



**CIHR IRSC**

Canadian Institutes of  
Health Research

Instituts de recherche  
en santé du Canada

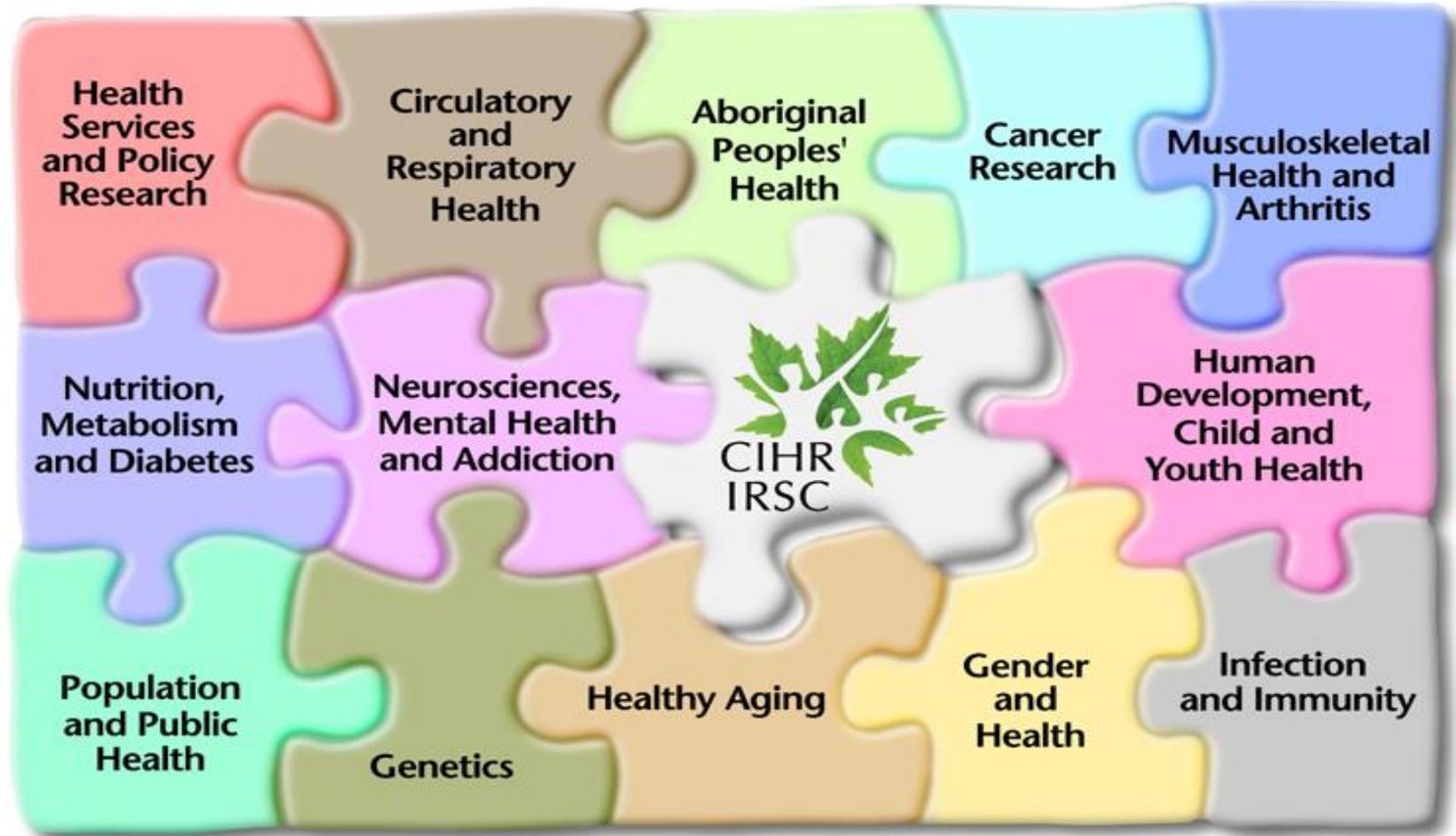
**Presentation at Whyalla, SA  
March 2005**

