MPH-IH
Past Practicums

Last Updated: October 2022
Past Practicums included:

- Canadian Institute for Health Information
- Chiefs of Ontario
- Cree Board of Health and Social Services of James Bay
- First Nations Health Authority
- Government of Canada
- Indigenous Primary Health Care Council
- Native Women’s Resource Centre of Toronto
- The Stop
- Waakebiness Institute for Indigenous Health
For my 2nd MPH-IH practicum placement, I worked as a Practicum Student for the Canadian Institute for Health Information’s Indigenous Health Team. I had the opportunity to apply MPH-IH competencies, such as applying principles of cultural safety and humility and Indigenous ethical and governance frameworks in the context of health and health systems performance measurements. I had the opportunity to contribute to CIHI’s Indigenous health pillars, which include Indigenous health include foundational capacity, governance of Indigenous data, relationships and partnerships, and analysis and capacity-building. This meant that I supported initiatives aimed at promoting cultural safety and humility within the organization and supported data requests for clients requesting to analyze and disseminate data with Indigenous identifiers. The tasks required me to gather and synthesize research and information, develop research materials, write reports, and present on topics related to Indigenous health and data. I also reviewed cultural safety training curricula, assisted with data requests involving Indigenous data, and participated in discussions and processes for implementing CIHI’s Indigenous Identifiable Data policy, which requires data requesters to seek approvals from the appropriate Indigenous authorities for accessing and disseminating data with Indigenous identifiers. This experience allowed me to further develop my research, writing, and analytical skills, and broaden my understanding of Indigenous wellness frameworks, Indigenous data sovereignty and governance, cultural safety and humility, and Canadian health performance measurement systems.

Lyric Oblin-Moses
MPH-IH 2022 Graduate
I completed a virtual practicum placement with the Chiefs of Ontario (COO), which is a forum and secretariat that works to inform collective decision-making for the 133 First Nations communities in Ontario through advocacy and action-based work. During my placement, I had the opportunity to work on an accessible COVID-19 action plan in partnership with the Registered Nurses’ Association of Ontario (RNAO). Further, I provided research support through leading an environmental scan on health human resources best practices during past health crises and the current COVID-19 pandemic within Indigenous communities in Canada and the US. Lastly, I worked collaboratively with the University of Western Ontario’s Pandemic Planning team to respond to the United Nations’ call to study the impacts of the COVID-19 pandemic on Indigenous peoples around the world. This practicum provided me with the opportunity to engage with public health responses that were community-led, culturally-relevant, and strengths-based.

Adriana Gonzalez
MPH-IH 2021 Graduate
I completed my practicum at the Congress of Aboriginal Peoples (CAP) which is a National Indigenous organization that is recognized by the Government of Canada. CAP works to enhance the individual and collective well-being for off-reserve status and non-status Indians, Métis, and Southern Inuit Indigenous peoples. As a research assistant I was responsible for supporting CAP’s Research Department that provides ongoing technical, conceptual, qualitative, and quantitative data/information in support of CAP’s ongoing and various advocacy activities such as the implementation of the Political Accord, CAP-Government policy priority tables currently underway, as well as developing in-house, and co-developing, various policy research reports and paper. This included developing an inhouse paper that looks at the association between health outcomes, housing, and child welfare. Likewise, I am co-developing a scoping review and meta-analysis that explores the systemic barriers within policies, programs and services for off-reserve Indigenous peoples that face homelessness. Further I was able to develop my public speaking skills where I co-presented to 70+ participants Network for Sharing Indigenous Information and Research, on the topic of Indigenous Over-Representation in the Justice System. Overall, I was able to use the core competencies learned throughout my coursework in the MPH: Indigenous Health program to apply them in a professional environment to develop my understanding of Indigenous health and well-being through culturally safe and trauma informed practices.
The practicum I completed at the Indigenous Early Learning and Child Care Secretariat housed within the federal government, Employment and Social Development Canada, was an excellent learning opportunity. I learned about the inner government processes and how items such as budgeting, and engagement are completed within the federal government in their relationships with Indigenous Peoples. I also learned about the federal government’s learning opportunities such as access to webinars, Indigenous learning sessions, and others. I was able to work on a variety of projects including Treasury Board Submissions (budgeting), analyzing childcare plans and budgets that are sent from communities, and I was able to provide input and insight into daily activities. I was able to use my knowledge of cultural safety to justify certain appointments and the items I learned in the MPH-IH allowed me to quickly grasp the methods in which the Indigenous Early Learning and Child Care Secretariat interact with their Indigenous partners and National Indigenous Organizations for childcare needs. I was able to understand and apply Indigenous leadership, team building, negotiation and conflict resolution skills required to build community and stimulate collaboration on childcare. Furthermore, I was able to apply my knowledge and skills in policy analysis by contributing to discussions about future projects within Indigenous early learning and childcare. I was able to describe the health, economic, administrative, legal, social, and political implications of policy options in a Canadian context while also understanding Indigenous world views to ultimately use these skills to inform my discussions with my team members.

