with a majority of team members being themselves Indigenous, and all team members having had close ties to various Indigenous communities over the course of their careers. A committee of Elders and Patients will guide the implementation and analysis of this research project. This research will be conducted in close collaboration with the First Nations Health Authority, the Squamish First Nation, Vancouver Coastal Health, the UBC Centre for Excellence in Indigenous Health, and the Vancouver Native Health Society.

## **Indigenous Youth as Agents of Change for Community Wellness: Promoting Resilience and Positive Youth Development**

*Principal Investigator: Cynthia Jardine - University of Alberta*

*Co-investigators: Karen Abraham, Tanya Cardinal, Dale Friedel, Tracy Friedel, Cindy Johner, Leslie Moncrieff, Rayann Ulvick, Amanda Boyd, Nicolette Teufel-Shone, Justin Wong*

**Project Description:** Youth have a largely untapped potential - and capacity - to be major players in community health promotion initiatives. This research will seek ways to involve Indigenous youth as agents of change for health and wellness in their own communities through involvement in proven and potential health promotion interventions. Doing so within each community's unique cultural context will foster empowered and more resilient youth, and result in enhanced overall community wellness. The primary goal of this research is to promote Indigenous youth resilience through increased confidence, capacity, leadership skills, and self-efficacy. It will use a community- and asset-based approach that emphasizes and promotes youth strengths. This will address the suicide prevention exemplar. The secondary goal is improved health decision-making by youth and other community members through direct engagement in health promotion programs and interventions, and the associated critical reflection on health behaviours. This will address the obesity/diabetes exemplar. This research is being conducted in partnership between an interdisciplinary group of academic researchers and four rural/urban Alberta First Nation (Frog Lake and Heart Lake First Nations) and Métis communities (Gunn Métis Local 55 and Métis Regional Council - Zone IV of the Métis Nation of Alberta). Potential interventions will be identified through a focused scoping exercise, community member interviews and discussions, and workshops to be conducted in each of the communities.

## **Suicide Prevention for Inuit Youth**

*Principal Investigator: Laurence Kirmayer - Jewish General Hospital (Montreal)*

*Co-investigators: Jenny Tierney, Sarah Burke, Sharon Edmunds, Meghan McKenna, François Bourque, Eduardo Chachamovich, Sarah Fraser, Bonnie Leadbeater*

**Project Description:** This Pathways to Health Equity Implementation Research Team will address the challenge of suicide prevention and mental health promotion for Inuit across Canada. The team will bring together partners from multiple Inuit regions and organizations to work together to identify promising or effective interventions for the promotion of mental health and the prevention of youth suicide. Members of the team have extensive experience working with Inuit communities in mental health promotion, as well as suicide and violence prevention. With our partners will build relationships with Inuit communities to identify their needs and priorities and to set the stage for further implementation research. The team will review current promising and effective evidence-based practices in suicide prevention and mental health promotion for Inuit communities. We will assess the potential challenges to implementation and national scaling-up of multi-level, age and culturally appropriate suicide prevention efforts across Inuit regions. The team will work with ITK and partners to build capacity within participating communities to apply for Components 2 and 3 of the Pathways Program to carry out a longitudinal program of implementation research involving the design, implantation, scale-up and evaluation of suicide prevention interventions for Inuit populations. Keywords: Inuit, Indigenous peoples, mental health promotion, suicide prevention, violence prevention, resilience, well-being, implementation science, adolescents and youth.

