

# THE FIRST SIX YEARS

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**INDIGENOUS AND GLOBAL  
HEALTH RESEARCH GROUP  
(IGHRG)**

2010-2016

## OUR PURPOSE:

To promote the health and wellness of all populations in Canada, with a focus on vulnerable peoples.

## OUR APPROACH:

We develop, implement, and evaluate culturally-appropriate and evidence-based programs and work closely and collaboratively with communities, and community-based organizations, to empower people to plan and implement a path to healthy living.

## OUR PHILOSOPHY:

A bottom-up approach - when communities, and community-based organizations have ownership of programs, success and sustainability follows.

## WHAT WE DO

**We work with Indigenous and new Canadian communities to prevent chronic disease through nutrition and healthy lifestyle education.**

Dr. Sangita Sharma established and now leads the Indigenous and Global Health Research Group (IGHRG) conducting cutting-edge, culturally-appropriate community health research and evidence-based programs.

The team is a large, collaborative group of scientific and research staff, data analysts, administrative

personnel including human resources and marketing, in addition to, students, post-docs, and volunteers. The IGHRG has built solid relationships with populations, communities and organizations in Edmonton, Alberta, the Northwest Territories and Nunavut, as well as nationally and globally.

## Focusing on Vulnerable Populations



## Promoting Nutrition, Healthy Lifestyles & Healthcare Service Utilization



## Reduced Chronic Disease Outcomes

### VULNERABLE POPULATIONS

#### Life stage

- Expectant women and women of childbearing-age
- Infants, children and youth
- Seniors

#### Ethnicity

- First Nations
- Inuit
- Métis
- New Canadians
- Multi-ethnic populations

#### Locations

- Remote/rural/isolated Canadian Arctic
- First Nations on- and off-reserve
- Urban

### CHRONIC DISEASE

#### Diabetes

- Type II
- Gestational

#### Cancer

- Breast
- Cervical
- Colorectal

#### Cardiovascular disease

- Stroke
- High blood pressure
- Ischemic heart disease

#### Mental health challenges

#### Obesity

# Achievements

2010-2016



**48** ONGOING &  
COMPLETE PROJECTS

Cancer screening, maternal health, youth health,  
chronic disease prevention, integrated knowledge  
translation, data analysis

**35** COMMUNITY  
PARTNERS

Working together to support and attain  
communal goals



**\$7,700,000**  
IN FUNDING

To achieve results which positively impact  
health and wellness



**64**  
COLLABORATIONS

42 provincial, 14 national and 8 international



**18**  
SPONSORS

Government agencies, corporations, non-profit  
organizations and foundations

**95**  
PAPERS PUBLISHED

Total in career = 144 articles.



