

2025-2026 ANNUAL YEAR IN REVIEW

INDIGENOUS DIABETES WELLNESS • **NAVIGATING THE RIVER OF WELLNESS**

FORTIFYING OUR COLLECTIVE BUNDLE FOR THE NEXT SEVEN GENERATIONS





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The IDHC Canoe Model of Indigenous Diabetes Care, first envisioned in 2025. While this graphic captures the model's foundational roots, it remains a living vision that continues to grow and gather new cultural teachings to be fully unveiled in future iterations of our journey.

Art created by Phoebe Riel.

Vision and Mission

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.

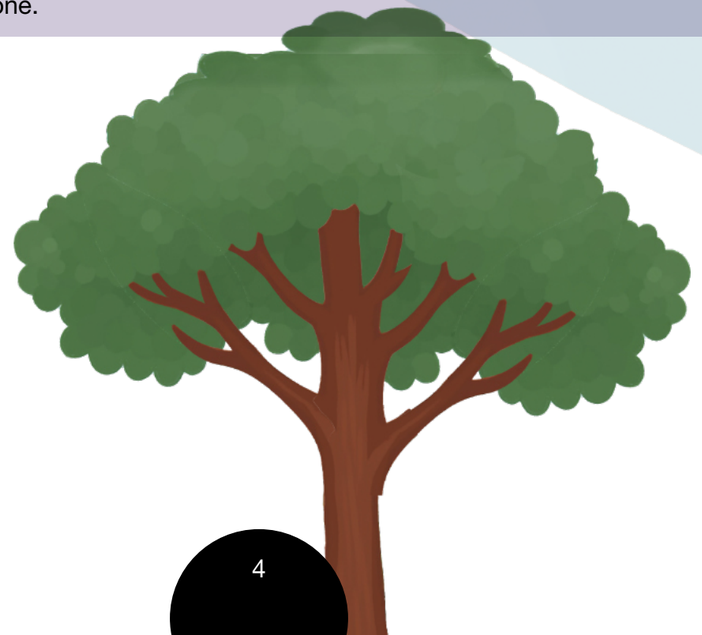
OUR MISSION

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

- Promoting wholistic 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 30-Year Milestone 2026-2027 Annual Report to witness the finely tuned shift of the IDHC trajectory as we celebrate this milestone.



LAND ACKNOWLEDGMENT

Ontario is covered by 46 treaties and other agreements, such as land purchases by the Crown signed between 1781 and 1930. 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 systemic change in Indigenous diabetes wellness.

Guided by these foundational strengths, IDHC is deeply committed to supporting the reclamation of culture and advancing Indigenous diabetes wellness across Ontario. We understand that true health is inseparable from cultural connection, sovereignty and wisdom. As a dedicated partner, IDHC collaborates closely with Indigenous communities, stakeholders, and allies across Turtle Island to drive systemic change, foster wholistic healing and champion a healthier, self-determined future for all First Nations, Inuit and Métis peoples.

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 2025-2026 is provided on the IDHC website for the convenience of our readers.



Foundation of Who We Are

SEVEN-SPANS-THICK TEACHINGS *Haudenosaunee*

- **Kahretsya:ron** *(Words of Encouragement)*
- **Kanikonri:io** *(Good Mind)*
- **Kasahsten:sera** *(Strength)*
- **Kanoronkwa:sra** *(Great Love Among Us)*
- **Senitweho:ten** *(Spirituality)*
- **Awenho:ten** *(Kind, Caring Words that Support and Nurture)*
- **Ohtennita:onsra** *(Compassion)*

SEVEN GRANDFATHER TEACHINGS *Anishinaabe*

- **Nbwaakaawin** *(Wisdom)*
- **Debwewin** *(Truth)*
- **Aakidehewin** *(Courage)*
- **Zaagidwin** *(Love)*
- **Gwekwaadziwin** *(Spirituality)*
- **Mnaandendmowin** *(Respect)*
- **Dbaadendziwin** *(Humility)*



THE FOUNDATION OF "WHO WE ARE"

QAUJIMAJATUQANGIT PRINCIPLES *Inuit*

- **ᐃᓄᒃᑎᑐᑦᓯᐊᕐᓂᖅ - Inuuqatigiitsiarniq** *(Respecting others, relationships and caring for people)*
- **ᑐᖓᓇᓐᓂᖅ - Tunnganarniq** *(Fostering good spirit by being open, welcoming and inclusive)*
- **ᐱᔾᔪᓂᖅ - Pijitsirniq** *(Serving and providing for family and/or community)*
- **ᐊᔾᔨᒃᑎᑐᑦᓯᓂᖅ - Aajiiqatigiinniq** *(Decision-making through discussion and consensus)*
- **ᐱᓕᒪᒃᓴᓂᖅ - Pilimmaksarniq** *(Development of skills through observation, mentoring, practice and effort)*
- **ᐃᒃᔪᖅᑎᑐᑦᓯᓂᖅ - Ikajuqtigiinniq** *(Working together for a common cause)*
- **ᖃᓄᖅᑐᓂᖅ - Qanuqtuurniq** *(Being innovative and resourceful)*
- **ᐊᕿᑎᓂᑦᓂᒃ ᑲᒪᓂᓕᓂᖅ - Avatittinnik Kamat**
  (Respect and care for the land, animals and the environment)

MICHIF *Métis*

- Honesty
- Respect
- Love
- Sharing
- Caring
- Courage
- Balance
- Patience
- Strength
- Kindness
- Sharing
- Tolerance
- but most importantly, Connection with the Creator and Mother Earth.

Message from Elder Grandmother Renée Thomas-Hill (Transcript).



WE ARE THE LAND

"We are connected to the land because whatever is in our bodies is the same thing as in the earth. The iron and the zinc are what we are all made of. We are creation, which is why children instinctively play in the mud. People often say when food falls on the floor, 'Oh, don't touch that.' I touch it because I ate from the garden and I ate dirt. I share the same essence as Mother Earth. My whole body is the land, the air, the water and the sun.

We come from the stars. Every ingredient that is here has come from the universe. There is another foundational ingredient in our medicine: it comes from the Sky World. All of our traditional knowledge comes from the Sky World. When we sample those natural foods without added sugar, we are inherently more connected."

THE POWER OF WILD MEDICINE V. CHEMICAL FOODS

"Our ancestors understood this connection. If you want to be a good runner, you have to eat the fast-running animals. If you want to be strong, you have to eat foods like the moose and the bear, which is why we are meant to have wild meat.

Unfortunately, our children are not living in that way today. They go to fast-food restaurants and eat highly processed meals that are causing unprecedented health problems. Recently, my grandchildren brought me some of their fast food. I put it away so they wouldn’t see it, and I forgot about it. When I opened those bags of chips years later, you could smell nothing but pure chemicals. I would never eat it now, and I do not even want to give it to the animals. This fake food smells good when you open it and it tastes good, but think about what it is doing to your stomach. This is why our kidneys are suffering, even in the young, and why our young people are having heart attacks.

The policy-makers are contributing to this crisis."

AN AWAKENING THROUGH CEREMONY

"Despite these challenges, the call for healing is out there.

This generation has been doing ceremonies and praying, and people are starting to wake up. We need the proper tools to support them, and that is exactly what IDHC has been doing by creating resources.

It is all happening because of ceremony. It is just like rain. We did all these ceremonies and prayers for everybody’s mind to be awakened.

When the rain falls down, some people may have their heads covered and will not receive it, but there are going to be others who receive those raindrops.

Awakening will take away the colonization so that our people can look around and see clearly."

Elder Allan Jamieson was present as message was relayed in Hamilton, Ontario (2026-06-08)



A Message from the Board Chair — Robert Lebel



GREETINGS ACROSS THE TERRITORY.



Robert Lebel

As the Chair of the Board of Directors for the Indigenous Diabetes Health Circle (IDHC), I am incredibly proud to present our annual report for the 2025–2026 fiscal year. For nearly three decades, our organization has been guided by the gentle strength and spiritual integrity of our Elders, whose wisdom remains our deep foundation. Working alongside this guidance is our dedicated Board of Directors — a circle of community-minded leaders who govern our shared canoe with immense care, passion, and vision.

I am honoured to re-introduce the exceptional individuals who comprise our current Board of Directors, each of whom brings a unique gift to our governance circle:

- **Cindy Hunt (Vice Chair):** Cindy's passionate advocacy and steady community-minded spirit light up our discussions, ensuring our relatives remain at the heart of every policy we create.
- **Philina Sky (Director):** Philina expertly infuses our circle with her clinical knowledge as a Registered Nurse and licensed education provider, ensuring our healthcare models are both scientifically sound and culturally safe.
- **Carol Taylor (Director and Former President):** Carol provides our table with decades of unmatched organizational history and structural insight, keeping our ancestral mission anchored as we expand. As 2025 represents the final year of Carol's term of service, we extend our deepest gratitude for her enduring legacy.
- **Robert Tenneriello (Director):** Robert seamlessly balances his clinical background as a Registered Dietitian with his high-level professional vision as a Senior Manager at Indigenous Services Canada in Ottawa.
- **Stephanie Peplinskie (Secretary/Treasurer):** Stephanie manages our organizational governance and structural frameworks with precise care from North Bay, bringing vital insights from the Anishinabek Nation (Union of Ontario Indians).
- **Julie Toulouse (Director):** Bringing a rich wealth of community dedication from Sagamok Anishnawbek, Julie has a commitment to providing input to community wellness, infusing our circle with inspiring, life-forward energy.
- **Mika Woolley (Youth Representative):** Mika brings a refreshing, forward-looking perspective to our circle, passionately advocating for the health of younger generations and inspiring our youth with creative paths toward wellness.
- **Elder Renée Thomas-Hill (IDHC Elder):** Renée wraps our board in profound spiritual comfort, anchoring our governance decisions in traditional Haudenosaunee teachings and deep historical wisdom.
- **Elder Allan Jamieson Sr. (IDHC Elder):** Elder Allan stands as a pillar of cultural integrity, offering vital ancestral knowledge that keeps our canoe firmly grounded in community truth.

This past year brought intricate operational transitions and systemic hurdles. We fully acknowledge that this has been a demanding and deeply challenging period for IDHC. Yet, the unyielding commitment of the entire IDHC team to reinforce the organization for future generations has been profoundly inspiring. Through extensive mentoring, proactive succession planning, robust data protection measures, transformative partnerships, vital committee work and cutting-edge strategic projects, IDHC has heavily fortified its collective bundle.

On behalf of the entire Board, I want to extend our warmest and most heartfelt congratulations to the *Godrihwasidso*, our Chief Executive Officer, Roslynn Baird, as she approaches an incredible third decade of dedicated service, navigating IDHC's 29th year. Roslynn continues to carry out an immense provincial, national, and global mandate with an inspiring level of grace, unyielding vigor, and visionary thinking.

We are profoundly grateful that an organization of this caliber exists to support Indigenous people across Ontario, steering our canoe through turbulent waters into clear sailing.



Roslynn Baird



A Message from the Chief Executive Officer (Godrihwasidso) — Roslynn Baird

Sekoh, Boozhoo, Aanii, and Greetings.

As Godrihwasidso, I offer this annual reflection with a heart full of gratitude for the resilience of our communities, extending my most gracious thanks to the IDHC Elders for their profound guidance and to our dedicated Board of Directors for their steadfast leadership. Guided by the Ancestors and the enduring wisdom of the Seven Grandfather Teachings, our journey this past year has been one of deep connection, proactive care and cultural revitalization. As part of our provincial mandate, we continue to weave together Care and Treatment, Prevention, Education, Coordination, and Research to safeguard the physical and spiritual wellness of our people in a wholistic way.

