



Indigenous Peoples' Health Research Centre
Presents

Indigenous Innovation Integration

**11th Annual National Gathering of
Graduate Students**

June 24—27, 2011

Regina, SK

11th Annual National Gathering of Grad Students

IPHRC is funded by



And is a collaborative project between



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INDIGENOUS PEOPLES' HEALTH RESEARCH CENTRE

On behalf of the Indigenous Peoples' Health Research Centre (IPHRC), we are delighted to welcome you to the **11th Annual National Gathering of Graduate Students**. Our program will provide you with workshops designed to help develop your skills as researchers and to give you better understanding what is required in an academic career. You will also have opportunities to showcase your research and to learn from that of your fellow students. And, on Monday you will have an opportunity to hear about the exciting and innovative research being done at the nine NEAHRs throughout the country.

IPHRC is a partnership between the University of Regina, the University of Saskatchewan, and the First Nations University of Canada. IPHRC's mandate is to develop capacity for community-based Indigenous health research in Saskatchewan and to create networks of Indigenous health researchers regionally, nationally, and internationally. IPHRC supports the creation of an ethical environment in research that supports Indigenous community-based definitions and solutions to health, which acknowledges Indigenous models and methods of health and influences government policies and practices in respect for Indigenous health delivery and promotion. To that end, we have given summer research awards to 76 undergraduate students and graduate fellowships to over 30 PhD and Master's level students. Of the 108 students IPHRC has supported, 98 have been Aboriginal. We have also funded over

50 community-based Indigenous health research projects.

We believe that this NGGS will provide you with opportunities not only to develop skills and know but also, through our collaborative approach, to develop networks of supportive colleagues also engaged in Aboriginal health research. June is a beautiful time of year on the University of Regina Campus, and our city has many wonderful attractions that you will enjoy visiting.



Dr. Carrie Bourassa
Nominated Principal Investigator
First Nations University of Canada



Dr. Jo-Ann Episkenew
Director and Co-Principal Investigator
University of Regina



Dr. Caroline Tait
Co-Principal Investigator
University of Saskatchewan

SCHEDULE OF EVENTS

FRIDAY, JUNE 24

TIME	EVENT	ROOM
6-10pm	Registration	North Residence

SATURDAY, JUNE 25

TIME	SESSION	ROOM
7:30am	Breakfast ED114	
7:30am	Pipe Ceremony	First Nations University Ceremonial Tipi - Atrium
8:30am	Welcoming remarks & opening prayer - Elder Betty McKenna	ED193
9:00am	Plenary/keynote: Dr. Margaret Kovach , University of Saskatchewan, author of <i>Indigenous Methodologies: Characteristics, Conversations, Contexts</i> (2009)	ED193
10:15am	Coffee Break ED114	
10:30am	Workshop 1— Ethics in Indigenous Health Research, Tri-Council and Beyond : Dr. Carrie Bourassa (FNUUniv)	ED191
	Workshop 2— Embodied Research : Dr. Warren Linds (Concordia U), Dr. Jo-Ann Episkenew (U Regina), Heather Ritenburg (U Regina)	ED185
	Workshop 3— Building Your CV : Dr. James Mulvale (U Regina)	ED187
12:00pm	Lunch ED114	
1:00pm	Group A: Paper presentations: Traditional Healing/Practices	ED191
	Group B Paper presentations – Chronic Disease	ED185
	Group C Paper Presentations - Cancer	ED187
2:30pm	Coffee Break ED114	
2:45pm	Group D Paper Presentations – Social Determinants of Health	ED185
	Group E Paper Presentations - Identity	ED187
4:15pm	Day Closing Remarks/Housekeeping ED193	
6:00pm	CIHR-IAPH Scientific Director Awards First Nations University Atrium	

SCHEDULE OF EVENTS

Sunday, June 26

TIME	SESSION	ROOM
7:30am	Breakfast ED114	
8:30am	Remarks & opening prayer	ED193
9:00am	Plenary: Innovative Methodologies : Dr. Charity Marsh (U Regina), Dr. Pammla Petrucka (U Saskatchewan), Kim McKay-McNabb (U Regina), Sarah Oosman (U Saskatchewan)	ED193
10:15am	Break ED114	
10:30am	Workshop 4— Writing for Publication : Dr. Mary Hampton (Luther College)	ED191
	Workshop 5— Participatory Processes in Indigenous Health Research : Dr. Viv Ramsden (U Saskatchewan)	ED185
	Workshop 6— Incorporating Indigenous Knowledge : Dr. Cora Weber-Pillwax (U Alberta)	ED187
12:00	Lunch ED114	
1:00pm	Group F Paper Presentations – Aboriginal Health Research	ED191
	Group G Paper presentations – HIV	ED185
	Group H Paper presentations – Mental Health	ED187
2:30pm	Break ED114	
2:45pm	Group I Paper Presentations – Environment & Health	ED185
	Group J Paper Presentations - Food	ED187
4:15	Closing Remarks ED193	
6:00 pm	Cultural Event: Traditional Usage of Tobacco Elder Betty McKenna and Jaimee Marks Medicine Room, Science Department, 2 nd Floor, First Nations University	
6:30	Supper ED114	

POSTER PRESENTATION DESCRIPTIONS

Posters are available for viewing in the Pit

Exploring the Experiences of Treatment Providers Offering Care to Aboriginal Women in Drug Treatment - Roisin Unsworth, University of Saskatchewan

Gender-based violence and abuse towards women is widespread in Canada. Data reveal that Aboriginal women experience a disproportionate incidence of such violence. The current day impacts of colonization and other traumatic life experiences, such as interpersonal violence, can lead women to self-medicate with alcohol and drugs in order to cope. However, there appears to be limited recognition of the role of violence and abuse in women's treatment services for problematic substance use.

Applying a post-colonial feminist framework, this study is undertaking a community-based, qualitative approach to understand what it means to address trauma from a gender-informed lens in Aboriginal women's treatment for drug abuse. This study will draw on data gathered from the original "From Stilettos to Moccasins Research Project". This poster presents the methodological and theoretical approaches of this current study and discusses the existing literature on this topic. The findings from this research will inform the creation of more gender-informed culturally relevant services for Aboriginal women in drug treatment.

Toward effective service provision: A comparison of prevalence, risk factors, and accessibility of services for heterosexual and lesbian couples following experiences of intimate partner violence - Angeline Tuesday, University of Manitoba

This poster presentation is based on a review of the existing literature regarding intimate partner violence (IPV) within the context of lesbian relationships. It examines the incidence rates, methodological issues, and risk factors that are commonly associated with violence in romantic relationships. The review compares and contrasts the experiences of heterosexual couples to that of lesbian couples in order to determine commonalities in terms of patterns of violence and cultural differences in lesbian relationships that must be addressed in order to facilitate healing from the experiences of abuse.

Access to Palliative Care Services in Rural Reserve Settings - Natalie Fraser, University of Toronto

Palliative care takes emphasis on relieving uncomfortable symptoms without the expectation of a cure (Anderson, 2005). Generally speaking palliative care is initiated in cases of terminal illness or end stage disease, and is very commonly used at the end of life in elderly populations. Palliative care is highly specialized requiring education, training, and considerable access to resources. When considering palliative care for Aboriginal peoples additional factors must be considered to account for culture-specific needs and geographical location. The perspectives of both healthcare practitioners and aboriginal community members will be considered, with an emphasis on the factors impacting individual perceptions. Cultivated understanding of individual palliative care needs and obstacles will be used to plan partnerships and build capacity among Aboriginal communities and practitioners. The goal of this paper is to elucidate salient issues in providing palliative care to Aboriginals in rural and reserve settings based on the literature, and to initiate progress in the development of improved care for an under-served population. The term "Aboriginal" will be used throughout the paper to describe people of First Nation, Métis, and Inuit heritage.

Anderson (2005). "Palliative Care" In: Mosby's Medical, Nursing, & Allied Health Dictionary (6th Ed.). St. Louis MO: Elsevier Mosby.

POSTER PRESENTATION DESCRIPTIONS

Posters are available for viewing in the Pit

Associations of blood selenium levels with circulating concentrations of inflammatory biomarkers among Inuit adults from Nunavik - Françoise Proust, Université Laval

Context: Selenium is an essential cofactor of the glutathione peroxidase enzyme complex and has been recognized to play a preventive role in oxidative damage. It has also been demonstrated that populations with low selenium intake have two to three times greater risk of ischemic heart disease. Now, inflammation is considered to play a key role in coronary artery disease and other manifestations of atherosclerosis. However, data on how selenium is associated with concentrations of circulating inflammatory biomarkers are still sparse and inconsistent.

Objective: To examine the association of circulating concentrations of inflammatory biomarkers C-reactive protein and interleukine-6 with blood selenium levels among Inuit adults from Nunavik.

Methods: The study population consisted of 861 Inuit from Nunavik aged ≥ 18 y who participated in a health survey in 2004. Data were collected through clinical questionnaires and examinations. Blood samples were analyzed for selenium, C-reactive protein and IL-6 concentrations. Logistic regressions were performed to assess the association between selenium concentrations and elevated levels of CRP and IL-6, while controlling for potential confounders. Several possible sources of effect modification were also tested.

Results: Overall, mean (\pm SD) blood selenium concentration was $4.42 (\pm 0.15) \mu\text{mol.l}^{-1}$. No significant associations were found between blood selenium levels and the circulating concentrations of CRP and IL-6 among our subjects, after adjustment for potential confounders. Participants in the highest versus the lowest quartile of blood selenium did not have significantly different levels of CRP [odds ratio (OR): 0.77; 95% confidence interval (CI): 0.44-1.35; $p = 0.363$] or IL-6 (OR: 1.49; 95% CI: 0.93-2.40; $p = 0.096$). Age and body mass index were strongly associated with both inflammatory biomarker levels, but none of the covariables tested for interaction (age, gender, smoking status, alcohol consumption and n-3 intake) appreciably modified the results.

Conclusion: Our results showed no relationships between blood selenium and inflammation when measured by CRP and IL-6. The fact that the levels of selenium measured at baseline were particularly high (partly due to a high fish consumption) in our subjects may explain our null association findings, because selenium intake above a certain level may not increase selenoprotein antioxidant properties. This may confirm the narrow safety range of selenium intake as recently suggested.

A Pilot Study Measuring Vegetable and Fruit Intake in a First Nations Elementary School in Alberta - Daniela Macias Bruenen, University of Alberta

The prevalence of child overweight/obesity has increased over the last 25 years. The prevalence is 2-3 times higher in Aboriginal compared to non-Aboriginal children. Consumption of vegetables and fruit (V&F) may reduce the risk for overweight/obesity. Previous studies on dietary behaviour suggested that a majority of interventions promoting V&F intake have short term positive results in increasing consumption. **Objective:** To describe weight status and V&F intake of children in a First Nation elementary school in Alberta as well as to provide information about their dietary preferences and habits. **Methods:** This was a community-based research study designed with community members to improve the health of children. Dietary surveys were conducted in 4th, 5th, and 6th grades by using repeated 24hour dietary recalls on three non-consecutive days and a food frequency questionnaire for youth. Both tools were tested for validity and modified accordingly. Children's weight status was determined using the WHO child growth reference. **Results:** Twenty eight children participated representing 51% of all eligible children. 60% were overweight. Children had a low V&F intake with 64.3% consuming on average 1 or fewer per day. **Conclusion:** This information can be used by the community to improve V&F consumption of school children.

PAPER PRESENTATION DESCRIPTIONS

GROUP A - Traditional Healing/Practices

Saturday, June 25 1:00pm

Rm ED191

Barriers Facing Those Seeking Travel Funding to Access Traditional Healers Through Non-Insured Health Benefits

My dissertation research is an inquiry into the health work that off-reserve Anishinabek do accessing travel funding for traditional healing services. This study examines access to traditional healing services as organized by the Traditional Healer Services Travel Policy of Non-Insured Health Benefits. By investigating access to traditional healing services where such access is organized by this policy, I explicate the social coordination of Anishinabek health and everyday life. Exploring the health work that is done in practice demonstrates linkages between sites where control takes place and how official versions vary from "how things actually happen as they do" (Campbell and Gregor, 2004, 49).