# Dr. Sangita (Gita) Sharma

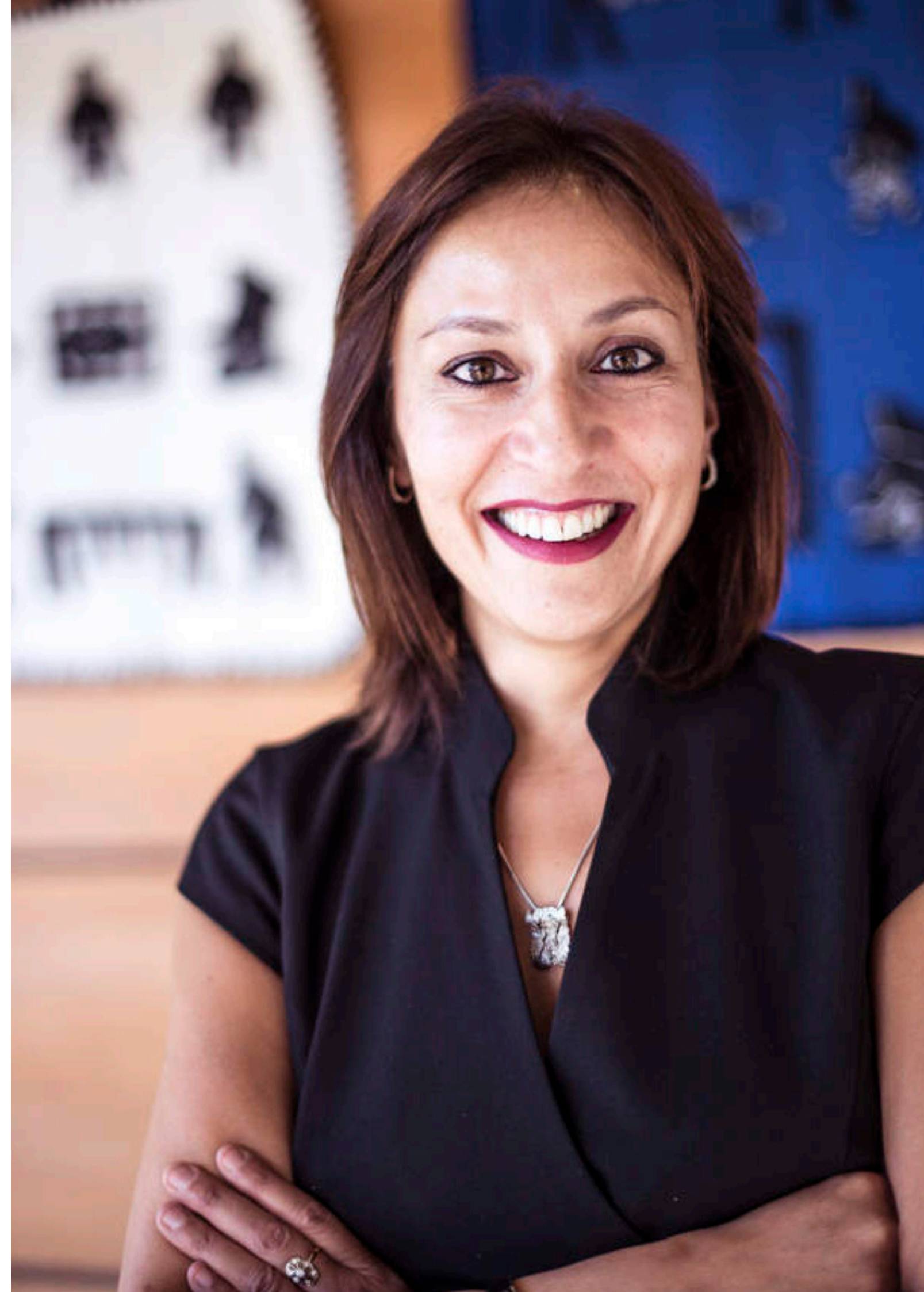
CENTENNIAL PROFESSOR, ENDOWED CHAIR  
IN INDIGENOUS HEALTH, PROFESSOR OF  
INDIGENOUS HEALTH & GLOBAL HEALTH  
RESEARCH, AND GLOBAL WOMAN OF VISION

Gita launched her career by managing successful research projects from the Amazon to the Arctic where she examined how a culture's diet impacts risk for chronic disease. Her expertise in nutritional epidemiology, dietary assessment and nutritional and lifestyle interventions continued to grow and she quickly became a global leader in her field.

It was a project in the Arctic where Gita found a passion for Canada's North, and for Inuit and other Indigenous groups. The culturally-appropriate and community-based program to promote healthy eating and lifestyle in remote areas of the Northwest Territories and Nunavut was a career milestone.