Thilaxcy Yohathasan
MPH-IH 2021 Graduate
For my second practicum term, from January to April 2022, I completed a fully remote practicum as a Junior Policy Analyst with Employment and Social Development Canada. I was in the Income Security and Social Development Branch, under Seniors Policy, Partnership and Engagement. Our primary purpose was to support the FPT (Federal, Provincial, and Territorial) Seniors Forum. As a Junior Policy Analyst, I supported the FPT Seniors Forum in a number of ways. I helped facilitate meetings that brought together federal, provincial and territorial governments at the officials, deputy ministers, and ministers levels. I contributed to records of decision, agendas, and issue notes in both official languages. I supported working groups on topics of ageism and senior abuse. I practiced project management skills through the development of critical paths and workplans along with interdepartmental and stakeholder collaboration. I led the publication process of 4 reports on seniors issues in both official languages and according to accessibility standards. I also drafted comminques and interdepartmental materials on short timelines to respond to ongoing seniors priorities. My personal highlight was independently writing a land acknowledgement that was used by our minister at a significant meeting with minimal changes.

Emma Rice
MPH-IH 2022 Graduate
First Nations Health Authority (FNHA) is a provincial health body that oversees and coordinates the health care of Indigenous Peoples’ of British Columbia (BC). One of its core mandates is to ensure that Indigenous Peoples’ in BC have access to evidence-based, culturally safe health care in both Western and traditional Indigenous methods of healing. My time at FNHA involved a project that was co-ordinated with the BC Support Unit with research into patient-centered safety measurements for Indigenous Peoples’ in BC. I also assisted in the ethics application, and the drafting of interview questions for focus groups and qualitative interviews for Indigenous patient partners. This opportunity allowed me to work as a member of one of FNHA’s cultural safety research teams, learning about cultural safety, research ethics and perspectives, scoping reviews, and how to conduct a comprehensive search strategy and literature review. I am grateful that the project continued despite the severe limitations of the coronavirus pandemic, and I received excellent FNHA technical support to be able to conduct my research remotely from home.

Ashok Krishnamurthy
MPH-IH 2021 Graduate
My placement took place at the First Nations Health Authority in Vancouver, BC. I worked with the Research and Knowledge Exchange department to support several of their projects. I played a role in the editorial process of the guest edition of the International Journal of Indigenous Health. I was responsible for designing and organizing the initial editorial review criteria based on the current call for papers as well as help design criteria for supplemental video submissions. I proceeded to review the first few submissions according to the initial editorial review guideline.

Beyond the journal, I was involved in several knowledge exchange projects. In December of 2018, FNHA hosted a network event through the Not Just Naloxone (NJN) summit. NJN participants discussed what people work in Indigenous Harm Reduction need from a provincial network. I translated information collected and presented the findings in a community facing report. The community facing report was returned to the community to ensure we captured the thoughts and ideas accurately before further disseminating findings.

My most recent project involved the Trauma Informed Emergency Care project the FNHA has been working on since 2017. In June 2019, FNHA conducted a follow up event with community members to ensure their thoughts and ideas were accurately represented in the final document. I am responsible for translating the text-heavy document into a tangible, community facing report. In times of light work, I supported the CIHR grant for Indigenizing Harm reduction by compiling a glossary of terms for the ethics application as well as developing an interview guide for the second phase of research.