This inquiry draws from Indigenous knowledge and institutional ethnography. The study took place off-reserve in northern Ontario over a 12 month period. Data collection was conducted through 21 interviews and textual analysis of policies and forms used to obtain travel funding to access traditional healers through Non-Insured Health Benefits. Because most off-reserve Anishinabek have limited financial means, receiving travel funding is the only way they can afford to travel to see a traditional healer. In addition, there are a range of social, political, religious and geographic barriers affecting the ability to access travel funding for traditional healers.

Michael Hankard is Abenaki and lives on the Serpent River First Nation with his wife Cheryl. He teaches part time in the Native Studies program at the University of Sudbury and is a PhD Candidate in Laurentian University's Human Studies program. He also has graduate degrees from Georgetown University and Northeastern University. Mike's dissertation investigates the social organization of access to Non-Insured Health Benefits travel funding for traditional healing services for status First Nations people living off-reserve in northeastern Ontario.

Exploring the experiences of Algonquin, Anishinaabe and Metis Grandmothers who practice Indigenous Sacred Arts for Minoo-madsiwin (physical, emotional, spiritual and mental health and well-being)

The health research is to explore, describe and illuminate the meaning and the essence of the experiences of thirteen Algonquin, Anishinabek, and Metis Grandmothers who practice Indigenous Sacred Arts for health and well-being. These sacred practices include amongst numerous others, the use of ceremonies, rituals, songs, dance, stories, drumming, approaches to healing, birthing, and the rituals associated with death, Cedar bath, birth lodge, sweat lodge, harvesting & preserving foods and medicines, women's retreats and sacred teachings for health and well-being. A second and related purpose is to create new positive narratives that are life enhancing and empowering. The research setting will be on the land, at sacred ceremonial retreats, and women's circles. It is expected that data gathering and sharing will invoke recall of memories, experiences and emotions. The reflections of the stories told will be analyzed using Indigenous methods and tools and meaning derived and shared collectively to make even more meaning from a collective perspective. The research will highlight how Indigenous women perceive their contributions to the health of their people and communities. Partnerships have been developed with the Grandmothers Empowerment Alliance Network and Neegoni and will be engaged throughout the whole process including dissemination of results.

Caroline is an Anishinaabe Kwe Nookimus. Having direct knowledge and experience with the collective traumas shared in First Nation communities, she believes that by reclaiming our Indigenous Sacred practices is a way to Minoo-Maadsiiwin. She possesses a strong passion for the land, the Earth, the environment and believes in the inter-connectedness of all life and a holistic approach to health and wellbeing. She has been an apprentice to the Indigenous Sacred Arts for the past seven years and is presently pursuing her doctoral studies.

PAPER PRESENTATION DESCRIPTIONS

GROUP A - Traditional Healing/Practices Saturday, June 25 1:00pm Rm ED191

Rites of Passage for Algonquin & Ojibwe Female Adolescents: The Berry Fast Experience

There is a paucity of modern literature available on the Berry Fast experience which is a rite of passage for Algonquin and Ojibwe adolescent girls. This thesis involved Algonquin and Ojibwe adolescent girls who completed their Berry Fast—a rite of passage embarked upon by the adolescent girls with the onset of menarche. The study participants also included the members of a Community Advisory Committee. The adolescent girls who participated in the study have chosen to revive a traditional First Nation rite of passage ceremony by completing the Berry Fast despite the negative societal attitudes that surround menstruation within mainstream society. Assimilation policies have also attempted to absorb the First Nations population into mainstream society, but have not succeeded. Using a modified photovoice method, this researcher sought to elicit answers to four questions regarding spiritual aspects, lived experiences, life changes and the traditional First Nations' views on moontime (menstruation). The results showed that the Berry Fast strengthened a connection to Mother Earth, Creator, and enhanced their understanding of their traditional role as Anishnaabe Kweg (Aboriginal women), a culturally constructed path upon which they follow. The study also developed a model for informal, traditional knowledge transfer. This thesis further discusses how the academic world, modified research methodologies, and the urban Aboriginal community came together.

Joey-Lynn Wabie is Algonquin First Nation from Quebec. She holds a diploma in Social Service Worker-Native Program, a Bachelor of Social Work undergraduate degree, a Master of Social work degree, and will be starting in the PhD program at Laurentian University in the School of Rural and Northern Health this fall. She has a passion for ethical community based research and believes in accessible data for all. She is active in the volunteer community bringing traditional teachings to young Urban Aboriginal youth through the Aboriginal Women's Sharing Committee, co-founder of the Niwapeten, N'peten Youth Mentorship Circle, and also the Wabikijik Cultural Circle Fund. She lives with her husband and three children on the outskirts of Sudbury, Ontario.

GROUP B - Chronic Disease Saturday, June 25 1:00pm Rm ED185

Intersecting Knowledge Systems to Collaboratively Create New Perspectives on an Old Issue: Tuberculosis in Saskatchewan Métis Communities.

Indigenous peoples in Saskatchewan continue to experience disproportionate levels of tuberculosis (TB) compared to the rest of the Canadian born population. This inequitable distribution of the TB disease burden demands effective responses at the policy, program, and practice levels. These have so far failed to materialize, perhaps in part because of limitations in the approaches we have taken to understanding the issue.

In this project, the researcher in collaboration with the Métis Nation-Saskatchewan will engage in group model building (GMB), a system dynamics method, to explore the dynamics of tuberculosis experienced by our Métis communities. With this approach, individuals exchange their perceptions of TB and together explore such questions as: What exactly is the problem we face? How did the problem originate? What might be its causes? How can the problem be effectively tackled? A follow-up evaluation of the GMB method will include surveys and interviews. The goal of this research is to create new knowledge about the determinants of TB by combining Western and Métis ways of viewing and exploring tuberculosis. It is hoped that the collaboratively created new knowledge will inform the development of more effective programs, policy, and practice aimed at the reduction of TB transmission.

My name is Amanda LaVallee and I am a Red River Métis woman presently residing in Saskatoon, Saskatchewan. I was born in Edmonton, Alberta and raised in Saskatchewan in places such as Speers and North Battleford. My educational background includes a Bachelor degree in Indian Social Work from the First Nation University of Canada, a Master's degree in Social Work from the University of Regina, and currently undertaking my PhD in Community Health and Epidemiology at the University of Saskatchewan.

PAPER PRESENTATION DESCRIPTIONS

GROUP B - Chronic Disease

Saturday, June 25 1:00pm

Rm ED185

Care, Community and Cognitive Decline: Experiences of Aging and Alzheimer's Disease in Manitoulin Island First Nations

This research uses critical interpretive anthropology to consider experiences of elderhood and dementia in First Nations communities on Manitoulin Island, Ontario. Although Aboriginal Elders have traditionally been highly respected as spiritual leaders and repositories of cultural knowledge, changing demographics and social structures have impacted the character of being and becoming old in Aboriginal communities. These changes, such as transitions from extended to nuclear family structures, put pressure on the roles of Elders and on traditional responses to health issues and care practices including community care and natural helping. Rapid projected growth in the number of elderly individuals, and the consequent increase in the prevalence of dementia in this population necessitate a better understanding of their health issues and care needs. This qualitative, ethnographic research considers the experiences of Aboriginal seniors with dementia, family caregivers, and traditional and mainstream health professionals to better understand how dementia reflects and shapes the aging experience in a contemporary Aboriginal context. Additionally, interviews with well elders elicit expectations for positive aging, as a baseline against which to compare the impacts of cognitive decline and memory loss, allowing an understanding of the broader framework within which dementia is identified, experienced and managed within this population.

Jessica Pace: I am entering the fourth year of my PhD in the Anthropology of Health at McMaster University. My PhD project, supervised by Dr. Wayne Warry, focuses on knowledge and perceptions of Alzheimer's disease and dementias in Canadian Aboriginal communities. I recently completed a year of ethnographic fieldwork on Manitoulin Island where I interviewed individuals with dementia, families, seniors and health care professionals to gain a better understanding of aging, health and the role of the aged in contemporary Aboriginal communities.

Understanding urban Metis, First Nations Peoples and Professionals' Perceptions of Susceptibility to Type 2 Diabetes: A community-based study

While Inequalities in incidence and prevalence of diabetes for Aboriginal (First Nations, Métis and Inuit) communities are often attributed to diet and lifestyle shifts, the roots of such change are not often explored and understood. Objectives: This project aims to understand Type 2 diabetes and its prevention from Métis and First Nations peoples of urban Ontario, Canada who are receiving the services and care as compared to those who provide the services, and those who develop and implement policies affecting the services. Method: This community-based research takes place in an eastern Ontario urban setting and uses two data sources. Primary data source is the in-depth one-on-one interviews with 25-26 primary research participants consisting of urban First Nations and Métis men and women; and 3-5 secondary research participants of policy makers and health service providers (HSPs). Secondary data source is published literatures. This study will employ narrative thematic analysis and diversity analysis. Results: The results of this study may enable the policy makers or front line health workers in urban Ontario context to better tune their prevention program in a way that can meet culturally-appropriate desires and needs of the community and to increase access to preventive health services to bring improved health outcome among urban First Nations and Métis peoples. Conclusion: The outcome of this study has ample diabetes intervention and policy relevance to be considered as a knowledge base in urban First Nations and Métis population health issues in Ontario or more broadly in Canadian context.

Hasu Ghosh is a PhD Candidate in Population Health; and a student in Health Services and Policy Research Diploma Program at the Institute of Population Health, University of Ottawa, Canada. Her research today is driven by local need, but evolved out of various opportunities she had to discuss with local First Nations and Métis community members, service providers and researchers about the importance of diabetes and its prevention. Hasu's research and study is funded by Anisnawbe Kekendazone - CIET (AK-NEAHR) doctoral research award, Ontario Training Centre scholarship, and PHIRN (Population Health Improvement Research Network) doctoral student award.

PAPER PRESENTATION DESCRIPTIONS

GROUP C - Cancer

Saturday, June 25

1:00pm

Rm ED187

The Wholistic Cancer Experience of Anishinaabe People: A Focus on Traditional Healing, Western Medicine and Bimaadiziwin

A qualitative, participatory action research (PAR) design is proposed to examine the wholistic cancer experience of Anishinaabe people who incorporate both traditional healing and western medicine versus those who use only western medicine. The study will further explore the inclusion of traditional healing and whether it brings an Anishinaabe person closer to achieving Bimaadiziwin, an Anishinaabe understanding of health. According to the Aboriginal Cancer Care Unit of Cancer Care Ontario, the incidence rate among Aboriginal people is increasing and cancer remains one of the leading causes of death in this population. However, research has been scant on the cancer experience and the incorporation of traditional healing and western medicine, despite the success of this integration in other areas of health. The proposed study will employ an Anishinaabe Worldview and Critical Medical Anthropology as frameworks to explore the influence of culture, history and the political-economic climate in shaping health and disease, in this case cancer. This study uses PAR as a research strategy which will ensure Aboriginal involvement in the design and delivery of the research, as well as emphasizing "knowledge for use" and benefits of research for Aboriginal communities. Approximately twenty Anishinaabe adults, including people who incorporate traditional healing and western medicine (n≈5), their family members (n≈5) and people who use only western medicine (n≈5) and their family members (n≈5) will participate in in-depth interviews. The results will be analyzed using a narrative approach which is congruent with the Aboriginal oral tradition. A goal for the present study is to share the results and deliverables in a meaningful manner with community stakeholders and with the community in general. This research will contribute to evidence-based research and will have the potential to inform policy and practice.