*"It is important to realize how isolated some of the communities really are and how difficult it is to access health care, and fresh fruit and vegetables. This all plays a significant role in the health struggles many Indigenous people face today. We need to all work together to improve the health and wellness of the Indigenous population, the First Peoples of this great country."*

- DR. SANGITA SHARMA





# Awards & Recognitions

DR. SANGITA SHARMA 2010-2016

## 2016

- Global Woman of Vision
- Speaker, Aurora College Scientific Speaker Series

## 2015

- Avenue Magazine, Edmonton, Alberta “25 Favorite Things to Eat 2016”
- Avenue Magazine, Edmonton, Alberta, “Better Choice for Children” (cover feature)

## 2014

- Attended State Dinner for the President of the Republic of Finland

## 2013

- Presentation for Sajos & Sami Parliament, Ambassador Visit, Inari, Finland. “Developing nutrition and physical activity intervention programs for the reduction of chronic diseases in Northern Indigenous communities”
- University of Alberta, Faculty of Medicine and Dentistry, 100 Years of Alberta Medicine, “North of 60” feature

## 2012

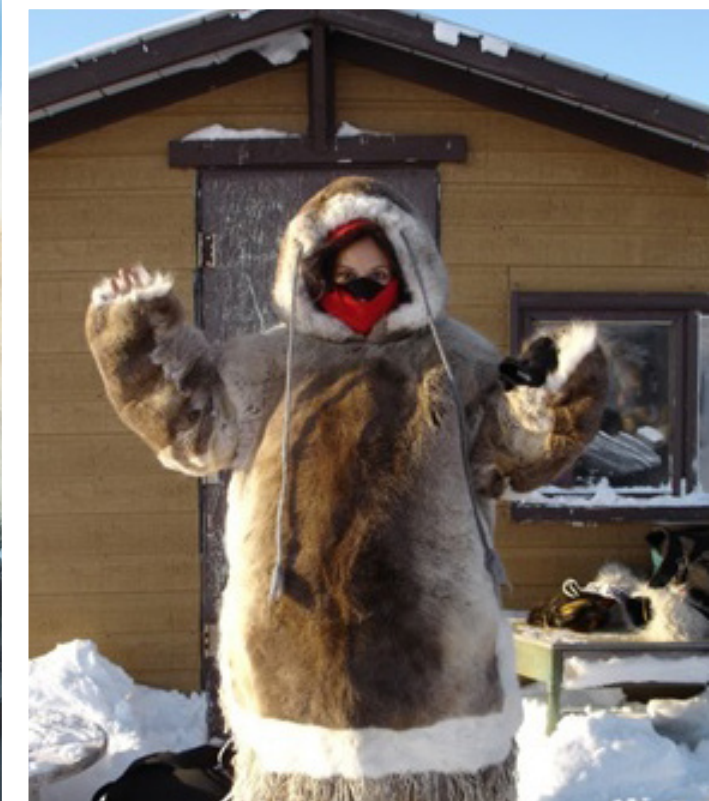
- Paul Man Award for Excellence in Translational Research - Post Doctoral Research Fellow recipient under supervision of Dr. Sharma
- European Nutrition Leadership Platform Advanced Programme, Luxembourg

## 2011

- Centennial Professorship, University of Alberta

## 2010

- Silver Medal, the British Nutrition Society
- Certificate of Merit for Excellence in Consumer Communication by the Dietitians of Canada for the Healthy Foods North
- Dannon Institute 2010 Academic Mid-Career Nutrition Leadership Fellowship





# Healthy Foods North (HFN)

NORTHWEST TERRITORIES & NUNAVUT, CANADA

Together with six Northern communities, the HFN program aimed to reduce the risk of chronic disease and improve dietary intake in the North.

The HFN was designed in consultation with each community. Creating and implementing programs that address the specific needs of each community and incorporate traditional cultural values can improve diets and reduce disease risk.

Some community members were trained in healthy lifestyles and then advocated with families and neighbours through presentations, posters, taste testings and cooking lessons. All of these materials were available in both English, Inuktitut, and Inuinnaqtun..



## RESULTS

Results showed many positive changes after the program. Participants made overall better dietary choices and on average, members of program communities lost weight and were more physically active.