In this issue of our Annual Report, we present the IDHC Model of Care. To understand this model, we visualize a canoe cutting through the waters of Ontario, carrying our four sacred medicines — tobacco, sage, cedar, and sweetgrass. This canoe represents the life-forward health journey of our people. As it moves up the river, the canoe reaches a critical fork in the water. One path leads toward dangerous rapids, systemic obstacles, and navigation barriers that threaten to capsize our health. The other path, illuminated by traditional knowledge and community-led care, offers clear sailing toward wellness, balance, and longevity. Every program we deliver is designed to steer our relatives away from the turbulent rapids and guide our collective community canoes into those clear, peaceful waters.

This journey requires many hands paddling in unison. I want to express my deepest gratitude to our dedicated Board of Directors. Their exceptional leadership, strategic foresight, and clear operational direction have provided the stability needed to navigate systemic obstacles and an ever-changing healthcare environment.

I also want to extend a heartfelt thank you to our Programming team, led by Autumn Watson. Through her brilliant vision for both the Knowledge and Client Services departments, Autumn has masterfully brought the IDHC Model of Care directly into our communities. She accomplished this by translating our wholistic framework into real-world, localized actions: launching the innovative Certified Diabetes Educator consultation program directly within our internal medical records, forging vital provincial training partnerships for eye health and Lower Limb Preservation and driving the creative development of culturally grounded resources like youth graphic novels and the Father's Video Companion Tool. Her leadership has transformed clinical data and traditional wisdom into a living, breathing reality for our relatives on the ground.

On the operational side of the organization, IDHC has achieved yet another milestone of digital and community reach, connecting with 20,000 frontline health workers and thought leaders. We have heavily fortified our data security frameworks and protected IDHC's intellectual property. Additionally, the operations team successfully transitioned our financial systems to QuickBooks, streamlined shipping and receiving logistics, and comprehensively reorganized Human Resources — including the proud implementation of the HOOPP pension plan for the long-term benefit of all our employees.

Looking ahead to the horizon — with our 30th year just around the corner — I see the brightest diabetes wellness future for IDHC and the Indigenous people of Ontario. Our bundle is full, our paddles are strong, and our network of community-led partnerships continues to expand across the province. Driven by our deep, unconditional love for the communities we serve, we will continue to steer away from navigational barriers and move gracefully into clear waters. Together, we walk forward in wellness for the next seven generations.

Miigwetch. Nia:wen. Thank you.

Roslynn Baird
Chief Executive Officer (*Godrihwasidso*)
Indigenous Diabetes Health Circle

A Message from the Director of Programs — Autumn Watson



Autumn Watson

HONOURING THE SACRED JOURNEY NURTURING OUR WAY FORWARD AND STRENGTHENING OUR BUNDLES

Sekoh, Boozhoo, Aanii, and Greetings.

As the Director of Programs, I would like to extend a huge thank you, to the entire IDHC team for tirelessly paddling together to deliver the IDHC wholistic model of care to Indigenous Peoples, frontline health workers, communities, and organizations across Ontario — and now into national and international waters. Your dedication, innovation and commitment create a powerful ripple effect strengthening equitable pathways to health and wellness for First Nation, Métis and Inuit communities. The resources, programs, services and training delivered each day is creating meaningful change and building capacity with lasting impacts.

The waterways navigated by the Client Services and Knowledge Program teams run deep — at times fast flowing — yet always guided by a gentle, calming and healing force. To highlight their collective paddles in this section would only touch the surface of their impact. I encourage you to continue turning the pages to discover the depth of their contributions and the strength with which they move the journey to wellness forward for the individuals, families and communities we serve.

CHARTING THE COURSE FORWARD

In March 2026, we finalized a comprehensive IDHC Operational Plan built within an MS Planner compatible format. To ensure organizational excellence, all core facets of IDHC operations were audited, including:

- Governance and Communications
- Human Resources and Financial Frameworks
- Shipping, Administration
- The Knowledge and Client Services Programmes

The systematic implementation of the Juvonno healthcare management platform and general reporting

The primary objective of this audit was to capture overarching strategic priorities for the fiscal year, clarify team accountabilities and ensure alignment across all projects. Implementation will begin fiscal year 2026-2027, alongside the leadership of Irene Samuel, Special Projects Coordinator, who will support the team with mapping this structure directly into MS Planner, resolving inter-departmental crossovers, and identifying specific, actionable tasks to maximize organizational efficiency.

NATIONAL CURRENTS: EXPANDING LEADERSHIP BEYOND ONTARIO

Award-Winning Prevention Work in Nunavut

Demonstrating that IDHC's wholistic model of care has national relevance, the Baker Lake Community Diabetes Prevention and Nutrition Program in Nunavut captured a prestigious award at the Arctic Inspiration Prize ceremony on May 13, 2025, with IDHC CEO Roslynn Baird delivering an inspiring acceptance speech. The project team, Baker Lake along with Land and People Planning, partnered directly with IDHC to help design and tailor culturally relevant diabetes education and prevention programming for the community.



IDHC is deeply honoured to tri-partner on a subsequent initiative under the ArcticNet: Inuit Qaujisarnirmut Pilirijjutit (IQP) programme. This 3-year project is led by the community of Baker Lake (Qamanii'tuaq) in the Kivalliq Region of Nunavut and further supported by our partners at Vision Loss Rehabilitation Canada (VLRC) and Land and People Planning. This IQP work complements the Baker Lake Community Diabetes Prevention and Nutrition program by expanding its scope to include diabetes-related eye health through two vital training streams: Eye Health Screening and Community-Based Research. The initiative will move forward fiscal 2026-2027.

SYSTEMIC ADVANCEMENTS WITH THE NIAGARA ONTARIO HEALTH TEAM (NOHT)



Closer to home, the Niagara Ontario Health Team (NOHT) makes strides toward advancing equitable healthcare access for Indigenous Peoples. Through strategic partnership, IDHC successfully hosted a dedicated Manager of Indigenous Health Care Relations role, yielding vital systemic insights. This initiative demonstrated that long-term, meaningful change within a vast healthcare infrastructure cannot rest upon a singular role; rather, systemic transformation demands system-wide, shared accountability. Real progress is rooted in continuous learning, authentic relationship-building and collective action. It requires an institutional willingness from all partners to deepen their cultural understanding, advocate for Indigenous-led solutions, and embed these critical priorities directly into workplans and governance frameworks.

Leveraging these insights to drive measurable progress in diabetes wellness, IDHC will proactively pivot next fiscal from isolated efforts and toward a high-level, collective governance model. With active leadership and oversight from IDHC CEO Roslynn Baird, IDHC ensures that Indigenous diabetes prevention, specialized care and wholistic wellness strategies remain at the forefront of regional healthcare policy, positioning the organization as a vital architect of health equity in Ontario and beyond.

PADDLING WITH PURPOSE: THE KARIHWÁHSTHA NATIONAL PUBLIC POLICY

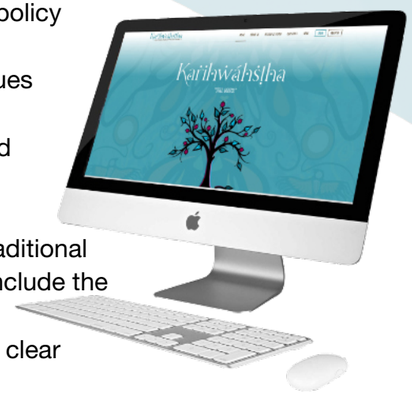


Irene Samuel made significant contributions to the Karihwáhstha initiative, Diabetes Action Canada Fellows and Diabetes Summit

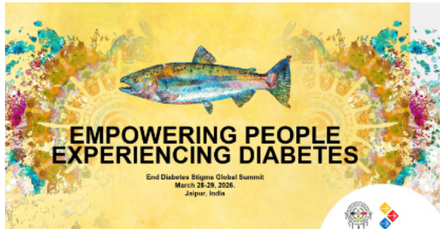


Abby Duggal Program Assistant

This fiscal year, the Karihwáhstha National Public Policy initiative reached additional milestones as we continued to advocate for structural health policy shifts at the federal and provincial levels. Through this policy framework, IDHC is actively participating in national dialogues to ensure that Indigenous diabetes wellness is recognized not merely as a medical issue, but as a fundamental right rooted in systemic equity, self-determination, and the preservation of traditional wellness practices. Initiative advancements include the collaboration hub (website) launch and the focus on cultural safety and food sovereignty. Together, we continue to clear the waters for the generations to come.



ADVANCING SYSTEMIC HEALTH EQUITY: COLLABORATION WITH DIABETES ACTION CANADA



The formal collaborative relationship agreement signed last fiscal year in Thorold, Ontario, between Diabetes Action Canada (DAC) and the Indigenous Diabetes Health Circle (IDHC) marked a milestone in amplifying Indigenous voices and advocating for systemic health equity.

Throughout 2025–2026, IDHC collaborated with Fellows representing Diabetes Action Canada (DAC) to create resources to support individuals living with diabetes. Together, they developed and produced wallet sized cards to make handy such information as signs and symptoms of diabetes, medical tests related to diabetes and patient rights.

A showcase of this partnership occurred at the March 2026 Diabetes Stigma Conference in Japur, India. At this international forum, IDHC and DAC highlighted multiple joint initiatives, most notably a Research-to-Action Fellowship project directly addressing Indigenous misdiagnosis and the implementation of culturally safe care models.

THE WHOLISTIC MODEL OF CARE IN ACTION



During the November 2025 Diabetes Canada conference, IDHC officially presented its core service framework: the Wholistic Model of Care. A primary example of this framework in action is the IDHC Foot Care Program, which weaves together clinical podiatry, reflexology, eye screenings, CKD screening, and one-on-one consultations alongside traditional knowledge and medicine. By demonstrating measurable success, this model successfully pivots frontline healthcare providers away from rigid clinical pathways and toward relational, flexible, and culturally safe wellness practices.

REVIEWING OUR COLLECTIVE PROGRESS

I invite all readers to turn their attention to the specialized sections ahead, which detail the tireless work of our Client Services and Knowledge departments. Take the time to travel with us on the journey to wellness by stepping into the “canoe model of wholistic diabetes care,” immerse yourselves in the accompanying data charts, narrative highlights and visual summaries that map out the journey over the past year.

These reporting tools have been intentionally designed to capture our milestones, localized impacts, and programmatic progress at a glance — reflecting the true strength of our community ties and our shared commitment to wellness

Miigwetch, Nia:wen, Matna to our partners, staff and communities for walking this beautiful path of wellness together.