Cindy Peltier (Fish Clan) is from Wikwemikong and lives on Manitoulin Island with her husband Blair and son Colin. She is currently enrolled in the Interdisciplinary PhD Program in Rural and Northern Health at Laurentian. Cindy holds an MLIS (Western), MA in Human Development (Laurentian), a BEd (Nipissing) and an Honours BA in Psychology (Laurentian). As an educator and researcher, she has worked in Anishinaabe communities for over ten years. Her dissertation research will examine the wholistic cancer experience with a focus traditional healing, western medicine and Bimaadiziwin as an Anishinaabe understanding of health.

CANCERS PUBLIC AND PRIVATE: (RE)NEGOTIATING SICKNESS AND THE END STAGES OF LIFE IN AN EYYOU (JAMES BAY CREE) COMMUNITY

Anthropological investigations of dying and death reveal the ambiguities, complexities, and nuances that surround the end stages of life (Kaufman & Morgan, 2005). Biomedical technologies and public health regimes complicate these difficult processes and intimate moments, creating ethical dilemmas for those in the healthcare profession but also give rise to unique challenges for afflicted individuals and families thrust into new categories of personhood and self-identity. Deborah Gordon (1991, 1997) in her ethnographic on cancer and the issue of disclosure among women in northern Italy documented the strategies deployed by the terminally ill to resist the fate of social death and potential exclusion from normal everyday life. Alternatively, as Linda Hunt (2000) argued, a diagnosis of cancer among some Mexican patients can act as narrative springboard and be a form of empowerment insofar as gendered social roles and social expectations are concerned. For the cancer-afflicted person and loved ones living within a small tightly integrated Eeyou community a new social category of precarious personhood requires negotiation and novel strategies to cope with not only the care and concern of community members but also unwelcome degrees of morbid curiosity and judgment. How does becoming the cancerous person become a strategy of resistance in community life? And in what ways does such a strategy complicate one's self-identity? This presentation will discuss the means by which Eeyou persons and families cope with the state of crisis a cancer diagnosis causes not only for themselves but also within the wider community.

Greg Brass is a Doctoral candidate at McGill University in the department of anthropology. I am Anishnawbeg and a member of the Keeseekoose FN.

PAPER PRESENTATION DESCRIPTIONS

GROUP D - Social Determinants of Health Saturday, June 25 2:45PM Rm ED185

A critical perspective on self-determination as a social determinant of health.

The social determinants of health offer a useful approach to research and policy development in Aboriginal health. This framework has helped describe inequities that contribute to variations in health status between Aboriginal populations. It has also guided responses to health disparities that exist between Aboriginal people and non-Aboriginal Canadians.

Within this framework, self-determination is often regarded as a key determinant of Aboriginal health. This assertion has been accompanied by high expectations about the ability of self-governing communities to redress marginal social conditions and improve population health. Within the health literature, ideas about the relationship between political sovereignty and health status have proliferated despite minimal criticism and evidence.

This paper discusses the role of self-determination in relation to the health of Aboriginal communities. The questions guiding this inquiry are: to what extent and through which pathways can self-determination effect the health of Aboriginal people? In considering this, my objective is to provide a critique of both the current understandings of this relationship and the available evidence-base. My contention is not to oppose the advancement of Aboriginal rights. Rather, I seek to explore a policy dimension that may contribute to a more robust understanding of the association between community self-determination and health.

Nathaniel Pollack - I am a PhD student in Community Health at Memorial University. My doctoral research is on preventative approaches to suicide and mental illness in Labrador. I have an MSW from Carleton University, and have worked in community development, psychiatry, family services, and social work education. I am currently the student services coordinator for the Inuit BSW program in Labrador. I grew up in rural southern Ontario. Since then I have lived in Guelph, Yellowknife, Ottawa, St. John's, and Goose Bay.

Understanding the Impact of a Health Promoting School Intervention on Physical Activity and Nutrition Knowledge, Attitudes & Beliefs of Métis Children.

Children living in Canada are increasingly experiencing obesity and type 2 diabetes (T2DM), conditions that are disproportionately affecting Métis children. The social determinants of health and the environments we live in influence lifestyle choices related to physical activity (PA) and nutrition, directly contributing to obesity and T2D rates in children. Implementing PA and nutrition interventions that integrate Métis culture, traditions and values may encourage healthy lifestyle choices in Métis children and further prevent the development of subsequent chronic conditions. In this project, Participatory Action Research (PAR) methods were used to design, implement and evaluate the effectiveness of a health-promoting school program on PA and nutrition knowledge, attitudes, beliefs and behaviours (KABB) of rural Métis children living in Île-à-la-Crosse, Saskatchewan. Sixteen Grade 3-4 students living in northern Saskatchewan participated in in-class and take-home lessons and activities promoting PA and healthy eating, which respected Métis knowledge, language and values. Interviews, questionnaires, accelerometry, and photovoice provided pre- and post-intervention PA and nutrition information. We highlight the positive influence this health promoting school program has had on influencing PA and nutrition KABB of Métis children. Our research team acknowledges the financial support from the Indigenous Peoples' Health Research Centre.

Sarah is a PhD candidate in the Department of Interdisciplinary Studies, University of Saskatchewan. Sarah is a physical therapist (PT) who actively practiced for several years before pursuing graduate studies. She obtained her Masters degree in physiology, providing a background in obesity and diabetes physiology. During her PhD, she has developed expertise in mixed research methods and participatory action research methodology. Sarah's current research focus is promoting health through community-based physical activity and nutrition interventions, primarily within Métis communities.

PAPER PRESENTATION DESCRIPTIONS

GROUP D - Social Determinants of Health Saturday, June 25 2:45PM Rm ED185

Understanding the relationship between travel on sea ice and community health and safety in Nain, Nunatsiavut

This study is exploring the relationship between travel on sea ice and community health and safety in the community of Nain, Nunatsiavut (northern Labrador). It is being conducted as a case study using mixed methods. Focus groups with expert sea ice users were conducted in July 2010, semi-directed interviews with community members were conducted in November 2010, participant observation was employed in March and May 2011 and search and rescue documents were reviewed. Preliminary results illustrate the importance of the travel on sea ice for health and wellbeing of Inuit and Kabloonangajuit in Nain coexisting with some experiences of injury and emotional trauma related to loss of life of community members from sea ice travel. Perspectives on factors that contribute to making a trip difficult/unsafe or good/safe indicate the importance of environmental conditions, the knowledge of travelers and forms of social support available to them. Individual and collective risk management strategies employed are based in land skills, knowledge gathering and sharing, preparation for trips and navigating obstacles. Weather and ice conditions are the most significant contributing factor to search and rescues in Nain. Many participants express the need for increased formalization of knowledge transmission to ensure safe travel, while expressing positive and negative perspectives on the institutionalization of social supports, through the local search and rescue organization. The results from this study could be used to inform search and rescue and health promotion practices and policies in Nain and other Nunatsiavut or Inuit communities.

Agata Durkalec : Prior to entering the Canadian Studies and Indigenous Studies MA program at Trent University, I completed a BSc at the University of Toronto, majoring in Biology and Peace and Conflict Studies. My thesis research emerged out of work I conducted in Nunavik and Nunatsiavut communities helping to organize community-based sea ice monitoring programmes. Now and in my future work, I hope to help address the pressing question: how can Inuit maintain and foster the health of their communities?

Exploring Aboriginal Perspectives on Social Support and How they Influence Health

Purpose: To understand how social support exists in an Aboriginal community and how it affects their overall health and well-being. **Methodology:** For this study I will visit in advance so that community members can provide input into how the study will unfold. After consulting with key informants (Chief and council, social workers, community health nurses and others) the methodology will be designed and may include story telling sessions, one-on-one interviews, talking circles and any other suggestions from the community. Ideally for this study twenty Aboriginal adults aged 18-85 from the community of Listuguj Mi'kmaq First Nation will participate.

Analysis: A narrative analysis will be conducted to find embedded meanings and common themes discovered through methods used. Throughout the process participants may be involved if they chose so that they are a part of the interpretation of results. **Results:** Given my connection to the community I expect to find social support at all levels very important but the outcome from the supports can either be negative or positive. **Discussion:** Using the uncovered themes in this research will be a first step in trying to increase social support systems that will benefit the health of the community. Working directly with community members will help to identify social supports and work towards solutions to improve health of community members.

Sara Swasoon: I am a 28 year old Mi'kmaq mother of one from Listuguj, Quebec. I grew up on a reservation until I graduated high school and moved to Halifax in 2000. This experience has shaped who I am today and will continue to be a part of who I am throughout the research process. I previously completed a Bachelor's Degree in 2005 and completed my honours thesis using participants from my reserve. During my 10 years in Halifax, I've worked with a few different jobs that were always connected to working with Aboriginal people. I am passionate about my people and their health. Having grown up on a reservation and moving into a more urban centre, I have met other Aboriginal people who have moved from their own reservations into the city. You begin to realize that although many come from different reserves we all share commonalities that are not shared with Euro-Canadians. Growing up on a reservation has an impact on feelings of being marginalized from mainstream Canada but also has the power to unite Aboriginal people from all over. My interest in Aboriginal health has always been inherent in who I am.

PAPER PRESENTATION DESCRIPTIONS

GROUP E - Identity

Saturday, June 25 2:45PM

Rm ED187

"I Bring All of My Ancestors into the Room": Indigenous Research, Identity and Decolonization

This presentation examines the ways in which my honours thesis research has served as a means of identity formation and renewal for me as a woman of Indigenous and Eurocanadian descent. I will highlight both the challenges and positive aspects of my experience in the community and academic context. I hope to engage other Indigenous students in dialogue around research as a means of identity promotion and decolonization in our communities.

Paula Broeders is of Anishinaabe and Eurocanadian descent and is based in Kenora, Ontario (Treaty #3). She holds an honours degree in Religious Studies from Queen's University and has worked over the last seven years at the Kenora Sexual Assault Centre. Paula is currently completing her honours thesis in psychology at the University of Manitoba and plans to pursue a Master's degree in Clinical Psychology.

Challenges and new directions in civic education in a Kanien'kehaka community: contributing to a path of wellness for young Aboriginal learners

My PhD research will begin at McGill University this fall in the Department of Integrated Studies in Education. This presentation focuses on my research proposal for the purpose of generating feedback and encouragement from peers. A strong primary and secondary education curriculum in Indigenous communities is one that teaches of identity, culture and language. It becomes an important component of the well being of Indigenous people of Turtle Island. I propose to broaden our understandings of challenges faced by Indigenous peoples of Canada around Indigenous approaches to Civic Education and how these challenges can be overcome. The frontier for this research poses that identity and cultural enrichment through civic education programs within our own communities encourage success and well being beyond primary and secondary education into post-secondary institutions. Education in my community of Kahnawake is currently experiencing change. The main research question of my research is: What are some of the factors and processes involved in enhancing an existing Social Studies and History curriculum that is both reflective of a Kanien'kehá:ka (Mohawk) citizen, and that satisfies requirements of post-secondary institutions?

Morgan Kahentonni Phillips is a Kanien'kehaka (Mohawk) from Kahnawake and is a citizen of the Haudenosaunee/Six Nations Iroquois Confederacy. Morgan holds a BA (Honours) and an MA in Social & Cultural Anthropology from Concordia University in Montreal and specializes in Indigenous mental health and wellness research, and community-based participatory research. She has been worked as a researcher for the Network for Aboriginal Mental Health Research (NAMHR) since June of 2007. In her community, she has been a Community Advisory Board Member of the Kahnawake Schools Diabetes Prevention Project (KSDPP) since its inception in 1994, and more recently has become part of its Research Team. She has a solid background in her culture and supports resilience and decolonizing research methods.

A Critical Examination of the Media Representation of the Aboriginal Gangster on the Prairies

Outside and Online: Examining why youth employ gangster tropes on social networking sites

Leisha Grebinski is an MA student in Interdisciplinary Studies through the Faculty of Fine Arts at the University of Regina and is the recipient of the Indigenous Peoples' Health Research Council's graduate studies research grant. She is currently working on her thesis entitled A Critical Examination of the Media Representation of the Aboriginal Gangster on the Prairies. Prior to entering academia, Leisha was an Associate Producer with CBC Radio in Saskatchewan.