These results highlight the important impact that a long term program could have on reducing risk of chronic disease. All data and results were shared with the communities and discussed in community presentations; community members had the opportunity to present results at various local, territorial, national, and international forums.



# Maternal Health

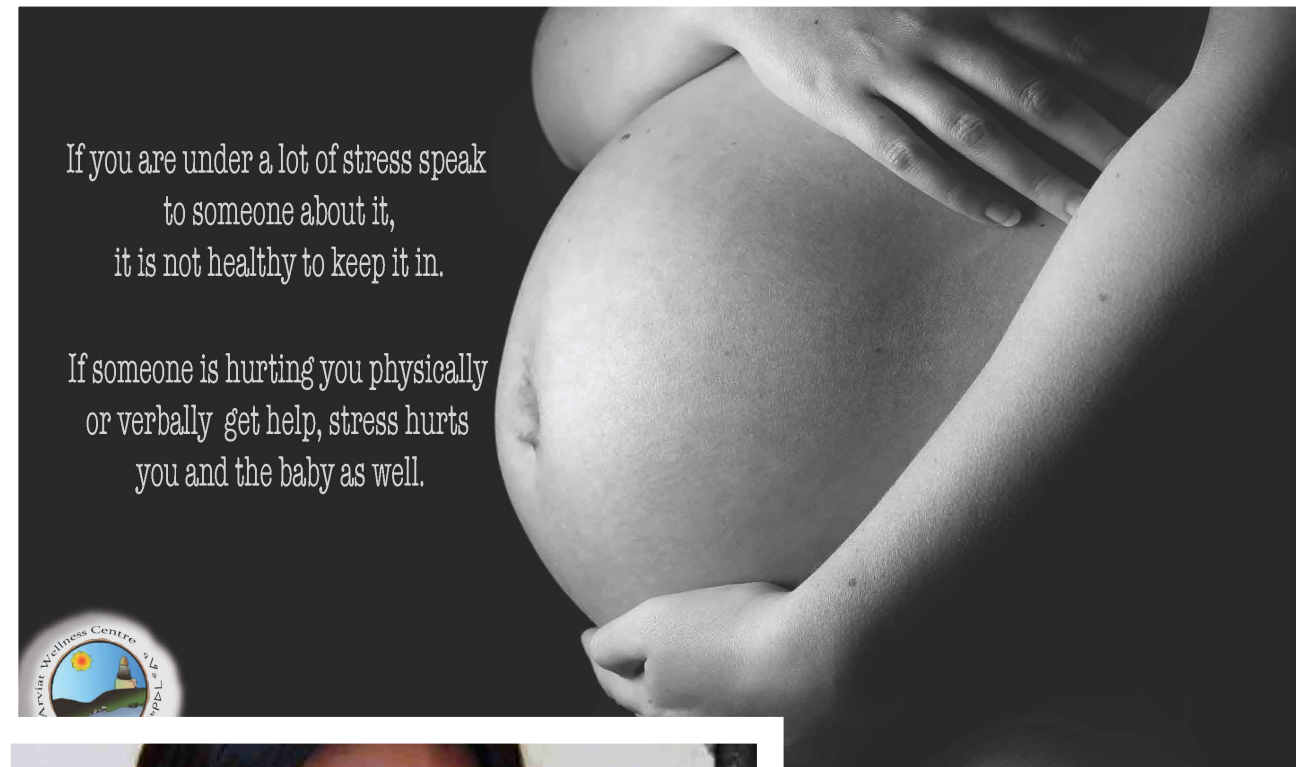
NORTHWEST TERRITORIES & NUNAVUT, CANADA

For Indigenous women of childbearing age in the Canadian Arctic, the risks associated with childbirth complications are higher than those in other areas of Canada, resulting in higher rates of preterm birth, stillbirth, and infant death.

