Message from Dr. Malcolm King, IAPH Scientific Director

Welcome to another year of exciting research in Aboriginal Health! I hope everyone has had a restful and recharging break, ready for new challenges and success in the coming year.

I'd like to remind our communities of current and upcoming research funding opportunities. In our previous newsletter, we announced two important new opportunities, namely the Open Operating Grant Priority Announcements Aboriginal Ways of Knowing and Applying the “Two-Eyed Seeing” Model to Aboriginal Health, as well as fellowship, dissemination, planning and travel awards opportunities.

Recently, another exciting new opportunity has been launched, namely Environments, Genes and Chronic Disease Catalyst Grants. See page 2 for more details. The Institute of Aboriginal Peoples’ Health is a partner on this opportunity, which is led by the Institute of Nutrition, Metabolism and Diabetes. The one-year $100K Catalyst Grants are designed to assist researchers in developing new research activities, such as feasibility studies and multi-disciplinary collaborations, which relate to advancing knowledge in the field of environment-gene interactions in chronic disease. The possibilities related to Aboriginal health are many – diabetes, lung diseases, arthritis, mental health. Indigenous communities and their research partners are uniquely positioned to take advantage of this opportunity, and form interdisciplinary alliances with researchers who can bring their biomedical expertise to tackle the problems of chronic disease in our communities.

Finally, perhaps the most exciting opportunity of all has come up. An expression of intent opportunity for Strategy for Patient-Oriented Research (SPOR) networks has just been announced. This call for expressions of interest is being held from January 18 to February 28, 2013. It is an opportunity for Canada’s researchers to provide information on the current network landscape. The goal is to identify existing and emerging research network capacity in patient-oriented research in Canada that could align with the SPOR network objectives.

Certainly, there could be a SPOR network specifically devoted to improving clinical outcomes for Aboriginal peoples. I would certainly encourage our community to think about what such a network could look like, and what it would accomplish in terms of reducing the health inequities and improving clinical outcomes for Aboriginal people. But beyond this, in my view, there should be an Aboriginal component to every SPOR network, no matter what the focus is, unless it’s some entity that doesn’t somehow affect First Nations, Inuit and Métis Peoples. Just as all health professionals – doctors, nurses, dentists, pharmacists, psychologists, social workers – are expected to achieve a level of competence that would allow them to deliver culturally safe care, so should there be an element to SPOR networks that respects the health of Aboriginal people and other vulnerable populations. What better time than now for our community to bring their knowledge and skills and their ways of knowing to these networks as they are forming. Please respond to the CIHR call for expressions of interest for SPOR networks.

I encourage everyone to consider these research opportunities and get involved. It’s only with your participation that we can make a difference to Aboriginal health, and close the gaps in health equity that our peoples are facing.

Best wishes for a happy and successful new year!
Malcolm King, PhD

Get your research into the media spotlight

If you are a researcher with an interest in communications and population and public health you are encouraged to apply to this full-day workshop on June 6, 2013 in Montreal, QC. IAPH will sponsor up to 5 researchers related to our mandate to attend this workshop. Application deadline is March 15, 2013.

This workshop is an opportunity to work with experts to improve your skills for getting your research into the media and reaching decision makers. It will be led by media experts from the Berkeley Media Studies Group who will work with participants to help them develop skills they need to more effectively pitch their research findings to news editors and journalists whose news stories have the power to reach decision makers and affect their thinking and plans around public health policy.
Funding Opportunities

Environments, Genes and Chronic Disease Catalyst Grants

The CIHR Institute of Nutrition, Metabolism and Diabetes (INMD) has announced the launch of the Environments, Genes and Chronic Disease (EGCD) Catalyst Grants. These grants are funded in partnership with the Institutes of Aboriginal People’s Health, Cancer Research, Gender and Health, Genetics, Infection and Immunity, Musculoskeletal Health and Arthritis, and Population and Public Health.

The Catalyst Grants, of $100K for one year to each successful applicant, will provide up to $1.1M to assist researchers in developing new research activities, such as feasibility studies and multi-disciplinary collaborations, which relate to advancing knowledge in the field of environment-gene interactions in chronic disease. Application deadline: April 2, 2013

Please visit the CIHR website to access the full funding opportunity. For questions about this strategic initiative and research objectives, please contact Keeley Rose.

Knowledge Translation Prize

The CIHR Knowledge Translation Prize honours and supports exemplary knowledge translation efforts and activities of an exceptional individual, team, or organization that has made an outstanding contribution to increasing the application of research findings, improving the health of individuals, improving health services and products, or strengthening the health-care system.

The nominees will be assessed on achievements in knowledge translation activities relevant to any area of health research (biomedical, clinical, health services and policy, and population and public health), including commercialization and global health.

The amount for the Knowledge Translation Prize is $100,000 for one year and will be awarded to the top overall ranked applicant. The application deadline is February 28, 2013. Additional information can be found on the CIHR website.

Call for Nominations: CIHR Partnership Award

The CIHR Partnership Award recognizes partnerships between organizations that exemplify excellence by bringing health research communities together to create innovative approaches to research, develop research agendas that are responsive to the health needs of Canadians and/or accelerate the translation of knowledge for the benefit of Canadians.

The emphasis of the award is on innovative cross-sectoral partnerships between organizations that promote excellence. The deadline for nominations is May 1, 2013. For questions, contact Rosa Venuta, Senior Advisor, Partnerships.

