

2024-2025 ANNUAL YEAR IN REVIEW Indigenous diabetes wellness

OUR VISION

IDHC's Vision encompasses strengthening Indigenous community capacity to reduce the impact of diabetes with the appreciation that Indigenous Peoples have the tools, knowledge and ability to make healthy choices and live free of diabetes—now and in future generations.

OUR MISSION

IDHC achieves its Vision by supporting Indigenous communities, families and individuals by:

- Promoting holistic wellness models;
- Building on traditional teachings and best practices to develop and provide programs, education and resources; and
- Building relationships and community capacity.

In all this "IDHC recognizes and respects personal choices, autonomy and diversity."

IDHC and its Vision are in the process of change. Stay tuned for the 2025-2026 Annual Report to witness the finely tuned shift of the IDHC trajectory.

LAND ACKNOWLEDGMENT

Ontario is covered by 46 treaties and other agreements, such as land purchases by the Crown signed between 1781 and 1930. In support of Truth and Reconciliation, IDHC supports the unique strengths of First Peoples, both past and present, on whose traditional territories we live and work. Indigenous Knowledge Systems and lived experiences are essential contributions to all of humanity and the natural world. IDHC is a committed partner with Indigenous communities, stakeholders and allies across Turtle Island, collaborating on critical systemic change in Indigenous diabetes wellness.

ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT (AODA)

IDHC is committed to AODA standards to make communications accessible to people with disabilities and make IDHC resources inclusive. The images of marketing posters displayed in this report are intended as thumbnails referring to previously published full-sized posters. A Word document version of this Annual Report 2024-2025 is provided on the IDHC website for the convenience of our readers.

TABLE OF CONTENTS

ne Foundation of "who we are"	2
ransformations Guided by Our Elders	4
Message from the Board of Directors	6
lessage from IDHC Godrihwasidso	8
Message from Director of Programs	13
Client Services Department	18
nowledge Department	29
perations Department	47
Communications	48
Human Resources	52
Cyber Security	54
Finance	56
Acknowledgments	61



IDHC IS PROUDLY INDIGENOUS

THE FOUNDATION OF "WHO WE ARE"

IDHC is a not-for-profit charitable organization and a corporation providing programs and services for diabetes education and prevention. Its head office is in Thorold, Ontario. IDHC recognizes the dignity and self-worth of every Indigenous person in Ontario—and their right to a kind, safe and secure health care. IDHC makes every effort to create a sacred and safe space for each of its clients and employees. Guided by its Elders, IDHC exemplifies a uniquely Indigenous workplace with a deep culture of compassion and capacity building.



Seven Sacred **Teachings** Anishinaabe

Zaagidwin (Love)

Mnaandendmowin (Respect)

Ohtennita:onsra (Compassion)

> Kanoronkwa:sra (Great Love Among Us)

Awenho:ten

(Kind, Caring Words that Support and Nurture)

Kahretsva:ron

(Words of Encouragement)

Kanikonri:io (Good Mind)

> Senitweho:ten (Spirituality)

Kasahsten:sera (Strength)

Gwekwaadziwin (Spirituality)

Dbaadendziwin (Humility)

Aakidehewin (Courage)

Debwewin (Truth)

Nbwaakaawin (Wisdom)



Tolerance

Respect

Honesty

Kindness

Caring

Courage

Love

Balance

Strenath

Patience

but most importantly, **Connection with** the Creator and **Mother Earth.**



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Inuuqatigiitsiarniq

(Respecting others, relationships and caring for people)

ACLLbhsos

Pilimmaksarniq

(Development of skills through observation, mentoring, practice and effort)

5PO26524

Qanuqtuurniq

(Being innovative and resourceful)

طَكُالِهُ الْمُورِدِةِ **Aajiiqatigiinniq**

(Decision-making through discussion and consensus)

Δρζ^ςρΟροσςρ

Ikajuqtigiinniq

(Working together for a common cause)

Jack Care

Tunnganarnig

(Fostering good spirit by being

open, welcoming and inclusive)

VSCALCLE

(Serving and providing for family and/or community)

dening properties

Avatittinnik Kamat

(Respect and care for the land, animals and the environment)

Pijitsirnig

TRANSFORMATIONS GUIDED BY OUR ELDERS

At the ceremonial naming of the virtual circle initiative, the Elders shared a message that merits continued reflection.

FOLLOWING ARE THE WORDS OF IDHC ELDER GRANDMOTHER RENÉE THOMAS-HILL AND ALLAN JAMIESON SR. (PARAPHRASED):

Elders say that life is a circle—embodying a cycle that has been with Indigenous Peoples forever and will continue forever. A virtual circle is shaping this work.

And to be able to start this work in sacred territory, amongst sacred people and with a blessing from the Elder in this area, is truly a blessing of all creation.

From one of the Elder Teachings, it is said we would almost lose everything. But there would come a time when at least one person would reach out to the Elders and return to our Ways, our Original Ways. This is such a time.

The trees and the animals have spoken. The Elders walked amongst the trees to experience the land and hear the voices. This is going to be a great time, a rebirth—and a resurgence of our Ways. That is why we're here today.

And so it is clear we are "Still Useful" now. We say, "Karihwahstha."

Game Changers in Indigenous Diabetes Wellness

In paragraph 8 of Elder, Allan Jamieson Sr.'s message, Allan references the term "game changer." A game changer is an event, idea, or procedure that effects a significant shift in current methodologies and ways of knowing. IDHC has observed that many of its activities this fiscal year qualify as game changers and has attempted to identify them throughout this Annual Report.

MESSAGE FROM ELDER ALLAN JAMIESON SR. IMPARTED SEPTEMBER 11, 2025 (FORT ERIE)

I was really attracted to IDHC, formerly SOADI, because of their support for traditional lifestyles, foods and activities. That really was welcoming to see.

There have been other organizations doing diabetes-related work with native community, yet we are not really seeing the numbers decline like we would like to see. And so we know there is so much work still left to do.

I know organizationally it's also a challenge to incorporate organizational methods of keeping our community engaged while at the same time satisfying funders. Funding and government bureaucracies and government officials.

Now though, it seems like there is more support now generally. So this was really, really good to see IDHC involved in that way.

I think that recent initiatives are really promising. Like the Lower Limb Preservation and Eye Health and the focus on internal, kidneys. That's happening. That's going to be really important.

And there are such positive events happening in our communities around food, food security.

I think it's taking a while but it's finally starting to come around to where we see a blending of the engagement with our community and doors opening and good relations with funders, with government. This is really positive.

There is so much work to do around diabetes that I like the direction that the organization is going in, that it is looking to work on policies—branching out on a more national—actually—level. And to see that is really exciting. This is, I think, monumental. That's going to be a game changer.

And I think if we can get more of our people in the profession that would really help.

This has really been a turning point these past couple years. Really been a turning point. I think we're getting it. Our communities are really getting it.

But we still face a lot of problems, societal problems, and we still have to deal with the traumas and everything. These next couple of years are going to be the real test. But I think we're prepared. I think we are ready. Yeah.



MESSAGE FROM THE BOARD OF DIRECTORS

ENRICHING GOVERNANCE WITH INDIGENOUS CULTURAL KNOWLEDGE

Shekoli all,

It is an honour to provide this message for the IDHC Annual Report reflecting IDHC operations. It is my pleasure to behold yet another productive fiscal year, as IDHC offers its services as an Indigenous diabetes wellness organization—fully embraced and trusted by clients and partners.

A board of directors for a not-for-profit organization sets the strategic direction, oversees finances, ensures legal compliance, and hires and evaluates the Chief Executive Officer. The board acts as the ultimate responsible body for the organization's actions and affairs. The board guides the organization's mission, approves major decisions and ensures responsible management of resources—acting with a duty of loyalty and care. In short, the IDHC Board of Directors works on the governance side of the organization.

In the 2024-2025 fiscal year, the IDHC Board of Directors boasted two new members, me and Philina Sky. Philina and I are committed to contributing positively.

This year, the Board conducted a full review and update of IDHC by-laws and completed governance training for the Board of Directors. What an education that was! I can safely say that IDHC is compliant with current legislation and is working in a good way.

In late 2024, the Board of Directors carried out a recruitment campaign to identify a youth representative in keeping with the youth pillar of its 2024-2027 strategic plan, and to undertake that challenge we identified Mika Woolley, a local Indigenous student. The Board and Mika work well together and look to provide IDHC supports to youth across the province.

The Board of Directors heard and approved the ambitious 2024-2027 strategic workplan with its four pillars: capacity building, health human resources, strategic partnerships and outreach to youth.

To reinforce capacity building efforts and to set the scene for greater reach

across the province, as well as to build on partnership agreements signed in preceding fiscal years, IDHC continued to forge partnerships with key partners. Partnerships foster collaboration, resource sharing and diverse perspectives essential for achieving mission goals, strengthening advocacy and building long-term community support. The Board is pleased to see a partnership renewal with the Indigenous Primary Health Care Council (IPHCC). And on March 27, 2025, IDHC signed a relationship agreement with Diabetes Action Canada (DAC). I was on hand to officiate and sign the agreement, along with Catherine Whiteside, Director of Strategic Partnerships, DAC, and Tracy McQuire, Executive Director, DAC. IDHC is delighted to partner with Diabetes Action Canada to support the mission of ending diabetes.

I wish to acknowledge participants of the Karihwáhstha National Public Policy Initiative for their contributions to the Karihwáhstha Report #2. Project progress was presented to the Board of Directors of the Lawson Foundation and was well received.

Kudos also to the IDHC team nominated for the 2024 Ontario Health System Quality and Innovation Awards. Well done!

This past fiscal year, the Board of Directors was pleased to support the title change of Roslynn Baird from Executive Director to Chief Executive Officer. Roslynn and the Board of Directors all went through one full year of associated governance reporting tutelage and passed with flying colours. The newly titled CEO has met her objectives for transparency, accountability and ethical conduct for the past 12 months, thereby fostering our trust and stakeholder trust.

On behalf of the Board, I want to extend our heartfelt thanks to each member of the IDHC team for all the hard work and dedication in keeping IDHC running smoothly as we maneuver through the challenges of Indigenous diabetes wellness. Your unwavering commitment to community does not go unnoticed. Your work exemplifies the resilience to overcome the challenges that certainly present themselves. Roslynn Baird has been heard to say, many times, that she does not know what she would do without each and every one of you. We, as a Board, could not be any prouder. We thank you for your dedication and the heart you put into all that you do. And we are looking forward to spending time with the entire team at the in-person staff meeting in December.

Miigwetch
Robert Lebel
IDHC Board of Directors, Chair



MESSAGE FROM GODRIHWASIDSO

It is an honour to provide this message for the IDHC Annual Report, reflecting our 28th year of operations. I begin, as always, with an expression of gratitude to our Elders, Grandmother Renée Thomas-Hill and Allan Jamieson Sr., for guiding the organization as knowledge keepers and strengthening Indigenous cultural continuity. For almost three decades, IDHC Elders have supported programs and services as teachers, healers, advisors and counsellors. Thank you to our Elders.