## **Youth-Governed Approaches to Mental Health Promotion and Suicide Prevention for Two Spirit, LGBTTTQQA and Gender Non-Conforming Youth**

*Principal Investigator: Janet Smylie - St. Michael's Hospital (Toronto)*

*Co-investigators: Erin Konsmo, Jessica Danforth, Jack Saddleback, Billie Allan, Michelle Firestone, Alexandria Wilson*

**Project Description:** Rates of suicide, self-harm and self-injury are increasing among Two-Spirit and gender non-conforming Aboriginal youth in Canada. Mainstream services and mental health promotion messaging around suicide, self-harm and self-injury do not reflect the experiences, knowledge or needs of Indigenous youth and their rights to self-determination over their own bodies. The goal of this youth-directed research is to identify best practices around suicide, self-harm and self-injury prevention and mental health promotion for Two Spirit, gender non-conforming and LGBTTTQQA (lesbian, gay, bisexual, transgender, transsexual queer, questioning, intersex and asexual )youth. We will accomplish this work through a research partnership between the Native Youth Sexual Health Network (NYSHN) and the Well Living House (WLH), based at the Centre for Research on Inner City Health, St. Michael's Hospital. Our objectives are to build on and strengthen existing relationships and governance structures between Indigenous youth communities, NYSHN and the WLH, engage with Indigenous youth around the re-framing of language in current suicide, self-harm and self-injury prevention messaging and services, to conduct a systematic review of literature on existing services in this area and to conduct an environmental scan identify promising practices including models of healing such as Rites of Passage and Arts-based methodologies Rites of passage and coming of age ceremonies incorporate many of the key elements of the overall research framework that we will use in this project, including youth-led initiatives and the involvement of the larger community.

## **OBESITY / DIABETES**

### **Embracing A Vision for Indigenous Health: Community Access to Prevention, Self-management and Integrated Diabetes Services in the BC Interior**

*Principal Investigator: Donna Kurtz - University of British Columbia*

*Co-investigators: Leslie Bryant MacLean, Danielle Wilson, Olivia Guerra, Peter Hutchinson, Charlotte Jones, Mary Jung*

**Project Description:** Using community-based participatory action and Indigenous methodologies, this Indigenous led study will to identify multilevel, and scalable interventions and effective Western diabetes/obesity services (prevention, treatment and self-management) and interventions into which local Traditional health practices can be integrated to improve Aboriginal health across the generations. An Implementation Research Team (IRT) will collaborate with local First Nations Friendship Center/Society organizations in two urban - Kelowna and Vernon, and two rural off-reserve - Lillooet and Williams Lake, Aboriginal settings in the interior of British Columbia. These communities are located in the west and central regions of the Interior Health Authority and make up 83.9% of the total number of Aboriginal people living in BC Interior health region. Four Advisory Teams, made up of community members, leaders, health providers, Elders/traditional healers, researchers, FNFC staff, and others will guide and be involved in all aspects of the study to ensure activities are culturally relevant and respectful of protocols, traditions and knowledge, and benefit the community.

In building respectful relationships a variety of perspectives will inform best practices in Traditional/Western integration implementation or scale up. Following community research agreements/university/health authority ethics approvals, Talking circles, community forums, environmental scans, literature review and surveys will be used to explore and prioritize promising practices and cost effective interventions. The research and Advisory teams will work with Canadian Institutes of Health Research Partners for Engagement and Knowledge Exchange, First Nations Health Authority, and local groups to increase the profile of health priorities for diabetes/obesity health services in these communities and move forward with future funding applications and implementation.

### **Food is Medicine: Addressing Obesity and Diabetes by Building Food Security and Food Sovereignty Among Prince Edward Island First Nations**

*Principal Investigator: Jennifer Taylor - University of Prince Edward Island (Charlottetown)*

*Co-investigators: Chief Brian Francis, Chief Matilda Ramjattan, Roseanna Sark, Alma MacDougall, Debbie Martin, William Montelpare*