Engaging Community Members in Health Research

Kiera Keown, Senior Advisor, Knowledge Translation

As a researcher with a focus on Aboriginal peoples, your research findings may be highly relevant to a broad range of Knowledge Users including community health representatives, nurses, elders and policy makers determining social support programs. But how you reach and communicate with these Knowledge Users will likely require innovative strategies that differ from the way you share new findings with fellow researchers. Involving these Knowledge Users in the research project by using an iKT approach is one means to increasing engagement and uptake in health research.

Raising Knowledge User awareness of research findings and facilitating the use of those findings is the purpose of knowledge translation (KT). CIHR plays a fundamental role in bridging the 'know-do' gap and ensuring that research findings get into the hands of those who can use them.

Integrated KT (iKT) is a way of co-creating knowledge that respects cultural approaches and addresses issues of context which are important to engaging Aboriginal Peoples in research projects. iKT happens when a Knowledge User is approached at the outset of a project to integrate their ideas and concerns directly into the design of the project. iKT also requires continual engagement throughout the research process. The ultimate goal of iKT is to increase the likelihood that research findings will be culturally appropriate and consequently more likely to be used. This is especially important in community focused research with First Nations, Inuit and Métis communities.

CIHR has written the Guide to Knowledge Translation Planning at CIHR: Integrated and End-of-Grant Approaches as one resource for researchers to incorporate KT into grant proposals. This guide includes both iKT and end-of-grant KT, providing case studies from successful CIHR grants that bring the concepts to life and worksheets that will help guide your thinking and planning. The KT Guide is available on the CIHR website or in hard copy by writing to kt-ac@cihr.gc.ca.

Michael Smith Foundation: 2013 Trainee & Post-Doctoral Fellowship Awards

The Michael Smith Foundation for Health Research (MSFHR) has launched a new funding competition of trainee awards for post-doctoral fellows. This competition introduces two new elements: (1) 20 percent of the total funding will go specifically to the clinical, health services, and population health research themes to encourage and support applications from health professionals; (2) they have introduced a research area for knowledge translation (KT) science with funding available across all research pillars (biomedical, clinical, health services, or population health).

More information about this funding opportunity, including guidelines and instructions, can be found on MSFHR’s website.

Application deadline: March 28, 2013
Two-eyed seeing for culturally safe health care

This article has been condensed from a recent piece written by Dr. Malcolm King for Gravitas, the official newsletter of the Association of Faculties of Medicine of Canada. In this publication, he commented on medical education but the issues were also relevant to researchers so we thought it timely to share with you. The full article can be viewed on the Gravitas website.

Many health professionals, both Aboriginal and non-Aboriginal, work with First Nations, Inuit and Métis peoples. Aboriginal health professionals, who are grounded in their own culture as well as in Western society, play an important role in making the health care system more culturally safe.

Many educational institutions have embraced cultural competency (gaining in-depth knowledge and understanding of patient/client); however, they often do not incorporate the notion of cultural safety (the power differential inherent in physician or other health provider and patient relationship, the impact of privilege on health and relationships).

In fostering cultural safety, one key aspect is “two-eyed seeing”, a concept developed by Mi’kmaq Elder Albert Marshall, that he described as meaning “to see from one eye with the strengths of Indigenous ways of knowing, and from the other eye with the strengths of Western ways of knowing.”

In everyday practice, two-eyed seeing can offer real benefits. Of course it needs to be understood that just being Aboriginal does not automatically lead to cultural safety. Many Aboriginal people have grown up in a non-Aboriginal environment, and therefore need to learn about Aboriginal traditions and knowledge, just as do most non-Aboriginal people. Also, given the diversity of Aboriginal cultures, everyone has something to learn from cultural safety training. However, having an Aboriginal base and a presence in the healthcare system is an important start towards improved Aboriginal health through better knowledge and understanding.

CIHR News

SPOR Networks - Call for Expression of Interest

Canada’s Strategy for Patient-Oriented Research (SPOR) is a collaboration of researchers, provinces and territories, partners, health care providers, patients and families – all working in partnership to improve the quality and effectiveness of care provided to Canadians.

The SPOR National Steering Committee is inviting the health research community to provide input on research network capacity in Canada.

This call for expressions of interest is being held from January 18 to February 28, 2013. It is an opportunity for Canada’s researchers to provide information on the current network landscape. The goal is to identify existing and emerging research network capacity in patient-oriented research in Canada that could align with the SPOR network objectives.

Please note that this is not a formal letter of intent or a CIHR funding opportunity. It is an open dialogue with Canada’s research community and a venue for Canadian researchers to demonstrate where there is capacity to translate research evidence into better health care policies, therapies, and practices.

Update to the CIHR Open Access Policy

CIHR-funded researchers are required to make their peer-reviewed publications freely accessible within 12 months of publication — at the latest. January 2013 amendments to the CIHR Open Access Policy, formerly known as the Policy on Access to Research Outputs, modify previous requirements to provide the public with freely accessible research articles while aligning with other major funding agencies, such as the US National Institutes of Health. Researchers can comply with the green open access policy by depositing the articles in an archive, such as PubMed Central Canada or an institutional repository, and/or by publishing results in an open access journal.

While the CIHR Open Access Policy provides researchers with clear guidance on CIHR’s minimum expectation, in the spirit of public benefits of research, CIHR continues to encourage researchers to make their publications accessible for free as soon as possible after publication. Compliance with the policy will continue to be monitored through end of grant reporting.

The revised Open Access Policy is available on the CIHR website. For further information, please contact access@cihr-irsc.gc.ca.

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The Institute of Aboriginal Peoples’ Health fosters the advancement of a national health research agenda to improve and promote the health of First Nations, Inuit and Métis peoples in Canada, through research, knowledge translation and capacity building. The Institute’s pursuit of research excellence is enhanced by respect for community research priorities and Indigenous knowledge, values and cultures.

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