# Overview of Presentation

- Historical overview of CIHR's Rural and Northern Health Research Strategic Initiative
- Research funding: CIHR's investments
- Current funding opportunities
- Obtaining funding

*Developing a national strategy to  
increase capacity in rural and  
northern health research in  
Canada*

# **Historical overview of CIHR's Rural and Northern Health Research Strategic Initiative**



# Four Pillars

1. Bio-medical
2. Clinical
3. Health Systems, Services and Policy
4. Health of Population, Societal and Cultural Dimensions of Health and Environmental Influences on Health

# Scientific Directors

## INSTITUTE

Aboriginal Peoples' Health  
Cancer Research  
Circulatory and Respiratory Health  
Gender and Health  
Genetics  
Health Services and Policy Research  
Healthy Aging  
Human Dev't and Child and Youth  
Health  
Immunity and Infection  
Musculoskeletal Health and Arthritis  
Neurosciences, Mental Health and  
Addiction  
Nutrition, Metabolism and Diabetes  
Population and Public Health

## SCIENTIFIC DIRECTOR

*Jeff Reading, U of Victoria*  
*Philip Branton, McGill*  
*Bruce McManus, UBC*  
*Miriam Stewart, U of Alberta*  
*Roderick McInnes, U of Toronto*  
*Morris Barer, UBC*  
*Anne Martin Matthews, UBC*  
*Michael Kramer, McGill*  
  
*Bhagirath Singh, UWO*  
*Cyril B. Frank, U of Calgary*  
*Rémi Quirion, McGill*  
  
*Diane T. Finegood, Simon Fraser*  
*John Frank, U of Toronto*

# Special Joint Initiatives

- **Rural and Northern Health Research**
- Genetic & Environmental Interactions
- Clinician Scientist Initiative
- Global Health Research
- Reducing Health Disparities
- Environmental Influences on Health
- Tobacco Initiative
- Regenerative Medicine
- Injury, Repair and Rehabilitation

# In the beginning

- CIHR identified need for a focus on rural health research
- December 5, 2000, Dr. Renee Lyons of Dalhousie University is appointed as the Special Advisor to the President on Rural Health
- Goal is to work collaboratively across the institutes in an integrated approach

# Objective

To support research and knowledge translation activities in rural and northern health.

To increase the capacity of the Canadian research community in rural and northern health.

To become a world leader in research, innovation and policy in rural and northern health research

# An overview...

## RNHRI Governance:

- Dec 2000 – Feb 2003 R. Lyons Special Advisor on Rural Health
- Jun 2001 – Creation of the National Agency Working Group (federal partners group)
- Sep 2002 – RNHRI created and J. Reading named CIHR Champion
- Jul 2003 – Creation of the Scientific Advisory Committee
- Aug 2003 – NSERC/SSHRC/CIHR Working Group on Northern Research is established
- Aug 2004 – M. Bisby is named CIHR Champion

# ...An overview...

Bringing researchers and stakeholders together:

- Sep 2001 - St John's NLL Forum
- Sep 2001 – Northern Town Hall meetings
- Oct 2002 – Rural Definitions - Halifax
- Oct 2003 – Rural/Northern Indicators Workshop – St John's
- Oct 2003 - Research in R/N Interdisciplinary Healthcare - Saskatoon
- Mar 2004 – Dialogue on Northern Research - Whitehorse

# ...An overview

## Funding Opportunities:

Jun 2001 - 1st RFA launched on Diagnostic and Integrative Projects

Jun 2002 – 2nd RFA launched on Building Healthy Communities

Jun 2003 – 3rd RFA launched on multi year Team and Community Grants

# CIHR Investments

- RNHRI
- CIHR in general

# RNHRI Funding

## 2002: 6 Diagnostic and Integrative Projects

- One year development grants
- Total: \$600,000 funded
- Most projects have finished their studies
- A few extensions due to delays in securing data from sources, including Statistics Canada
- Areas of Institute interest include:
  - health services, baseline health data on rural populations, population health issues, gender & health, aging