IDHC continues today as a hybrid (virtual and inperson) entity focused on the professional development

of Indigenous frontline health workers and capacity building of Indigenous communities across Ontario. For yet another productive fiscal year, IDHC offered its services as an Indigenous diabetes wellness organization—fully embraced by clients and partners.

IDHC BOARD OF DIRECTORS DEVELOPMENTS

On the governance side of the organization, IDHC benefits from the prudent oversight of its refreshed skill-based Board of Directors and welcomes new members, Robert Lebel and Philina Sky. Robert is elected as Board Chair. This year, IDHC conducted a full review and update of IDHC by-laws and included governance training for the Board of Directors. This review ensures decision-making is effective and efficient and is compliant with current legislation.

In late 2024, the Board of Directors carried out a recruitment campaign to identify a youth representative in keeping with the youth pillar of its 2024-2027 strategic planning. Key skills sought to support the youth included leadership skills, passion for improving health outcomes for Indigenous Peoples and capability in health services to promote Indigenous diabetes wellness. IDHC found these skills and more in Mika Woolley, a local Indigenous artist from Welland, Ontario, student at Niagara College and CEO of Indigenous Dreams. In her personal life, Mika shares traditional Haudenosaunee and sacred medicine wheel teachings to young people. The Board considered Mika is well positioned to help broaden IDHC's reach to youth across Ontario.

8

WORK-IN-PROGRESS: IDHC 2024-2027 STRATEGIC PLAN

Over the year, IDHC resumed execution of its ambitious 2024-2027 strategic plan to ensure all actions were executed according to timeframes, roles and responsibilities, expected outcomes and strategies for each department. Four overarching pillars are in scope:

- 1. Enhancing the Capacity Building Model
- 2. Strengthening Health Human Resources
- 3. Enhancing Strategic Partnerships
- 4. Outreach to Youth

This work continues on time and the team leaders will report on specific successes later in this publication.

PARTNERSHIP AGREEMENTS

To reinforce capacity building efforts and to set the scene for greater reach across the province, as well as to build on partnerships signed in preceding fiscal years, partnership agreements continue to be forged with key partners.

On February 19, 2025, IDHC and the Indigenous Primary Health Care Council (IPHCC) renewed their Relationship Agreement. This Agreement realizes a culturally sensitive partnership ensuring continued, collaborative efforts to support Indigenous diabetes wellness.

On March 27, 2025, IDHC was honoured to sign a relationship agreement with Diabetes Action Canada (DAC). On hand to officiate the agreement were Catherine Whiteside, Director of Strategic Partnerships, DAC, and Tracy McQuire, Executive Director, DAC. IDHC thanks its Board Chair, Robert Lebel, for being present and leading this relationship forward in a good way. See the opening video here: Relationship Signing with Diabetes Action Canada.

I was pleased to be able to contribute to the Ontario SPOR Support Unit (OSSU) DAC Research Roundtable by making a presentation to provincial policy makers with recommendations for Indigenous-specific provincial eye health screening. Which brings me to public policy.



On Mon., March 27, 2025, IDHC was honoured to sign a relationship agreement with Diabetes Action Canada (DAC). On hand to officiate the agreement were: Catherine Whiteside, Director of Strategic Partnerships, DAC Tracy McQuire, Executive Director, DAC., and Robert Lebel, Board Chair.

2024 DIABETES CANADA/CSEM PROFESSIONAL CONFERENCE

The 2024 Diabetes Canada | Canadian Society of Endocrinology and Metabolism (CSEM) Professional Conference, held from November 20–23 at the Halifax Convention Centre, brought together over a thousand professionals to explore cutting-edge developments in diabetes research, treatment and care. This is the most highly anticipated diabetes and endocrinology-related conference in Canada to learn about significant advances in diabetes research, treatment and care. Delegates attend original research presentations and take part in information sharing with leading diabetes, endocrinology and related field experts.

The presentation on the IDHC wholistic model of care was important. The model emphasizes culturally grounded, community-driven approaches to diabetes management—integrating physical, emotional, mental and spiritual wellness. The session sparked meaningful engagement, as participants connected with the importance of culturally safe care and the need for systemic change in how diabetes is addressed in Indigenous communities.

FIRST NATIONS HEALTH MANAGERS ASSOCIATION 12TH ANNUAL CONFERENCE

At the 12th Annual National Conference hosted by the First Nations Health Managers Association (FNHMA) in Calgary, Alberta, from November 5–7, 2024, I presented IDHC's capacity building model.

My presentation highlighted IDHC's wholistic and culturally grounded approach to building health capacity in Indigenous communities. The model integrates:

- Knowledge sharing rooted in Indigenous ways of knowing
- Community empowerment through partnerships and leadership development
- Cultural safety and spiritual wellness as core pillars of care
- Responsive programming tailored to the unique needs of each community

The session was part of a broader conference theme focused on leadership, governance and meaningful change in First Nations health systems. IDHC's contribution underscored the importance of Indigenous-led solutions in addressing chronic conditions like diabetes.

KARIHWÁHSTHA NATIONAL PUBLIC POLICY INITIATIVE

In July 2024, a gathering was held in Victoria, British Columbia, funded by the Lawson Foundation, aiming to affect public policy for better health outcomes. This gathering built on the momentum from the previous year, bringing together Indigenous leaders, health professionals, policy makers and community members to collaborate on ideas for systemic change. Attendees prioritized key areas for systemic change and capacity building, drawing on both traditional knowledge and modern approaches to Indigenous health. Thank you to participants for their work in the summer (2024) and their contributions to the Karihwáhstha Report #2. Project progress was presented to the Board of Directors of the Lawson Foundation and was well received.

IDHC is preparing now for the third annual in-person gathering to be held in Wendake, Quebec, at the Indigenous-owned and operated, Hôtel-Musée Premières Nations on Huron Wendat territory. We welcome new participants as we prioritize outputs, create workplans and launch an engaging digital hub designed to support collaborations across Turtle Island.

In 2024, the Elders named the initiative "Karihwáhstha." Karihwáhstha means "Still Useful." The name underlines how, in this initiative, Indigenous Peoples are shaping and reshaping policy to prepare for a resurgence of our health ways. The work supports the idea that we are "still useful"—that is, "Karihwáhstha."

National public policy addressing the disproportionately high rates of diabetes in Indigenous populations from Indigenous-specific perspectives will ensure effectively designed culturally appropriate community-led interventions for prevention, early detection and improved management—a game changer.

EARNING A NOMINATION FOR 2024 ONTARIO HEALTH SYSTEM QUALITY AND INNOVATION AWARD

Guests gathered at the Schwartz Reisman Innovation Campus at the University of Toronto, on September 26, 2024, to celebrate the finalists of the 2024 Ontario Health System Quality and Innovation Awards. The event was hosted by the Dalla Lana School of Public Health. IDHC was nominated for its "Community-Based Diabetic Retinopathy Screening Project Utilizing AI Technology" in the "Improved Indigenous Health" category. Vision Loss Rehabilitation Canada (VLRC) and the Indigenous Primary Health Care Council and Toronto Council Fire Native Cultural provided letters of support for IDHC. It was an honour to have been nominated among such distinguished peers.



THE WORK OF GODRIHWASIDSO (OVERSEER) IS NEVER DONE

In late 2023, I was conferred the title of Chief Executive Officer (CEO) | Godrihwasidso (Cayuga for Overseer). In support of my title change last fiscal year, the Board and I collaborated with a CEO facilitator to work out updated executive limitations to reflect the attributes of a high-performing Board and not-for-profit organization. As of 2024, one full year of successful governance reporting under the new structure has come to pass. Thank you to Adrianna Tetley, past CEO for the Alliance for Healthy Communities, for her mentorship through the process.

That concludes a high-level commentary on last fiscal year from me. I am pleased with the progress made. I take this moment to honour and thank each one of our employees for services rendered, working with so many partner organizations, across Ontario. On behalf of the IDHC Board of Directors, I thank the devoted IDHC team for their contributions to Indigenous diabetes wellness in Ontario—and beyond.

Many, many thanks always to the Elders, healers, knowledge holders and service providers with whom we work. The information from these knowledge carriers is woven through each and every IDHC presentation, resource, program and strategy. We know that with this wisdom—together—we will reverse the epidemic of diabetes that we face.

12

Nya; Weh. Miigwetch. Marsi. Thank you.

Roslynn Baird, Godrihwasidso (Cayuga "Overseer") Chief Executive Officer

MESSAGE FROM DIRECTOR OF PROGRAMS

ACHIEVING SYSTEMIC CHANGE BY ADDRESSING INEQUITIES

It has certainly been an honour to have been in the role of Director of Programs here at IDHC for another good year.

And what a year for the programming side of the organization it has been!

The programming team is comprised of the Client Services and Knowledge teams. Allow me to share some of the many rich programming highlights of the year—many of which are "game changers."

THE CLIENT SERVICES TEAM

On the Client Services side of IDHC programming, the Client Services team is led by Samantha Lascelles, as Client Services Manager. Samantha is a member of the Eelūnaapèewii Lahkèewiit (Delaware First Nation) and a Registered Practical Nurse.

The Client Services team guides diabetes prevention education, while providing access to screening, care, treatment and referrals, all through a trauma-informed lens. This year, Client Services aligned wholistic community events in delivery of foot care, eye care, diabetes education and traditional wellness.

THE KNOWLEDGE TEAM

On the Knowledge side of IDHC programming, Knowledge Program Manager, Jessica Pace, PhD, has continued to guide the team in knowledge dissemination, frontline training, resource development and capacity building. The Knowledge team is instrumental in the development, delivery, implementation and procurement of resources required for programming, training and community wellness.

I will not steal the thunder of either of these two teams by recounting their successes to you. They will provide details about their many accomplishments in the pages that follow. Trust me, their work inspires. Allow me instead to describe some of the projects and relationships developing behind the scenes that together, position IDHC with ever greater reach and ever higher impact.

13

TOGETHER WE RISE

PARTNERING TO IMPROVE ACCESS TO CULTURALLY RELEVANT HEALTH CARE AND ADDRESS SYSTEMIC HEALTH DISPARITIES

Ontario Spor Support Unit (OSSU) and Diabetes Action Canada (DAC) Policy Roundtable

As our Chief Executive Officer noted in her Message just prior to mine, the OSSU and DAC policy roundtable served as a key forum for partners across the province to initiate dialogue on a coordinated strategy for diabetic retinopathy screening and lower limb preservation. These discussions aimed to align both initiatives with broader provincial health strategies, emphasizing prevention, equitable access and culturally safe care.

IDHC contributed four vital recommendations to ensure that the strategy reflects the needs and perspectives of Indigenous communities, reinforcing the importance of inclusive and community-driven approaches to chronic disease management. Acknowledgments and thanks to valued IDHC partner, Vision Loss Rehabilitation Canada (VLRC) for their support in the development of the four recommendations.