Client Services Annual Review — Samantha Lascelles



Samantha Lascelles

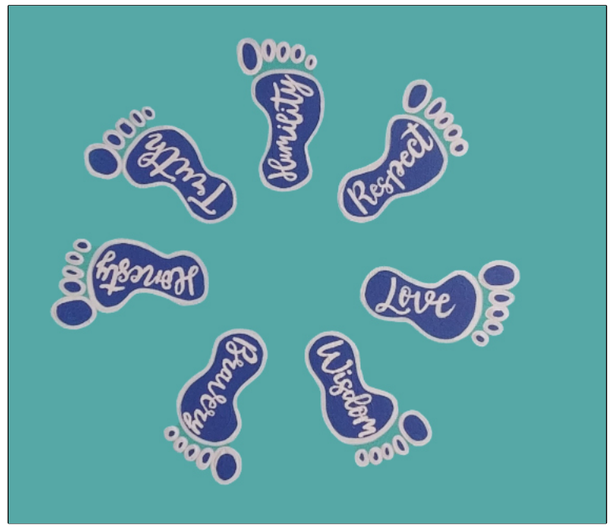
NAVIGATING WELLNESS: CHARTING OUR COLLECTIVE PROGRESS

In alignment with the IDHC Model of Care, our annual metrics form the physical baseline of our paddling. The data we report to the Ontario Ministry of Health forms the gunwales, thwarts, ribs, planking and stern that keep our collective canoe moving forward. By tracking every treatment, referral and preventative screening, we map our progress along the river. This rigorous data collection ensures our families stay within safe, clear waters while actively avoiding the turbulent rapids of diabetic complications. Far from just numbers, these metrics provide the concrete evidence that IDHC is successfully shifting the landscape of Indigenous healthcare. They prove that our proactive, culturally integrated strategies are effectively reducing the risk of long-term illness. The following data outlines the direct impacts achieved across our client pillars over the 2025–2026 fiscal year, demonstrating the physical strength and measurable success of our wellness bundle in Ontario and beyond.

FOOT CARE PROGRAM: TENDING TO THE PATH OF OUR ANCESTORS

Our feet connect us directly to Mother Earth; keeping them strong is a sacred duty. Throughout the fiscal year, IDHC sustained its network of ongoing foot care clinics and active subsidy clinic sites across Ontario, providing vital, life-saving treatments. Our dedicated providers safely managed numerous high-risk cases, distributed protective footwear, and provided offloading devices to safeguard vulnerable steps.

The high volume of specialized interventions and rapid referrals highlights a critical, life-saving network that protects Indigenous community members from advanced diabetes complications.



FOOT CARE PROGRAM DELIVERY AT-A-GLANCE

16
Ongoing subsidy clinic sites actively operating and treating clients in community spaces.

1572
Completed In-Person Treatments by SP.

93
High Risk Treatment with FC Specialist.

64
New Foot Assessments.

9
Ongoing foot care clinics providing regional access across the year.

42 pairs
Seasonal footwear and 5 specialized offloading devices distributed to support long-term mobility.

10
Referrals to Specialist.

1
Created one new remote ongoing clinic.

10
Critical referrals facilitated to specialized medical professionals.

NAVIGATING OPERATIONAL BARRIERS AND REGIONAL RAPIDS

While our canoe moves forward with strength, we must transparently document the navigational barriers encountered along the riverbank. This year, we were able to start one remote ongoing clinic. Onboarding new Northern and remote subsidy locations has proven exceptionally challenging, as our current organizational subsidy rates cannot match the general competitive rate of pay commanded by experienced professionals in these isolated territories.

TARGETED MOBILISATION & CRISIS RESPONSE

Despite these restrictions, we utilized targeted mobilization to reach underserved relatives. We conducted three major community outreach events, which included two events and three dedicated clinic sessions specifically for evacuees.

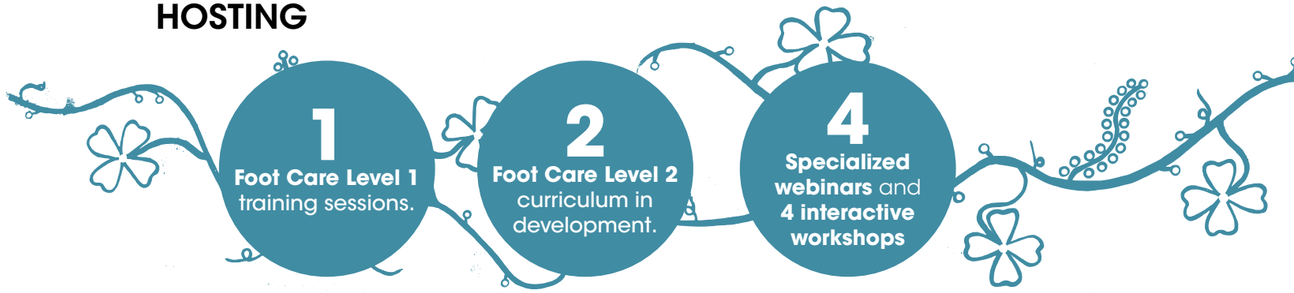
We also participated directly in Inuit Wellness Day, providing essential health education and direct clinical treatments to 19 unique participants to ensure our urban and regional Inuit relatives were wrapped into our circle of care.

CAPACITY BUILDING AND COMMUNITY KNOWLEDGE EXCHANGE

Strengthening our circle requires training new paddlers to carry out our clinical mission with cultural safety at the forefront. Within this fiscal year, we successfully trained 2 new service providers and engaged 32 subsidy site service providers across our network.

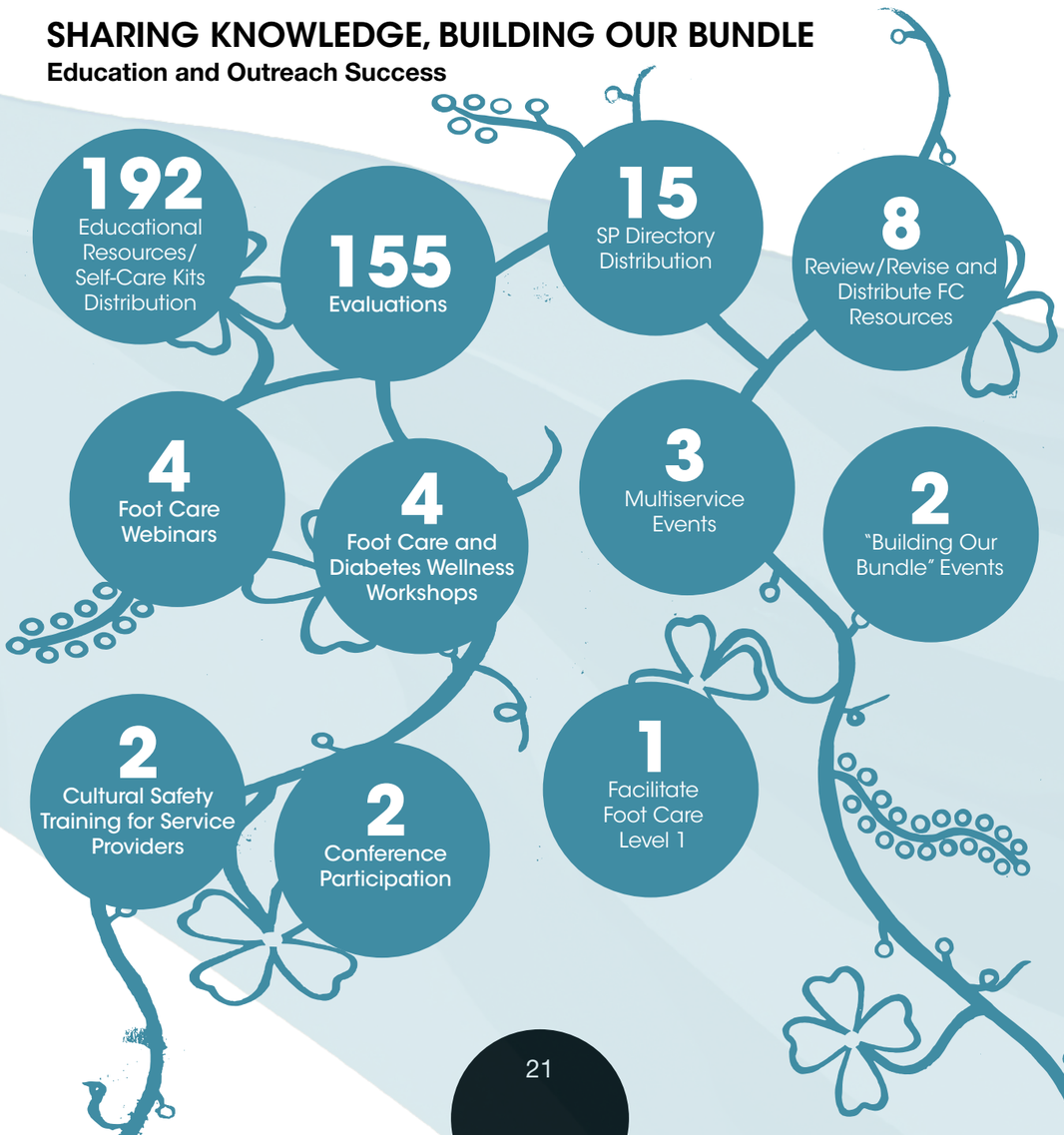
To expand our visibility and ensure our resource directories reached the hands of frontline workers, we executed a physical distribution strategy at major provincial assemblies, including the Anishinabek Nation Health Conference. Through these entry points, we distributed 15 complete service directories to community partners. We also completed a comprehensive review of five foot care resources and collected critical community feedback, gathering 155 completed foot care evaluations directly from the relatives we served.

EDUCATIONAL OUTREACH WAS STRENGTHENED BY HOSTING



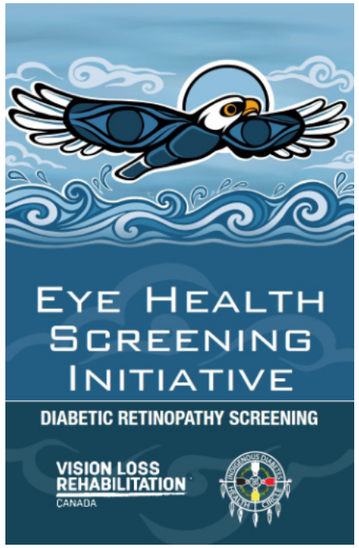
SHARING KNOWLEDGE, BUILDING OUR BUNDLE

Education and Outreach Success



Expanding the Circle: Targeted Clinical Programs

EYE HEALTH SCREENING INITIATIVE (EHSI)



The Eye Health Screening Initiative (EHSI), developed through long-term IDHC and Vision Loss Rehabilitation Canada (VLRC) collaboration, is a province-wide program aimed at reducing vision loss caused by Diabetic Retinopathy (DR) in Indigenous communities across Ontario. Since its inception, EHSI has grown to support over 40 communities by providing portable retinal imaging equipment, training community staff, and coordinating culturally safe screening clinics. The core roles of the EHSI initiative include delivering diabetic retinopathy screenings, building local capacity through training, and ensuring timely referrals for follow-up care through an AI-mediated screening tool and trusted tele-ophthalmologists.

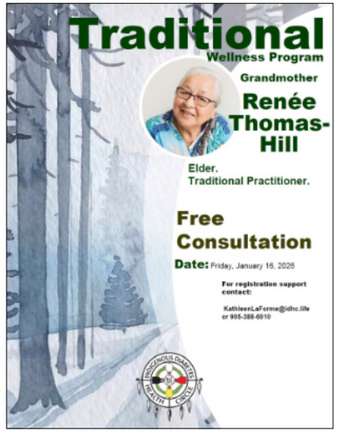


A central focus of this initiative is removing geographic barriers to diabetic eye care, particularly in remote or underserved areas. To support local sovereignty, communities have the option of purchasing an imaging camera for their permanent use; alternatively, communities can utilize the IDHC camera-sharing programme. By empowering local networks with clinical tools and diagnostic knowledge, EHSI establishes a dependable pathway for early detection, directly preventing blindness and supporting wholistic wellness rooted in community trust.