**Project Description:** Canada's Indigenous communities are experiencing public health crises related to escalating rates of obesity and Type II diabetes (T2D). Our research team, comprised of concerned Prince Edward Island First Nations (PEI FN) policy and health leaders, Indigenous health scholars, and nutrition experts, believe that the root of these issues centres around problems of food insecurity, the "outcome of inadequate or uncertain access to an acceptable amount and quality of healthy food", and a loss of food sovereignty, defined as the culturally appropriate, locally determined food systems and distribution". The purpose of this project is to use a consultative and inclusive process to develop an implementation research team (IRT) and project to address Type 2 diabetes (T2D) and obesity by reducing food insecurity in PEI First Nations (PEIFN) and enhancing food sovereignty. Because of a desire to return to traditional food production and food preparation and produce medicinal herbs as a means of healing the PEI IRT named this proposed project "Food is Medicine". We will expand our research team, develop a research paper on best practices, consult with the PEIFN communities regarding best approaches to reduce obesity and T2D and develop a funding proposal to improve health among PEI FN.

## **TUBERCULOSIS**

### **Implementing the "Patient's charter of tuberculosis care" in high incidence Indigenous communities and across jurisdictional borders**

*Principal Investigator: Richard Long - University of Alberta*

*Co-investigators: Stephanie Sack, Janet Smylie, Wadieh Yacoub, Sylvia Abonyi, Ryan Cooper, Paul Hackett, Courtney Heffernan, Moliehi Khaketla, Kris Stewart*

**Project Description:** Herein, we, (the Tuberculosis Program Evaluation and Research Unit ([TB PE & RU: <http://tbper.ualberta.ca/>]) in the Department of Medicine at the University of Alberta, along with colleagues from Saskatchewan Health, the University of Saskatchewan and the University of Toronto in Ontario ([see applicant table]) provide a proposal for funding to the "Pathways to Health Equity for Aboriginal Peoples" competition in the first component, under the tuberculosis (TB) pillar. The goals described in this proposal relate to the development of a team and an intervention

aimed at correcting the marginalization of Indigenous peoples with respect to TB programming and, further, to reduce the incidence of TB in their communities. This proposal describes the development of a team with four interconnected communities in a high-incidence region to 1) make relevant to Indigenous Peoples the Tuberculosis Patients' Charter of Rights, 2) create a regional coalition that would advocate for local priorities and the removal of barriers to health equity associated with TB transmission, infection and disease to the proposed team of stakeholders and upstream to the Partners for Engagement and Knowledge Exchange (PEKEs); and 3) document the development of a regional, non-jurisdictional framework for population health interventions using an implementation science approach. The communities would participate as a region rather than a patchwork of jurisdictions and exclusive –TB programming efforts that have heretofore operated exclusively. Following the team development stage and in the second component, each community will implement a local level intervention. As such, the regional framework is a program-level intervention, within which community level priorities can be advanced.

## **Operating Grant: Pathways Implementation Research Teams Component 2 (Letter of Intent)**

### **OBJECTIVES**

The Pathways Implementation Research Teams (IRTs) Funding Opportunity supports the overall goal of Pathways which is to develop a better understanding of how to design, implement and scale-up population health interventions that will improve Aboriginal health. There are four exemplars of focus: Suicide prevention, Diabetes/Obesity, Tuberculosis, and Oral Health.

In addition to previously mentioned Pathways goals, component 2 enhancement and adaptation grants will support research teams aimed at strengthening the effectiveness or scalability of population health interventions through community-informed enhancements or adaptations.

Each team is expected to have a primary focus on a single Pathways' exemplar. In recognition of the need for holistic approaches to wellness and the interrelationships across exemplars, proposals may include a secondary focus on one or more of the other Pathways' exemplars. It is required that community partnerships be established such that applications for funding are undertaken jointly from the outset.