INDIGENOUS INCLUSION AND CO-CREATION IN PROVINCIAL PLANNING

Here IDHC supported a mandate for the inclusion of Indigenous-led organizations, such as IDHC and the Indigenous Primary Health Care Council (IPHCC), in the planning, design, delivery and evaluation of provincial diabetic retinopathy (DR) screening programs. Aligning these initiatives with the Connecting Care Act, 2019, and Ontario Health's First Nations, Inuit, Métis and Urban Indigenous Health Framework ensures culturally appropriate, community-driven solutions. This approach respects Indigenous values, strengthens trust and enhances the effectiveness of DR screening programs by addressing the specific needs of Indigenous populations.

INDIGENOUS-SPECIFIC NEEDS ASSESSMENT

The work of this initiative was to allocate dedicated resources to conduct comprehensive needs assessments for diabetic retinopathy screening within Indigenous communities across Ontario. Accurate data on regional disparities and community-specific needs are essential for guiding evidence-based decision-making and resource distribution. These assessments will improve the targeting of resources, enhance relationship building and ultimately lead to more equitable health outcomes for Indigenous populations.

SUSTAINABLE FUNDING AND INFRASTRUCTURE FOR COMMUNITY-BASED SCREENING PROGRAMS

The work of this initiative was to establish multi-year, stable funding mechanisms to support community-based diabetic retinopathy screening programs like the Eye Health Screening Initiative (EHSI). One-year funding contracts create operational challenges and prevent long-term planning. Multi-year funding and investments in infrastructure (cameras, software, etc.) provide stability for program growth, ensure consistent access to screening and lead to better health outcomes.

INTEGRATION OF DIABETIC RETINOPATHY SCREENING IN DIABETES EDUCATION CENTRES AND LOWER LIMB PRESERVATION PROGRAMS

The work of this initiative was to mandate Diabetes Education Centres (DECs) and Lower Limb Preservation (LLP) programs to integrate diabetic retinopathy (DR) screening into their services for patients who have not seen an eye doctor in the past two years. This approach leverages existing infrastructure and funded programs, ensuring efficient use of resources while expanding access to DR screening. By incorporating the EHSI into DEC and LLP services, the initiative enhances early detection and management of eye health issues, improving overall health outcomes and reducing complications without duplicating costs.





NATIONAL INDIGENOUS DIABETES ASSOCIATION (NIDA) BOARD OF DIRECTORS

I am honoured to serve on the National Indigenous Diabetes Association (NIDA) Board of Directors for the past three years. Every year, I work to contribute my lived experience and cultural insight and unwavering passion to advance Indigenous-led diabetes prevention and management strategies across Canada. Through my work at NIDA, I play a role in shaping national policy frameworks that honour Indigenous knowledge systems, promote culturally safe care and advocate for community-driven solutions to address the disproportionate impact of diabetes in Indigenous communities.

UNIVERSITY HEALTH NETWORK

IDHC and the University Health Network (UHN) have cultivated a meaningful and evolving partnership grounded in mutual respect, cultural understanding and shared commitment to Indigenous wellness. Their Circle of Collaboration and Friendship is more than just a meeting space—it's a living framework for cross-sharing knowledge, co-developing strategies and building trust between Indigenous and mainstream health systems.

Through regular gatherings, the two organizations engage in:

- Reciprocal learning: blending Indigenous ways of knowing with clinical expertise
- Relationship building: fostering cultural safety and allyship
- Joint grant submissions: applying to research institutes and funding bodies to support the spread and scale of IDHC's wholistic model

This partnership exemplifies how collaborative leadership can drive systemic change. By working together, IDHC and UHN work to decolonize health care delivery, empower Indigenous communities and promote sustainable, culturally grounded models of care.



IDHC is actively working with the Ontario Health Indigenous Renal Program to integrate CKD screening into its existing wholistic care framework. This new layer would:

- offer CKD screening at the IDHC head office during Wellness Wednesdays
- be delivered in partnership with Niagara Regional Health, DAHAC (De Dwa Da Dehs Nye>s Aboriginal Health Centre) and Indigenous Patient Navigators
- align with physical, emotional, mental and spiritual wellness



This initiative is especially timely given the disproportionate impact of CKD on Indigenous communities, as highlighted by Ontario Health's Indigenous Renal Portfolio. Early detection through community-based screening can dramatically improve outcomes and reduce the need for dialysis or late-stage interventions.

If successful, this CKD screening model could follow the path of other IDHC programs that have demonstrated success in scaling across Ontario: the Eye Health Screening Initiative, Traditional Wellness Program and Foot Care Program. This initiative would not only strengthen IDHC's leadership in Indigenous health but also set a precedent for integrated chronic disease prevention rooted in cultural safety and community empowerment.

Hopefully my Message lifts the veil and provides some insight into the work that goes on behind the scenes. The seeds of projects and relationships will certainly grow into well-thought-out programs that map together to provide a feasible health care pathway for Indigenous Peoples in Ontario. I am honoured to carry out my duties.

Each one of us was called to our roles and responsibilities—and so I give thanks to each member of the IDHC team. The Programming team carried the IDHC wellness bundle that builds capacity in frontline workers, individuals, families and communities to prevent and manage the impact of diabetes—all from an Indigenous perspective. It is my honour to support the programming side of the IDHC family.

Discover the work of this past fiscal year in the report ahead.

Autumn Watson

Director of Programs





CLIENT SERVICES

CREATING PATHWAYS TO INDIGENOUS HEALTH CARE PROGRESS

Koolamalsi!

Samantha Lascelles ndushíinzi. Níi há ndulŭnaapéew. Níi noonjíiyayi Eelunaapéewi Lahkéewiit wáak ndamiimúnzi máxkw.

My name is Samantha Lascelles. I am Lunáapeew. I am from Delaware Nation and my clan is bear.

I am honoured to have joined IDHC in January of 2024 as the interim Foot Care Coordinator and then as Client Services Manager. I feel very fortunate to have joined the team, as I have known about this great organization since I was a teenager. One of the original "SOADI sisters," Barb Whiteye, was from my home community and I had the privilege of working with her when I was Community Health Representative for our Health Centre Wulamaliswiikaan. Barb was a caring and knowledgeable individual who always had kind words and a soft voice. And I am happy to join this reputable organization that has spread awareness and prevention in diabetes for going on three decades.

The Client Services Department comprises Foot Care, Eye Care and the Traditional Wellness Program. Client Services promotes diabetes awareness from an Indigenous perspective and assists Indigenous communities in identifying appropriate resources and services, planning, prevention and awareness strategies. The team delivers multi-level regional-based services to communities four times a year across Ontario. The IDHC team addressed tasks, timelines and deliverables, plus new developments and recruitment of key roles for the next fiscal year.

INDIGENOUS-LED LOWER LIMB PRESERVATION (LLP) INITIATIVE NIAGARA

Over the year, IDHC launched the LLP initiative of Niagara to articulate a health care pathway. The initiative formed an advisory committee, encompassing health professionals from partnerships that included Bridges Community Health Centre, Compass Community Health, De dwa da dehs nye>s Aboriginal Health Centre (DAHAC), Fort Erie Native Friendship Centre and Niagara Vascular.

Next the initiative hosted two "Building the Link" events, bringing together health care professionals and community members to identify service gaps Indigenous clients

may encounter when experiencing foot ailments while navigating the Niagara health system. Dr. Darrel Manitowabi and Dr. Barry

Lavallee were speakers, as

they highlight the importance not only of traditional wellness in Indigenous communities but also of holding health care systems accountable for maltreatment and racism to First Nation community members. In addition to the "Building the Link" events, IDHC held several sharing circles to gather stories from community members about the challenges they experienced and what changes they feel the system requires to better serve their needs.

The LLP initiative also supported the renovation of the foot care clinic at the Fort Erie Native Friendship Centre site. The Centre hosts three foot care clinics every six weeks for up to 70 clients of all ages. Brand-new equipment enabled the foot care nurse to complete safe cleaning and autoclaving procedures and benefit from updated storage space and an ergonomic podiatry chair.

The initiative hosted a "Knowledge Transfer" event to share with stakeholders and partners insights and findings from the information gathered from sharing circles, advisory committee meetings and "Building the Link" events. The event launched an integrated health care pathway with the knowledge that the pathway will change over time along with community needs.

This work represents the sole Indigenous LLP initiative in Ontario that integrated wholistic care by offering traditional wellness and diabetic retinopathy screening—a game changer.





Irene Samuel Client Services Project Navigator



Stacey Ely Client Services Support Worker

JUVONNO ALL-IN-ONE CLINIC AND ELECTRONIC MEDICAL RECORDS MANAGEMENT PLATFORM

Part of our Indigenous-led LLP initiative also supported the launch of Juvonno, a new eMAR (electronic medication administration record) system and digital platform. Juvonno was selected as it is a Canadian company that reliably protects personal health information and is used widely by health care. IDHC worked with Juvonno and consultants to conform it to IDHC's unique work processes to ensure that service providers (foot care nurses, hosts and chiropodists) have a safe and reliable vehicle to chart and communicate with foot care program staff.

Initially, the transfer from our old operating system to Juvonno was challenging. However, with the continued efforts of Client Services Nurse, Georgia Baum, and Client Services Support Worker, Stacey Ely, more than 60 service providers and hosts were trained on the navigation.

The team continues to meet with Juvonno to address billing issues and alleviate ease of use for service providers. The daunting nature of changing long-held workflows for 60 service providers, along with dealing with inevitable bugs, underlines the importance of preparing for setbacks and the complexity of organizational change management. Thank you to the many service providers who made this change with IDHC.

Juvonno has improved reporting time and tracked all treatments throughout Ontario. The plan is to continue the work to bring system utilization to full potential by adding Traditional Healing and Eye Health services to the roster.

TRADITIONAL WELLNESS PROGRAM HONOURING INDIGENOUS HEALING **PRACTICES**

The Indigenous Diabetes Health Circle (IDHC) continues to uphold its commitment to culturally grounded care through its Traditional Wellness Program, led by Kathleen LaForme, Traditional Wellness Coordinator and carrier of the Traditional Wellness bundle. Kathleen brings extensive knowledge in the areas of traditional medicine and lived experienced as a caregiver to a loved one living with diabetes.



Kathleen LaForme Traditional Wellness Coordinator

Kathleen plays a vital role in connecting community members with traditional healers and practitioners, fostering relationships that honour Indigenous approaches to wellness. Under her guidance, the program offers Wellness Wednesdays in collaboration with the foot care clinic at IDHC's head office. These sessions are cofacilitated by Gail Whitlow, a respected Knowledge Keeper, who provides one-onone consultations and reflexology treatments. Gail often incorporates sacred medicines from the Traditional Wellness Room into her work, creating a space of healing and cultural safety.

20

Recognizing the diverse needs of community members, the program also offers virtual appointments with traditional healers and knowledge carriers. These sessions are not intended to replace medical treatment prescribed by physicians, but rather to complement care through a trauma-informed, culturally safe circle of support.

Kathleen is deeply versed in diabetes education and self-care practices, and she regularly shares her insights through presentations and community discussions. Her teachings encourage individuals to embrace their own role in their healing journey, blending traditional knowledge with practical strategies for diabetes self-management.