Sustaining exceptional momentum across Ontario, the initiative achieved a historic milestone of **1,420 vision screenings** this fiscal year. These screenings serve as an essential preventative shield, successfully preserving the sight of our long-term clients from Diabetic Retinopathy — one of the leading causes of blindness in Canada.

DIABETES EDUCATION PROGRAM (DEP) SERVICES AND VIRTUAL MOBILIZATION



Wholistic wellness requires balancing clinical intervention with direct, accessible counsel. Our Diabetes Education Program (DEP) bridged these worlds by providing individualized support. Throughout the year, we facilitated 225 confidential one-on-one sessions connecting individual community members directly with our network of Elders, traditional practitioners and Certified Diabetes Educator.

To supplement this localized care, we deployed a continuous stream of health literacy across modern digital channels, ensuring wellness information remains accessible outside of clinic walls. Across the fiscal year, our communications team achieved a benchmark of releasing 284 targeted social media daily messages across Facebook, Instagram, X (formerly Twitter) and LinkedIn. We intentionally synchronized our outreach with the seasonal cycles of the earth, keeping the fire of preventative health burning bright for our digital community.

KEY COLLABORATIVE MILESTONES & STRATEGIC ALLIANCES

Leading Innovation in Indigenous Healthcare Quality



- Another significant accomplishment over the past year is the Indigenous Diabetes Health Circle's (IDHC) recognition as a **finalist for the Ontario Health System Quality and Innovation Award** for two consecutive years. These prestigious awards celebrate healthcare leaders and innovators who are actively strengthening Ontario's health system. Achieving a spot within the top three finalists across nine highly competitive categories—specifically the Improved Indigenous Health

Category—for both initiatives provides clear evidence of IDHC's growing impact and progress in advancing Indigenous diabetes wellness.

In 2024, IDHC's Eye Health Screening Initiative was named a finalist, followed closely by the Lower Limb Preservation Initiative in 2025. Because the Improved Indigenous Health Award recognizes excellence in providing care to First Nations, Inuit, Métis, and urban Indigenous (FNIMUI) people, families, and communities, this back-to-back recognition is more than an honour. It serves as external validation from health system leaders that IDHC's culturally grounded, proactive models of care are successfully moving the needle on diabetes prevention and management. By consistently scaling these initiatives, IDHC continues to demonstrably improve health outcomes, bridge critical systemic gaps and strengthen sustainable care for Indigenous communities across Ontario and beyond.

- **Self-Advocacy Resource Development** IDHC collaborated closely with Fellows representing Diabetes Action Canada to create practical resources supporting those living with diabetes. Together, they developed and produced durable, wallet-sized resource cards detailing critical signs and symptoms, essential diagnostic medical tests, and patient rights frameworks.





- **Launch event for Chronic Kidney Disease Point of Care Testing** IDHC and Niagara Health partnered with the Ontario Renal Network to offer vital chronic kidney disease screening closer to home. This event brought together our community and partners to discuss this new initiative and develop culturally relevant resources IDHC can share throughout the Indigenous community of practise. The team unveiled the graphic developed in partnership with artist Ryan Woodruff that will be featured on all IDHC CKD resources. This culturally safe and trauma-informed community-based initiative aligns seamlessly with IDHC's Wholistic Model of Care.

THE LESSON OF THE FISH

Clean water is life for the fish, and it is life for us.

Our kidneys act as the stewards of our inner ecosystem—our inner waters—filtering waste to keep our inner waters pure.The fish reminds us of our sacred responsibility: to care for the land, the water, and our own bodies.



- **The Niagara Lower Limb Preservation (LLP) Initiative:** IDHC was honoured to secure specialized funding to strengthen its foot care footprint by participating in the Lower Limb Preservation (LLP) initiative. With non-traumatic amputations rising nationally, lower limb preservation is vital for client autonomy and overall wellness. Funded by Ontario Health and executed in partnership with the De dwa da dehs nye>s (DAHAC) Aboriginal Health Centre, the Fort Erie Native Friendship Centre (FENFC), and VLRC, our joint strategic objectives include:
  - Increasing regional access to IDHC's existing diabetes screening, foot care, traditional wellness and eye health pathways.
  - Building an Indigenous-led LLP pathway to support clients in Niagara (Indigenous Health in Indigenous Hands).
  - Improving equitable access to high-quality, best-practice early screening, integrated lower-limb wound care, and vascular care.
  - Measurably reducing avoidable, non-traumatic major lower-limb amputations across the territory.

Strategic Partnerships & Organizational Tributes On June 17, 2025, IDHC hosted a community Strawberry Social, paying tribute to the foundational work of Kitten Moses as Manager of Indigenous Healthcare Relations in developing the Niagara Ontario Health Team (NOHT) Indigenous Pillar Strategic Plan. Highlighting our expanding corporate network, Breakthrough T1D (formerly JDRF) formally signed a collaborative relationship agreement with IDHC during this event.

With the physical baseline of our paddling firmly mapped through clinical metrics, we turn our attention to the Knowledge Department, which serves as our vital storehouse of training, data and strategic resource development to steer our communities toward lasting wellness.

THE HEART OF IDHC CARE: MEET THE CLIENT SERVICES TEAM



Lindsey Cosh
Foot Care Coordinator



Stacey Ely
CS Support Worker



Ellena Kechego
Eye Health Worker



Justice Maki-Chambers
Eye Health Worker



Kathleen LaForme
Traditional Wellness Coordinator



Kyla Stonefish,
Client Services Nurse

Knowledge Department Annual Review—Jessica Pace



Jessica Pace

I am deeply honoured to present the annual overview of our department's path. In the spirit of the IDHC Model of Care, if our clinical services represent the steady paddling of our collective canoe up the river, the Knowledge Department represents the ancestral maps, the star teachings and the physical contents of the bundle we carry. The role of the Knowledge Department is to gather, refine and share wisdom across the organizational ecosystem, ensuring that Indigenous communities are equipped with the tools needed to steer away from the turbulent rapids of chronic illness and into the clear sailing of lifelong wellness.



The past fiscal year has been a period of growth, educational innovation and expanding partnerships. By grounding our output in research, capacity building and responsive community materials, we have fortified our collective bundle for the next seven generations.

TRAINING, E-LEARNING PATHWAYS AND

Knowledge in Action
Community Engagement and E-Learning Growth

Core Curricula (6 Training Sessions)	Garnered 120 registrations, 97 attendees and 87 completed curriculum evaluations.
Short Courses (8 Training Sessions)	Welcomed 252 cumulative attendees and gathered 29 training evaluations.
Digital Training Expansion	Officially launched the Father's Video Companion Tool and Diabetes 101 e-learning modules, alongside updated Annual ISO audit May 2025. This drove a digital surge of **947 e-learning enrollments**, yielding 424 completions and 38 evaluations.
Systems Infrastructure	Identified operational needs for enhanced learning environments and initiated testing for two new Learning Management Systems (LMS). Concurrently, we cross-trained our Training Administrator to streamline student record management and certificate distribution.

INFRASTRUCTURE INNOVATION

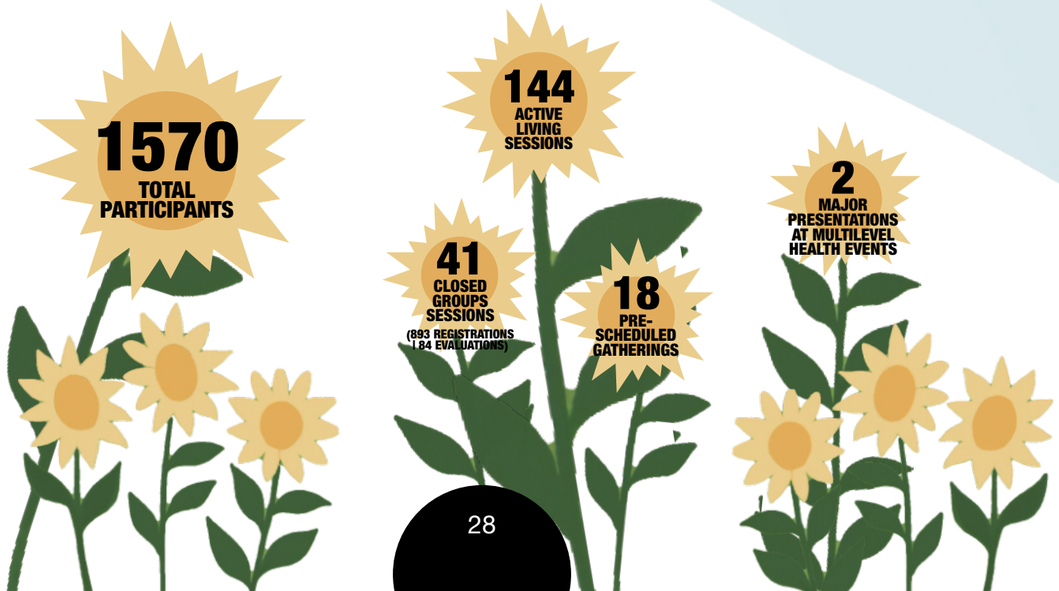
To ensure that health care across Ontario is rooted in cultural safety and clinical excellence, our department meticulously maintained learner records for in-person, virtual and digital pathways. Over the fiscal year, we drove academic and professional development by hosting 14 core and short training sessions, welcoming a total of 349 attendees.

VIRTUAL CONNECTIONS, ACTIVE LIVING AND COMMUNITY MOBILIZATION

Knowledge translation thrives when it flows directly into community spaces. Our team maintained a robust virtual and physical presence throughout the year, launching 13 programming newsletters and hosting 16 educational webinars (attracting 739 registrations, 344 attendees, and 113 evaluations). These sessions provided vital guidance on Electronic Medical Records (EMR) systems, self-inspection techniques and diabetes blood health.

At the community level, wellness engagement bloomed through a diverse tapestry of initiatives that reached **1,570 total participants:**

- **144 Active Living Sessions** and **18 Pre-Scheduled Gatherings.**
- **41 Closed Group Sessions** (drawing 893 registrations, 1,570 attendees, and 84 evaluations).
- **Provincial Leadership Delivered** two major presentations at multi-level health events, sharing Indigenous ways of knowing and being with mainstream and community organizations.



MATERIAL DISTRIBUTION AND CULTURALLY CENTRED RESOURCE DEVELOPMENT

Fulfilling requests for physical wellness tools forms the heartbeat of our resource mobilization. Across the fiscal year, our department successfully processed **229 resource orders**, delivering **13,213 individual items** to families, health centres, and frontline workers while tracking a baseline of 1,788 wellness tools.



Our publication bundle distributed an additional **4,551 products**, including 1,780 books and guides, 523 educational posters, 746 pieces of protective footwear/socks, and 450 copies of our *Newly Diagnosed* support booklet.

Our publication library grew substantially this year through the development of Chronic Disease Screening wallet cards, a Chronic Kidney Disease Handout, and updated physical activity and stress management materials. Backed by external grants, we also created a dedicated suite of youth-centered and curriculum-specific resources:

- An official IDHC Model of Care Illustration to visually anchor our health philosophy.
- The Illustrated Youth Graphic Resources series.
- An Illustrated Youth Wellness Bingo Game to promote healthy lifestyle habits.
- A set of curriculum-focused handouts tailored specifically for our Trauma-Informed Care training.





