



Engaging Community in Guiding Research Excellence

National Aboriginal Research Advisory Committee

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Introduction

The Canadian Aboriginal AIDS Network (CAAN) is a not-for profit organization that represents over 400 member organizations and individuals across Canada. Governed by a national 13 member Board of Directors, CAAN provides a national forum for members to express their needs and concerns, to ensure access to HIV/AIDS-related services through advocacy and to provide relevant, accurate and up-to-date HIV/AIDS information. CAAN has been conducting Aboriginal-led Community-Based Research (CBR) projects that strive to make a positive difference for our communities since 2005. One of the mechanisms that we have put in place to ensure that research is being done in a good way across the country is our National Aboriginal Research Advisory Committee (NARAC).

(The term Aboriginal includes First Nations, Inuit and Métis)



Back L to R: Rick Kotowich, Namaste Marsden, Alex Wilson, Renee Masching Carrie Martin
Middle: L to R: Andrea Medley, Sherri Pooyak, Marni Amirault, Krista Shore
Front: Elder Cliff Thomas
Missing: Dylan Rose and Margo Pearce

NARAC successes

We have brought together a skilled and knowledgeable group of engaged individuals from across the country who are leaders in their communities.

There have been reciprocal capacity building opportunities between CAAN staff and NARAC members.

History

When CAAN first began to do research, each research project was set up with an advisory committee of its own. There was a lot of overlap in people who sat on those committees. This was a concern for two reasons:

- 1) CAAN did not want to over-burden people by asking them to be on too many committees, and
- 2) There was a burden of cost to CAAN to support so many committee meetings.

In the fall of 2005, CAAN started to reflect on how it was doing research. The thinking was the organization might benefit from having one group to advise on the research work of the organization. Those invited would:

- know and understand CBR;
- know and understand research processes;
- Bring equal representation from the academy and from the community; and
- know and understand research ethics boards and how they operate.

CAAN created the National Research Advisory Committee (NRAC). This committee was funded through the CIHR Community-Based Research Facilitator grants, which eventually transitioned to the Aboriginal HIV and AIDS Community-Based Research Collaborative Centre (AHA Centre). With that transition came a name change – National Aboriginal Research Advisory Committee (NARAC).

NARAC Composition:

NARAC is an eight-seat committee that must fulfil CAAN's commitment to diverse representation, perspectives and experience. Terms are for two years. NARAC membership must be inclusive of the following perspectives:

- Aboriginal people living with HIV or AIDS
- First Nations, Inuit and Métis peoples;
- community and the academy;
- youth and Elders;
- regional – Northern/Eastern/Southern and Western; and
- gender-diverse.

The Role of NARAC at CAAN:

This committee meets every two months and also in an 'on call' capacity as needed. NARAC reviews some of CAAN's seminal documents such as *The Statement of Research and Integrity* and the *Principles of Research and Collaboration*, for example, to ensure that these documents are up to date and relevant to the present-day research context. In essence, NARAC is responsible for guiding the research work of the Research and Policy Unit (RPU), and the work of the AHA Centre, both housed at the Canadian Aboriginal AIDS Network (CAAN). NARAC promotes accountability by continually assessing CAAN's research as a reflection of real community need, and its usefulness and relevance to the community.

NARAC challenges

Achieving desired representation on the committee continues to be a challenge.

Engagement with NARAC has been difficult to achieve. We have been consulting with committee members to rectify this issue

CAAN, as a Community-Based Organization (CBO) is eligible to hold funds through CIHR. However, unlike universities and hospitals, CBOs are ineligible to receive funds from CIHR's Indirect Cost Program, which offers organizations additional financial support above the amount awarded for a successful research grant. This creates an additional financial burden for CBOs that are eligible to hold funds from the Tri-Council Agencies.



We have no conflicts to declare