Through this program, IDHC continues to honour Indigenous ways of knowing and healing, ensuring that wellness is approached wholistically and respectfully.

EYE HEALTH SCREENING INITIATIVE (EHSI) ADVANCING VISION CARE IN INDIGENOUS COMMUNITIES

Now in its fourth year of operation, the Eye Health Screening Initiative (EHSI) continues to make significant strides in promoting vision health among Indigenous communities. This

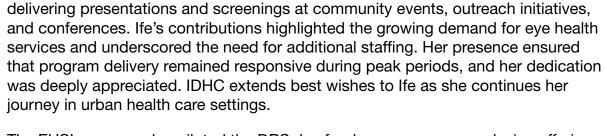
initiative is a collaborative effort between IDHC and Vision Loss Rehabilitation Canada (VLRC), the leading national provider of rehabilitation services for individuals who are blind or experiencing significant vision loss.

EHSI focuses on raising awareness about diabetes and diabetic retinopathy (DR) through targeted educational resources and accessible screening services. Using a hand-held fundus camera,

frontline workers are trained to capture retinal images, which are then analyzed using Health Canada-approved artificial intelligence software to detect signs of retinopathy. The portability and ease of use of the camera have enabled even remote communities to conduct screenings, connecting clients with essential resources to preserve vision and prevent further loss.

To increase accessibility, IDHC and VLRC launched a camera sharing program, allowing trained frontline workers to host screening events across communities. While Indigenous organizations have the option to purchase their own cameras, the sharing model has proven effective in expanding reach. Over the past year, more than 800 Indigenous participants were screened, with over 30 Indigenous community partners actively involved.

In late 2024, Ìféolúwa Àkàndé joined the IDHC team on a short-term basis to support Justice Maki-Chambers, Eye Health Worker, in



The EHSI program also piloted the DRSplus fundus camera, a new device offering improved accuracy for previously ungradable retinas. This enhanced technology will be integrated into future screenings as the program continues to evolve and expand.

Through innovation, collaboration, and culturally safe practices, EHSI remains a vital component of IDHC's commitment to wholistic diabetes care and vision preservation in Indigenous communities.

WELCOME BACK LINDSAY COSH! -PILLAR OF THE FOOT CARE PROGRAM

The Client Services Team was thrilled to welcome back Lindsay Cosh, Foot Care Coordinator, following her maternity leave. Lindsay's return brought renewed energy, insight, and leadership to the Foot Care Program, which she has supported for over a decade.



Care Coordinator

Her deep knowledge and unwavering commitment have been instrumental in building community capacity, particularly through the training of frontline health workers and the delivery of culturally safe foot care services. Lindsay has long championed the message that "healthy feet are happy feet," encouraging community members to take charge of their foot health—starting with the simple reminder to "take your socks off" and get checked.

Her presence continues to strengthen the program's foundation, ensuring that education, prevention and treatment remain accessible and empowering for Indigenous communities across Ontario.

FOOT CARE PROGRAM - SUPPORTING INDIGENOUS **WELLNESS THROUGH WHOLISTIC CARE**

The Foot Care Program provides essential services to Indigenous individuals affected by, or at risk of, diabetes and its related complications. Rooted in a wholistic model of care, the program emphasizes education, prevention, professional screening, ongoing treatment, and culturally safe referrals.

This continuum of care is supported by the expansion of a foot care network across Ontario, which connects community members to Indigenous agency partners and local health professionals. The program also facilitates training for service providers, ensuring that foot care is delivered with cultural competence and clinical excellence.



Chambers, Eye

Health Worker

Ìféolúwa (Ife)

Àkàndé



Services offered to individuals, organizations and communities include:

- Wholistic foot care group trainings tailored for organizations and community settings
- Self-care and prevention resources to empower individuals in managing their foot health
- Ongoing foot care clinics and subsidy sites that provide accessible, community-based care
- Subsidies for orthotics, proper footwear and off-loading devices not covered by insurance

Through this integrated approach, the Foot Care Program continues to strengthen diabetes prevention and management efforts, while honouring Indigenous knowledge and promoting long-term wellness.

TRAINING DELIVERED TO INDIGENOUS COMMUNITIES

Throughout the 2024–2025 fiscal year, the Foot Care Program continued to provide both treatment and education to Indigenous communities across Ontario. As part of the program's evolving work plan, a series of virtual webinars, workshops and conference presentations were delivered to support community wellness and diabetes prevention. These sessions focused on culturally grounded self-care practices and seasonal foot health strategies and were designed to be accessible to both frontline workers and community members.

FOR SERVICE PROVIDERS – ADVANCING CULTURAL SAFETY AND NETWORK CAPACITY

Cultural safety remains a foundational requirement for all chiropodists and foot care nurses working with clients of the IDHC. The team continued to onboard and train new service providers in cultural safety practices. This ongoing effort aims to enhance service coordination and ensure safe, respectful access to Indigenous-specific care and treatment.

The program's overarching goal is to build a robust network of health care professionals who operate in safe spaces free from discrimination, passive racism or harassment. By fostering culturally safe environments, IDHC strengthens trust and improves health outcomes for Indigenous clients.

To support this network, the Foot Care Program maintains an interactive online service directory that maps and connects local service providers with Indigenous communities. This tool serves as a valuable resource for communities seeking professional foot care services. In addition, printed service provider directories were distributed to stakeholders to expand their networks and build capacity across regions.

Through these initiatives, IDHC continues to lead with integrity and cultural accountability, ensuring that service providers are equipped to deliver care that is both clinically sound and culturally respectful.

PROFESSIONAL DEVELOPMENT & CAPACITY BUILDING FOR FRONTLINE HEALTH WORKERS

The team prioritized professional development and capacity building for frontline health workers in Indigenous communities. Trainings focused on preventative foot care best practices, equipping service providers with the knowledge and tools needed to support diabetes-related foot health.

A key highlight was the delivery of Foot Care Level 1 training in Thunder Bay, specifically supporting the Sioux Lookout First Nations Health Authority. This initiative strengthened local capacity and ensured that community-based providers are prepared to deliver culturally safe and clinically effective care.

In addition to training delivery, the team actively participated in virtual and inperson conferences, sharing their expertise through presentations, guest speaking engagements and on-site foot clinics. These events provided valuable opportunities to engage with broader health networks and advocate for Indigenous-specific foot care services.

Some of the Conferences Attended

- Anishinabek Nation (formerly known as the Union of Ontario Indians)
- Kenora Chiefs Advisory (KCA)
- National Indigenous Diabetes Association (NIDA)
- Chiefs of Ontario (COO)

These engagements reflect IDHC's commitment to building a strong, culturally competent health workforce and fostering partnerships that support wholistic diabetes care across Ontario.

Webinars Offered



Winter Foot Care in Wahnapitae First Nation 7 Grandfather Teachings with Self Care – integrating traditional values into wellness routines Reflexology Self Care Workshop – promoting healing through Indigenous-informed reflexology techniques

ONGOING FOOT CARE CLINICS- EXPANDING ACCESS TO CULTURALLY SAFE SERVICES

The Foot Care Program continued to strengthen access to culturally safe foot care for Indigenous clients across Ontario. The team actively sourced, recruited and registered foot care providers to support a growing number of clinics and outreach events. By the end of Q4, the program had successfully created and re-established four remote ongoing clinics and conducted four multi-service outreach events. These efforts were made possible through strong host partner involvement, which enabled sustainable, community-based care delivery tailored to local needs.

Foot Care Program Impact

- 692 foot assessments completed across Ontario
- 40 referrals made to foot care specialists
- 90% of assessments identified as high-risk, requiring specialist intervention
- Preventative care included regular follow-ups and urgent referrals to vetted local services

This work significantly increased access to Indigenous-specific, wholistic foot care treatment and education, helping to prevent complications and promote long-term wellness. The program's success reflects IDHC's commitment to culturally grounded, client-centred care that meets the evolving needs of Indigenous communities.

SUBSIDY PROGRAM - ENHANCING ACCESS TO FOOT HEALTH RESOURCES

The Foot Care Program significantly expanded access to essential foot care resources through its Subsidy Program, supporting Indigenous clients in managing diabetes-related foot complications. By providing proper footwear, foot care devices, and treatment subsidies, the program contributed to improved health outcomes and reduced progression of foot-related conditions.

These outcomes reflect IDHC's commitment to culturally safe, client-centred care and its ongoing efforts to build capacity, improve access, and promote wholistic wellness across Indigenous communities in Ontario.

The Link Between Foot Health and Diabetes

Foot care service statistics demonstrate the widespread impact of foot problems, prove populations at risk, justify investment in services and improve health outcomes. Data points to the scope of the issue. Data may be used to inform policy and allocate resources effectively to prevent serious complications like amputations, especially in people living with diabetes.



FOOT CARE SERVICES DELIVERED / NO.

In-Person Treatments by Foot Care Service Provider Performed 692

High-Risk Treatment with Foot Care Specialist Performed ${f 625}$

Foot Care Educational Resources/Self-Care Kits Distributed 170

Foot Devices Issued 116

Evaluations Collected **98**

New Foot Assessments Performed **86**

Attendees per Event (Average Attended) 49

Referrals to Foot Care Specialist Carried Out **40**

Advanced Treatments on Chronic Foot Pathologies Performed 15

Service Provider Directories Distributed 10

Foot Care Workshops Performed 4

Service Provider Cultural Safety Trainings Completed 4

Multi-Service Outreach Events Carried Out 4

Remote Ongoing Foot Care Clinics Carried Out 4

Conferences in Which IDHC Participated 4

Foot Care Webinars Performed 2

Off-Loading Devices Issued 2

New Subsidy Site Created

Foot Care Level 1 Training Facilitated



THE JOURNEY AHEAD IN FOOT CARE - BUILDING A SUSTAINABLE, EMPOWERING MODEL

Looking forward, the IDHC Foot Care Program remains committed to delivering educational services, self-care resources, referrals, preventative treatment and off-loading devices to Indigenous clients across Ontario. The program's evolving focus centres on scaling ongoing foot care clinics, building community capacity and articulating a comprehensive "Model of Care" that reflects Indigenous values and health priorities.

Through strong collaboration with community partners, IDHC supports the launch of foot care clinics with the long-term goal of enabling communities to take ownership of clinic oversight and management. This approach fosters sustainability and ensures that care remains rooted in local leadership and cultural safety.

IDHC also continues to provide training and information on emerging technologies, empowering service providers to integrate innovative tools into their practice. As part of the ongoing Lower Limb Preservation Initiative, the program is working with specialists to implement a vascular care component, which will be shared regionally to enhance service delivery and outcomes.

As the program moves forward, IDHC envisions a model that meets people where they are, offering care that is accessible, empowering and responsive. By supporting individuals in taking control of their health journey, the Foot Care Program reinforces its commitment to client-centred, wholistic wellness rooted in Indigenous knowledge and community strength.