# Results: Diagnostic and Integrative Projects

***Evaluation of rural medical education programs*** – B. Chan, Sunnybrook and Women's College Health Sciences Centre

***The Canada Rural and Remote Health Study: Progress towards project building and area identification*** – J. Dosman, University of Saskatchewan

***Gender and women in rural health research: Developing a comprehensive research strategy*** – L. Greaves, University of British Columbia

***An evaluation of the unity of national information sources for developing a baseline dataset on the health of rural Canadians*** – J. Guernsey, Dalhousie University

***Net loss population settlement patterns and maintenance of rural health status: A case study in Atlantic Canada*** – J. Keefe, Mount Saint Vincent University

***Fit and frail seniors in rural Canada*** – C. MacKnight, Dalhousie University

# RNHRI Funding – 2002/03

## 2003: 6 Projects under Building Healthy Communities RFA

- One year development grants
- Total: \$506,672 funded
- Areas of Institute interest include:
  - Maternity care
  - Food security in Nunavut
  - Baseline health data on rural populations,
  - Community resiliency,
  - Medical workforce and,
  - Asthma therapy

# Results: Building Healthy Communities

***Rural women's experiences in maternity care*** – J. Kornelsen, BC Women's Hospital

***Food security in Nunavut: Traditional and market foods*** - L. Chan, McGill University

***Evaluation of the utility of national information sources for developing a baseline data on the health of rural Canadians*** – J. Guernsey, Dalhousie University

***Health status and community resiliency: What are the links*** – J. Kulig, University of Lethbridge

***Strengthening the medical workforce in rural Canada: the role of rural/northern medical education*** – R. Pong, Laurentian University

***Better respiratory education and asthma therapy in Hinton*** – R. Tsuyuki, University of Alberta

# Partnered Research funding – 2003/04

Total of \$1,140,000 commitment over 6 years

**With INMHA: *Rural- urban and intra-rural differences in mental health***

– C. D'Arcy – University of Saskatchewan

**With IA:**

• ***Care of persons with dementia in rural and remote areas*** - D.Morgan – University of Saskatchewan

• ***Health and aging in rural environments*** - L.Strain – University of Manitoba

**With IPPH: *The changing physical and social landscape in Atlantic rural Canada*** – J. Guernsey – Dalhousie University

# Research Funding – 2004/05

## June 2003, launched RFA to support:

New Emerging Teams @ \$300,000 per year

Operating grants with community involvement @ \$100,000 per year

Peer review took place in July 2004

Results announced in August 2004

## Approved funding:

4 NETS for a value of \$6,000,000 over 5 years

2 Community grants for a value of \$600,000 over 3 years

# RFA Results – August 2004

## RNHRI New Emerging Teams

***Responding to rural communities: Building a program of research in maternity care*** – S. Grybowski & J Kornelsen, University of British Columbia

***Young women and health in rural Nova Scotia*** - P. McGrath, Dalhousie University

***Integrated study of the social dimensions of rural health*** – A. Ostry & C. Hertzman, University of British Columbia

***Exploring an untapped resource: The role of pharmacists in improving healthcare in rural and northern regions*** – R. Tsuyuki, University of Alberta

# RFA Results – August 2004

## RNHRI Community-based Grants

- ***Community collaboration to improve health care access of northern residents*** – R. Annis, Brandon University
- ***The working relationships of public health nurses and high priority families in northern communities*** – M. MacLeod, University of Northern British Columbia

# Overall CIHR investments

June 2001:

Press release to launch the 1<sup>st</sup> RFA, Diagnostic and Integrative Projects, CIHR states that this will add to CIHR's existing \$5.2million investment in rural health.

So what is it as of June 2004...

