Q&A: Waakebiness-Bryce Institute for Indigenous Health

Why was the name Waakebiness selected?
The name “Waakebiness” means Radiant Thunderbird from the South in the Anishinaabemowin language. It was given to Michael Dan, the Institute's founding benefactor by Kalvin Ottertail, Midewin (medicine man) of the Lac La Croix First Nations community in 2012.

Why was the name “Bryce” selected?
The name of “Bryce” pays tribute to Dr. Peter Henderson Bryce, a University of Toronto graduate who founded the Public Health Service of Ontario and served as Chief Medical Officer with the Departments of the Interior and Indian Affairs from 1904 to 1907.

In 1907 he issued a report critical of public health standards in the residential school system of western Canada where 24 per cent of students died of communicable disease, primarily Tuberculosis. The statistics became public in 1922 when Bryce published, The Story of a National Crime: Being a Record of the Health Conditions of the Indians of Canada from 1904 to 1921.

What will the Institute do?
The Institute will conduct world class research and academic training opportunities targeted towards innovative interventions that address Indigenous health inequities and contribute to thriving Indigenous communities, in Canada and across the world.

To ensure community relevance, the Institute will identify and cultivate partnerships with Indigenous communities, support Indigenous faculty and trainees and provide seed funding to support pilot projects.

The Institute will be grounded in the responsibility of the University of Toronto to educate a citizenship that recognizes the rights of all people and respects the diverse intellectual heritages that make up Canada, with particular recognition of the unique position that Indigenous people hold in Canadian society.

The development of the Institute for Indigenous Health and Wellbeing signals the University's commitment not only to addressing inequities in health of Indigenous people, but also to contributing to thriving Indigenous communities, in Canada and across the world.

Why is this Institute needed?
There is little doubt that, while some Indigenous Peoples living in Canada are healthy and happy, many communities are less likely to have the same opportunities to optimize their health and well-being than are other Canadians. Given that Indigenous communities are the fastest growing segment of Canadian society, an urgent need exists to imagine a better future and end the multi-generational cycle of poverty and oppression that affect many Indigenous communities in Canada.

The generous gift from Michael and Amira Dan is the catalyst for change that aims to break the cycle and improve the health and well-being of Indigenous Peoples in Canada.

How will the Institute be governed?
The Institute will be led by a Director and governed by an Indigenous Community Council comprised of Indigenous community leaders and scholars; an Academic Advisory Committee...
comprised of Deans from across the University of Toronto; and overseen by the Dalla Lana School of Public Health's Dean, Howard Hu.

Professor Jeff Reading is the Institute’s Interim Director. Professor Reading joined the Institute on January 1, 2015 and is an Indigenous person with a record of excellence in research and grantsmanship, teaching, multidisciplinary research and educational collaborations, leadership and community collaboration. A graduate of the Dalla Lana School of Public Health, he was the founding scientific director of the Canadian Institutes of Health Research’s Institute of Aboriginal Peoples’ Health (2000-2008).

The Institute will have an on-campus core administrative hub located at the Dalla Lana School of Public Health. The Community Council and Academic Advisory Committee will meet throughout each year to provide guidance and direction. The Chair of the Academic Advisory Committee will be the Dean of the Dalla Lana School of Public Health.

Why are Michael and Amira Dan passionate about Indigenous health?
Michael and Amira Dan have been committed to righting the wrongs of the social and economic inequity of the Indigenous peoples in Canada for many years. Dr. Dan is a trained medical doctor with a diverse background that includes neurosurgery, medical research, and biotechnology. He is also a social entrepreneur and philanthropist with experience in green energy projects and environmentally focused consumer products.

He is the Founder and President of Gemini Power Corp., a privately-held hydro-electric venture company that works with the development in Canada’s First Nations communities promoting community ownership of small hydro projects. The Dan’s believe the University of Toronto is well placed with its breadth and depth of expertise required to engage in this complex endeavour of promoting the health of Indigenous peoples.

How will the $10-million commitment be allocated?
Funding for the Institute’s Director, staff, seed grants, scholarships and other activities will be derived from the Dan family grant with $2- million allocated as expendable and $8-million endowed.

How will Indigenous community members be consulted and ideas integrated into the Institute’s vision and mission?
The Institute is committed to community-based research (a community engagement approach) and will identify and cultivate partnerships with Indigenous communities to ensure community relevance of its program of research and education and also to secure sites for community-based participatory research projects and training. The Institute will be founded on respectful, sustainable and equitable partnerships between Indigenous communities and organizations and the University of Toronto.

To demonstrate its commitment to this principle, the School invited Elders, knowledge keepers, Indigenous scholars, community leaders and members, policy makers, academics, educators, service providers and others to a two-day planning meeting to discuss and deliberate about core aspects of the vision, mission, and governance structure for the Institute.

Why is DLSPH/ U of T the right home for the Institute?
U of T has a long tradition of graduate education and research in Indigenous health and related fields conducted in various departments and units.

The Dalla Lana School of Public Health also has a longstanding history of acquiring research funding from the CIHR and other funding agencies. Current areas of research expertise among faculty related to Indigenous health include: indigenous knowledge systems, infectious and chronic diseases; social determinants of health; health informatics, indicators and surveillance systems and many other health issues that influence wellness among Indigenous peoples across Canada, including northern, rural, remote, isolated and urban Indigenous communities.

As well as possessing a solid base of academic scholarship as it relates to Indigenous health, the School is also a partner within the Collaborative Program in Aboriginal Health that provides educational opportunities for students from across the University of Toronto.

The School can also offer faculty and students with exciting opportunities to contribute substantially to development in ‘big data’ methods through the Institute for Clinical Evaluative Sciences (ICES) which houses among its many collections, the world’s largest collection of administrative health data relating to Indigenous health.

Among our faculty include Dr. C. Shah (emeritus) who won a 2012 Queen Elizabeth II Diamond Jubilee Medals for being Pioneer in Public Health Education and being advocate for Aboriginal Peoples, the homeless, the jobless and poor children in Canada, Office of the Governor General of Canada, June 2012.

**Who are the Institute’s key partners?**
This Institute will also include close collaboration with centres of excellence in Indigenous health within the hospitals fully affiliated with the University of Toronto, such as Well Living House at St. Michael’s Hospital, which was created and is directed by DLSPH Professor Janet Smylie.