KNOWLEDGE DEPARTMENT

THE KNOWLEDGE DEPARTMENT



Jessica Pace, Knowledge Manager

BRAIDING CULTURAL SAFETY, SKILLS AND FRONTLINE LEADERS TOGETHER

2024-2025 was a year of imagination, creativity and growth in the Knowledge Department. The Knowledge team expanded this year to support training needs and special projects. The department increased its knowledge and skills base to complement the wisdom of long-time staff Training Lead, Crystal Bomberry, and Training & Procurement Administrator, Krista Ruthven. A warm welcome to three new team members: Diabetes Wellness Trainer, Jenna Hammond; Waasnooden Project Coordinator, Samantha McConnell; and Indigenous Cultural Safety (ICS) Project Coordinator, Jordan McNeilly.

Throughout the transition of the team build-out and embarking on new projects, the Knowledge Department continued its key functions—conducting webinars and training.

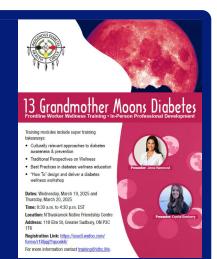
WEBINARS

The Knowledge Department hosted 13 webinars in fiscal year 2024-2025, showcasing a variety of topics including diabetes prevention, supporting families when a child is diagnosed with diabetes, weight loss medications and diabetes, gestational diabetes, winter foot care, breastfeeding and diabetes, menopause myths, and the Seven Grandfather teachings. This year, IDHC's Diabetes Wellness Trainer, Jenna Hammond, led webinar planning and hosting.

Registrations: **680**

Attendees: **347**

Evaluations: 110



TRAINING

The Knowledge Department hosted 10 trainings this year, including in-person 13 Grandmother Moons sessions at the IDHC head office (Thorold) and in Sudbury (N'Swakamok Native Friendship Centre) and Foot Care Level 1 in Thunder Bay in partnership with the Sioux Lookout First Nations Health Authority (SLFNHA). Returning to more in-person training has energized the training team!

We also continued to offer virtual training, including a learning series in partnership

30





Grandmother

Moonts

Moonts

Indigenous Diabetes Wellness
Frontline Health Worker Training

In-Person Training

The to 2 -day training.

The to 2 -day training.

The to 3 -day training.

The total training t

with the Weeneebayko Area Health Authority (WAHA). The IDHC eLearning platform saw significant growth, with 642 enrolments this year! IDHC's Personal Data and Privacy Courses proved popular, with 525 individual course completions and 52 four-course certificate completions.

We trained over 750 learners across all modalities.

IDHC's training centre also reached a huge milestone! In May 2024 IDHC was successful in meeting the criteria for ISO

21008 certification in Management Systems for Educational Organizations. This certification adds value to the allotted training, allowing us to award Continuing Education Units to learners who complete IDHC courses.

Trainings At a Glance	Partner	Location
In-Person (10)		
13 Grandmother Moons	N'Swakamok Native Friendship Centre	Sudbury; Thorold
Foot Care Level 1	Sioux Lookout First Nations Health Authority (SLFNHA)	Thunder Bay
Virtual		
Learning Series	Weeneebayko Area Health Authority (WAHA)	
IDHC Learning Platform (642 enrolments)		
Personal Data and Privacy Courses	525 course completions 52 four-course certificates allocated	
Total Learners	750	

31

ANNUAL CONFERENCE CHANGE-OF-DATE

This year was a transition year as IDHC shifted its annual event from the month of October dates to the month of May dates to align with National Indigenous Diabetes Awareness Day. As IDHC worked through this transition, the organization offered two special inspirational guest speaker events this year:

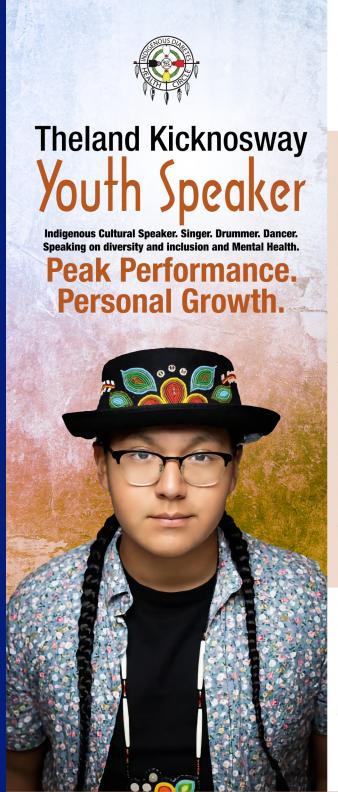
- In March, Indigenous physician Dr. Lana Potts gave a special talk about "Decolonizing Diabetes: Reclaiming Indigenous Ways of Knowing for Health and Healing."
- In May, trailblazing Indigenous youth speaker (also activist, role model and educator) Theland Kicknosway shared his knowledge about helping youth to find their path to wellness.

IDHC was pleased to have 281 registrants and 110 attendees present across these two special events.

Registrations: **281**

Attendees: 110





This is a youth inspirational speaker brought to you in celebration of National Indigenous Diabetes Awareness Day (NIDAD).

Theland Kicknosway is a young Indigenous activist from Walpole Island First Nation, Bkwejwanong Territory. He is a traditional singer, drummer, grass and hoop dancer, and an active member of Families of Sisters in Spirit, which supports First Nation, Inuit, and Métis families impacted by missing and murdered Indigenous women, girls and two-spirit people. Theland's advocacy for Indigenous communities began when he was in third grade, and he wrote a letter to his school to celebrate the annual powwow. Theland was the youngest Indspire Laureate named for Culture, Heritage and Spirituality in 2018.

He has gained a significant following on TikTok, where he is known as @the_land. Theland's annual Run/Bike for MMIWG2S raises awareness about violence and injustice towards Indigenous people. He has also taught over 1,500 people about Indigenous youth in Canada at KAIROS and offers teachings to LGBTQ2S youth at the Canadian Centre for Gender and Sexual Diversity.

This event will be hosted by Crystal Bomberry.

Date: Thursday, May 2, 2024 **Time:** 7:00 p.m. to 8:00 p.m.

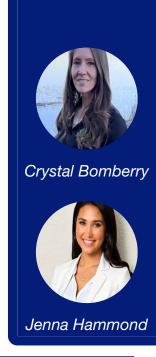
Registration Link: https://soadi.wufoo.com/forms/r1y7i1ti0cmyjtn/

For more information contact Jessica Pace at knowledge@idhc.life.

COMMUNITY PROGRAMMING

Our facilitation team, Crystal and Jenna, provided a wide range of workshops and presentations this year in-person and virtually. These sessions included 23 pre-scheduled sessions, 36 community-requested sessions and 142 active living sessions. Overall, the team reached 1,753 participants!

Behind the scenes, our Training Administrator, Krista Ruthven, kept everything running smoothly supporting learner communication, planning, placing orders and ensuring prompt procurement of the many resources that go into IDHC bundles and kits!



Some Popular IDHC Community Sessions		
Setting Intentions and Action Steps for Wellness	Culturally Relevant Approaches to Diabetes Awareness and Prevention	
Using Mindfulness and Behavioural Action to Live Well with Diabetes	Walking with Creation: Enjoying the Benefits of a Regular Walking Routine	
Daily Mindfulness Practices for Wholistic Wellness	Simple Summer Salads and Dressings	
The Sweet Trickster	Meal Prep & Budgeting	



Krista Ruthven, Training & Procurement Administrator



RESEARCH & SPECIAL PROJECTS GROUNDED IN INDIGENOUS WAYS OF KNOWING

Research and special projects have continued to be an important part of the Knowledge Department this year, including new and ongoing opportunities.



GET READY TO THRIVE

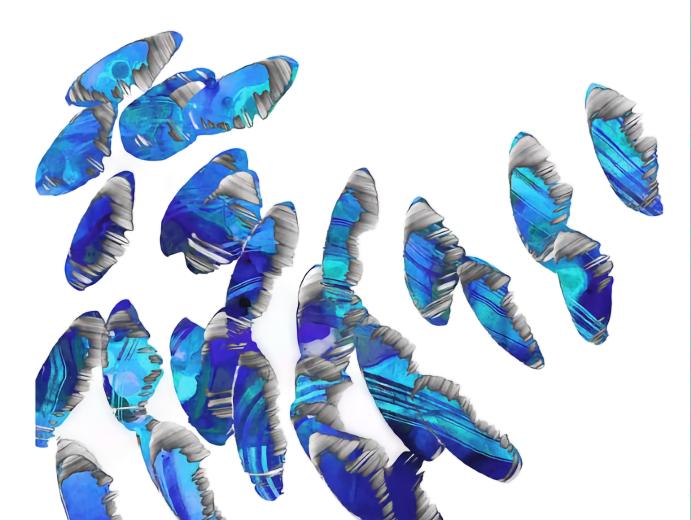
Ongoing Research Grant Partnerships on Indigenous-Led Projects

"Shookaawaapinewin Mamow Wicihiwewin: Reorienting diabetes prevention and care in First Nations communities in Northwestern Ontario through empowerment, autonomy and ownership for health and wellbeing"

Canadian Institutes of Health Research (CIHR) Team Grant – Diabetes Treatment and Prevention in Indigenous Communities: Resilience and Wellness in partnership with Sioux Lookout First Nations Health Authority (SLFNHA) and University of Toronto

"Mobilizing Resilience through Community-to-Community (C2C) Exchange: Seven generations thinking for wellness and diabetes prevention"

Canadian Institutes of Health Research (CIHR) Team Grant – Diabetes Treatment and Prevention in Indigenous Communities: Resilience and Wellness in partnership with the Kahnawake Schools Diabetes Prevention Project (KSDPP) research team



Ongoing Research Grant Partnerships on Indigenous-Led Projects cont'd

"Supporting Men along their Journey to Becoming Fathers: A community-led and father-driven approach (Fathers of the Next Generation)"

Canadian Institutes of Health Research (CIHR) Team Grant – Indigenous Gender and Wellness Team Grant in partnership with University of Toronto et al.

"Making Indigenous Men Visible: A community-led research partnership to improve diabetes education"

SSHRC Partnership Engage Grant in partnership with Dr. Amy Wright, University of Toronto



"Trauma and Violence-Informed & Culturally Safe Research Practices with Indigenous and Indigenous 2SLGBTQQIA+ People"

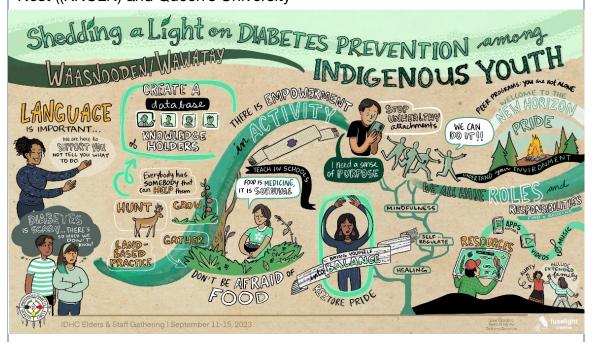
Canadian Institutes of Health Research (CIHR) Project Grant in partnership with Dr. Amy Wright, University of Toronto et al.