# Methodology...

## Review of CIHR funding and project databases

(J.Koptie & G.Thomas)

- Timeframe: from 1999/00 to 2009/10
- Key word search
  - Conducted validation process to reduce over 1,900 hits to 71 valid projects
- Types of funding: includes all funding programs: operating grants from open competition, grants from RFAs, IHRTs, CAHRs, etc

# ...Methodology...

## Parameter definitions for selection of projects:

For the purpose of this study, the 60th parallel was used as the dividing line to identify rural and northern.

Why? The official federal definition identifying the southernmost limit of the discontinuous permafrost is difficult to apply to CIHR projects that refer to large geographical areas such as “northern Alberta”.

# ...Methodology...

## Northern:

- includes all funded grants for research North of 60°
- includes research into the health of Inuit, and other Aboriginal groups (eg: Dene) that are located North of 60°
- includes research into the health of the Inuit and Innu of Northern Quebec and Labrador

# ...Methodology

## Rural:

- Excludes all funded research that is focused exclusively on the health of Aboriginal groups in rural areas South of 60°, including the northern part of the provinces.
  - The reason: this research is specifically attributable to IAPH, and First Nations are easily identifiable.
- Includes any comparison of Aboriginal and non-Aboriginal communities in rural areas South of 60°, including the northern part of the provinces.
- Includes any comparison of urban vs rural populations.



**PROVINCES ET TERRITOIRES**

- Yukon
- Colombie-Britannique
- Alberta
- Saskatchewan
- Manitoba
- Ontario
- Québec
- Nouveau Brunswick
- Nouvelle-Écosse
- Île-du-Prince-Édouard
- Territoires du Nord-Ouest
- Nunavut

**PROVINCES ET TERRITOIRES (FRANÇAIS)**

- Yukon
- Colombie-Britannique
- Alberta
- Saskatchewan
- Manitoba
- Ontario
- Québec
- Nouveau Brunswick
- Nouvelle-Écosse
- Île-du-Prince-Édouard
- Territoires du Nord-Ouest
- Nunavut

**LEGEND / LÉGENDE**

**MAJOR CITIES / VILLES MAJEURES**

- Population 1,000,000+
- Population 500,000+
- Population 250,000+
- Population 100,000+
- Population 50,000+
- Population 25,000+
- Population 10,000+

**CITY POPULATION / POPULATION DES VILLES**

- Population 1,000,000+
- Population 500,000+
- Population 250,000+
- Population 100,000+
- Population 50,000+
- Population 25,000+
- Population 10,000+

**MAJOR ROADS / VOIES MAJEURES**

- Interprovincial / Interprovinciales
- Provincial / Provinciales
- Highway / Autoroute
- Trunk / Tronc
- Local / Local

**BOUNDARIES / FRONTIÈRES ET LIMITES**

- International / Internationales
- Provincial / Provinciales
- Territorial / Territoriales

**OTHER FEATURES / AUTRES CARACTÉRISTIQUES**

- Water / Eau
- Ice / Glace
- Glacier / Glacier
- Perennial Snow / Neige éternelle
- Permafrost / Permafrost

**SCALE / ÉCHELLE**

1:10,000,000

**CANADA**

Scale: 1:10,000,000

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# Projects/value

Period under review: 1999/00 to 2009/10

	<u>Number of projects</u>	<u>Value</u>
<u>Rural Health</u>	57	\$28,212,921
<u>Northern Health</u>	14	\$12,799,202
*Arctic Net		9,146,150
*Laval ACADRE		1,494,064
Projects funding		2,158,988
<u>Total</u>	71	\$41,012,123

# Subject of Northern Research Projects n=14

## From 1999/2000

- Nutrition 3
- Addictions and Mental Health 2
- Environmental influences 2
- Health Status 2
- Gender: Women's health 1
- Population Health 1
- Genetics: Children's Health 1
- Health Services : Healing practices 1
- Health Services: Cancer 1