**Funding Results:** [General funding pool](#), [Oral Health](#), [Suicide Prevention](#), [Obesity/Diabetes](#)

## ORAL HEALTH

### **Scaling Up: A Multi-Pronged Approach for Improving Mother and Child Oral Health in Aboriginal Communities**

*Principal Investigator: Herenia Lawrence - University of Toronto*

*Co-investigators: Gilbert Fredette, Martin Chartier, Janet Gordon, Jaime Cidro, Doris Gillis, Laurie Hoffman-Goetz, Marion Maar, Janis Randall-Simpson, Robert Schroth, Janet Smylie*

**Project Description:** Early Childhood Caries (ECC) is a multifactorial disease that affects disproportionately higher numbers of Aboriginal children than non-Aboriginal children in Canada. While ECC is preventable, reducing the high rates of the disease among at-risk populations such as the Aboriginal Peoples in Canada remains a challenge, owing in part to the high levels of sugar that have entered the Aboriginal diet. This study focuses on the successful scale-up of an existing multi-pronged intervention for the prevention of ECC in Aboriginal communities. The intervention comprises four components: dental care offered to prenatal women, topical fluoride varnish applications to their infants/toddlers' teeth, oral health anticipatory guidance and motivational interviewing delivered by community-based researchers to mothers at critical early developmental stages in their children's lives. These interventions have been shown to be either effective or promising in preventing ECC and reducing caries in Aboriginal children. Researchers and community members, including knowledge users and knowledge holders will work together on how the interventions can be adapted to cultural, historical and contemporary Aboriginal contexts and the current health care delivery systems. The approach will center on knowledge sharing so that the interventions are fully synergized with local community ways of knowing. We plan to study the implementation of the adapted/enhanced interventions in at least four geographically diverse First Nations and Métis communities with differing levels of readiness/capacity for the intervention. The objective is to confirm that the set of interventions identified for scaling up are indeed effective and will remain effective (or become more effective) when appropriately adapted across these communities. The overarching goal is to bring about tangible improvements in young Aboriginal children's oral health and wellbeing thereby reducing oral health inequalities.

## SUICIDE PREVENTION

### **P2RASP: Pathways to Resilience and Suicide Prevention enhancing community-selected strategies**

*Principal Investigator: Eduardo Chachamovich - Douglas Hospital Research Centre (Verdun, Québec)*

*Co-investigators: Victoria Akhiatak, Minnie Grey, Lucy Kuptana, Sarah Fraser, Stephanie Lloyd, Véronique Paradis, Gustavo Turecki, Lisa Wexler, Ashlee Cunsolo Willox, Joshua Moses*

**Project Description:** The World Health Organization estimates that suicide accounts for almost one million deaths per year. Nowhere, however, does suicide have such an impact and social burden as among Indigenous populations. Inuit suicide is associated with transgenerational effects of colonization, rapid culture change, sedentarization, economic and political marginalization, forced assimilation through residential schools and changing gender roles. Our team was recently funded by the CIHR/Public Health Agency of Canada/Arctic Council to conduct an assessment of the promising practices in suicide prevention in the Arctic (Team Grant Competition: Circumpolar,

wellness, resilience and suicide prevention, 2014-2015). This project (RASP: Resilience and Suicide Prevention) is a four-step strategy to identify best practices of suicide prevention, and will inform us as we work towards a full proposal of the Pathways Component 2 project. Building on and highlighting local capacity, resilience, and vision, this proposal offers a plan forward by building linkages among generations, within and across communities to foster young people's capacity to aspire and real opportunities to test them out as part of the developmental process.

### **Culturally-Based Suicide Prevention and Mental Health Promotion for Indigenous Youth**

*Principal Investigator: Laurence Kirmayer - Jewish General Hospital (Montreal)*

*Co-investigators: Sherry Copenace, Gregory Brass, Garry Munro, Amanda Ward, Jacob Burack, Stéphane Dandeneau, Sarah Fraser, Jaswant Guzder, Laurence Katz, Melissa Walls, Ashley Wazana*