Ongoing Research Grant Partnerships on Indigenous-Led Projects cont'd



Aki Gimiinigonaa Mshkooziiwin (The Land Gives Us Strength): Culturally grounded healing within the urban-Indigenous community during COVID-19"

Canadian Institutes of Health Research (CIHR) Indigenous Covid-19 Rapid Research Findings in partnership with Kingston Native Centre and Language Nest ((KNCLN) and Queen's University



"Waasnooden/Wawatay (Wind Blowing/Northern Lights): Shining a light on diabetes prevention among Indigenous youth"

Lawson Foundation Child and Youth Diabetes Strategy in partnership with Kenora Chiefs Advisory (KCA), waasegiizhig nanaandawe'iyewigamig (WNHAC)



"Ceremony is Learning | Learning is Ceremony"

Book publication project in partnership with Addiev Corporate Training to create a resource for trainers to support more inclusive and culturally safe learning spaces and approaches.



INDIGENOUS CULTURAL SAFETY

TRAUMA-INFORMED DIABETES CARE CERTIFICATE

In 2024, IDHC was successful in securing a two-year Ontario Health Indigenous Cultural Safety grant to support the development of an Indigenous Trauma-Informed Diabetes Care Certificate. As part of this grant, IDHC welcomed Jordan McNeilly and Abby Duggal to the Knowledge Team in January 2025. Jordan and Abby spent the last quarter of 2024-2025 collaborating on research, launching a survey, building partnerships with community members, Knowledge holders, Elders and key partners—and hosting a compelling knowledge sharing event in Niagara Falls. Look out for this new certificate course in early 2026!

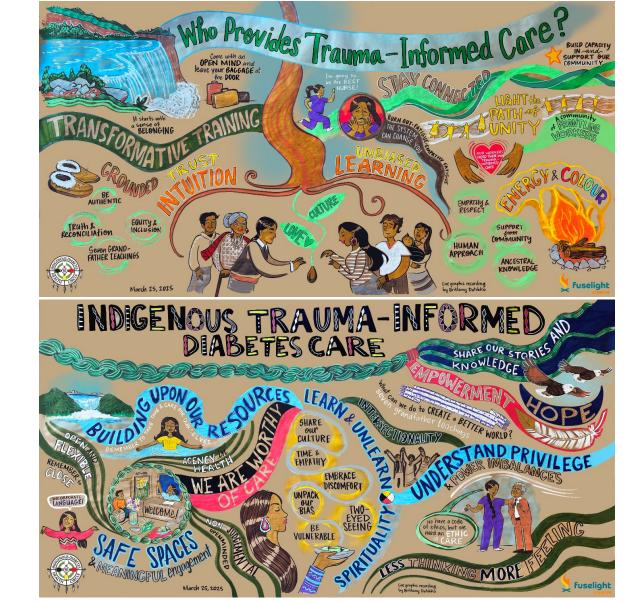


Jordan McNeilly, ICS Project Coordinator



Abby Duggal, ICS Researcher

ICS Project Video: https://tinyurl.com/284yfas7



Feature Video Projects

This year the Knowledge Department created four new video resources including a new men's health video created as part of our *Making Indigenous Men Visible* project.

"Living Strong: Indigenous Men Walk the Red Road" features Indigenous fathers and Elders sharing their knowledge and lived experience of men's health and wellness, including diabetes prevention. Living Strong Video: https://youtu.be/dz5nH7Y9fCk

IDHC also updated its much loved youth video with a new IDHC Youth Video Series featuring Grandmother Renée Thomas-Hill. This series, entitled "Land. Air. Water. Sun (LAWS) Youth Video Series: Strengthening Mind, Body and Spirit" includes 3 videos:

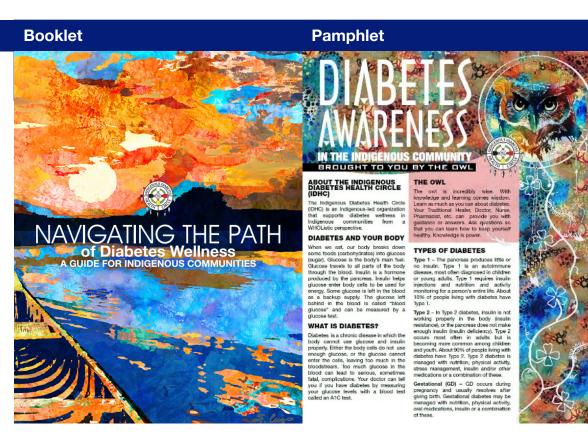
- LAWS: Land. Air. Water. (LAW) Youth Video Series
- Be Active! Have Fun! Land. Air. Water. (LAW) Youth Video Series Be Active
- Food is Medicine: Land. Air. Water. (LAW) Youth Video Series Nutrition

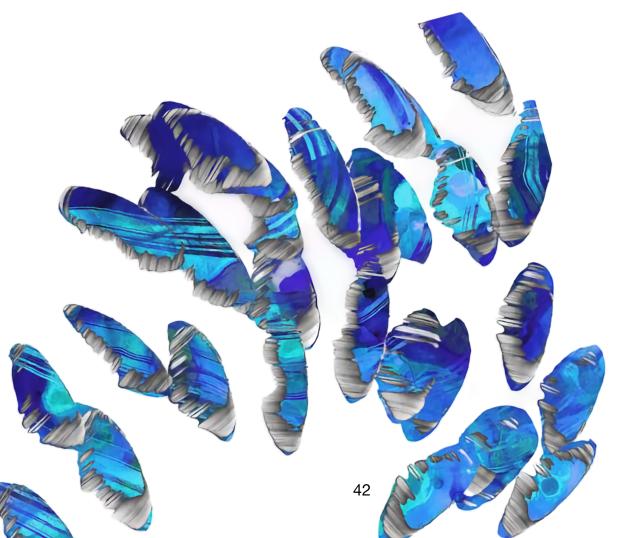
Resource Development

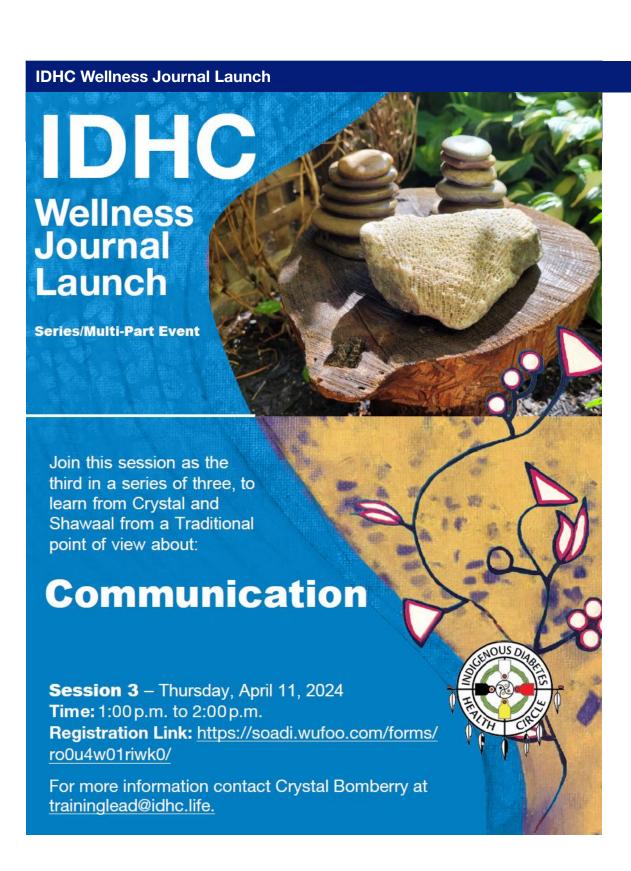
Foot Screening Learning Tool & Assessment Cards Activity (to support Foot Care Level 1 training course)

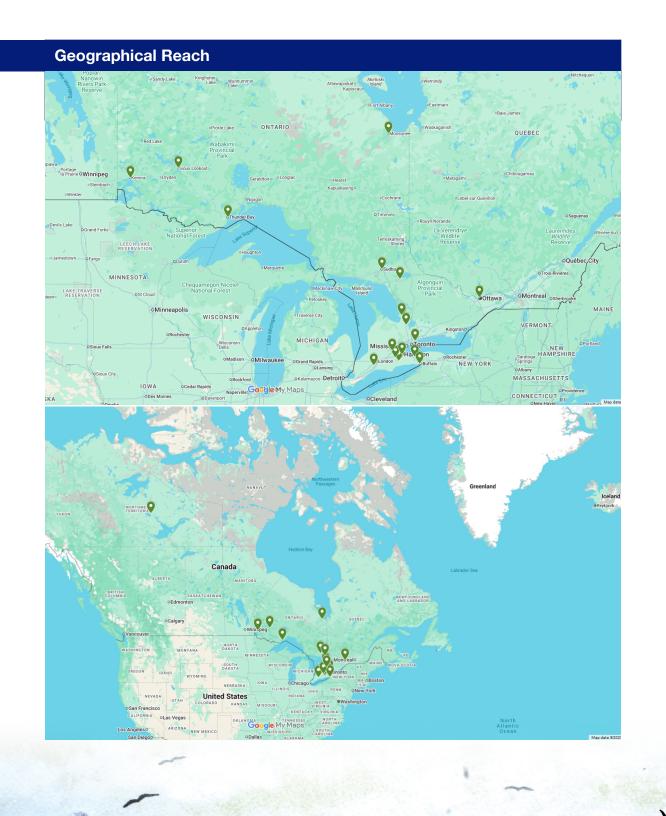










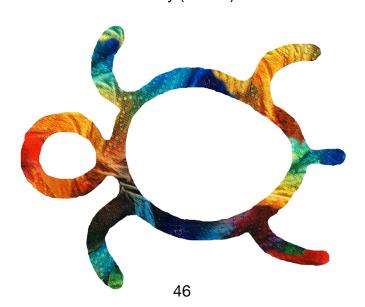


BRAIDING FRIENDSHIPS, COLLABORATIONS, PARTNERSHIPS AND COMMUNITY CONNECTIONS

- Addiev Corporate Training
- Anishinabek Nation (AN)
- Barrie Native Friendship Centre
- Breakthrough TD1
- Canadian Institutes of Health Research (CIHR)
- Chegamick Community Health Centre (Hub)
- Children's Oral Health Initiative (COHI)
- CMO Diabetes Care Gathering, Muncey (IP)
- De dwa da dehs nye>s Aboriginal Health Centre (DAHAC) (Brantford)
- Diabetes Action Canadas (DAC)
- Dokis First Nation
- First Nations Health Managers Association (FNHMA)
- Fort Erie Native Friendship Centre
- Gatineau Native Friendship Centre
- Georgian Bay Native Women's Association (GBNWA) Diabetes Support Group (IP)
- Grand River Employment and Training (GREAT) Six Nations
- Grand Valley Institute for Women (Minimum)
- Grand Valley Institute for Women (Maximum)
- Indigenous Primary Health Care Council (IPHCC)
- Kahnawake Schools Diabetes Prevention Project (KSDPP) Research Team
- · Lawson Foundation Child and Youth Diabetes Strategy
- McMaster University Endocrinology Resident Program
- Mississaugas of the Credit First Nation (MCFN) Diabetes Support Group
- Mississaugas of the Credit FN (IP)
- MNP Limited
- National Indigenous Diabetes Association (NIDA)
- Native Women's Centre, Hamilton
- Niagara Catholic District School Board, Soaring Eagles Program (IP)
- Niagara Chapter of Native Women (IP)