In partnership with communities and healthcare professionals in the Northwest Territories and Nunavut, the IGHRG team reviewed dietary, environmental, and lifestyle factors influencing maternal health among Northern Indigenous women through an extensive literature review and meetings with the communities.

*“If the mother is trying to quit smoking or drinking, support her by not smoking or drinking around her, don’t have drinking parties at her house.”*

- WELLNESS CENTRE PAMPHLET

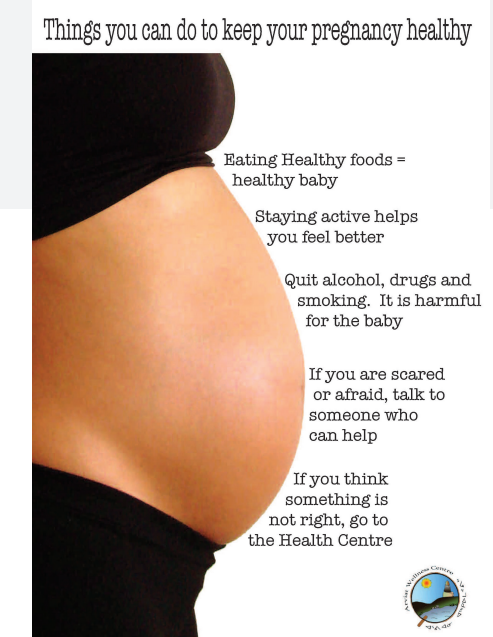


## RESULTS

The research identified key factors affecting maternal health in the North, which allowed a local wellness centre to develop effective communications aimed at health improvement for expectant mothers.

Once these were identified, a local wellness centre developed culturally-appropriate posters and pamphlets with specific messages on maternal health, in addition to 8 radio spots with promotional incentives for participation.

Future steps will engage community-based Advisory Boards and networks created through this study to develop a funding proposal to support the design of a bottom-up, community-driven, sustainable and local intervention program.