PAPER PRESENTATION DESCRIPTIONS

GROUP F - Aboriginal Health Research SUNDAY, June 26 1:00pm Rm ED191

Nothing About Us Without Us: Applying the Updated Chapter 9 “Research Involving Aboriginal Peoples in Canada” to Aboriginal Health Research - Issues and Challenges

In the development of research in Canada, there are increasing attempts to ensure that the study of human subjects is conducted ethically. The second edition of the Tri-Council Policy Statement (TCPS) Ethical Conduct for Research Involving Humans revises and augments the initial policy adopted in 1998. It governs researchers – faculty, staff and students – and institutions receiving grants from the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council and the Social Sciences and Humanities Research Council, known collectively as the Tri-council. Of particular significance is research pertaining to the study of groups that are perceived as vulnerable. There is great concern about the impact that research can have on Aboriginal people, for example, because of the power imbalances instituted by colonization. It is argued that additional protection should be provided to the Aboriginal population, and that the enhancement of indigenous cultures should be a goal of the studies conducted. However, applying the TCPS is a complex endeavor due to community protocols and institutional policies. Chapter 9, “Research Involving Aboriginal Peoples in Canada” is the longest chapter in the TCPS at 28 pages long with 22 separate articles. Half of the articles are mandatory for researchers to follow while the other half are meant to provide guidance. This presentation is intended to discuss one researcher’s experience conducting Aboriginal health research with Tootinaowaziibeeng treaty reserve in north-western Manitoba under the updated Chapter 9 of the TCPS. The purpose is to provoke discussion around the strengths and challenges of conducting Aboriginal health research under these new guidelines and to discuss ways of helping Aboriginal health researchers digest these new requirements.

Chelsea Gabel is currently in her final year of Ph.D. studies at McMaster University where her areas of specialization include Comparative Public Policy, Health Policy, and Aboriginal Politics. She explores each of these interests in her doctoral dissertation, where she discusses and evaluates processes and institutional structures that influence relationships between Aboriginal communities and government in the development, implementation, and evaluation of health policy. With particular attention to the social and cultural dimensions of governance, her dissertation draws on community-based research in both Manitoba and Ontario to provide insight into the complex challenges of Aboriginal representation and self-determination in contemporary Canadian society.

Indigenous Ontology in Research Methodology: Application when Conducting Indigenous Health Research in British Columbia- A Saulteaux Metis Perspective

This paper illustrates the integration of Indigenous ontology and methodology into health research in British Columbia. Through the number four [the gifts of medicine (sweet grass, sage, cedar and tobacco); elements that sustain life (earth, fire, wind & water); the elements (sun, stars, moon and earth); four stages of life (birth, youth, adult, elder); four aspects of self (physical, emotional, mental & spiritual); four directions (north, south, east west); four seasons (summer, winter, spring & fall); four living creatures (plants, animals, humans & the environment); and the four food groups as taught by Dr. Jeannette Armstrong Silx- Okanagan (black bear, spring salmon, bitter root and saskatoon berry)] the author describes how an Indigenous ontology can be utilized within research. The number four and its teachings/ principles are incorporated into the author's research framework which includes Indigenous, Women, Health (with a focus on maternal health) and research within Institutions (statistics and epidemiology).

Jennifer Leason is a Saulteaux Métis/ Anishanabe whose Indigenous roots originate in Duck Bay and Camperville Manitoba. She now resides in Vernon, BC with her husband and 19 month old son. She is pursuing a PhD in Interdisciplinary Graduate Studies at the University of British Columbia Okanagan with a focus on Medical Anthropology, Indigenous Studies and Women/ Gender Studies. Her research focus is Indigenous Women's Maternal and Reproductive Health.

PAPER PRESENTATION DESCRIPTIONS

GROUP F - Aboriginal Health Research SUNDAY, June 26 1:00pm Rm ED191

[A reflexive journey] An examination into Indian Residential Schools, the IRS compensation, the Truth & Reconciliation Commission, and the Apology--Perspectives of Blackfoot Confederacy people.

This thesis discusses the perspectives of Blackfoot Confederacy people relating to Indian Residential Schools, specifically the IRS compensation, the Truth and Reconciliation, and the Apology, using an analysis of participant interviews and a literature review. It will address issues concerning these three events which have affected the lives of Blackfoot Confederacy people in various ways. This research examines a chapter in Canadian history which is deep-rooted in non-Aboriginal policy and law as related to Aboriginal people. It is anticipated that we will gain a greater understanding of those survivors of IRS, and how these events have impacted their individual lives, their families, communities, and mainstream society. Furthermore, it is hopeful that each community within the Blackfoot Confederacy benefits in various capacities due to the outcomes and recommendations from this research project. Both mainstream society and academia will also benefit—the lives of Aboriginal People's have been altered due to these aforementioned events; their stories need to be documented and shared to continue to build positive relations and partnerships, to aid in decreasing the astounding statistics that a marginalized people are affected by, and to enhance community ties in all societal realms, thus equality, fairness and respect are realized.

Okj, I am Aipiikohkoikamootaki, my grandfather, Mokakin gave me this name. My English name is, Terri-Lynn Fox. I come from the Fish-eater clan; my ancestors' name was Running Fox. My parents are Tony and Teresa Fox; my grandparents are the late Patrick and Paula Weasel Head and George and Margaret Fox. I have five siblings; many nieces and nephews, and a few great nieces and nephews. I am blessed to have four children, Ross, Courtney, Chate-Lane and Chondra, and now Darian. Together with my partner, we have seven children. I hold a B.A. in Psychology; an M.A. in Sociology; and currently in year three of a Ph.D. in Interdisciplinary Graduate Studies at the University of Calgary. My life experiences teach me of humility, patience, sharing, acceptance, perseverance, and of trust, honesty, courage, determination, and love—of self and others. My passion to understand my community and people stem from the unfortunate and sometimes dire circumstances we are challenged with as Blackfoot people. I strive to incorporate the formal teachings of western academia with the essential knowledge of my ancestors' value systems. Bridging these worldviews will ultimately aid in both mainstream society and Blood Tribe (Blackfoot) society's path to unity, equality and harmony as a collective and as individuals. "Be the change you want to see in the world." Ghandi

PAPER PRESENTATION DESCRIPTIONS

GROUP G - HIV

SUNDAY, June 26

1:00PM

Rm ED185

A multidisciplinary approach for investigating social and biological factors contributing to HIV risk in solvent users

Sunshine House, a drop in centre in Winnipeg, Manitoba, provides services to street involved individuals, many of whom are Aboriginal and involved with solvent use. Manitoba has a unique population of solvent users that differs from the typical solvent user defined in the limited, existing literature. Observational evidence suggests that there is a high proportion of HIV rapid progression within this population. HIV disease involves a disruption of the integrity of mucosal barriers as well as state of chronic immune activation, and additional destruction of upper respiratory and GI mucosa may have important consequences in solvent users. This may be further compounded by social factors, such as increased risk-taking behavior. The objective of this project is to investigate the social and biological factors contributing to HIV risk in Winnipeg's solvent using population through the establishment of a research partnership at Sunshine House. We will use a multidisciplinary approach merging community based research and basic science. It is important that the views of those most directly involved are sought and used to help shape future studies. We will employ mixed methodology including focus groups and individual interviews. Next steps involve obtaining biological samples and assaying for microbial translocation and immune activation.

Courtney Bell is a Métis woman from Manitoba. She is in the first year of a Master's program in the department of Medical Microbiology and the University of Manitoba. Courtney's research involves using a multidisciplinary approach to investigating social and biological factors that may be contributing to HIV rapid disease progression in solvent users in Manitoba. Courtney is also involved with a project investigating genetic links to HIV rapid disease progression in Manitoba.

Addressing Indigenous Health Practices within the HIV/AIDS Service Sector

The imagined HIV/AIDS consumer in Canada is presumed to be white, gay, middle class, able bodied and have the capacity to heal through bio-medical and pharmaceutical conglomerates. This preoccupation with conceptualizing HIV/AIDS subjects as white continues to mask the differences and people who are impacted and affected by HIV/AIDS. This paper calls for decolonizing HIV/AIDS health services, which takes seriously the on-going settler colonialism that infiltrates health services and continues to disavow Indigenous self-determination, sovereignty and HIV/AIDS activism. Health practitioners are responsible for providing safe, adequate and equitable health services to HIV+ people and therefore, must be accountable to the historical and contemporary trauma associated with settler colonialism. This paper asks, how health service practitioners can envision health service practices that move beyond a "helping imperative" that reduce Aboriginal people into "problems" and re-centers settler colonialism. This paper critiques the pedagogical paradigms which are used to teach "diversity" to social workers, pre-service teachers and health practitioners that ultimately reduce all racialized and colonized people into another Other. This paper makes visible the possibilities for a HIV/AIDS practice paradigm shift that strays away from bio-medicine and puts to work decolonization that places Indigenous healing at the center of HIV/AIDS discourses.

Cameron Greensmith is a PhD Candidate in Sociology and Equity Studies in Education at the Ontario Institute for Studies in Education of the University of Toronto in collaboration with Aboriginal Health. He holds a MA in Women and Gender Studies at the University of Toronto and a BA in Sociology at Brock University. His MA research explores the experiences of 2-Spirited or Queer First Nations, Métis and Inuit people as they negotiate their sexuality, spirituality and Indigeneity within the contested and highly a-political space of Pride Toronto. Cameron has recently published an article in the Journal of Homosexuality, which focuses on the overt racism and colonialism within the LGBTQ community in Toronto by interviewing gay/queer men of colour. Cameron's current research focuses on the interconnections between settler colonialism and queer health services in Toronto which continue to devalue Indigenous people and their rights to self-determination and sovereignty. Cameron identifies as a self-reflexive settler, queer activist, feminist who aims to shed light on the continual marginalization of racialized and colonized people in Western queer social movements and health services.

PAPER PRESENTATION DESCRIPTIONS

GROUP G - HIV

SUNDAY, June 26

1:00PM

Rm ED185

Supporting HIV drug treatment among Aboriginal persons living with HIV/AIDS using a health status, health determinants and health care framework: A literature review and conceptual analysis.

Objectives: (1) To describe HIV/AIDS among Aboriginal populations; (2) to examine structural vulnerabilities and resiliency affecting HIV drug therapy among Aboriginal persons living with HIV/AIDS (APLWHA); and (3) to propose a research plan to support APLWHA within the context of HIV drug therapy.

Methods: Literature review and conceptual analysis using a health status, health care and health determinants framework.

Results: In 2008, Aboriginal people accounted for approximately 8% of the estimated 65,000 people living with HIV in Canada. In comparison to non-APLWHA, APLWHA are more likely to be injection drug users, women, and younger than 40 years. APLWHA are less likely than non-APLWHA to access and adhere to HIV drug therapy. Determinants of health for APLWHA include culture, poverty and self-determination. Few theoretical and methodological frameworks have the potential to address the combined effect of biomedical, behavioural and structural factors on HIV drug therapy specific to APLWHA.

Conclusion: My research will use a community, participatory-based design. It will combine both qualitative and quantitative data collected and analyzed using narrative and epidemiological methodologies. I will create a system dynamics model, a data-driven visual model, to explain why and how APLWHA are not accessing, accepting and adhering to HIV drug therapy.

Earl Nowgesic is Ojibwa from the Gull Bay First Nation. Earl is a student at the University of Toronto (UofT) pursuing a PhD in Public Health Science under the supervision of Dr. Kue Young, MD, DPhil. Earl has over 20 years of experience working in the health sector. Earl holds a MHS in Community Health and Epidemiology from UofT, and a BScN from the University of Ottawa. Earl is also a graduate of the Field Epidemiology Training Program, Health Canada.