BRAIDING FRIENDSHIPS, COLLABORATIONS, PARTNERSHIPS AND COMMUNITY CONNECTIONS

- Niagara Peninsula Aboriginal Area Management Board (NPAAMB), Ceremony 2 Employment Program
- N'Swakamok Native Friendship Centre
- Ogwehoweh Skills and Trades Training Centre (OSTTC) Six Nations
- Ontario Federation of Indigenous Friendships Centres (OFIFC)
- Ontario SPOR Support Unit (OSSU)
- Pro-Fit Health Club Open House, Six Nations
- Queen's University
- Scarborough Health Network
- Setting Intentions and Action Steps for Wellness, OSTTC-GREAT, Six Nations (IP)
- Sioux Lookout First Nations Health Authority (SLFNHA)
- Six Nations Diabetes Conference
- Soaring Eagles, Thorold
- St. Joseph's Health Care Hamilton
- Sudbury Native Friendship Centre
- Thunderbird Friendship Centre, Thunder Bay
- Tlicho Territory, Northwest Territories
- University Health Network (UHN)
- University of Toronto
- Vision Loss Rehabilitation Canada (VLRC)
- Weeneebayko Area Health Authority (WAHA)





WE ARE WHAT WE IMAGINE

The communications component of IDHC leverages multiple tiers of digital platforms to enhance reach across Ontario—and Turtle Island. The result is real-time engagement, a stronger brand—and a trusted reputation. The communications component also works to foster collaboration by enabling customized communication with internal and external audiences.

COMMUNICATIONS

Key Elements of IDHC Communications

Ontario has the largest Indigenous population among all Canadian provinces and territories.

According to the Statistics Canada 2021 Census, there were 406,590 Indigenous people in Ontario, which was 2.9% of the province's population. This total includes 251,025 First Nations people, 134,615 Métis and 4,310 Inuit.

Game Changer: IDHC is reaching a sizable number of the 406,590 individuals which indicates a respectable order of magnitude and a good reach. The following charted statistics—especially the Meta reach of 961,469 people—suggest that IDHC is reaching its target Indigenous audiences and penetrating a broad spectrum of the Indigenous communities in Ontario.

Meta (formerly Facebook) Site

Meta benchmarks IDHC as the highest percentile and "higher than other" businesses. IDHC typically published more posts and stories than other businesses.

48

Reach: 961,469 PEOPLE

Content interactions for photos: **21,084**

Followers: **15,470**

Content interactions for links: 12,568

The Website

Event Views: **204,675**

Users Page Views: **74,000**

User Engagements: 40,000

Users: **21.00**(

Video

YouTube Impressions: 21,900

YouTube Views: **2,400**

YouTube Views from Impressions: **939**

Video Library: **236**

YouTube Subscribers: 167

YouTube Watch Time from Impressions (hours): 95.72

Video Projects

Video Projects:

- (6) project summary videos for Lower Limb Preservation project
- project summary video for Karihwáhstha National Public Policy project
- project summary video for Indigenous Cultural Safety (ICS) project
- camera-sharing project
- relationship agreement signings: Diabetes Action Canada (DAC)
- (12) Ryan Hooey series of shorts supported those with vision impairment

49

Social Media

Instagram Views in three months: **5,634 (Translates into 22,536/year)**

Instagram Followers: 439

LinkedIn IDHC Page Followers: 1,010

X (formerly Twitter) Followers: **205**

The Blog

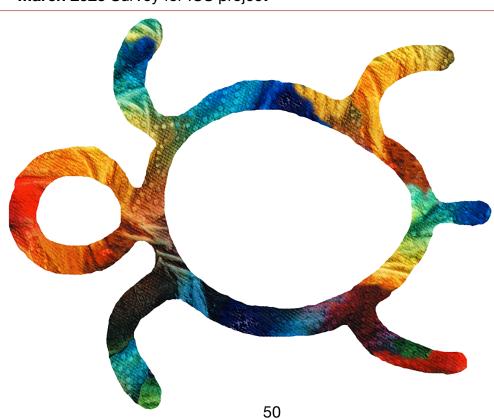
- IDHC blog recognized by FeedSpot as #5 of "20 Best Canadian Diabetes Blogs and Websites" in 2025. The best Canadian Diabetes blogs from thousands of blogs on the web and ranked by relevancy, authority, social media followers & freshness.
- FeedSpot Ranking of 20 Best Canadian Diabetes Blogs and Websites

CRM

- CRM Contacts (2025): 16,871
- Contact data is segmented into 50 types, including: Ally, Artist,
 Attendee, Chief, Community Member, Foot Care Nurse, Friendship Centre,
 Frontline Health Worker, Funder, Gestation, Indigenous Doctor, Land Based, Men, Navigator, Partner, Policy, Research, Student Services, Youth
 and more!

Key Interactive Engagements

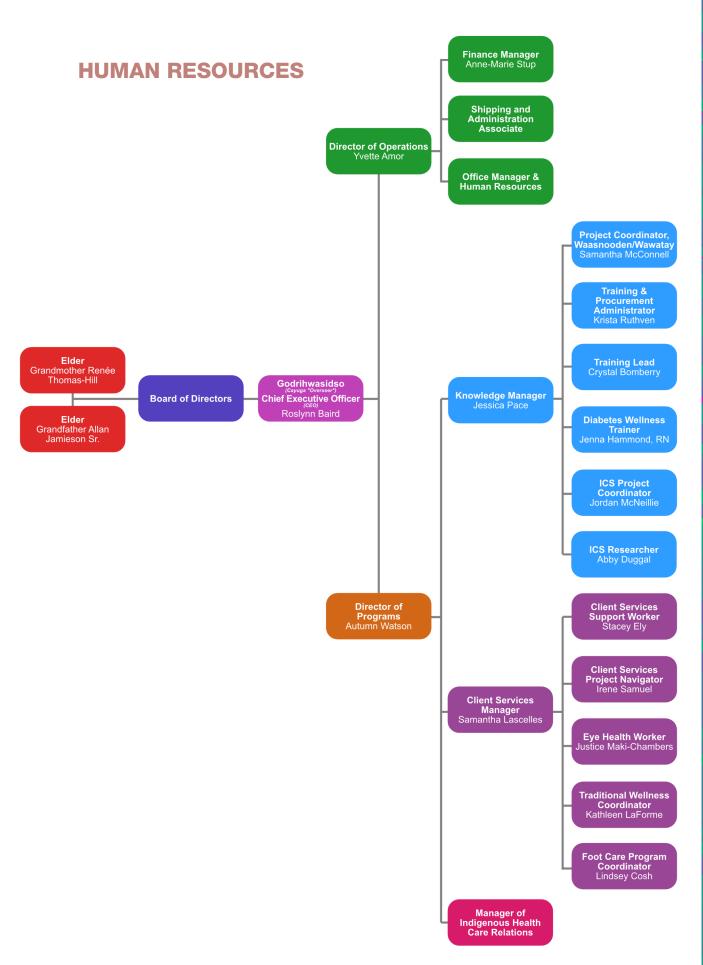
- May 2024 Kingston Indigenous Languages Nest (KILN), IDHC and Queen's University conducted program evaluation to learn how participation in land-based programs (walking in the forest, gardening, and/or building a personal bundle) helps with Bimaadziwin (well-being).
- May 2024 Waasnooden Youth Art Contest
- **July 2024** Surveys for LLP project
- **January 2025** Commenced work on Karihwáhstha website as interactive hub for stakeholders across Turtle Island
- March 2025 Survey for ICS project



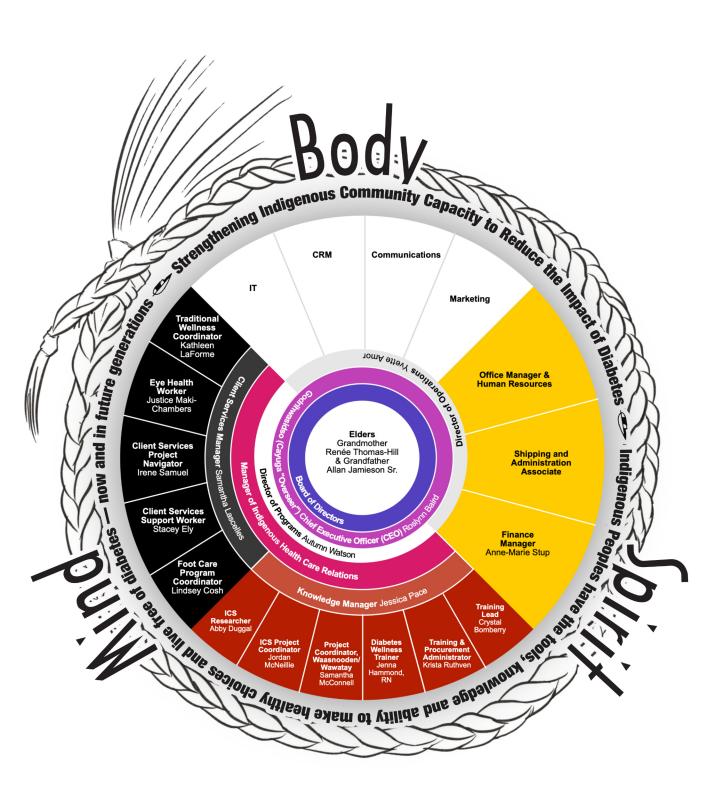
Key HubSpot CRM Campaigns	
Name of Campaign	No. of Contacts
(12) Monthly programming newsletters	~7,500 / month
Promotion of "Camera-Sharing" program	2,775
Promotion of "Camera-Purchase" program	2,618
Eye Health Screening Refresher Training	1,890
LLP "Knowledge Transfer" event promotion	1,777
LLP Newsletter Issue 1	1,563
Job Post for ICS Coordinator	1,436
LLP Sharing Circle promotion	1,121
LLP "Building the Link" event promotion	1,120
Promotion for 13 Grandmother Moons training	1,046
Promotion for 13 Grandmother Moons training (Sudbury)	211

IDHC's digital platforms provide broadly accessible channels for sharing information related to Indigenous diabetes wellness. IDHC then effectively promotes wholistic culture and recognizes community achievements, thereby fostering a stronger sense of community capacity. Year over year, IDHC capitalizes on its digital investments by creating targeted content, reaching diverse audiences and ensuring consistent brand messaging.





HUMAN RESOURCES



CYBER SECURITY

GUARD THE DATA EMPOWER THE FUTURE

RESPECTING INDIGENOUS DATA SOVEREIGNTY

"THINK BEFORE YOU CLICK" CYBER SECURITY PRO-ACTION

IT support to all staff is outsourced to Compass Community Health, Hamilton, Ontario, who have led the cyber security escalation. IDHC files are stored on vetted and shielded platforms. IDHC upgraded licences to MS Premium which provides MS Defender for Business. Defender is designed for small- and medium-sized businesses for protection from ransomware, malware, phishing and other threats. Using Microsoft Defender, IDHC now has enhanced security and streamlined device management, ensuring only compliant and secure devices access corporate resources.