PROFESSIONAL GROWTH AND CLINICAL CONSULTATION

To ensure our team remains at the forefront of diabetes wellness, IDHC staff actively participated in vital professional development assemblies. Seven team members attended the Diabetes Canada Conference in Toronto, while others engaged at the Six Nations Polytechnic Diabetes Conference, the Anishinabek Nation Diabetes Conference, the National Indigenous Diabetes Association (NIDA) event and the Principe de Joyce Cultural Safety Conference in Trois-Rivières. We also logged attendance at the Lawson Foundation CYDS gathering. Internal capacity was further strengthened through a staff Cross-Training/Train the Trainer pilot focused entirely on our Trauma-Informed Care curriculum.

Clinical innovation reached individual clients in the final quarter of the year with the launch of a brand-new Certified Diabetes Educator (CDE) consultation program.

IDHC made key presentations at the Diabetes Canada Conference between November 27-29, 2025, featuring the IDHC Canoe Model of Wholistic Care and the LLP Pathway. IDHC engaged targeted thought leaders to advance the integration of Indigenous knowledge within national healthcare frameworks, furthering systemic collaboration and enhancing culturally safe diabetes care across Canada.

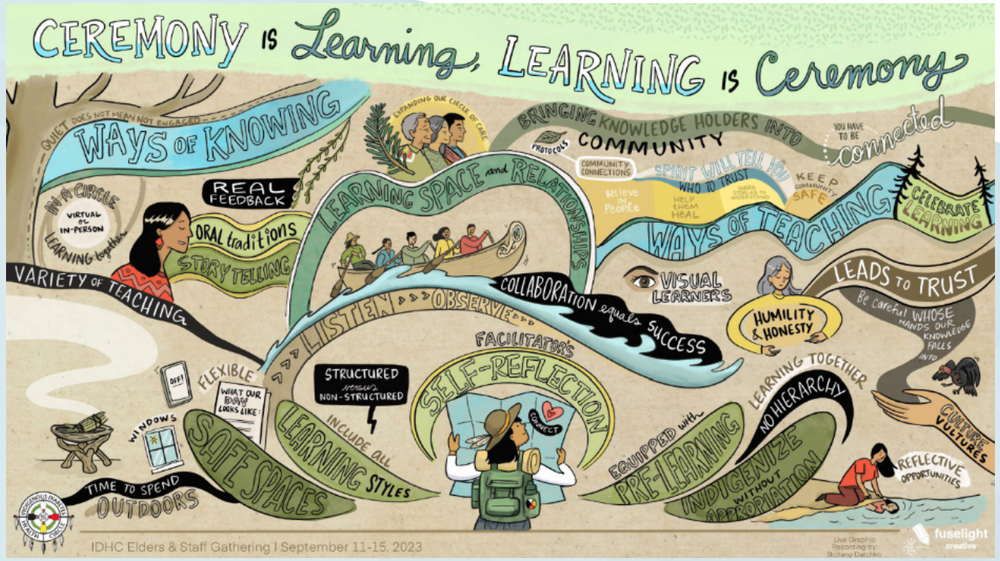
GROUNDING OUR FUTURE IN INDIGENOUS-LED RESEARCH & SPECIAL PROJECTS

In our unwavering commitment to self-determination and data sovereignty, the Knowledge Department secured multiple external grants, finalized impactful health pilots, and achieved peer-reviewed academic publication.

Our department successfully secured a key grant from the **Social Sciences and Humanities Research Council (SSHRC):** the *Indigenous Capacity and Leadership in Research* grant, and the Indigenous *Innovation and Leadership in Research. (Stage 1).*

To build collaborative capacity across Ontario, we have extended our knowledge framework to encompass diverse, externally supported initiatives:

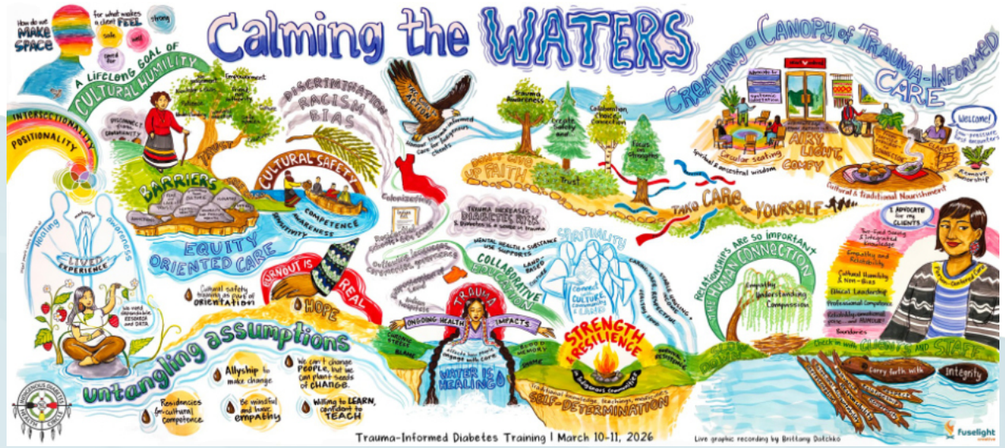
- **Diabetes Connections – *Shookaawaapinewin Mamow Wicihiwewin*:** A five-year partnership with the Sioux Lookout First Nations Health Authority (SLFNHA) and the University of Toronto.



- **Eye Health Screening Initiative (EHSI) ISO certification training** was developed in collaboration with Vision Loss Rehabilitation Canada (VLRC) and due for completion April 2026. The curriculum was developed and the course will launch in 2026.
- **Mobilizing Resilience through Community-to-Community (C2C) Exchange: Seven Generations Thinking for Wellness and Diabetes Prevention (CIHR)** An ongoing collaboration with KSDPP and McGill University. IDHC serves as an active knowledge user to help mobilize diabetes prevention models across communities while improving regional program coordination (Research project ongoing).
- **Learning is Ceremony — Applying Methods of Indigenous Knowledge Transfer in Contemporary and Diverse Educational Settings:** In partnership with ADDIEV Corporate Training, a core text and curriculum model mapping out Indigenous knowledge translation methodologies to support culturally safe instructional design is in development.
- **Extending the Circle: Sharing Indigenous Men's Voices to Encourage Healthy Living.** ***CIHR Dissemination Grant*****:** A one-year grant to support the development of an e-learning companion tool to increase uptake and utility of the IDHC Father's video (**project completed**).
- **OH Indigenous Cultural Safety Training Project:** A two-year funded initiative (April 2024 - March 2026) that assesses community needs surrounding trauma and diabetes risk. Our department successfully developed and piloted four core modules outlining trauma mechanics, diabetes screening effects and traditional cultural approaches to trauma healing (project completed).
- **Supporting the Journey to Fatherhood** A three-year research collaboration with the University of Toronto, McMaster University, Hamilton Regional Indian Centre and Tsi Nón:we Ionnakerátstha (Six Nations Birthing Centre). This initiative drives community-led parenting programs for fathers, integrating lifecycle-specific diabetes information into family care circles (partnership ongoing).

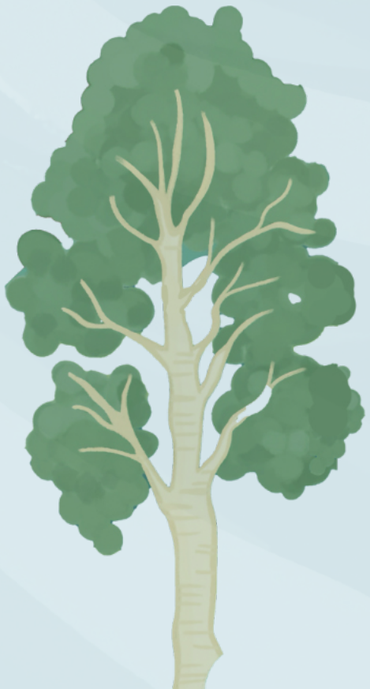


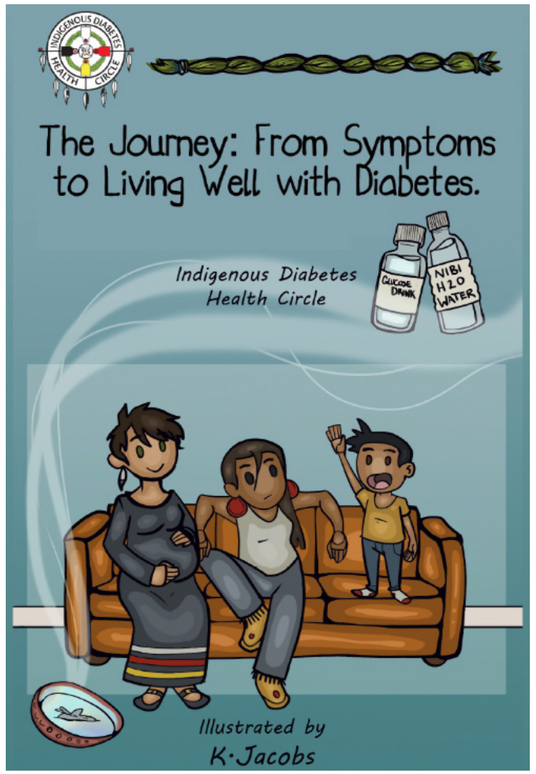
- **Telus Grant (Nurturing Connections: An Inclusive Approach to Type 1 Diabetes):** A specialized proposal submitted on March 5, 2025 seeking a single year of funding to execute a comprehensive provincial environmental scan. This project charts existing Type 1 Diabetes resources to understand and address resource equity gaps (proposal submitted).
- **Trauma and Violence-Informed & Culturally Safe Research Practices with Indigenous and Indigenous 2SLGBTQQIA+ People:** A four-year partnership supported by Ontario Health investigating the needs of First Nations, Métis and Inuit people, including 2SLGBTQQIA+ communities, regarding research involvement. This project evaluates gender-focused training modules using the Implementation Outcomes Framework (partnership active).



The IDHC embarked on a province-wide Trauma-Informed Diabetes Certification Training initiative to support frontline healthcare workers in delivering culturally safe, and trauma and violence-informed care to Indigenous clients living with diabetes. The project aims to develop a training program rooted in community collaboration that will lead to an Indigenous Trauma-Informed Diabetes Care Certificate. The training will highlight connections between intergenerational trauma, lived experience, and diabetes risk, while emphasizing the role of cultural knowledge and healing in improving outcomes. This training provides practical tools, case studies and culturally grounded approaches that empower service providers and protect clients.

This initiative kicked off in Niagara Falls in March 2025 and featured a pilot training at Niagara-On-The-Lake in March 2026.





Waasnooden (Northern Lights) Diabetes prevention in Indigenous youth: Funded for three years in partnership with the Kenora Chiefs Advisory, Waasegiizhig Nanaandawe'iyewigamig Health Centre (WNHAC) and the Lawson Foundation. The objective was to build youth prevention capacity across Treaty #3 by training local promoters to co-create youth-centered diabetes support plans adapted from ancestral and clinical data.