GROUP H - Mental Health

SUNDAY, June 26

1:00PM

Rm ED187

Research with people: Walking the line of empathy and self-care in mental health services

This presentation will offer reflections on my thesis journey so far. I have sought a number of different perspectives on what it means to be mentally healthy, from Aboriginal Elders, Aboriginal and non-Aboriginal health care providers, and Aboriginal clients of health care services in Prince George. I have been given a wealth of information; therefore one focus of this presentation will be on making meaning from people's stories. I will speak to my own processes of finding a balance between people's insights and my own interpretations, as well as on how to manage and synthesize a large amount of information while remaining true to people's original voices.

Mental health, tied as it is to all other aspects of health, is an emotional subject for all those who helped me by offering their stories, and so the second focus of my presentation is to touch on the connections, trust, empathy, and self-care that are necessary in order for me to move through people's varied experiences of mental health services.

Throughout the presentation I will elaborate on the recurring themes of respect, honour, and a deep love for human beings, that have tied together and supported this work.

Sarah Nelson: I was born in the small town of Perth, Ontario, in a house on Algonquin territory that was bought in 1823 by my Scottish ancestors. I studied at the University of Toronto, completing a degree in Health Sciences and African Studies in 2006, and came to the University of Northern British Columbia in 2009 to undertake a Master's in First Nations Studies. My passions are decolonization, especially of the mind, and social justice leading to health and well-being.

PAPER PRESENTATION DESCRIPTIONS

GROUP H - Mental Health SUNDAY, June 26 1:00PM Rm ED187

Decolonization and special education – implications for mental health for Indigenous/marginalized students

I present the results of a literature review and semi-structured interviews with Indigenous educators based on their experiences working with Indigenous students in Ontario, regarding the overrepresentation of Aboriginal and “minority” student being identified as having “learning disabilities” in Canada. I examine the impact of teacher expectations and “first” language of generations of extended and immediate family on how students perform within the school system. Following Kanu (2003, p.70), I refer to minority populations as the “colonized other” to include “not only the former colonies that formed the periphery at the receiving end of despenations from metropolitan centres in Western Europe,” but also “minority populations experiencing repression and discrimination in dominant culture societies.” A number of researchers attributed differences in overrepresentation of Indigenous students as having “learning disabilities” to inherent differences in learning styles of students. The educators perspectives provided a layered, complex and critical narrative about how the assimilative school system in Ontario fails to recognize Indigenous students’ gifts, or attempts to measure aptitudes based on Western, English-focussed systems maintaining negative stereotypes and lowered expectations for Indigenous peoples. I examine the mental health implications for these students and their families and potential policies and programs to address these implications.

Julie Kang is completing a Master of Education in Adult Education & Community Development at OISE/University of Toronto with a Collaborative in Aboriginal Health. After completing a Bachelor of Education with qualifications to teach English for junior/intermediate students, she worked in a literacy NGO based in Toronto and taught children and youth in the Onigaming First Nations community of northwestern Ontario. Her broad research interests are in the area of “learning disabilities” and “special education” and students who are marginalized within colonial systems embedded in the school system, with a focus on Ontario schools and students.

GROUP I - Environment & Health SUNDAY, June 26 2:45PM Rm ED185

Charting a New Course: A Collaborative Approach to Mapping Changes to Environmental Health

Traditional Knowledge holders are rarely consulted or meaningfully included in managing environmental change, despite that Indigenous Peoples are among the groups most vulnerable to declining environmental health (Brook and McLachlan 2008). In Land and Life aims to bridge the gap between conventional environmental research and Indigenous knowledge of and concerns for the health of the land. Our research partners are the Alexis Nakota Sioux and Paul First Nations in west-central Alberta. Elders have identified that wildlife health, particularly that of moose, is declining, and invited us as researchers to help them better understand and address these issues. We have conducted 12 semi-directed interviews which documented spatial outcomes on maps of the Alexis and Paul First Nations' traditional hunting areas. Participants identified locations of harvested animals, areas which tended to have healthy or sick wildlife, and areas of important habitat. Regions and activities of concern were also located, including resource development and pollution. We will next combine this Traditional Knowledge with satellite imagery and land cover data to further analyze changes to wildlife health. Our goal is for the research outcomes to assist Indigenous communities in advocating for changes in policy and management of wildlife and environmental health in Alberta. Brook, R.K. and S.M. McLachlan. 2008. Trends and prospects for local knowledge in ecological and conservation research and monitoring. Biodiversity and Conservation 17:3501–3512. More information about the In Land and Life Wildlife Health Study can be found at: inlandandlife.ca

Katie Peterson is a Master's candidate with the Environmental Conservation Lab at University of Manitoba. Past research experiences have included species-at-risk, watershed and behavioural ecology. An internship with an agricultural biodiversity enhancement project in Cuba solidified a resolve to work for environmental justice, in Canada as well as in the Global South. Katie was raised within the traditional territory of the Alexis Nakota Sioux Nation, one of the primary Indigenous research partners in the In Land and Life Wildlife Health Study.

PAPER PRESENTATION DESCRIPTIONS

GROUP I - Environment & Health SUNDAY, June 26 2:45PM Rm ED185

Wholistic Health includes the Right to a Healthy Environment

There is a debate in Canada regarding the effects of resource development on human life and the natural environment. On one side of the debate is the preservation of the natural environment that includes the essential needs of human beings to trees, water, air and food. On the other side is the advancement of a market-driven world economy through the extraction of minerals and resources. The research in my PhD dissertation has not begun as of yet, but it will examine a First Nations community in Alberta, their relationship to the lands, resources and environment, and the link to maintaining wholistic health. Despite the debate of preservation of the environment versus economic development, human lives are at stake and it is mainly the lives of First Nations' peoples and their environment that are at issue here. The purpose of my proposed research is to determine, through a Community Based Health Research project, the impacts of resource development on the wholistic health of First Nations' peoples in a First Nations community in Alberta. The empirical study will include a sociological qualitative methodology called PhotoVoice where members of the community will take ownership of the research and will gain experience and knowledge on their own as to how resource development is impacting their wholistic health. It will be important to research with an Aboriginal and treaty rights as well as a Human Rights approach: the rights of First Nations' peoples, their rights to health and to a healthy environment. The primary research question to be addressed is: What is the impact of resource development on First Nations peoples' wholistic health in Alberta? Once an examination is made regarding the effects of resource development on the wholistic health of First Nations' peoples, a final question will be answered: Can International Human Rights law be used to protect the health and environmental concerns of First Nations' peoples in Alberta?

Beverley's Mohawk name is Gowehegyuseh. It means; "She is visiting." Her home community is Six Nations of the Grand River Territory in Southern Ontario. She is working on an interdisciplinary PhD in Law, Sociology and History at the University of Calgary, Calgary, Alberta. She recently completed her course work for the degree and in the process of the candidacy exams. She has earned a Bachelor of Law Degree from the University of Windsor in 1994 and a Masters of Law Degree from the University of Saskatchewan in 2000. Beverley Jacobs has been a Professor at various educational institutions in Ontario, Saskatchewan, and Alberta, where she most recently taught a course, Indigenous Governance, and coached law students to prepare for the Kawaskimhon Moot (Aboriginal Law). She teaches courses on Self-Determination, Canadian Indian policies, Canadian Law and Aboriginal People, First Nations Women and the Law, and Indigenous Law, just to name a few. She is also a public speaker and has made numerous presentations across the globe on various issues affecting Indigenous people and specifically, Indigenous women. She is a former President of the Native Women's Association of Canada. Beverley participated and made numerous interventions at various international fora and traveled to many communities, locally, regionally, nationally and internationally.

PAPER PRESENTATION DESCRIPTIONS

GROUP I - Environment & Health SUNDAY, June 26 2:45PM Rm ED185

Community-based monitoring to ensure the health and continued availability of Arctic Char – a Traditional Food source

Arctic Char (*Salvelinus alpinus*) is an important subsistence resource for people of the Inuvialuit Settlement Region (ISR) contributing a significant portion of their traditional foods consumed. In recent years, dramatic effects of climate change have been observed in the ISR including char-bearing lakes draining into the ocean due to extreme permafrost melt. Residents are concerned about potential effects on the health of their char and the ecosystem and therefore to their access to a resource that is important for their physical, mental, social, cultural and economic health. This research brings together scientific and Traditional Ecological Knowledge (TEK) to develop community-based monitoring plans (CBMPs) for the early detection of changes in the char populations associated with climate change for environmental health management of a food resource. To determine key indicators of change to use in CBMPs, regional environmental conditions are examined in relation to changes in char health. Potential indicators are suggested from both TK and science and are used to determine the parameters studied in the research. Through the creation of local capacity to monitor their Arctic Char traditional food resource, community members are ensured to remain healthy and able to continue their cultural fishing practices for generations to come.

Jennie Knopp is a PhD Candidate in the Environmental and Life Sciences Department at Trent University (Peterborough, ON) researching effective community-based monitoring methods and the linkages between scientific and Traditional Knowledge of Arctic Char in the Inuvialuit Settlement Region. Jennie is an IPY (Climate Variability and Change Effects on Arctic Char Project) and ArcticNet Student Researcher. She is the recipient of the Garfield Weston Award for Northern Research for her MSc and PhD, the Arctic Institute of North America Lorraine Allison Memorial Scholarship, the Nasivvik Centre for Inuit Health and Changing Environments Graduate Scholarship, and the ArcticNet Northern Partnership of Excellence Award. Jennie has also worked with Inuit Circumpolar Council (Ottawa, ON) and Inuit Tapiriit Kanatami (Ottawa, ON) conducting Traditional Knowledge research with local Inuvialuit sea ice experts for Team 10 of the IPY Circumpolar Flaw Lead Study as well as conducting consultations with the Inuvialuit for the upcoming Inuit Knowledge Centre in Ottawa. Previously, Jennie completed her Honours B.Sc. in Zoology at the University of Guelph.

GROUP J - Food SUNDAY, June 26 2:45PM Rm ED187

Traditions and the City: Food insecurities and preferences for urban Aboriginal youth.

It is known that Aboriginal people are over represented among those experiencing food insecurity in Canada. However little is known about how urban Aboriginal youth, Canada's fastest growing population, address food insecurity. Nor is there an understanding of what foods they prefer and how culture influences these preferences when choice exists. To effectively support healthy eating there is a need for a more comprehensive understanding of food preferences and the factors influencing eating habits in this population. The purpose of this qualitative study is to explore food insecurity and cultural practices concerning food in urban First Nations youth. This study employed the qualitative methodology of ethnography. The findings from this study showed that food sharing networks are often used to address food insecurity. Traditional foods were believed to be healthy and desired by the participant. Participants who reported eating traditional foods less frequently desired to eat them more often. In addition to expressing preference for traditional foods insight was provided on the realities of food insecurity for urban Aboriginal youth. The findings from this work highlight the complexity of food procurement, cultural influence and food preference for Aboriginal youth living in urban areas.

Serene has her MSc. in Kinesiology and will be starting her PhD this winter at the University of Saskatchewan. She is the Aboriginal Health Curriculum Coordinator for the College of Medicine at the University of Saskatchewan. For her Masters Serene received the Banting and Best Canada Graduate Scholarship from The Canadian Institute for Health Research. Serene enjoys teaching in Kinesiology and Education. Recently, she was awarded the Provosts Outstanding Teacher Award for a graduate student.

PAPER PRESENTATION DESCRIPTIONS

GROUP J - Food SUNDAY, June 26 2:45PM Rm ED187

Berries, Bison and Branches: Returning to Traditional Aboriginal Sustenance

Food is an outward expression of identity. The food and diets of Aboriginal people are connected to the land. These ties not only inform and shape culture and identity but also determine health and nutrition. For the Aboriginal population, food is a manifestation of culture anchored in land and protocol. Previously, the traditional based diet followed by Aboriginal people ensured health and longevity. However, through the process of colonization all of this changed. Colonization resulted in the denigration of distinct individual Aboriginal cultures, and in turn, the deterioration of health. This disconnect continues presently and is evident throughout Canada as they suffer with greater health disparities than the non-Aboriginal population.