# Subject of Rural Research Projects n=57 From 1999/2000

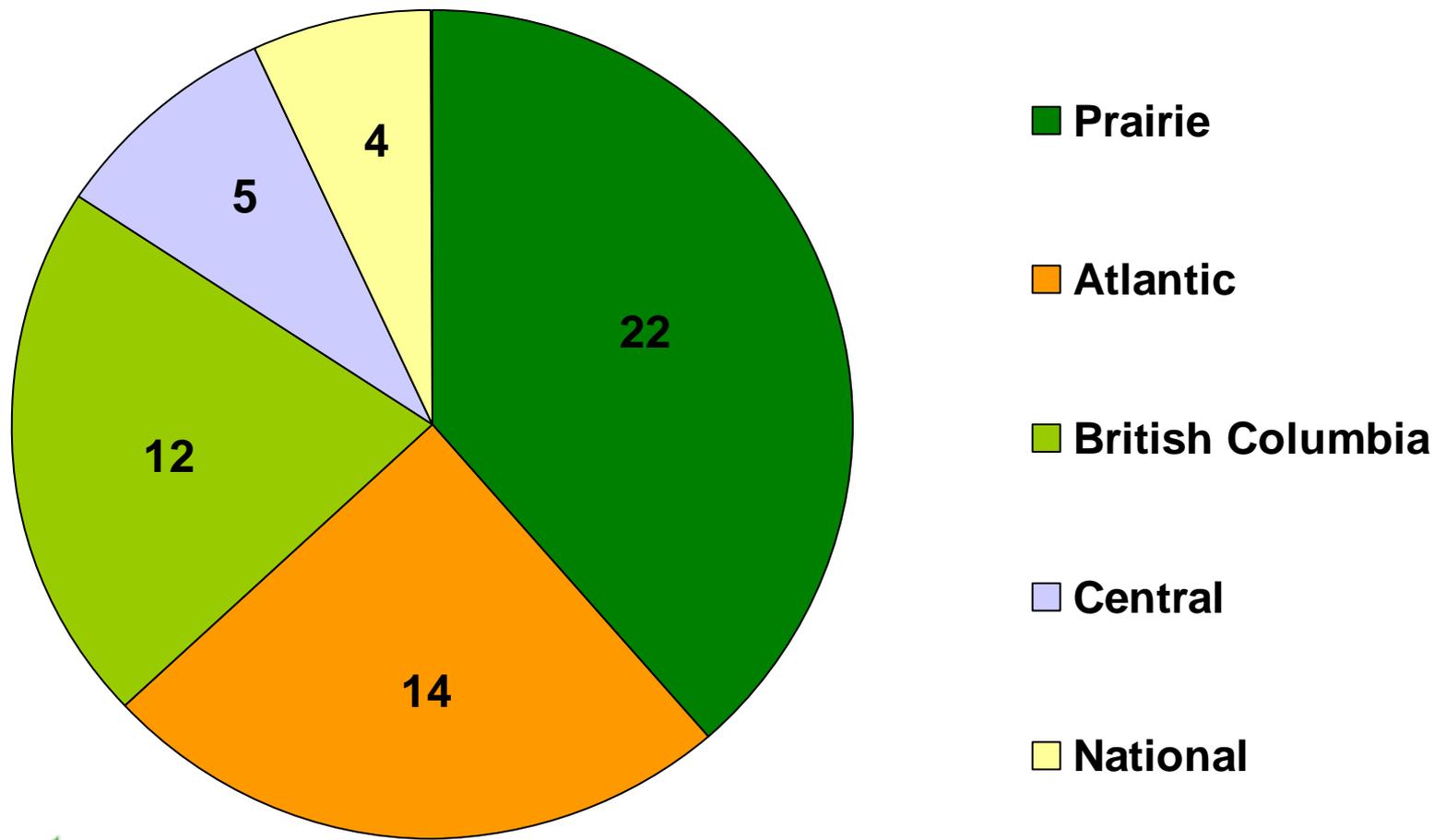
• Health services	8	• Chronic Illness	2
• Gender- women's health	6	• Tele-health	2
• Aging	5	• Anti-microbial resistance	2
• Health status	5	• Knowledge translation	2
• Agricultural health	4	• Workshops/symposia	2
• Mental health	4	• Population Health	1
• Health Policy	4	• Respiratory Health	1
• Health Human Resources	4	• Cancer Health Services	1
• Occupational Health	3	• Environment- Water Safety	1