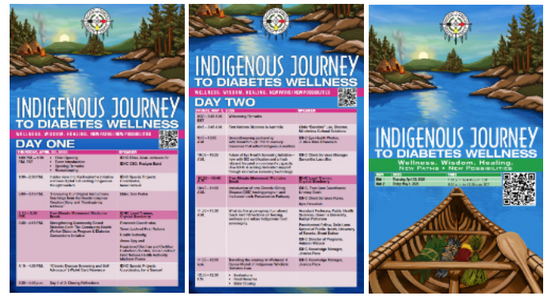
Following a regional survey and discussions with frontline workers and the KCA youth council, the Waasnooden team responded to community needs by creating a youth graphic novel. The project involved collaborations with an Indigenous illustrator to bring the stories to life and resulted in a graphic novel for youth to promote diabetes awareness. The three sections of the novel depict stories of Type 1, Type 2 and gestational diabetes. Reviews of the graphic novel by youth ensured the resource is relatable and beneficial for youth. (project completed).

IDHC's Annual Conference

Our annual gathering served as a resounding success for knowledge translation, bringing together a powerful circle to mark National Indigenous Diabetes Awareness Day. Hosted virtually to ensure accessible, province-wide participation, the event beautifully shared Indigenous ways of knowing and being. The virtual lodge was filled with the powerful words of respected Elders, traditional teachers and guest speakers, including Elder Renée Thomas-Hill, Elder Allan Jamieson Sr., Elder Mary Elliot, Amy Wright, Sasha Delorme and Colby Tootoosis.

The gathering generated overwhelming community participation, tracking:

- **1,145 total registrations** from across Turtle Island
- **751 interactive attendees** participating in live sessions
- **95% of participants** indicating total satisfaction with speakers and sessions, with 4% somewhat satisfied and 1% neutral



The event attracted key organizational sponsorships from MNP, Addiev Corporate Training, Windspeaker.com and Fuselight, leaving our relatives deeply connected with traditional teachings and modern resources to manage their long-term well-being.

Miigwetch, Nia:wen to our brilliant Knowledge team, our research partners and the communities who trust us to carry and protect these vital bundles of wisdom.

THE HEART OF TRAINING AND TRADITION: MEET THE KNOWLEDGE TEAM



Crystal Bomberry
Training Lead

Jenna Hammond
Diabetes Wellness Trainer

Samantha McConnell
Project Coordinator - Waasnooden/ Wawatay

Jordan McNeillie
ICS Program Coordinator

Krista Ruthven
Training & Procurement

Operations, Communications and Infrastructure Review

CONNECTING OUR COMMUNITIES: STRENGTHENING OUR DIGITAL INFRASTRUCTURE AND PROVINCIAL REACH

In alignment with the IDHC Model of Care, the Communications network serves as our vital link across the province. By building a high-quality, secure and expansive digital highway, we ensure that life-saving resources, clinical updates and cultural teachings reach every corner of Ontario, effectively guiding our collection of canoes away from isolation and toward a unified future of wellness.

Over the 2025–2026 fiscal year, our team achieved remarkable progress in expanding our provincial reach and upgrading our operational core to support self-determination and data sovereignty.

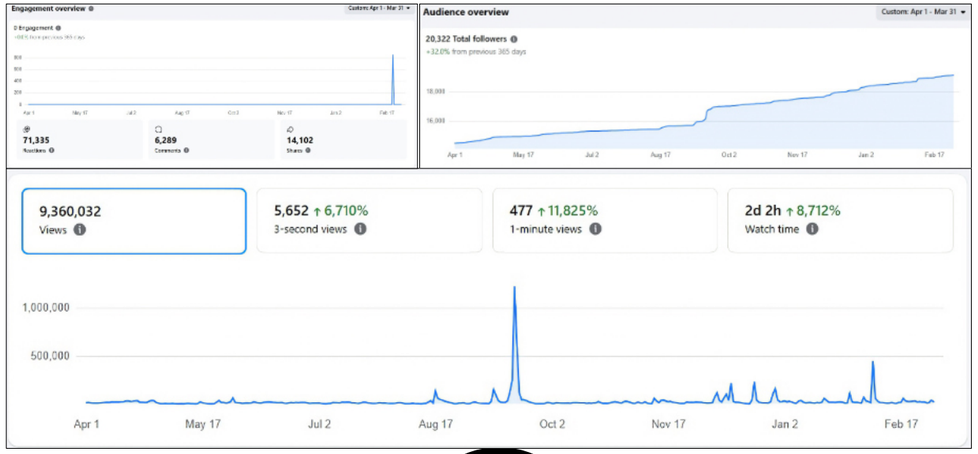
MAXIMIZING PROVINCIAL REACH ACROSS DIGITAL PLATFORMS

To increase awareness of IDHC programs and empower communities to prevent diabetes complications, our team expanded its digital footprint significantly. On Facebook, our message achieved massive visibility across Ontario, generating **9,360,032 Facebook Impressions** and achieving a **Facebook Reach of 5,781,993**. Our active engagement strategy drew **5,305 Facebook Hits**, **37,875 Facebook Reactions** and **2,100 Facebook Interactions**. Our social community grew steadily, concluding the year with **19,145 Facebook Followers**.



IDHC Facebook platform fostered vital connections and engagement, reaching 19,145 followers.

Our social media networks similarly blossomed, allowing us to connect with younger demographics and healthcare stakeholders alike. Our Instagram presence maintained strong engagement throughout the final quarters, logging **478 Instagram Followers in Q3** and concluding the annual tracking period with **476 Instagram Followers**. Across these platforms, our communications team published a total of **1,323 posts**. On LinkedIn, our professional circle expanded to **1,103 Followers**, ensuring that our advocacy for systemic health equity reaches key thought leaders and decision-makers across the province and beyond.



Facebook Reach of 5,781,993 People

CULTIVATING THE VIRTUAL LODGE: WEBSITE AND VIDEO MOBILIZATION

Our website serves as a vital virtual lodge where interested stakeholders gather to access Indigenous health promotion tools. This year, our online platform welcomed **33,000 unique Website Users** and experienced an incredible growth in engagement, tracking **65,000 total Website Views** alongside **22,000 recorded Website Engagement sessions**. Our communication health was further validated by the Hootsuite platform, which awarded IDHC an exceptional **Social Media Score of 89% out of 100**.

IDHC Website and Blog are in Top 3 of Top 20 Best Canadian Diabetes Blogs and Websites as rated by FeedSpot

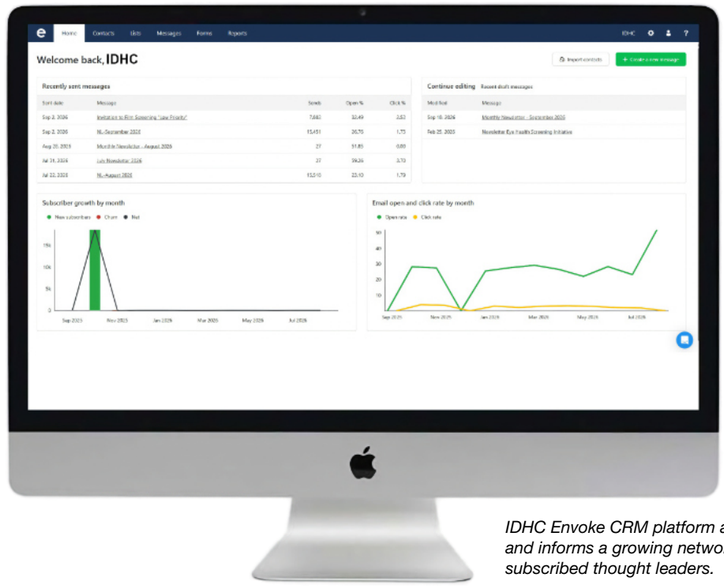
Video media continues to be a highly effective way of sharing Indigenous ways of knowing and being. Our finalized digital infrastructure successfully hosted **237 total videos in our YouTube Library**, which generated **29,000 YouTube Impressions**. Across all online platforms, our educational media achieved a massive impact, tracking a total of **5,499 videos viewed from all sources**, effectively keeping our families connected to traditional wellness guidelines.

Virtual Care Privacy Policy Our digital platforms achieved full approval with FeedSpot which once again rated the IDHC website and blog as a **top 3 out of the top 20 best Canadian diabetes blogs and websites.**



FORTIFYING OUR OPERATIONS: DATABASE SECURITY AND TRANSITIONS

True data sovereignty requires secure, cost-effective infrastructure that treats community contact records with the highest level of respect and confidentiality. This year, our department successfully navigated a major structural milestone. Over Q1 and Q2, IDHC was in the midst of identifying a cost-effective and data-secure replacement for our USA-based CRM system, HubSpot. Our team identified a secure Canadian alternative, and over Q3 and Q4, our transition to the "**Envoke" CRM platform was a complete success.** Through this modernized platform, we expanded our secure network to an annual total of **19,869 number of contacts in our database**, ensuring consistent, targeted messaging, health promotions and health campaigns reach all groups in Indigenous communities.



IDHC Envoke CRM platform actively supports and informs a growing network of 19,869 subscribed thought leaders.

Furthermore, this department successfully executed several critical, grant-supported digital infrastructure developments, not least being the **Virtual Collaboration Hub Website** IDHC successfully developed and launched a dedicated public policy collaboration hub website entitled "*Karihwáhstha,*" meaning "*We are still useful.*" The digital site boasts **38 private members of knowledge holders in Indigenous health policy** and houses a library of relevant news, policies, resources and videos to support frontline health workers.

Virtual Care Privacy Policy Our digital platforms achieved full compliance, with FeedSpot rating the IDHC website and blog as a **top 3 out of the top 20 best Canadian diabetes blogs and websites.**

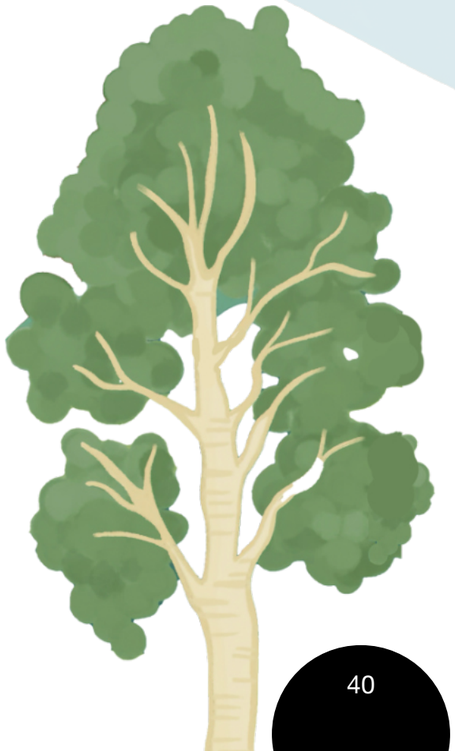
OPERATIONAL RESILIENCE AND FINANCIAL STEWARDSHIP



Anne-Marie Stup

Our digital and operational updates would not be complete without acknowledging the profound resilience demonstrated within our financial lodge. Over this past fiscal year, our Finance Manager, Anne-Marie Stup faced the immense professional challenge of concurrently onboarding and mastering two entirely new financial software platforms: Juvonno and QuickBooks. To compound these systemic demands, she also successfully managed and completed the complex, major transition to the world-class Healthcare of Ontario Pension Plan (HOOPP) system for all eligible employees.

This steep technological and administrative learning curve had to be navigated alongside deeply challenging personal circumstances that tested her spirit. Despite these overlapping barriers, her dedication to the financial health of IDHC never wavered. Through her meticulous stewardship, all organizational accounts remained in perfect balance; accounts payable were settled with precision, funding streams were carefully tracked, and every single employee received their salary and newly established retirement benefits on time and without interruption. We are all deeply grateful for the unwavering strength, integrity, and dedication of our Finance Manager, whose quiet resilience ensured clear sailing for the entire team.