I intend to look at the relationship between cultural identity and foods and how this affects the overall health and well-being of Aboriginal people. Firstly, in understanding this broad topic, I will explore the impact of colonization as it relates to traditional Aboriginal diets. Secondly, I will explore past and present diets and their relationship to Aboriginal health. Finally, I will look at some of the contemporary initiatives that address and involve issues such as food insecurity, food security and food sovereignty that affect the over-all health and well-being of Aboriginal peoples and communities.

Patricia Ann Cundy is of Métis ancestry and is currently a Master's Student at UNBC where she is pursuing a degree in First Nations Studies. Her focus is on Aboriginal Health and the role traditional sustenance has regarding the overall health and well-being of Aboriginal people.

Inuit food security: vulnerability and adaptation to climatic extremes during 2010/2011 in Iqaluit, Nunavut

This research assesses how extreme climate conditions during 2010/2011 affected the food system in Iqaluit, Nunavut. We argue that in order to predict how climate change may affect communities in the future, it is necessary to understand how they experienced and responded to climatic variability in the past. Therefore, 2010/2011 is used as a lens for understanding determinants of vulnerability and pathways for adaptation. This timeframe is examined because it was extreme in terms of biophysical conditions throughout the Canadian Arctic, and these conditions will become more common with future climate change. The aim of this research is to analyze the influence of climatic extremes on food security. Specific research questions include: 1) characterize how climatic conditions were anomalous during 2010/2011 by comparing recent biophysical data to historical trends; 2) determine how extreme climatic conditions affected the ability of hunters to procure traditional food, 4) examine how hunting challenges and opportunities influenced Inuit food security; 5) identify factors leading to increased vulnerability; 6) evaluate adaptive strategies for coping with climatic extremes. This community-based, bottom-up approach allows biophysical data to be complemented by traditional ecological knowledge. This project characterizes vulnerability and adaptive capacity of Inuit in light of a changing climate.

Sara Statham is currently a graduate student at McGill University pursuing a Master's degree in Geography. She is a member of the Climate Change Vulnerability and Adaptation research group led by Dr. James Ford. She is interested in studying vulnerability and adaptive capacity of Inuit inhabiting the Canadian Arctic. Her thesis assesses how extreme climatic conditions during 2010/2011 in Iqaluit, Nunavut affected the ability of Inuit hunters to procure traditional food and how this affected food security at the household level.

1ST Annual Aboriginal Health Research Networks Conference June 27, 2011

TIME	SESSION	ROOM
7:30am	Breakfast ED 114	
9:00am	Welcome remarks & opening prayer	ED191
9:30am	Opening Plenary: “ A Poverty Reduction Approach to Improving Health & Well-being of First Nations Communities (PAR Project) ” – Dr. Charlotte Reading	ED191
10:30am	Break	
10:45am	Talking with their Feet: An Exploration of Non-attendance at Diabetes Clinics - Presenter: Fred Wien (AAHRP)	ED193
	Studying Indigenous Healing in Canada and Belize - Presenter: James Waldram (NAMHR)	CK185
	Applying Realist Review Methodology for Complex Health Intervention Assessment - Presenter: Jonathan Salsberg (AK NEAHR)	CK187
	Health Promotion Research Using an Outdoor Intervention Designed for First Nations - Presenters: Stephen D. Ritchie and Diane Jacko (IHRDP)	ED623
	TBA (Nasivvik)	ED619
12:00	Lunch ED 114	
12:45	Afternoon Plenary: “ Life After Completing a PhD - The Journey Continues ” - Treena Delormier, PhD, PDt	ED191
1:45	The Dynamics of Colonization and Decolonization in a Research Project with Aboriginal Communities - Presenters: Karen Schmidt, Warren Linds, Linda Goulet, Jo-Ann Episkenew, Heather Ritenburg (IPHRC)	CK187
	Indigenous Knowledge and Health Research: Engaging with Community - Presenters: Cora Weber-Pillwax, Phyllis Steeves, Jeannette Sinclair, Jenna Weber, Sarah Auger (AB NEAHR)	CK185
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Conference Co-Hosts:

Conference Funders and Sponsors:





PLENARY SPEAKERS

A Poverty Reduction Approach to Improving the Health and Well-being of First Nation Communities (PAR Project)

Presenter: Charlotte Reading

Poverty, which is disproportionately experienced by First Nations people living on reserve has been linked to increased chronic disease, injury, poor infant development, a range of mental health issues (stress, anxiety, depression, and lack of self-esteem), and premature death. The research team lead (Dr. Fred Wien) and others were approached by and are partnering with the Assembly of First Nations to undertake an intervention research project that will assist in the development, implementation and evaluation of community-level economic development projects as a means of ameliorating poverty and improving health. This intervention research project brings together Aboriginal communities, researchers, health and social service practitioners, policy makers, and health promoters to ensure relevancy and cultural safety. With \$2.5M in funding from CIHR-IAPH, the PAR Project will engage with five (5) volunteer First Nation communities from different regions of Canada to form an Advisory Committee for each with academic, government and First Nations representation to undertake community needs assessments that will inform the development of a strategic plan for sustainable economic development and poverty reduction.

Charlotte Reading is an Associate Professor in the School of Public Health and Social Policy, Faculty of Human and Social Development, University of Victoria. Dr. Reading has conducted research and published in the areas of Aboriginal health, Aboriginal HIV/AIDS, social determinants of Aboriginal health, cultural competence, cancer among Aboriginal peoples, Aboriginal ethics and research capacity building as well as the sexual and reproductive health of Aboriginal women. She is the Chair of the CIHR-Institute of Aboriginal Peoples' Health - Aboriginal Health Research Network Secretariat, and Co-Chair of the CIHR-Institute of Infection and Immunity - Community-Based HIV Research Steering Committee.



PLENARY SPEAKERS

Life After Completing a PhD - The Journey Continues

Presenter: *Treena Delormier, PhD, PDI; Kahnawake Schools Diabetes Prevention Project Research Team and Community Advisory Board Member; Owner - Tionhnhehkwen Consulting Research Associate Center for Indigenous Peoples' Nutrition and Environment*

In my presentation I will share with graduate students and Aboriginal health researchers how my experiences at a doctoral student have shaped my current work as an Aboriginal health researcher. Over the eight years that it took to complete my doctoral degree in Public Health (Health Promotion) a number of factors contributed to my successful completion. I will describe these in terms of the individual/self, family, community and university relationships in which my experiences were embedded. An overarching teaching shared by numerous elders and colleagues was key in guiding my adventure to becoming an independent researcher: that is research of value to one's community is one that balances the intellectual endeavor with the heart. I will conclude my talk by discussing my potential contributions to Aboriginal health research in Canada, as well as my outlook on the future.

Treena Wasonti:io Delormier is a Kaniénke'há:ka (Mohawk) woman from the Mohawk Territory of Kahnawá:ke. She holds Bachelor and Masters degrees in nutrition from McGill University and is a professional dietitian. Treena recently completed her Doctorate at Université de Montréal in Public Health in the Health Promotion option. Her doctoral thesis developed the Food Choice Practice Framework, a theoretical approach to study food choices as social practices and the social structures in which these are shaped. She demonstrated the utility of her framework by exploring family food choices with families of young children in Kahnawake. Over the past 16 years Treena has been involved in multiple academic and community roles with the Kahnawá:ke Schools Diabetes Prevention Project, a community/university partnership which received the 2010 CIHR's partnership award. Treena's research practice emphasizes community-based research with Aboriginal communities and participatory research approaches. Her research interests include food, nutrition and health, social perspectives of food, qualitative methodologies, public health and health promotion, food security, traditional food systems, diabetes and obesity prevention, and aboriginal conceptions of health. She is currently working as a consultant and pursuing post-doctoral opportunities.



NEAHR RESEARCH PRESENTERS

Talking with their Feet: An Exploration of Non-attendance at Diabetes Clinics

Presenter: Fred Wien (AAHRP)

In this session, we present and discuss with those attending the results of a qualitative re-search project carried out in Atlantic Canada. The project sought to understand the reasons why a portion of the Aboriginal population (especially males) who have diabetes are found not to attend diabetes clinics designed to help them cope and manage this serious chronic illness. The presentation will be divided into three sections:

- (a) how was the research carried out and what challenges were encountered?
- (b) What were the findings of the study? More specifically, what reasons or causes lie behind the pattern of non-attendance that has been observed, and what solutions are recommended once those causes are understood?
- (c) What lessons emerge about how best to disseminate the results of a project such as this, and how one can influence programs and services that are provided?

The principal investigator for this study was Dr. Barbara Paterson who at the time held a Canada Research Chair at the Faculty of Nursing, University of New Brunswick. She is currently Dean of Nursing at Thomson Rivers University in British Columbia. The research was supported in a number of ways by the Atlantic Aboriginal Health Research Program.

Fred Wien has an Honours B.A. in Political Studies and Spanish from Queen's University (1962-66), and an M.A. and PhD. in Development Sociology, Government and Latin American Studies from Cornell University (1966-71). Between 1992-96, Dr. Wien served as the Deputy Director of Research at the Royal Commission on Aboriginal Peoples where he headed the research program on employment and economic development. Upon his return to Dalhousie University in 1996, he continued as Professor in the School of Social Work, an appointment that changed to Adjunct Professor in June, 2009 and Professor Emeritus in July, 2010. He serves as the nominated principal applicant for the Atlantic Aboriginal Health Research Program (AAHRP), funded by CIHR/IAPH.

At the national level, he has until recently chaired the Advisory Board for the Institute of Aboriginal Peoples Health (CIHR) and continues as a member. He also chairs the "Make Poverty History" Expert Advisory Committee serving the Assembly of First Nations, which was successful in obtaining a major research grant from CIHR for the project: "A Poverty Reduction Approach to Improving the Health and Well-being of First Nation communities in Canada". He is also the nominated principal applicant for the renewal of funding for the national NEAHR network, comprised of 9 centres for Aboriginal health research and the AHRNet Secretariat, and awarded in the fall of 2010.



NEAHR RESEARCH PRESENTERS

Studying Indigenous Healing in Canada and Belize

Presenter: James B. Waldram PhD, University of Saskatchewan (NAMHR)

The author has experienced significant differences in the research process with Aboriginal healers in Canada and Q'eqchi Maya healers in Belize. The Aboriginal healers he has worked with have tended to be cautious and circumspect, careful to guard access to healing sessions, placing restrictions on what is observable and recordable, and generally communicating a model of healing that accentuates its sacred and secret nature. The Q'eqchi healers with whom he has worked, in contrast, have proven to be very open to research, with few restrictions on what can be observed, recorded and discussed, and have presented a view of the sacred as considerably more open and transparent. Aboriginal healing in Canada is highly politicized, in contrast to the Q'eqchi. I will argue that the main explanatory factor in understanding the significant differences between the two groups with respect to healing research lies as much in contemporary political realities as it does in differing epistemologies.

*James B. Waldram is a medical anthropologist at the University of Saskatchewan who specializes in research on processes of healing. Among his publications is *The Way of the Pipe: Aboriginal Spirituality and Symbolic Healing in Canadian Prisons* (Broadview Press), and *Revenge of the Windigo: The Construction of the Mind and Mental Health of North American Aboriginal Peoples* (University of Toronto Press). He is currently engaged in SSHRC-funded collaborative research with Q'eqchi Maya healers in southern Belize.*



NEAHR RESEARCH PRESENTERS

Applying Realist Review Methodology for Complex Health Intervention Assessment

Presenter: Jonathan Salsberg (AK NEAHR)

Realist review is a relatively new, theory-driven methodology for synthesizing evidence from complex interventions such as those that often take place under the auspices of community-based participatory research. Primarily designed to assess social programs, the methodology explores program mechanisms and contextual factors involved in program success or failure. The product of such a review is typically a theoretical refinement of “generative” causation pertaining to why, when, and in what circumstances programs produce particular outcomes. This interactive workshop will focus on exploring the philosophical foundation of realism and building the skills needed to use and interpret realist review methods.

