

# Endings and Beginnings for Aboriginal Health Research in Canada

By: Chris Furgal and Dianne Kinnon

It is surprising that in a G8 country such as Canada, the average life expectancy of individuals of certain heritage is significantly less than that of Canadians overall. This is unfortunately the case for Aboriginal peoples, who have a life expectancy more than 10 years less than the country's average. The answer to the question "Why?" is in some cases quite straight forward, and in others quite complex. What cannot be argued is the need to understand this reality in order to better serve, support, and improve Aboriginal health today and in the future.

*"Guided by the original consultation reports about the role of a national Aboriginal health institute, the National Aboriginal Health Organization (NAHO) became aware that there was a void in the availability and accessibility of health information and outcomes of Aboriginal health research. To remedy this, the National Aboriginal Health Organization's (NAHO) Board of Directors and staff decided to produce a research journal focusing on Aboriginal health."* ([www.naho.ca](http://www.naho.ca))

Launched in 2004, NAHO's *Journal of Aboriginal Health* (JAH) has promoted and disseminated peer-reviewed articles pertaining to Aboriginal health from leading health scholars, academics, and Aboriginal community members. In addition to offering in-depth analyses on emerging issues in the field, the journal has included original research, editorials, and reading suggestions on selected themes. JAH was also dedicated to open access by publishing online through the NAHO website, being a front-runner in the online access movement in the academic publishing community.

To date, JAH has published 9 volumes and 13 issues on topics that raise awareness of and provide critical insights in the field of Aboriginal health. For nearly 10 years, JAH has represented a leading source of research findings and critical dialogue on the reality of Aboriginal health in Canada, serving researchers, decision-makers, and communities. In a publishing and electronic information landscape that is expanding rapidly with new journals focused on specific aspects of health and well-being, JAH has continued to represent one of the few venues for an Aboriginal-specific focus to health, healing, and well-being.

Sadly, 2012 marked NAHO's twelfth and final year of operations, when its funding was cut in the 2012 Canadian federal budget. NAHO's offices closed on June 29, 2012 and with it, JAH was forced to close down its operations as well. As a result, this issue represents the final issue of the *Journal of Aboriginal Health* to be produced under the JAH banner and NAHO's direction. With significant threats to the role and place of Aboriginal health research in today's funding landscape (Webster, 2012; <http://kahwatsire.com>) and significant pressures on access to basic resources and services supporting Aboriginal health in many regions of the country (e.g.,

food security in the North), there is an even more pressing need to disseminate evidence-based findings on Aboriginal health and well-being.

While this issue marks the passing of an important actor in the Aboriginal health research communication field, we are very pleased to announce that it is not the end of the journal. With a strong belief in the need for such an outlet, the Secretariat of the Network Environments for Aboriginal Health Research (NEAHR) in Canada has taken on the role of continuing and growing the mandate of the journal (Loppie and Marsden, 2014). Moving forward, the *Journal of Aboriginal Health* will be published by the Secretariat—based at the University of Victoria—under the title *International Journal of Indigenous Health* (<http://journals.uvic.ca/index.php/ijih>). Volume 10 (currently available) and future issues will continue to disseminate high quality research findings and community perspectives to fuel critical dialogue on these important topics in Canada and around the world.

This final issue of JAH also represents the only issue specific to Inuit health. While other volumes and issues have included Inuit-focused content, this publication is dedicated to research, community stories, and perspectives specific to Inuit. It is produced in collaboration with the Nasivvik Centre for Inuit Health and Changing Environments based at Laval and Trent Universities.

Created in 2002 with a grant from the Canadian Institutes of Health Research – Institute for Aboriginal Peoples Health (CIHR-IAPH) under the NEAHR program, the Nasivvik Centre is one of nine NEAHR Centres across the country. It is the only Centre in this program focused exclusively on capacity building and training for research in Inuit communities. Directed through partnerships with the regional Inuit governments, land claim organizations, and national organizations—including at the time Inuit Tuttarvingat, the Inuit Centre at NAHO—the Nasivvik Centre focuses on supporting researcher community relationships, student training and capacity building, and Inuit-specific research and communication on issues related to environment-health relationships in the North.

However, funding for the NEAHR program has come to an end and the Centres across the country are now striving to maintain a presence on the landscape of Aboriginal health research and training. Following 10 years of initial investment in capacity building in this area, great strides have been made in Aboriginal engagement in and direction of health research, as well as our collective understanding and appreciation for Aboriginal health issues. If one thing has come out of the rich and valuable volume of research exploring this topic in the country over the last 15 years, it has been an appreciation for the complexity and diversity