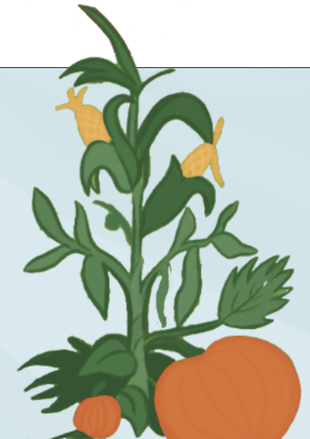
INDIGENOUS DIABETES HEALTH CIRCLE

Statement of Operations - General Fund for the year ended March 31, 2026

	Unaudited Budget	2026	2025
Revenue			
Ministry of Health & Long-Term Care			
Annual budget	$2,147,007	$2,147,007	$2,147,007
	2,147,007	2,147,007	2,147,007
Expenditures			
Salaries and benefits	1,366,865	1,366,782	1,357,485
Operating Expenses			
Insurance	20,000	18,994	18,130
Professional services	21,000	22,072	24,666
Rent, utilities and sundries	128,042	127,863	128,067
Professional development	15,000	14,626	14,997
Administrative supplies	9,600	9,795	9,600
Program support	28,000	27,785	26,208
Purchased services	30,000	30,540	32,973
Phones, internet and tech supplies	20,000	20,047	19,794
Travel expenses	65,000	64,062	71,027
Board of Director expenses	20,000	20,072	12,035
IT Outsourcing, Web Maintenance & Licensing	37,000	36,572	36,999
Communications & Graphic design services	35,000	34,672	34,697
Shipping and receiving	30,000	30,647	29,983
Build Your Bundle Events	45,000	44,812	44,960
Traditional services	50,000	50,371	50,003
Services and subsidies	94,000	94,880	93,906
Service provider travel	7,500	7,371	7,455
FLW Training - Kits and resources	95,000	94,883	84,997
Education and training development	20,000	20,162	20,003
Research and development	-	-	20,000
Annual event	10,000	9,999	9,729
	780,142	780,225	790,229
Total Expenditures	2,147,007	2,147,007	2,147,714
Excess of revenue over expenditures	-	-	($707)

See accompanying notes to the financial statements





STREAMLINING OUR LOGISTICS PRECISION, SAFETY AND SUPPLY CHAIN STEWARDSHIP



Jim Marshall

Our operational capacity reached new heights this fiscal year with the addition of Jim Marshall, who joined our team late in 2025 as our Part-time Shipping and Receiving Associate. Jim comes to us from the Qalipu First Nation in Newfoundland, bringing an excellent corporate shipping and receiving background that has transformed our material distribution pipelines into a model of efficiency.

In a short time, Jim has already successfully completed two full physical inventories, bringing rigorous accuracy to our supply storehouse. He turned his expertise toward our digital storefront, substantially improving our WooCommerce "kitting" procedures to ensure community bundles are packed efficiently and accurately. Furthermore, Jim enhanced our WooCommerce infrastructure by developing the technical ability to separate internal staff resource requests from external community orders. This critical modification has fast-tracked the fulfillment of travel requirements for our frontline employees, ensuring they have the exact materials and resources needed for their community workshops well before they set out on the road.

Beyond numbers, Jim meticulously tracks and reports on the complex subtleties of provincial logistics, including analyzing remote destination routing and fluctuating shipping costs to maximize our grant budgets. In addition to his logistics stewardship, Jim serves as a vital pillar of our physical workplace safety at head office, working closely alongside Justice Maki-Chambers as an active and leading member of the IDHC Health and Safety Committee. Jim's dual commitment to supply chain precision and staff safety ensures that our physical workspace remains secure while our resources reach the land without delay.

NURTURING OUR PEOPLE VIRTUAL PRESENCE AND HUMAN RESOURCES EXCELLENCE



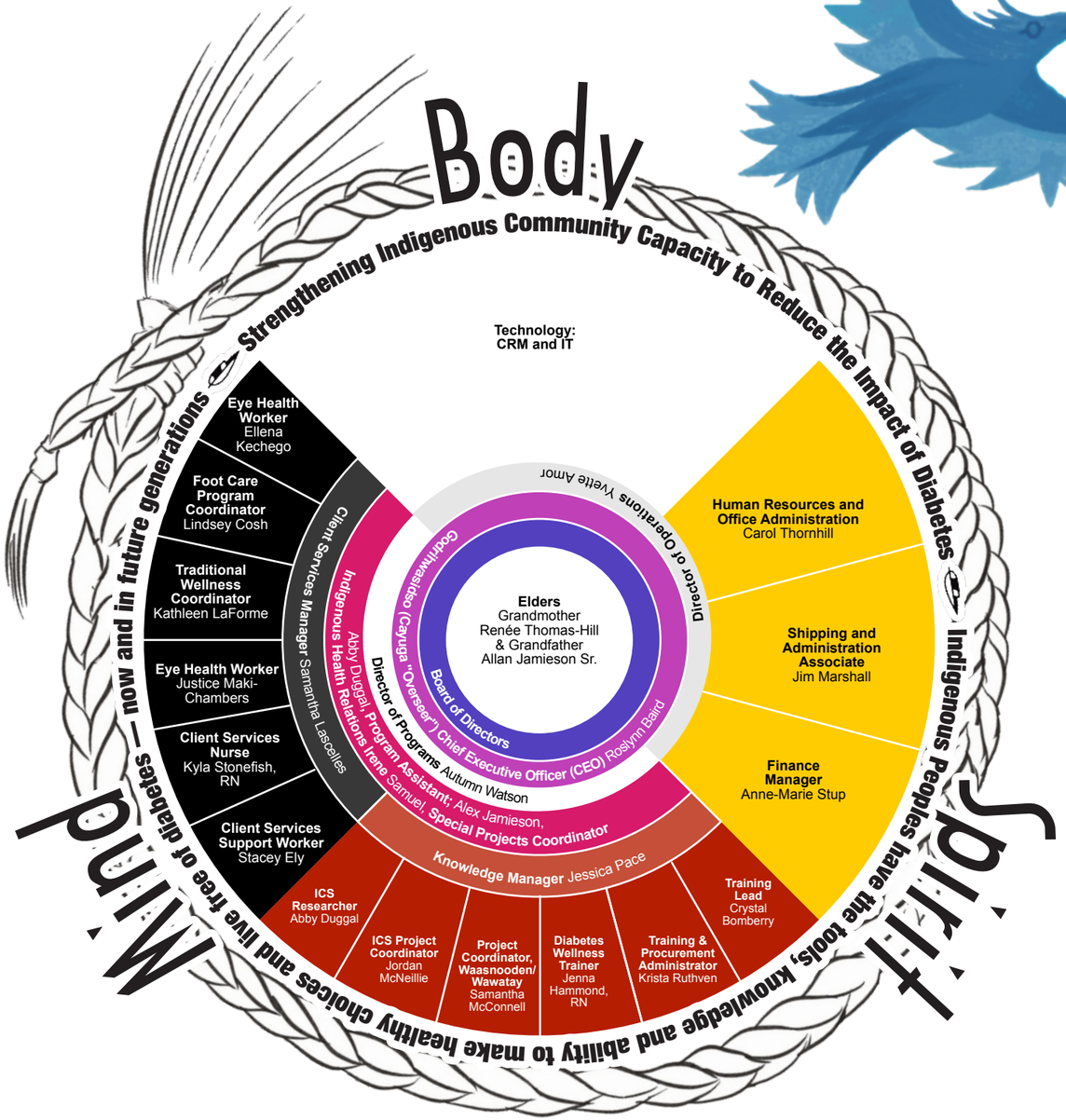
Carol Thornhill

The operational backbone of our circle has been profoundly strengthened through the exceptional work of Carol Thornhill, our Human Resources and Office Administrator. Carol was brought into our circle on contract in mid-2025 to step in and fill an immediate gap in services, and she has handled this demanding responsibility with immense grace and precision. Operating 100% remotely from her home in Napanee near Ottawa, Carol has proven that physical distance is no barrier to fostering a warm, connected and highly efficient workplace culture.

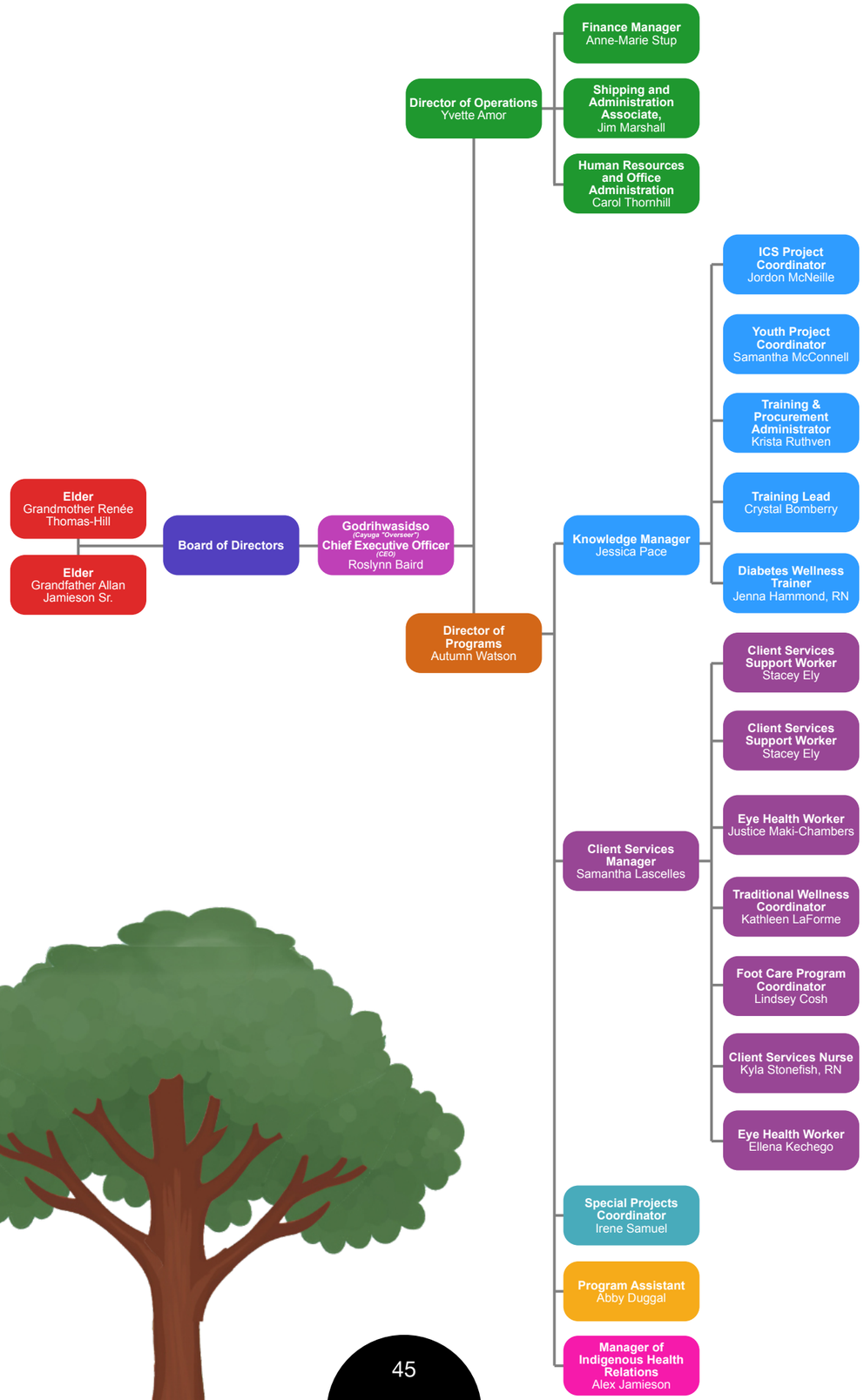
Since her arrival, Carol’s organizational stewardship has left a lasting impact across all levels of our administration. She has seamlessly supported our Board of Directors with comprehensive administrative care and completely reorganized our human resources SharePoint files to establish a secure, accessible digital archive. Her strategic recruitment efforts have brought several promising new employees into our circle, ensuring our paddling team remains strong.