Workshop goals:

- To explore when it is appropriate to use a realist review approach;
- To understand the key concepts of a realist synthesis (context-mechanism-outcome configurations, demi-regularities, middle-range theory and abductive reasoning);
- To look at examples of realist reviews;
- To address specific questions from the participants concerning their interest, past experience, and future use of realist review.

***Jon Salsberg** is Associate Director and Research Manager for Participatory Research at McGill. He has spent the last ten years working in integrated knowledge translation and participatory research - in communities and in academia. Five of these were situated in a community-based primary prevention project, where he managed the population health component of a national CIHR-IHRT study looking at diabetes in the Aboriginal population. He is co-author of the CIHR KT learning tool *A Guide to Researcher and Knowledge-User Collaboration in Health Research*, and was invited faculty for the 2008 CIHR Summer Institute on KT Research. Jon has worked in both northern and southern Aboriginal community settings, delivered numerous faculty development seminars on PR/IKT and has consulted on participatory projects involving various knowledge-users such as patients in an urban family practice centre, Canadian pharmacists, Montreal urban youth, and federal and provincial public health policy makers. Jon currently teaches *Advanced Participatory Research in Health* in the Department of Family Medicine.*



NEAHR RESEARCH PRESENTERS

Health Promotion Research Using an Outdoor Intervention Designed for First Nations Presenters: Stephen D. Ritchie and Diane Jacko (IHRDP)

The focus of this workshop is to share the story of a collaborative research project to develop, implement, and evaluate the impact of a 10-day outdoor intervention designed to promote holistic health for First Nations (FN) youth. Mainstream programs using wilderness adventure experiences have proven effective, yet there is very little evidence on such programs designed for FN youth populations. Over two summers (2009-10), 16% of the on-reserve population (n=73) of youth (ages 12-18) from Wikwemikong Unceded Indian Reserve in northern Ontario, participated in a standardized 10-day Outdoor Adventure Leadership Experience (OALE) as a short-term intervention to promote resilience and well-being.

Our collaborative research team confirmed improvements in resilience for the youth and attributed it to the OALE experience. We will present the methods and preliminary results from our research, share some of the tools and techniques used, and screen a short 12-minute film from our work entitled *The Journey Home*. Facilitated discussion will revolve around research-related challenges and the use of outdoor experiences as a health promotion modality for Aboriginal communities. The OALE video is available for viewing at www.oalevideo.laurentian.ca. A detailed research report is available from the Indigenous Health Research Development Program (IHRDP) website at <http://www.ihrdp.ca/reports.html>.

Stephen Ritchie is an Assistant Professor in the School of Human Kinetics, and a Doctoral Candidate in the School of Rural and Northern Health at Laurentian University. He has worked in the outdoor field on and off for over 25 years as a guide, teacher, facilitator and more recently as professor and program coordinator. Over the past eight years he has taught a variety of senior level under-graduate courses at the university on topics such as outdoor facilitation and teambuilding; risk management; and adventure therapy. As an instructor trainer, each year Stephen also teaches and certifies students in canoeing and rock climbing. Stephen's research interests are devoted to understanding outdoor adventure and experiential education programs in the context of achieving personal growth and health outcomes. Currently as part of his PhD studies, he is collaborating on a participatory research project with community leaders from Wikwemikong Unceded Indian Reserve to develop, implement and evaluate an outdoor adventure leadership program designed to promote resilience and well-being for First Nations youth in the community.

Diane Jacko is a mother of four and grandmother of two. She is the Program Manager of the Nadmadwin Mental Health Clinic in Wikwemikong, Ontario. Her managerial responsibilities include providing oversight and direction for mental health services for all members of the Wikwemikong Unceded Indian Reserve. These responsibilities include clinical and intervention services, as well as coordinating prevention and mental health promotion programs. The Outdoor Adventure Leadership Experience (OALE) is an example of a mental health promotion program that Diane helped develop along with her clinicians. She graduated from Laurentian University in 1999 and has earned two degrees, one of which is an Honors in Psychology. Diane has been working in the mental health field since that time, and she is a certified trainer in Mental Health First Aid Canada. She is a proud Ojibway from Wikwemikong Unceded Indian Reserve. Diane's overall professional goal in life is to "work herself out of a job" by building capacity, resilience, and well-being for her community.



NEAHR RESEARCH PRESENTERS

The Dynamics of Colonization and Decolonization in a Research Project with Aboriginal Communities

Presenters: Karen Schmidt; Warren Linds; Linda Goulet; Jo-Ann Episkenew; Heather Ritenburg (IPHRC)

We are a research team working with Aboriginal youth using theatre and the arts to develop youth health leaders in a multi-year research project funded by a CIHR Operating Grant. We work with a variety of approaches that encourage youth to identify problematic issues in their community while clarifying the historical, oppressive relationships of colonizer-colonized. One issue we face is negotiating the dynamics of the colonizer-colonized relationships in Western academic research traditions. What happens in the dynamic realities of colonization-decolonization theory in action?

***Karen Schmidt** is a health educator for the File Hills Qu'Appelle Tribal Council in southern Saskatchewan. Karen is also a teacher and former teacher educator with extensive experience working with Aboriginal youth in Aboriginal communities and a community partner on this project.*

***Warren Linds** has worked in Forum Theatre and community education for the past twenty-five years. He has extensive training in Forum Theatre techniques and conducts research in this area. Warren is on faculty at Concordia University in Montreal, Quebec. He is also an IPHRC Co-Investigator.*

***Linda Goulet** has been involved in many collaborative projects with First Nations communities. She is a certified teacher with training in reality therapy. She has conducted research into effective teaching practices for First Nations students. Linda is on faculty at First Nations University of Canada and is an IPHRC Co-Investigator.*

***Jo-Ann Episkenew** is a certified Life Skills Coach with training and work experience in crisis intervention. Her research is on Indigenous peoples' literature and theatre and their applications in improving the socio-cultural health of Indigenous people. Jo-Ann is director of the Indigenous Peoples Health Research Centre at the University of Regina, an IPHRC Co-Investigator and is on the faculty of First Nations University of Canada.*

***Heather Ritenburg** is a certified teacher who has been working with students and the arts for more than thirty years. Her research uses the arts to examine issues in our lives and in our communities. Heather is a doctoral candidate at the University of Regina and is the university research assistant for this project.*



NEAHR RESEARCH PRESENTERS

Indigenous Knowledge and Health Research: Engaging with Community

Presenters: Cora Weber-Pillwax, Phyllis Steeves, Jeannette Sinclair, Jenna Weber & Sarah Auger (AB NEAHR)

The Alberta NEAHR (Network Environments for Aboriginal Health Research) encourages a focus on capacity-development processes, activities and events motivated and guided by Indigenous systems of knowledge acquisition, knowledge sharing, and knowledge application in relation to Aboriginal health research. The Alberta NEAHR supports and enhances the establishment of connections between and amongst Aboriginal community partners, both as individuals and groups, so as to foster the development of more clusters of active research partnerships locally and regionally; more clusters of students and trainees in their own peer-mentoring systems; and more clusters of students and researchers, as individuals and small groups, to work with and learn from Traditional Knowledge holders/teachers, medicine persons, healers and other community members. A panel of researchers, community members and students will discuss projects undertaken by the Alberta NEAHR in collaboration with communities, focusing on outcomes, experiential learning and future plans.

***Cora Weber-Pillwax** is a Cree Métis woman who grew up in a small, isolated community of northern Alberta. She spent her early years within the circle of a large family, living self-sufficiently off the land and in close connections with the rich environment of a northern lake in the boreal forest. She had to leave her home community to continue her schooling through high school and university, obtaining a Bachelor of Education (& a Certificate in Intercultural Education), a Masters in international/Intercultural Education and a PhD in Indigenous Peoples Education, all three degrees from the University of Alberta. Cora currently serves as Principal Investigator on two major research projects involving Indigenous/Aboriginal communities: *Healing Through Language & Culture: Research with Aboriginal Peoples of Northwestern (Canada Social Sciences & Humanities Research Council/Community University Research Alliance)*, and *Participation & Empowerment of Aboriginal Peoples in research to Improve Health & Well-being (Network Environments of Aboriginal Health Research/Canadian Institutes of Health Research)*.*

Previous to her position of Associate Professor in Indigenous Peoples Education at the University of Alberta, she served for almost thirty years as a classroom teacher, a school/systems administrator, and senior level administrator in a northern school system of education whose school population was almost entirely Aboriginal. She works now with Indigenous graduate students and Aboriginal communities in research interactions that are oriented to opportunities for Aboriginal peoples to share and create/re-create/remember their own Indigenous knowledges, and thus to enrich their own lives, their parents' and grandparents' lives, their children's and grandchildren's lives, and ultimately, their communities.

Phyllis Grace Steeves is a Cree Métis woman with strong roots in the community of Lac. Ste. Anne, Alberta, Canada. An 'urban Aboriginal,' she lives in Edmonton, Alberta. Phyllis was recently awarded a Postdoctoral Fellowship with the Alberta NEAHR: Network Environments for Aboriginal Peoples Health, hosted by the University of Alberta. Phyllis holds a PhD, with a specialization in Indigenous Peoples Education, from the University of Alberta, Department of Educational Policy Studies. She obtained a Master in Philosophy, International Peace Studies, at Trinity College University of Dublin, Ireland, in 2003. She obtained a Certificate in Adult Continuing Education (Distinction) at the University of Alberta in 2000. Phyllis also studied at MacEwan University in Edmonton, where she earned several certificates and honed her skills in the realm of Non-Profit Sector Management. Her professional contributions, previous to her current work as a Postdoctoral Fellow, include teaching in a range of contexts: adult literacy students, University students, and a range of education and health professionals. She worked for over a decade in the non-profit sector in the field of literacy education, initially in an Aboriginal organization and most recently in a mainstream association located in Edmonton's inner city. Personal, professional and academic interest and experience has led to a research program focused on factors which impact on the well-being of Indigenous peoples.

Sarah Auger is a member of Mikisew Cree First Nation, which is a community situated in and around Fort Chipewyan in northern Alberta. Sarah acquired her Bachelor of Arts degree with a major in Native Studies at the University of Alberta. She is currently working on a Masters degree in Educational Policy Studies with a specialization in Indigenous Peoples Education. She has more than 10 years of research experience at all stages of the research process. She has worked on several projects, including studies which examined: Aboriginal rights and title in Canada; Métis literacy; accessibility of Métis-specific HIV/AIDS services; family disruption and attachment among federally incarcerated Aboriginal men and women; and effective service provision for low-income families in the City of Edmonton. Currently, she is serving as the Coordinator for the Alberta NEAHR and a CURA project, Healing Through Language & Culture. Sarah has a keen interest in examining how research can be done appropriately and respectfully with Aboriginal communities and individuals using Indigenous Research Methodologies.

Jeannette Sinclair I am Sakâw (northern/bush\ Cree originally from Lesser Slave Lake, Alberta. I am a doctoral student in the Indigenous Peoples' Education program in Educational Policy Studies at the University of Alberta. I have a MA in Anthropology and a BA in Native Studies from the U of A. My research focus is on examining how health and wellness are tied to an Indigenous person's sense of identity, reflected not only in culture and language, but also in connections that are shaped and reflected in shared ancestry (blood) and territory (land). I am a grateful recipient of an Alberta NEAHR graduate student award. During my doctoral studies I worked as a research assistant with a CURA research project, Healing Through Language and Culture which allowed me to broaden my community connections and deepen my understanding of Indigenous/Aboriginal worldviews and Indigenous ways of knowing. In the past two years, I have gained experience teaching on-line university transferable courses to Indigenous students in northern communities.