# ACCESS

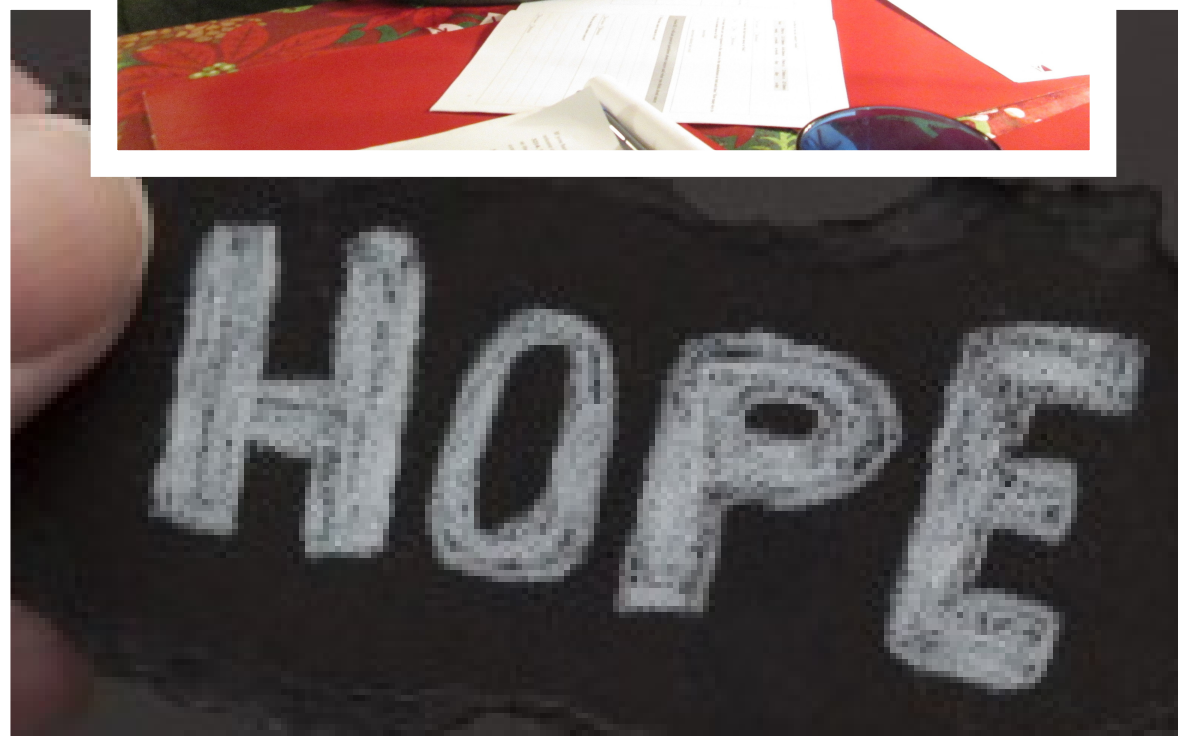
NORTHWEST TERRITORIES, CANADA

The goal of the Attitudes toward Cancer in Indigenous Communities and Examining Uptake of Cancer Screening Services (ACCESS) project was to assess the knowledge and attitudes toward cancer and cancer screening services among Indigenous people living in remote Arctic communities.

Additionally, the study identified the barriers that existed to screening and the ways to increase screening uptake levels to improve cancer awareness.

Collaborating with two Northern communities with large Indigenous populations, the IGHRG established a Community Advisory Board. Trained local Indigenous people worked with the IGHRG staff as assistants to help interview community members. The team interviewed 366 people individually and hosted sharing circles. In addition, 22 local health care providers, health promotion professionals, community stakeholders and Elders provided input.

Canada's territories have the highest rates of cancer mortality in the country, when age-standardized. This is due, in part, to utilization of cancer screening services in smaller communities in the Northwest territories being less than half of the national average



## RESULTS

Through the ACCESS project, community members have provided valuable feedback that will be used to develop strategies to increase the uptake of cancer screening services in remote Arctic Indigenous communities.

*“People now see screening as preventive. I see more and more people talking about prevention, rather than diagnosis.”*

- STUDY PARTICIPANT



# WHY ACT NOW

ALBERTA, CANADA

Edmonton has the second highest urban Indigenous population in Canada and a rapidly growing community of new Canadians. These populations are facing a unique set of challenges, particularly in combating chronic disease.

The purpose of Wellness and Health in Youth - Aboriginal and New Canadian Communities in Transition NOW (WHY ACT NOW) Phase1 was to interview urban youth, not only Indigenous youth and new Canadians, on issues of food access, nutrition intake status, physical health, and overall well-being. The IGHRG team interviewed and collected data from 557 multiethnic youth. The interviews revealed the needs of our urban youth and gave direction to implement an action plan to combat the risk of chronic disease, in particular diabetes and obesity.



*“We knew about healthy diets to some extent but after those classes we had a clear picture regarding a healthy diet. We know the way to check nutritional value of and to select the proper foods that are helpful for healthy living.”*

- WORKSHOP PARTICIPANT



Moving forward with WHY ACT NOW: Phase II the IGHRG team developed a culturally-appropriate intervention program to improve the nutrition and physical activity of urban Indigenous youth in Grades 7-12, and expanded to community organizations, such as the Edmonton Mennonite Centre for Newcomers. The team created

presentations, handouts, recipes and other interactive activities to deliver key messages and engage youth and young adults.

All program information, and educational materials are available free of charge in a downloadable format on the IGHRG website, [www.whyactnow.ca](http://www.whyactnow.ca).





Thank you so much for helping IGHRG attain measurable and meaningful results. We hope you will continue to support us and help share our achievements with others who can support us too.

With your partnership and financial support, we can continue  
transforming lives and building healthier communities.

**Join us!**



**Dr. Sangita Sharma** *Endowed Chair in Indigenous Health*

Centennial Professor and Professor of Indigenous and Global Health Research  
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