**Project Description:** This Component 2 Pathways to Health Equity Implementation Research Team will address the challenge of suicide prevention and mental health promotion for First Nations youth across Canada. The team will build on previous work by a Public Health Agency of Canada funded team developing a culturally-based mental health promotion and suicide prevention program. The intervention involves engaging communities in culturally adapting, implementing and evaluating a 14-session program for youth 10-14 years of age and their parents or caretakers. The team will work with partners in First Nations communities and organizations in BC, Manitoba, Ontario and Quebec. Together we will 1) modify the existing evidence-based intervention to format it as a series of modules that can be delivered flexibly in different settings and time frames, including schools and community centres; 2) develop strategies for training and supporting community coordinators and facilitators to deliver the program; 3) support the development of regional centres to allow wider dissemination and scale-up of the intervention; and 4) assess the potential challenges to implementation and national scaling-up. The team will bring together the resources needed to carry out a longitudinal program of implementation research examining the process of cultural adaptation, implementation, scale-up and evaluation of suicide prevention interventions for First Nations communities across the country.

### **PAX-Good Behavior Game in First Nations Communities: Enhancing and Adapting a School-Based Mental Health Promotion and Suicide Prevention Strategy**

*Principal Investigator: Mariette Chartier - University of Manitoba*

*Co-investigators: Garry Munro, Jitender Sareen, Leanne Boyd, Nora Murdock, Robert Santos, Fran Schellenberg, Tracie Afifi, James Bolton, Shay-Lee Bolton, Marni Brownell, Daniel Chateau, Brenda Elias, Corinne Isaak, Depeng Jiang, Laurence Katz, Jennifer Volk, Roberta Woodgate*

**Project Description:** Rates of suicide and suicide attempts of First Nations youth in Canada are alarmingly high and are considered a major public health concern. We still have a considerable amount to learn about how mental health promotion and suicide prevention is implemented in Canada and in First Nations communities. It is essential to understand what works and for whom, how and why it works and whether it is scalable or not. In this study, we propose to examine PAX-Good Behavior Game (PAX-GBG) a relatively inexpensive strategy that has been implemented widely in Manitoba including First Nations communities. It is estimated that about 1,700 fewer Manitoba youth would contemplate suicide by age 21 for each year that all Grade 1 students are in

classrooms with PAX-GBG. The team assembled to improve our understanding includes Swampy Cree Tribal Council, Healthy Child Manitoba Office, First Nations Health Directors and Manitoba First Nations Education Resource Centre, researchers and experts in implementation science. We plan to examine how PAX-GBG is being carried out within Swampy Cree Tribal Council schools and to determine if it has an impact on children's mental health and school achievements. We then plan to use this new knowledge to adapt the intervention to make it more compatible with cultural values, language and perspectives of the Swampy Cree Tribal Council communities and evaluate these adaptations. Answering these questions will benefit ongoing suicide prevention efforts in Manitoba and across Canada.

### **The Strength Within: Suicide Prevention in Northern British Columbia**

*Principal Investigator: Henry Harder - University of Northern British Columbia*

*Co-investigators: Travis Holyk, Warner Adam, Amanda Ward, Margo Greenwood, Tammy Klassen-Ross, Christopher Lalonde, Linda O'Neill, Virginia Russell*

**Project Description:** Aboriginal peoples' health is deeply impacted by social determinants including those related to the effects of colonization and its resultant intergenerational traumas. As a result, Aboriginal peoples in Canada experience a unique set of mental health challenges. Mental illness and social issues such as substance abuse, addiction, and suicide are particularly high among Aboriginal peoples. Suicide and self-inflicted injuries are, in fact, a leading cause of death for Canadian First Nations youth and young adults. Findings from a recently completed CIHR funded youth suicide research project by this team with First Nations youth in 11 Carrier and Sekani communities demonstrated positive effects, including: decreased levels of depression, hopelessness, suicidal ideation, and increased self-esteem associated with being involved in cultural training and education. Due to the success of the previous study, it is proposed that the study be expanded and adapted to meet the needs of young adults in the same and additional northern BC communities. The goals of the study are to evaluate the long-term effects of youth participants' involvement with cultural interventions and suicide prevention programs, adapt and expand the previous suicide intervention and program, and implement and evaluate interventions with new populations. The research team, including researchers, community organizations, health practitioners, community members and leaders, will work together to achieve these goals. The outcomes from this project will be to increase understanding and awareness of mental health research and suicide prevention within the context of northern BC Aboriginal communities, the maintenance of existing and building of new partnerships through collaboration, and the development of intervention suicide prevention and wellness training manuals for young adults that encompass the traditional values of the individual Aboriginal groups that are part of this project.