I had a wonderful time during my placement and would love to work with the FNHA again in the future.
This practicum was conducted within the Communicable Disease Prevention and Population Health (CDPPH) department at the First Nations Health Authority (FNHA) on Coast Salish Territory in Vancouver, British Columbia. The FNHA was formed through an innovative Tri-Partite agreement between Health Canada, the government of British Columbia, and BC First Nations leaders, and works in partnership with the province’s 203 First Nations communities to plan, deliver, and evaluate health services. The main outcome of the practicum was a literature review examining: a) Indigenous peoples’ attitudes, perceptions, and beliefs surrounding vaccination; and b) best practices in developing print-based resources for promoting vaccines in Indigenous communities. This literature review will be used to inform the development of future health promotion resources by the CDPPH department, and assist in the planning of programs by the immunization team. The practicum also included the development of a resource to provide information about the hepatitis A vaccine, which is offered free-of-charge to Indigenous children in British Columbia. Implementing a program that specifically targets Indigenous peoples has the potential to reinforce negative and untrue stereotypes, particularly if a healthcare provider lacks appropriate contextual information and cultural safety training. To address this, a guide for healthcare providers across British Columbia’s five regional health authorities was developed through discussion with First Nations community members and Community Health Nurses (CHNs).
The Indigenous Primary Health Care Council (IPHCC) provided an excellent practicum experience; my duties were always clear, relevant and educational. I was very fortunate to have an attentive and informative supervisor, Kassandra Loewen, a graduate of the Master’s program in Indigenous Health herself. From early on my goals for the practicum were established, and they were broken up into checkpoints, but I still had time for impromptu tasks such as attending committee meetings and helping to prep for a presentation for a workshop. I mainly worked on a Data Governance project and a Cultural Safety Jurisdictional Scan, both required research and input from local Indigenous organizations, and culminated in a final document.

The IPHCC is also a great collective to learn from and be a part of. Within my short time there we had a staff social and the ability to speak with an Elder for support if we needed. I always felt that the lines of communication were open and that I could always reach out to my supervisor. Because the IPHCC is a relatively young organization, I was able to see the work put into growing an Indigenous organization and how the values and priorities of Indigenous leadership and sovereignty take shape.
This summer, I had the opportunity to complete a summer practicum placement at the Institute for Circumpolar Health Research (ICHR) in Yellowknife, NT. The ICHR is also home to the NT-NEIHR grant and serves both the regions of the Northwest Territories and Yukon. During the practicum, I had the opportunity to work on a variety of projects, such as a policy brief, a scope of potential future NT-NEIHR partners, and the co-development of a NT-NEIHR doctoral scholarship. Each of these activities helped me apply the knowledge I learned in classes in a concrete way, and allowed me to see what it means to practically conduct projects that are community-based and driven by community values. At the beginning of the practicum, I had the opportunity to join a meeting with the NEIHR Elder Advisory Council, where the elders shared their perspectives on ongoing projects and provided suggestions for future directions. This meeting served as a small but very crucial first step into my practicum, as their comments provided the foundational values that grounded my future projects. Beyond time spent in the office, my biggest learning experiences have come from physically being in Yellowknife. The city of Yellowknife, found right on the shore of Great Slave Lake, is located on Chief Drygeese territory and the traditional land of the Yellowknives Dene First Nation. Throughout the summer, I have been very grateful to have opportunities to genuinely learn about the ways that the physical landscape shapes the social and cultural values of the communities, through conversations and relationships with community members. While on the surface this may not be directly related to health research, these moments have helped me realize the importance of context, and the role of place, in one’s sense of wellbeing and identity.
I mainly worked on two projects during this practicum. The main one is the housing project, in which I created a focus group interview guide for collecting information on the current housing situation and conditions among MNO Citizens and if their housing situation has impacted their health through the form of online focus groups. I have also assisted with the Research Ethics Board submission for this project, where I drafted the consent form and addressed and revised the documents based on the feedback. The other practicum student and I also started a scoping review related to this project, in which we review literature that explores the influence of housing conditions on health among First Nations, Métis, and Inuit in Canada and other similar countries. While waiting for the REB approval, I worked on another project which explores chronic diseases and multimorbidity among MNO Citizens. I did a literature review on chronic diseases among Métis in Ontario and multimorbidity within Indigenous populations in Canada. As a result, I drafted the background for the manuscript. Besides all the writing, I was also able to attend meetings with the MNO staff and consultants on the projects and facilitation training for leading the focus groups.