NEAHR RESEARCH PRESENTERS

Community Research Partnerships at the Manitoba NEAHR

Presenters: Michael Hart (Co-Investigator), Julianne Sanguins (Manitoba Métis Federation) and Brenda Garner (Manitoba Métis Federation). (MB NEAHR)

This presentation will provide an overview of the research partnerships with the Manitoba First Nations and Métis communities that have been established with the Manitoba NEAHR program and will highlight the unique approaches to research that are being taken by each of these community partners. Manitoba Métis Federation: The Health & Wellness Department is one of several departments within the Manitoba Métis Federation and is committed to knowledge development and knowledge dissemination with the goal of improving health and well being of all Métis in Manitoba. Today's presentation will highlight several aspects of our department. To begin, an ongoing initiative to build understanding and use of research at the community level using Knowledge Networks will be described. The presentation will then feature several NEAHR funded initiatives that are assisting in the further development of skills in community based participatory research. In particular, the week-long Métis community Based Participatory Research and Proposal Development Workshop will be discussed as well as two CBPR projects: 'No Place Like Home - Métis Aging in Place' and 'it's a Long way From Here - Health Consumer Experiences of North Métis.

Michael Hart is an Assistant Professor in the Faculty of Social Work, Co-Investigator with the Manitoba NEAHR program and a Co-Director at the Manitoba First Nations – Centre for Aboriginal Health Education. His research focuses on indigenous ways of practice, mental health and indigenous people, disparities in health and social services and anti-colonialism and indigenism.

Julianne Sanguins graduated with a BScN in 1982 from the University of Toronto, MS(N) in 1994 from the University of Portland, and a PhD in Nursing in 2006 from the University of Calgary. Her dissertation was a focused ethnography in which she explored the experiences of individuals living with diabetes and cardiovascular disease in a First Nations community in northern Manitoba. Having held a variety of nursing positions in her career so far, since April 2006 she has been employed as a Research Associate with the University of Manitoba and as Research Program Manager with the Manitoba Métis Federation. She has been involved in a number of qualitative and quantitative research projects as a coordinator and also as a co-investigator. During her affiliation with the University of Manitoba she has been actively involved on the ACADRE community advisory group and now as a member of the 'Networks in Aboriginal Health Research' advisory group.

Brenda Garner, BA, MEd, joined the Health & Wellness Department of the Manitoba Métis Federation five years ago and has participated in the development of the Department's knowledge mobilization unit within a policy and research environment. She has brought with her decades of experience in the non-profit sector, adult education, program development and negotiation.



NEAHR RESEARCH PRESENTERS

Truth-telling, Reconciliation and Community Events: Effective Activities for Communities

Presenters: Rod McCormick, PhD, University of British Columbia, Nominated Principal Investigator
and Sharon Thira, MA, Former Executive Director, IRSSS (Kloshe Tillicum)

The Truth and Reconciliation Commission (TRC) looking into Indian Residential Schools in Canada was developed as part of a court mandated settlement for former residential school students in 2007. One unique component of its work is the community-designed “community event” which while intended to document collective experiences of residential school will reflect the cultural distinctiveness of individual communities. In British Columbia, the Indian Residential School Survivors Society (IRSSS) which has been providing service since 1994, was approached by communities to provide concrete examples of how they could mount TRC “community events”. In 2009, Kloshe Tillicum was invited by the IRSSS to assist with evaluating its large three-day TRC gathering in Kamloops, BC at which numerous truth-telling and reconciliation activities would be offered. Dr. Rod McCormick and Hilda Green undertook the evaluation and delivered pre- and post- test surveys as well as interviews and group sessions to determine emotional safety and effectiveness of the activities offered. Overall, participants were unused to surveys and the emotional impact of the event offered challenges to the researchers. Nonetheless, the data indicated useful directions for communities and organizations wishing to undertake future TRC events.

Rod McCormick is a Mohawk Psychologist at the University of British Columbia where he works as an Associate Professor in the Counselling Psychology Program. For 7 years he was also Director of the Native Indian Teacher Education Program at the same university. This researcher’s area of specialization is Aboriginal mental health and the development of culturally appropriate healing approaches for Aboriginal people. Dr. McCormick has numerous research projects and publications in this field. Dr. McCormick also works as a clinical consultant to several Aboriginal healing centres and organizations as well as government departments such as Health Canada.

Sharon Thira is the former Executive Director of the Indian Residential School Survivors Society(2003-9) and the founding Director of the First Nations House of Healing at Tsa Kwa Luten Lodge in BC (2000). She has developed provincial and national programs in Canada and Australia on the issues of suicide response and residential schools. Ms. Thira specializes in indigenous community change processes and has worked as a consultant for numerous communities and agencies as well as various government departments. She is from Guyana, South America and has a delightful teen-aged daughter.



Aboriginal Health Research Networks Secretariat

The AHRNet Secretariat is the coordinating body for the nine **Network Environments for Aboriginal Health Research (NEAHR)** centres located across Canada. Our goal is to bring Aboriginal health researchers together to enhance communication and coordination; and to promote the improvement of Aboriginal health through networking, collaboration and research.

The purpose of the NEAHR initiative is to sustain, strengthen and evolve a collaborative CIHR Network Environment for Aboriginal Health Research across Canada between researchers and communities. These Centres are funded by the Canadian Institutes of Health Research (CIHR) and the Institute of Aboriginal Peoples Health (IAPH). The Institute of Aboriginal Peoples' Health (IAPH) was established in June 2000, along with the twelve other Canadian Institutes of Health Research (CIHR). Its role is to lead a national advanced research agenda in the area of Aboriginal health and promote innovative research that will serve to improve the health of Aboriginal people in Canada.

The NEAHR Program

The NEAHR program was established to build on the successes of the Aboriginal Capacity and Developmental Research Environment Centres. ACADREs were developed to focus solely on exploring critical Aboriginal health issues and to be the basis of a network of centres across Canada responsible for developing capacity of Aboriginal health researchers and for focused research efforts on determinants of health in Aboriginal communities.

The NEAHR program will benefit Canada's Aboriginal people by helping to increase the impact of Aboriginal health research, and apply the research findings effectively to improve the health of First Nations, Inuit and Métis peoples' health in Canada. The program will, for example:

- Enhance and develop the research environment between Universities and First Nations, Métis and Inuit communities and organizations.
- Support research that focuses on themes such as population health; health services; child health and development; and ethical issues in Aboriginal health research.
- Train more than 200 graduate students who are working a broad range of health issues, including mental health and addiction, food security, nutrition, diabetes, northern health issues, tobacco control, Aboriginal youth suicide.
- To support foster and evolve the collaborative CIHR-IAPH Network Environment for Aboriginal Health Research across Canada.
- To translate new knowledge and to promote the exchange of community knowledge to improve the health of First Nations Inuit and Métis communities.
To advance capacity and infrastructure in Aboriginal health research, ethics and knowledge exchange.

NEAHR MEMBER CENTRES



Atlantic Aboriginal Health Research Program, Halifax

The program fosters community-generated indigenous research in three broad areas: social determinants of health; intervention research; and, health services.

Website: www.aahrp.socialwork.dal.ca

Telephone: 902-897-9199 ext 120

Email: carla.moore@dal.ca



Network for Aboriginal Mental Health Research

NAMHR developed in December 2001 as a partnership between Aboriginal communities and academic researchers. It is a network of researchers from across Canada with extensive experience in Aboriginal health and related areas. The priority of the Network is to develop research capacity. To that end, the emphasis is on networking and training for existing researchers and conducting a series of pilot projects that provide a basis to

seek funding for larger scale projects from other sources including regular CIHR competitions, federal and provincial programs and Aboriginal organizations.

Website: www.namhr.ca

Telephone: 514-340-8222 ext. 5244

Email: tracee.diabo@mail.mcgill.ca



Nasivvik Centre for Inuit Health and Changing Environments

The Nasivvik Centre for Inuit Health and Changing Environments is a multidisciplinary research and training centre funded by the Canadian Institutes of Health Research-Institute of Aboriginal Peoples' Health. The Nasivvik Centre is focused on building capacity in Inuit health research through trainee support and strategic funding initiatives in key environmental health areas of importance to Inuit communities. The Nasivvik Centre provides training and education opportunities, and is conducting multi-disciplinary research on environmental change and influences on Inuit health; environmental public health surveillance and monitoring; and Inuit scientific knowledge in environmental health research.

Website: www.nasivvik.ulaval.ca

Telephone: 705-748-1011 ext. 7242

Email: kristeenmctav@trentu.ca

Anisnabe Kekendazone NEAHR

The Anisnabe Kekendazone (original knowledge) NEAHR (AK-NEAHR, formerly ACADRE) supports training of Aboriginal health researchers through fellowships and seed grants at masters, doctoral and post-doctoral levels. The fund also helps Aboriginal health researchers take part in national and international health research that is relevant to the well-being of Aboriginal communities and attuned to their worldview. The AK-NEAHR focuses on Aboriginal health issues of national relevance, emphasizing primary prevention (building individual and community well-being and reducing the risk of health threats), evaluation of interventions, and translation of research findings for use by communities, policy makers and health services. The centre also features research linking modern science and indigenous knowledge in fields ranging from traditional medicine to community-based resilience to sexual violence and HIV/AIDS.

Website: <http://www.ciet.org/en/project/canada-anisnabe-kekendazone-network-environment-for-aboriginal/>

Telephone: 613-562-5393

Email: neahr-iph@ciet.org



Indigenous Health Research Development Program

IHRDP is committed to a student-centered approach to community-based health research in Ontario. IHRDP will assist with building a career structure for students in Aboriginal health research and will focus its resources on community-driven research projects that will identify health-related issues in First Nations communities. Research themes guiding IHRDP include: prevention and control of chronic diseases; mental health of women and children; and culture, health and healing.

Website: www.ihrdp.ca

Telephone (Oshweken): 519-445-0023 ext. 236

Email: vobrien@mcmaster.ca



Manitoba NEAHR, Manitoba First Nations - Centre for Aboriginal Health Research

The Manitoba Network Environment for Aboriginal Health Research (NEAHR) Program seeks to expand the pool of Aboriginal health researchers and contribute to the development of a sustainable and collaborative research environment for First Nations, Inuit and Métis communities in Manitoba. Primary research themes addressed by this NEAHR include: population health; health services; child health and development; and ethical issues in Aboriginal health research.

Website: www.umanitoba.ca/centres/cahr

Telephone: 204-789-3250

Email: cahr@umanitoba.ca



Indigenous Peoples' Health Research Centre

IPHRC is a partnership between the University of Regina, First Nations University of Canada and the University of Saskatchewan, with broad support from various health boards and Aboriginal health organizations. Funding provided to IPHRC is primarily focused on building capacity in health research among Aboriginal people, communities and institutions through trainee support, and promoting research into areas of Aboriginal health. Our focus includes: Indigenous identity, place and connectivity, and cultural/linguistic continuity, as they relate to health; Mental health and addictions; Complex interactions of factors; Chronic disease. The principles that inform our research are community-based and interdisciplinary. Policy, knowledge translation and social determinants of health transcend all four focus areas and are a required aspect of all of our research.

Website: www.iphrc.ca

Telephone: 306-337-2461

Email: Marissa.Desjardins@uregina.ca



Alberta Network, Edmonton

Their research has evolved in a responsive manner through collaborative community partnerships and research requests. Three research themes have evolved from community requests that will guide and enhance the work of the Alberta Network over the next three years: traditional knowledge and ethics; northern community environmental health; and community access to health services.

Website: www.neahr.ualberta.ca

Telephone: 780-492-1827

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Kloshe Tillicum Healthy People|Healthy Relations, British Columbia and Yukon Territory, Network Environments for Aboriginal Health Research

Kloshe Tillicum: is one of 9 Aboriginal health research centres in Canada. The intention is to build aboriginal capacity in health research by linking the academics, students and communities that were conducting aboriginal research. By developing such a network, these researchers could share their findings, collaborate on projects and encourage new health research from aboriginal students and communities themselves. The four key themes are (1) Indigenous Knowledge including traditional medicine, (2) complex interactions – determining the health of populations, (3) infectious disease and (4) Aboriginal research ethics.

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