# Northern Projects n=14 Geographic Distribution

# Summary of Geographic Distribution of CIHR Funded Rural Projects

Atlantic Canada	14
Central Canada (ON & PQ)	5
Prairie Provinces	22
British Columbia	12
National	4

# Summary of Geographic Distribution of CIHR Funded Rural Projects



# CIHR Funded Institutions with 1 Rural Project

Brandon University

University of Northern British  
Columbia

University of New Brunswick

McMaster University

Memorial University of Newfoundland

Centre de recherche Fernand-Séguin  
(Montreal)

Hospital for Sick Children (Toronto)

University of Windsor

Mount Saint Vincent University

University of Regina

Sunnybrook and Women's College  
Health Sciences Centre (Toronto)

Université Laval

Laurentian University

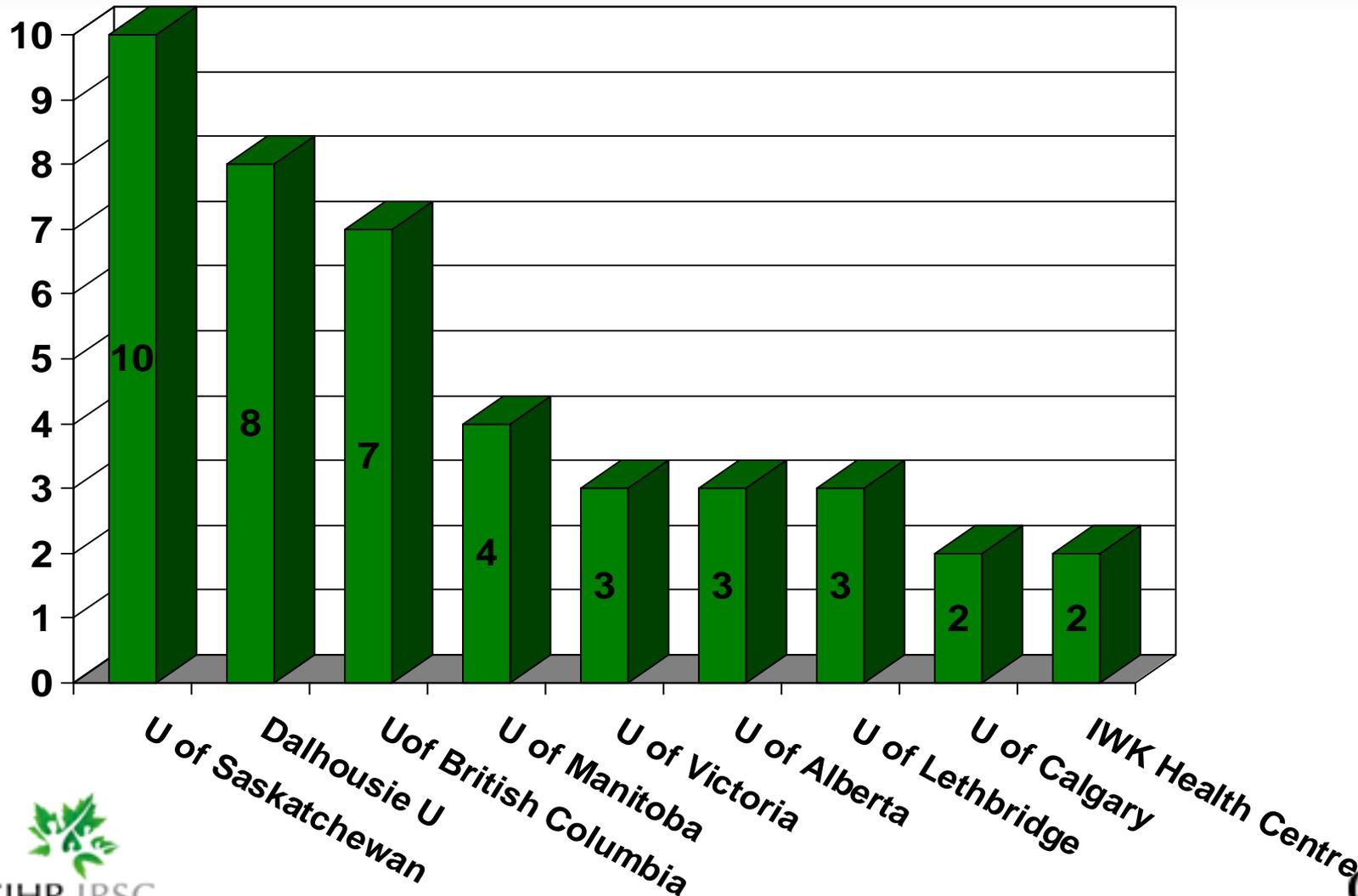
B.C. Women's Hospital (Vancouver)