## **Strengthening Parent-Teen Relationships: Pathways to Improving Mental Health and Wellbeing of Aboriginal Youth and Caregivers**

*Principal Investigator: Marlene Moretti - Simon Fraser University*

*Co-investigators: Annette McComb, Karla Braber, Tanya Broesch, Grace Iarocci, Margaret Jackson, John O'Neil*

**Project Description:** The rate of suicide among Aboriginal youth is approximately five to six times that of non-Aboriginal youth. Extensive research has demonstrated that attachment security within the adolescent-caregiver relationship is associated with significantly lower levels of depression and suicidal ideation. The Connect Parent Group program is an attachment based intervention with demonstrated effectiveness that has been developed and evaluated in communities across British Columbia; however uptake has been more gradual among Aboriginal caregivers. Over the last 18 months, in collaboration with our partners in Aboriginal communities, we have held a series of focus groups and interviews with service providers, program facilitators, community leaders and caregivers living on-reserve and found that there was universal interest among those with whom we spoke to co-create an adapted version of the Connect program that would: strengthen attachment between caregivers and teens; honour the inherent strengths of Aboriginal caregivers; and respect traditional teachings related to parenting. This project of adaptation, implementation and evaluation of the Connect program for Aboriginal caregivers will move forward through four developmental phases. First, we will establish a Reflecting Team consisting of Aboriginal service providers, community members and leaders who will guide the process of adapting the program. Next we will work with the Reflecting Team to identify adaptations to the program and appropriate measures for evaluating the program that honour both Indigenous and Western ways of knowing. In phase three we will pilot the adapted program in at least six diverse Aboriginal communities representing urban and rural settings as well as on- and off-reserve communities. Finally, we will work with communities to identify barriers to program uptake and produce a detailed implementation plan that will support the future scale-up of the intervention in diverse Aboriginal communities.

## **OBESITY / DIABETES**

### **The Healthy Weights Connection: Scaling up a public health system intervention**

*Principal Investigator: Piotr Wilk - University of Western Ontario*

*Co-investigators: Lizanne Belliveau, Amber Griffiths, Huguette Trottier-Frappier, Chris Wilson, Martin Cooke, Shelley Gonneville, Darryl Sturtevant, Wenda Watteyne, John (Jack) Bend, Janice Forsyth, Rhona Hanning, Guss Hill, Angela Mashford-Pringle, Barbara Riley, Storm Russell, Cameron Willis*

**Project Description:** Aboriginal (First Nations, Inuit and Métis) children and youth living in urban areas are at higher risk for overweight and obesity than are non-Aboriginal urban residents. The reasons for this are complex, and there are a number of factors that directly and indirectly affect children's diets and physical activity. These include characteristics of families, neighbourhoods, schools and communities. Reducing the risk of obesity therefore requires action on the part of a number of community actors and organizations, including local government, health and social services, clinicians, Aboriginal organizations, and others, that make up the local health and wellness system. One way that we can improve children's health is to work to improve how these system actors

work together to deliver culturally appropriate and effective programs and services. Funded by the Public Health Agency of Canada, the Healthy Weights Connection intervention has been operating in London since 2011 and Midland-Penetanguishene since 2013. Through the efforts of local site coordinators and a “backbone” organization, the program supports collaboration and coordination of services and programming aimed at Aboriginal children and youth. By helping local organizations to share knowledge and resources, apply for external funding, and to develop new and innovative programs, the project leads to better use of local resources to serve the local Aboriginal population. Urban Aboriginal communities vary widely, in terms of their size, cultural and institutional composition, geography, and other characteristics. This research project would examine the implementation of this intervention in an additional six communities, in collaboration with the Métis Nation of Ontario. This will provide an opportunity to examine how the intervention and its tools need to be adapted for different geographic contexts, and to identify “what works”, under what conditions, to improve collaborations around Aboriginal child health.