54

PROTECTION OF HEALTH DATA

IDHC has invested in the Canadian Juvonno platform for client medical data, a shielded medical information repository.

Guard the Data. Empower the Future.

The IDHC requires a cybersecurity workplan to protect sensitive client and employee data, ensure the continuity of critical health care services, and safeguard technology from cyberattacks. The support company Compass Community Health based in Hamilton, Ontario. Compass devised a well-defined plan to help IDHC comply with regulations, manage evolving threats like IoT and telehealth, and maintain community trust. The IDHC is fulfilling its commitment to data integrity and patient safety in an increasingly digital health care landscape.

The cyber security workplan was completed by consultants during this fiscal year included:

Microsoft Licence Optimization

Upgrade and/or improve existing Microsoft licences. All employees upgraded to Business Premium.

Microsoft 365 Configuration

- Multi-Factor Authentication (MFA) for all users
- Naming convention for email accounts is by name, not roles
- Accounts disabled and revoked upon termination
- Updated SharePoint and Teams Policies, not as prior with MS default settings
- Updated Exchange Policies, not as prior with MS default settings
- Assessed IDHC's tenant settings to ensure optimal performance, security and compliance with best practices.

IDHC'S DATA PRIVACY POLICY

IDHC's Data Privacy Policy was reviewed and updated, and includes subjects such as collection of personal information, forms and methods of collection, interactivity, cookies and log files and storage of personal in-formation and more. A "Privacy Policy" is posted on the IDHC website at: https://idhc.life/privacy-directive/. Staff training for cyber security is provided at staff meetings and is ongoing.

55

FINANCE

STATEMENT OF OPERATIONS

General Fund for the Year Ended March 31, 2025

Appendix A

Indigenous Diabetes Health Circle

Statement of Operations

April - December, 2024	
	TOTAL
INCOME	Orientas assista
4000 Revenue	1,610,262.00
4005 Grant Income	1,049,027.59
4015 Charitable Donations	222.86
Total Income	\$2,659,512.45
GROSS PROFIT	\$2,659,512.45
EXPENSES	
6001 Administrative Supplies	6,040.54
6005 Annual Event	3,752.60
6010 Audit Fees & Bookkeeping Tools	182.90
6015 Board of Director Travel & Expenses	12,034.83
6020 Communications	50,577.23
6025 Education & Training Development	1,187.7
6030 Educational Material	12,598.07
6040 FLW Training Kits & Resources	70,986.00
6045 Grant Expenses	236,855.87
6050 Graphic Design	5,410.86
6060 Insurance	2,400.00
6065 Interest & Bank Charges	6,007.38
6070 IT Outsourcing/Website Maintenance/Licensing	45,991.80
6075 Miscellaneous Expenses	4,808.2
6080 Multilevel events	20,460.6
6085 Office Supplies & Sundries	3,840.99
6090 Phones/Internet/Tech Supp.	22,895.67
6095 Professional Development	9,496.6
6100 Professional Services	32,862.13
6105 Program Support	11,736.6
6110 Purchased Services	22,352.00
6115 Rents & Utilities	92.174.67
6120 Research & Development	10,217.33
6130 Salaries & Benefits	
6130-1 Salaries	986,936.30
6130-2 Benefits	193,566.90
6130-3 EHT Expense	5,790.58
Total 6130 Salaries & Benefits	1,186,293.81
6135 Service Provider Travel	3,702.91
6140 Services & Subsidies	68,468.4
6145 Shipping & Receiving	18.264.86
6150 Traditional Healing Services	40,070.4
6155 Travel Expenses	57,643.4
6160 Technologies	69.221.8
6165 Clinic Equip & Supplies	5.740.2
6175 Community Assessment Needs	18,985.5
6180 Conferences	31,206.14
6190 Activities	26,424.81
6210 Communication/Knowledge Transfer	3,475.12

FINANCE STATEMENT OF OPERATIONS

General Fund for the Year Ended March 31, 2025

Indigenous Diabetes Health Circle

Statement of Operations April - December, 2024

	TOTAL
6215 Other Expenses	258.65
6220 Screening Events	0.00
Total Expenses	\$2,214,627.40
OTHER INCOME	
Interest earned	13,098.43
Total Other Income	\$13,098.43
PROFIT	\$457,983.48

Financial Resilience

It was a big fiscal year for IDHC finance—some would call it a game changer.

- IDHC introduced a new financial reporting format to IDHC core funder, the Ministry of Health.
- IDHC introduced a new financial reporting format to Board of Directors to coincide with new executive limitations of CEO.
- IDHC transitioned from Sage accounting platform to QuickBooks, selected for its ease of use, affordable cost and broad integration capabilities.
- IDHC introduced new foot care invoicing capability with Juvonno, in which service providers direct bill into this shielded database. Juvonno is preferred for IDHC service providers because it offers the opportunity to automate clinic invoicing. The software integrates with existing IDHC processes, provides data-driven insights and offers robust security measures, such as HIPAA compliance.

All in all, these financial transformations help IDHC create a more effective and transparent financial foundation and lead Indigenous diabetes wellness ever forward by leveraging new technologies. That said, 2024-2025 heralded in yet another successful fiscal year end.

Accrual Basis Wednesday, March 12, 2025 07:43 AM GMT-04:00

FINANCE

STATEMENT OF FINANCIAL POSITION

As at March 31, 2025

Appendix B

Indigenous Diabetes Health Circle

Statement of Financial Position

As of December 31, 2024	
	TOTAL
Assets	
Current Assets	
Cash and Cash Equivalent	
1001 Chequing Bank Account - General	-4,716.4
1002 Chequing Bank Account - Grant	473,036.50
1005 Savings Bank Account	565,433.81
1010 Term Deposit	304,678.77
Total Cash and Cash Equivalent	\$1,338,432.69
1035 Prepaid expenses	17,946.37
1040 Purchase Prepayments	727.73
1050 Inventory	135,530.45
Total Current Assets	\$1,492,637.24
Total Assets	\$1,492,637.24
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable (A/P)	
2005 Accounts payable	108,497.75
Total Accounts Payable (A/P)	\$108,497.75
Credit Card	
2015 RBC VISA	
2015-01 RBC Visa Payable - CEO	9,356.20
2015-02 RBC Visa Payable - KNW CB	469.26
2015-03 RBC Visa Payable - DoPR	-242.43
2015-04 RBC Visa Payable - CS JMC	922.87
2015-05 RBC Visa Payable - CS KL	275.30
2015-06 RBC Visa Payable - CS SL	-842.61
2015-07 RBC Visa Payable - CS LC	570.11
2015-08 RBC Visa Payable - OM	1,954.51
2015-09 RBC Visa Payable - KNW KR	1,343.97
2015-10 RBC Visa Payable - KNW JP	883.85
2015-11 RBC Visa Payable - CS SE	686.72
2015-12 RBC Visa Payable - DoOP	2,400.68
Total 2015 RBC VISA Total Credit Card	17,778.5
	\$17,778.52
2006 Other Accounts Payable	1,925.20
2010 Funding Repayment	
2010-1 MOH	11,213.00
Total 2010 Funding Repayment	11,213.00
2020 Wages and Salaries Payable	265.75
2025 EHT Payable	-1,033.25
2027 Pension-Employee Portion	-177.77
2028 Garnishments	-15.24
2060 GST/HST Payable	71,881.72



STATEMENT OF FINANCIAL POSITION

As at March 31, 2025

Indigenous Diabetes Health Circle

Statement of Financial Position As of December 31, 2024

	TOTAL
2070 Line of Credit	92,538.30
GST/HST Payable - RG_GST_HST	-133,662.30
Total Current Liabilities	\$169,211.64
Total Liabilities	\$169,211.64
Equity	
3500 Opening Balance Equity	133,994.95
3505 General Surplus / Deficit	-255.94
3510 Special Project Reserve Fund	731,733.11
Retained Earnings	-30.00
Profit for the year	457,983.48
Total Equity	\$1,323,425.60
Total Liabilities and Equity	\$1,492,637.24



Key Contacts	
Programming	Operations
Director of Programs 613-697-6604	Director of Operations 289-929-7892
 Client Services (CS) CS Manager 289-968-7577 CS Nurse 289-407-6934 CS Support Worker 705-561-9461 CS Project Navigator 905-359-2044 Foot Care Coordinator 289-668-0551 Eye Health Worker 289-783-3942 Traditional Wellness Coordinator 905-388-6010 	Head Office Operations HR 519-350-6789 Finance 289-407-8774 S&R 289-241-0204
 Knowledge Department Knowledge Manager 289-407-1033 Training Lead 519-750-0893 Diabetes Wellness Trainer 289-228-1150 ICS Project 289-228-1858 Training & Procurement 289-929-4544 Waasnooden/Wawatay 705-220-8910 	

60

Indigenous Health Care Relations 905-380-2497

SPECIAL ACKNOWLEDGMENTS

Inti Amaterasu, IDHC Graphic Designer

IDHC is grateful for the extensive work and many long hours (days and years) delivered by graphic designer, Inti Amaterasu, making the powerful connection between Indigenous cultures, artistic expression and spiritual significance. The 2024-2025 Annual Report is Inti's seventh consecutive Annual Report completed for IDHC. Inti's canon of IDHC work includes other reports, along with a significant amount of marketing, promotional campaigns and branding. Thank you, Inti, for tailoring promotions in a way that resonates with IDHC audiences and brings people together.

Thank you to Indigenous Artists

Thank you to the Indigenous artists who brought the work of IDHC to life with their imagery, in particular in 2024-2025, IDHC thanks Ryan Woodruff.

Ryan Woodruff is the artist who created the brilliant image of the turtle and the golden sun used in the 2025 Annual Event branding and now again featured in the cover of the 2024-2025 Annual Report. Anishinaabe Ojibwe artist, Ryan was born and raised in the sacred and powerful Niagara Region terrain. Ryan embarked on a transformative journey to reconnect with his roots unfolding his unique perspectives on Indigenous art. Inspired by a desire to honour and represent traditional Indigenous art in a good way, Ryan revealed a distinctive style that captivates with vibrant colours and dynamic flow. Creating on a digital canvas, Ryan relates rich stories about the traditions of his people. IDHC's employees, clients, partners and stakeholders tell us over and over again how they love Ryan's artwork.

IDHC is grateful to Funders

Thank you to those that stepped up to support Indigenous diabetes wellness:

- Canadian Institutes of Health Research (CIHR)
- Lawson Foundation
- Michener Institute
- Ministry of Health
- Ontario Health

Special acknowledgment and thanks to IDHC's unique partners in the work

- Dedicated Service Providers supporting foot care, eye care and more
- Land Pharmaceuticals (very popular makers of Biodetic Foot Care Cream)

61

Ongoing foot care clinic sites serving so many community members