University of Prince Edward Island

# CIHR funded Institutions with Rural Projects

University of Saskatchewan	10
Dalhousie University	8
University of British Columbia	7
University of Manitoba	4
University of Victoria	3
University of Alberta	3
University of Lethbridge	3
University of Calgary	2
IWK Health Centre	2

# Institutions with more than 1 CIHR Funded Rural Projects



# Funding Opportunities

# Funding opportunities....

## RFA – Development of Northern Health Research:

- Purpose: support researchers to meet with communities and explore new collaborative opportunities in northern health research
- CIHR commitment from the Dialogue
- One-year development grants - \$40,000 Maximum
- Total funds available this year: \$200,000
- Deadline for proposals: November 15, 2004
- Anticipated Start date: February 27,2005
  
- <http://www.cihr-irsc.gc.ca/e/24888.html>

# ...funding opportunities...

## RFA –International Development Program:

**Purpose:** encourage Canadian researchers to collaborate internationally in CIHR's priority areas of health research

### **Key Deadlines:**

- **One-time Development/Planning Grants:** Dec 1/04
  - **One-time Collaborative Research Grants:** Dec 1/ 04
  - **Funding:** Up to 1 year
  - **Maximum amount per grant:**
    - Development and Planning Grants is \$25,000
    - Collaborative Research Project Grants is \$100,000
- The total amount for this program is up to \$1,000,000.

- <http://www.cihr-irsc.gc.ca/e/22308.html>

# ...funding opportunities

## **RFA – CIHR Team Grant Program:**

**Purpose:** support teams of talented and experienced health researchers conducting high-quality research and providing superior research training and mentorship

### **Key Deadlines:**

- Letter of Intent: January 7,
- Full applications: September 1, 2005
- Anticipated funding: April 1, 2006
- Duration: Up to 5 years

### **Funds Available** For this competition:

\$12 million, at a minimum, per annum for 5 years.

CIHR anticipates that between 6 and 16 Teams will be funded. Only applications of exceptional merit and scope will receive over \$2 million per year.

<http://www.cihr-irsc.gc.ca/e/24791.html>

# Tri-agency Collaboration...

## **Proposed: Tri-agency RFA on northern research**

- Purpose: to fund team northern projects that will include all 3 sciences

## **Proposed timeframes:**

- Launch dates: March 2005
- Decisions on LOI and invitation for full proposal: Jan 2006
- Deadline for full applications: July 2006
- Funding start: October 2006

# The Working Relationships of Public Health Nurses and High Priority Families in Northern Communities

1. To articulate the practice of PHNs with families
2. To identify factors that facilitate and hinder families' access to multidisciplinary community resources and services
3. To inform best practices, including those with Aboriginal families off-reserve
4. To inform education and policy development
5. To develop capacity for research involvement and research -based practice among northern PHNs

# Working Relationships Research

- Researchers: MacLeod, Browne, Cerny Doane, Greenwood, Moules, Hanlon
  - Team of 6 PHNs - to add family representatives
- In depth interviews with PHNs in 8 different practice settings across Northern Health
- Shadow several PHNs
- Interview Families
- Interpretive Analysis
- 3 year study - Data collection to begin

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