### **Bridging Traditional and Scientific Knowledge to improve Type 2 diabetes prevention and management through a participatory community-based approach targeting Traditional diet, healing, and physical activity**

*Principal Investigator: Pierre Haddad - Université de Montréal*

*Co-investigators: Jane Blacksmith, Jessica Mitchell, Sonia Robertson, Jill Torrie, John Arnason, Alain Cuerroer, Brian Foster, Cory Harris, Thora Herrmann, Pascal Imbeault, Mélanie Lemire*

**Project Description:** Through participatory community-based research, we first aim to establish the needs, desires and capacities for each of 4 Aboriginal populations (in Northern Quebec and in Nunavik) in regards to the use of traditional diet (including medicinal plants/foods) and culturally relevant physical activity to improve diabetes management. We plan to use land-based activities with Aboriginal Knowledge holders, such as nature walks and plant/food identification and collection. The established participatory and collaborative protocols will be promoted in communities through the most appropriate media (written, audiovisual, etc). We will then follow individuals from each community to see if their metabolic parameters are improved by following the dietary and physical activity changes. We will also use plant chemistry and cell biochemistry to make sure that the medicinal plants/foods chosen are safe (alone and in combination with diabetes drugs) and to find out how they work. This will allow us to better advise health authorities to improve diabetes prevention and management in Canadian Aboriginals.

### **Pathways Implementation Research Team for Northern Child Health: Enhancement of a pan-territorial, sugary sweetened beverage consumption intervention in northern Canada**

*Principal Investigator: Colleen Davison - Queen's University (Kingston, Ontario)*

*Co-investigators: Elsie De Roose, Shirley Tagalik, Jody Butler Walker*

**Project Description:** This program of intervention research is about improving child health and equity in northern Canada. It addresses the obesity/diabetes (primary) and oral health (secondary) exemplars. The problems are clear: on average, children in the north have much poorer nutritional and oral health status than their southern counterparts. This Pathways Implementation Research Team acknowledges these health inequities and focuses on the science of solutions. The proposal is put

forward by a child health researcher at Queen's University, three territorial government-based nutritionists, collaborators at the Arctic Institute for Community-Based Research and the Wellness Centre of Arviat, NU. We will build on the strengths of two long-standing initiatives in "Drop the Pop" and the international WHO-PHAC sponsored "Health Behaviour in School-aged Children Study", with two decades of history in the north. Three complimentary mixed-methods research projects will be undertaken: (1) Description of the current food and beverage consumption patterns and physical activity levels of northern children; (2) Quantitative analysis of the dietary impacts of Drop the Pop; and (3) Qualitative participatory study with youth examining the impacts of Drop the Pop on individual health behaviours, family food practices and oral health. The proposed will result in a large number of opportunities for cross-disciplinary training, youth and community engagement and leadership development. We believe due to the extent and nature of the Team collaborations, the results will be well placed to concretely inform population health intervention scholarship and northern practice.