Noel Tsui
MPH-IH 2022 Graduate
I completed my winter placement at the Native Women’s Resource Centre of Toronto. My main focus during my placement was working with the Trauma Support Coordinator to prepare for, support, and later facilitate the new iteration of the Seeking Safety for Indigenous Women program, a program that was adapted from the Seeking Safety treatment manual by Lisa M. Najavits to support women struggling with post-traumatic stress disorder (PTSD) and substance use from a harm-reduction approach and through an Indigenous lens. I also supported the preparation for Anti-Human Trafficking Awareness Day by compiling some materials for folders that attendees would be receiving, which contained resources that would help women who had been/were being trafficked. I took some time to also develop some program ideas. The first idea was a Marketplace for women accessing the centre who did different crafts such as leatherwork and beading and could use the venue to make an income from their crafting. The second idea was a storytelling workshop inspired by the Seeking Safety program that would create a space where women could explore the power of storytelling and share their stories if they felt comfortable to do so, in whatever medium they chose. I also spent a substantial portion of my time at the centre in the kitchen supporting our cook Christina with daily lunches, Tuesday/Thursday breakfast, and special meals for events. I learned a lot regarding food safety and security in this time, especially with Food Handlers Training to reinforce those lessons. Overall, my duties were varied, and I was able to see and experience programming throughout NWRCT’s numerous departments.
The Stop Community Food Centre is focused on using food to address the social determinants of Indigenous health and making efforts to enhance food sovereignty for Indigenous communities in Toronto. The Stop provides community members with opportunities to connect to land, culture, community, as well as improving their intake of healthy foods and traditional medicines. My time at The Stop allowed me to experience community-led advocacy that addresses food security, social isolation, access to land, while fostering connections and community engagement in thriving dignified spaces that build a sense of belonging. This opportunity allowed me to build upon my education related to Indigenous food systems, land-based knowledge, the right to land and access to resources, and helped me improve community advocacy skills by working to create a more equitable urban environment.

Carter Sehn
MPH-IH 2020 Graduate
The practicum provided me with the invaluable opportunity to work toward completing Indigenous health related projects within the timeframe of my placement. With the support of my supervisor, I was also motivated to work on both individual and group projects. The individual projects helped me to hone my self-sufficiency skills and build my confidence in applying my knowledge as a Master of Public Health Student. Through the placement, I learned about the importance taking the necessary time to collaboratively edit and revise course materials and documents that intend to be used as trainings for public health professionals, field staff, and epidemiologists. I learned how to navigate the requisite work processes for creating training materials which reflect the high caliber standards of the Public Health Agency of Canada and, more broadly, the Federal Government of Canada. I also learned that establishing the contents for public health training materials is an iterative and gradual process that necessitates endurance and teamwork. It was immensely interesting, motivating, and engaging to witness public health training materials come together effectively and successfully. I feel grateful to have worked with such a wonderful team of motivated professionals at the TDU, ready and willing to learn and un-learn in topics of Indigenous Health and bring health equity perspectives into public health and epidemiological realms. Overall, I had a wonderful experience in my practicum placement with the Training and Development Unit. The team of epidemiologists and staff members were so welcoming, supportive, and kind. The placement consistently stimulated my critical thinking skills, as I was able to utilize the knowledge and learnings I had garnered thus far in my MPH: IH degree. I was also able to assess what the TDU team needed in terms of Indigenous Health considerations and help to fill those gaps of knowledge or considerations in my training course materials projects.

Jenna Wilson
MPH-IH 2022 Graduate
For the first practicum I completed a 2.0 FCE placement in Dr. Angela Mashford-Pringle’s lab as a research assistant. With the many projects Dr. Mashford-Pringle had going on, I was able to choose opportunities that focused on my interests. As a research assistant I supported the lab in various capacities, working on literature searches, writing reviews and commentaries, contributing to grant writing, and assisting the wider team as needed.

My main focuses for the placement were the research for and writing of two papers. In a small team, I used rapid scoping review strategies to give a view of the literature on mental health and COVID treatment mobile health units and crisis response teams for Indigenous peoples within Toronto. I then extracted tools, evaluations, trainings and frameworks on the aforementioned topic and co-wrote a literature review which was submitted for consideration in an academic journal by the end of the term. Additionally I co-researched and co-wrote a commentary on the use (and need to re-examine thereof) biometrics in Indigenous populations. This paper too is in the process of submitting to an academic journal. Both projects provided a strong understanding of not just research processes, but how to go about them in a good way.

In a smaller capacity, I contributed to several other projects. I researched alternative housing strategies, building on the work of a previous student, to inform a future research project in the AMP lab. I also contributed to the literature search portion of an upcoming publication, which will likely be written after my placement is over. Despite the COVID-19 pandemic and working remotely, I felt that my placement helped me apply my coursework in tangible ways and build the skills necessary to work for and with Indigenous peoples in public health.