Carol has also been instrumental in executing our most complex operational transitions. She worked hand-in-hand with our finance department to successfully integrate the new Healthcare of Ontario Pension Plan (HOOPP) system, securing the future wellness of our staff. Furthermore, she collaborated directly with Shipping and Receiving to oversee our asset management program, ensuring the seamless allocation of technology — including laptops and phones — to incoming staff, as well as managing the secure return of assets from exiting employees.

Looking to the horizon, Carol has structured a comprehensive succession and onboarding plan for IDHC, ensuring that future generations of team members are welcomed with a clear path forward. Frontline staff can always look forward to a warm welcome from Carol, who delights in organizing and distributing IDHC swag to keep our team spirit high. Above all, her calm, diplomatic approach makes her an invaluable conflict resolution ally, ready to support and restore balance to our collective canoe whenever the need arises. We are incredibly fortunate to have Carol’s expertise, warmth and steady guidance grounding our provincial team.


Body
Strengthening Indigenous Community Capacity to Reduce the Impact of Diabetes
Technology:
CRM and IT
Spirit
Indigenous Peoples have the tools, knowledge and ability to make healthy choices and live free of diabetes — now and in future generations
Mind
Eye Health Worker Ellena Kechego
Foot Care Program Coordinator Lindsey Cosh
Traditional Wellness Coordinator Kathleen LaForme
Eye Health Worker Justice Maki-Chambers
Client Services Nurse Kyla Stonefish, RN
Client Services Support Worker Stacey Ely
Client Services Manager Samantha Lascelles
Indigenous Health Relations Abby Duggal, Program Assistant; Irene Samuel, Special Projects Coordinator
Director of Programs Autumn Watson
Godrihwasidso (Cayuga "Overseer") Chief Executive Officer (CEO) Roslynn Baird
Board of Directors
Director of Operations Yvette Amor
Elders
Grandmother Renée Thomas-Hill & Grandfather Allan Jamieson Sr.
Human Resources and Office Administration Carol Thornhill
Shipping and Administration Associate Jim Marshall
Finance Manager Anne-Marie Stup
Knowledge Manager Jessica Pace
Training Lead Crystal Bomberry
Training & Procurement Administrator Krista Ruthven
Diabetes Wellness Trainer Jenna Hammond, RN
Project Coordinator, Waasnooden/ Wawatay Samantha McConnell
ICS Project Coordinator Jordan McNeillie
ICS Researcher Abby Duggal




Finance Manager Anne-Marie Stup
Director of Operations Yvette Amor
Shipping and Administration Associate, Jim Marshall
Human Resources and Office Administration Carol Thornhill
Elder Grandmother Renée Thomas-Hill
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- Barrie Area Native Advisory Circle (BANAC)
- Bone & Quill
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- Bridges Community Health Centre Corporation
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- Clarke Ventresca Foot & Orthotic Centres
- Community Addictions Services of Niagara (CASON)
- Compass Community Health
- Curve Lake First Nation
- Curve Lake Health Centre | WshkiiGomaang MnoBmaadziwin Gamig
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- Department of Indigenous Services
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- Family Foot Care Centre
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- Fuselight Creative Inc., The
- Ganawageh and Ohsto: Seri Urban Homes Inc.
- Georgina Island Health Centre
- Giiwednong Health Link
- Grand Valley Institute for Women
- Great Lakes Home Foot Care Inc.
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- Kwanlin Dün First Nation
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- Lovesick Lake Native Women's Association
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- Matawa Health Cooperative
- McQuistan Chiropody Professionals
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- Munsee-Delaware Nation (CMO Diabetes Care Gathering)
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- Niagara Chapter of Native Women
- Niagara Health: Indigenous Health Services & Reconciliation
- Niagara Health: Kidney Care
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- Niagara Region: Smoking Cessation
- Niagara Regional Native Centre
- Niagara Regional Native Centre (NRNC)
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- Niagara Vascular Surgery
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- Ontario Native Women's Association (ONWA) Mindimooyenh Health Clinic
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- Six Nations Polytechnic Inc.
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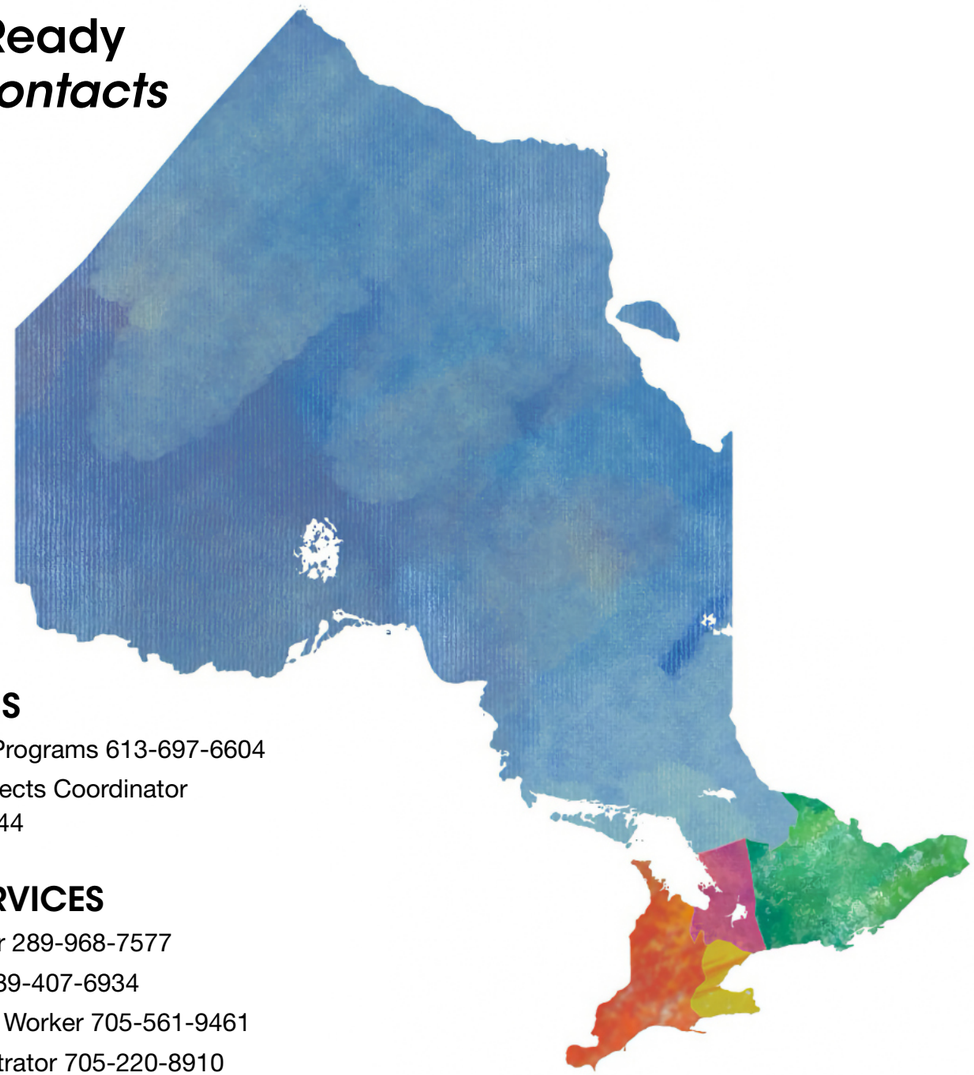
- Weeneebayko Area Health Authority
- Wiikwemkoong Unceded Territory
- Wikwemikong Health Centre
- Wulamaliswiikaan Delaware Nation Health Centre
- Zandberg Foot Clinic

Born Ready
Key Contacts



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- Ongoing foot care clinic sites serving so many community members

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Travelling the Journey to Wellness

THE CANOE MODEL OF INDIGENOUS WHOLISTIC DIABETES CARE

For nearly 30 years, the Indigenous Diabetes Health Core (IDHC) has worked to strengthen community capacity and reduce the impact of diabetes. Our community-based, strengths-based approach recognizes that true wellness encompasses the body, emotions, mind, and spirit.

Through Two-Eyed Seeing, we weave traditional knowledge and Indigenous lifeways together with Western biomedical approaches.

Diabetes prevention and care do not belong to the individual alone; they belong to the entire ecosystem of families, communities and environments. This dynamic relationship is brought to life through our Canoe Model.

THE TRAVELLER AND THE PADDLE—AUTONOMY AND SELF-DETERMINATION

At the heart of the model sits the individual in the canoe, surrounded by the natural landscape. This positioning reflects self-determination and personal autonomy. The traveller holds the paddle, representing their capacity to steer their own healthcare journey when equipped with the right knowledge and supports. While the image is static, the lived experience of diabetes is fluid, changing as the traveller navigates the waters.

STORMS AND ROUGH WATERS—CONFRONTING SYSTEMIC BARRIERS

The sun and storm clouds on the horizon symbolize the external forces influencing each journey. The river splits into two distinct paths. The right branch—filled with rocks and rapids—represents the historic and ongoing impacts of colonization, systemic racism, and inequalities in the social determinants of health.

To clear these waters, healthcare providers must actively engage in Truth and Reconciliation. This requires unlearning biases and committing to culturally safe, trauma-informed care. The two trees standing along this shoreline signify IDHC's training and resources, which empower frontline workers to transform the healthcare system from within.

CLEAR STREAMS AND THE VILLAGE—TRADITIONAL SUPPORTS AND PREVENTION

The left branch of the river offers smooth sailing, sustained by upstream prevention and cultural nourishment:

- **The Three Sisters Garden** Signifies IDHC's research protocol, honouring traditional food systems, land-based activities, and Indigenous agricultural wisdom.
- **The Village** Represents the vital network of family, community, and ancestral knowledge, reminding us that no health journey occurs in isolation.
- **The Rabbit and the Eagle** Visual reminders of core IDHC services. The rabbit guides our foot care program, while the eagle reflects our eye health and diabetic retinopathy screening initiatives.

THE VESSEL—GROUNDED IN SACRED TEACHINGS

The canoe itself represents the core program values and structures protecting the traveller. Our work is anchored in cultural wisdom, guided by the Seven Spans Thick teachings and the Seven Sacred Teachings—strength, wisdom, compassion, caring, humility, respect, and courage. Together with our partners, we share the responsibility to foster safe, inclusive environments that honour Indigenous identity, strengthen relationships, and secure wellness for generations to come.





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