### **Refining a Scaling up Strategy for Local Sustainable Nourishment in Indigenous School Communities**

*Principal Investigator: Rhona Hanning - University of Waterloo*

*Co-investigators: Kiku (Karen) Dhanwant, Scott Graham, Kitty Corbett, Jennifer Dean, Mary McKenna, Barbara Riley, Steffanie Scott, Kelly Skinner, Michelle Vine, Cameron Willis, Jennifer Yessis*

**Project Description:** Our vision is that working together we ensure First Nations and Métis students in rural and remote school communities in Canada enjoy healthy, local, sustainable food five times a week, to reduce obesity and diabetes in these vulnerable populations. We will achieve our vision by applying a Learning Circle approach in 4 rural and remote First Nations /Métis communities (Haida Gwaii, BC, Upper Skeena, BC; Ministikwan Lake, SK; Cross Lake, MB) to adapt and implement a Farm to School (F2S) intervention. F2S activities support communities to increase the availability and consumption of local foods among students. The sequence and combination of activities changes based on the context of each community. Yet a process to enable communities to identify, adapt and implement the most suitable activities is not widely available. A promising process is a Learning Circle, which engages a wide range of community members to identify, adapt and implement Farm to School activities in their own community. We will gain new insights into how and why Learning Circles aid scaling up of F2S interventions. We have 4 interdependent objectives:

1. Apply and adapt the Learning Circle process in 4 communities implementing F2S (engagement and action planning objective)
2. Explore the adaptation, reach and implementation of F2S (implementation objective)
3. Examine F2S effectiveness on the availability and consumption of healthy, local and sustainable foods among youth, by gender (outcome objective)
4. Understand how and why Learning Circles contribute to the implementation and effectiveness of F2S within and across communities (explanatory objective)

We will use work with community members in each community to study their networks, assets and student diet quality. Analyses will integrate findings to answer what works for whom and why. We will produce a set of principles for scaling up the Farm to School intervention within existing communities, and in additional rural and remote communities.

### **The Aboriginal Youth Mentorship Program - Exploring the Potential for Dissemination Across Multiple Settings**

*Principal Investigator: Jonathan McGavock - University of Manitoba*

*Co-investigators: Brian Torrance, Joannie Halas, Kate Storey, Alex McComber, Sharon Bruce, Heather Dean, Leah Ferguson, Anthony Hanley, Margaret Humbert, Amanda Johnson, Jay Johnson, Lucie Lévesque, Heather McRae, Jacquelyn Oncescu, Elizabeth Sellers, Garry Shen, Brandy Wicklow, Noreen Willows*

**Project Description:** Obesity and type 2 diabetes (T2D) are two of the most common chronic diseases in youth and disproportionately affect indigenous youth from all continents. Unfortunately, few interventions grounded in Indigenous teachings exist to reduce these statistics. We have developed a peer-led afterschool program that reduces risk factors for obesity and diabetes in Indigenous youth. The current proposal is designed to determine if and how this program can be scaled up from 1 to 13 communities across 5 provinces in Canada.

### **Measuring the Impact of Local Food Strategies in Aboriginal Communities to Improve Food Access and Reduce the Prevalence of Obesity and Obesity Related Disease**

*Principal Investigator: Michael Robidoux - University of Ottawa*

*Co-investigators: Lois Philipp, Wendy Trylinski, Eric Doucet, François Haman, Mary-Ellen Harper, Courtney Mason, Sonia Wesche*

**Project Description:** Over the past several decades Aboriginal populations in northern Canada have undergone dietary and lifestyle transformations which have resulted in alarming rates of obesity and obesity related diseases, in particular type 2 diabetes mellitus, hypertension, dyslipidemia and cardiovascular disease. While it is clear that in northern Aboriginal communities, limited physical activity contributes to the higher than average rates of obesity and obesity related diseases, maintaining a healthy diet is critical for the prevention/reduction of obesity and obesity related diseases. In this context, the work presented in this proposal builds on our previous efforts to implement community-based programs to improve food access. We propose a two-pronged approach that aims to a) further improve and support food access programs, and b) evaluate the impact of these programs on the dietary practices and metabolic health of individuals living in these communities. It is expected that, in view of the limited access to nutritious and high prevalence of chronic diseases in many northern communities, improved access to nutritious foods and increased intake of these foods will result in significant improvements in metabolic conditions linked to a number of chronic diseases.

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