



The following Motion and Document were considered by the GFC Academic Planning Committee at its Wednesday, September 17, 2014 meeting:

Agenda Title: **Proposal for the Establishment of the Integrative Health Institute (IHI) at the University of Alberta**

CARRIED MOTION: THAT the GFC Academic Planning Committee approve, under delegated authority from General Faculties Council, the proposal submitted by the Vice-President (Research) for the formal establishment of the Integrative Health Institute (IHI), an inter-Faculty Academic Institute to be overseen by the Vice-President (Research), as set forth in Attachment 1, as amended, to be effective upon final approval.

Final Amended Item: 5

OUTLINE OF ISSUE

Agenda Title: **Proposal for the Establishment of the Integrative Health Institute (IHI) at the University of Alberta**

Motion: THAT the GFC Academic Planning Committee approve, under delegated authority from General Faculties Council, the proposal submitted by the Vice-President (Research) for the formal establishment of the Integrative Health Institute (IHI), an inter-Faculty Academic Institute to be overseen by the Vice-President (Research), as set forth in Attachment 1, as amended, to be effective upon final approval.

Item

Action Requested	<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Recommendation <input type="checkbox"/> Discussion/Advice <input type="checkbox"/> Information
Proposed by	Lorne Babiuk, Vice-President (Research)
Presenters	Ingrid Johnston, Associate Vice-President (Research); Roger Epp, Vice-Provost (Academic) and Chair, Centres and Institutes Committee (CIC); Sunita Vohra, Professor, Department of Pediatrics, Faculty of Medicine and Dentistry
Subject	Establishment of the Integrative Health Institute (IHI) at the University of Alberta

Details

Responsibility	Provost and Vice President (Academic) and Vice-President (Research)
The Purpose of the Proposal is (please be specific)	<p>As noted by the proposers in part in the attached documentation, the "IHI builds on existing expertise in integrative health research and education across ten Faculties to create a position of strength provincially, nationally, and internationally. The Institute is designed to promote interdisciplinary collaboration at all levels of research. Our goal is scholarship that will inform health policy and practice on a topic that is of great relevance in Canada and internationally.</p> <p>IHI will help our university to be more successful in the new funding environment of 'patient-centred research,' including the new CIHR [Canadian Institutes of Health Research] and AIHS [Alberta Innovates: Health Solutions] Strategy for Patient-Oriented Research programs. Such funding opportunities require functioning interdisciplinary teams, and the IHI will play a major role in promoting and supporting collaboration necessary for success in our new funding landscape.</p> <p>The IHI will focus on three priority areas based on the University's strengths and our ability to develop national and global leadership in the field. The themes are: natural health products/functional foods; mind-body therapies, such as mindfulness meditation; traditional and indigenous health practices, such as Aboriginal health practices, Traditional Chinese Medicine, <i>et cetera</i>.</p> <p>These themes will allow for research across the spectrum (basic science to clinical research to population health and health policy/services research). Of note, 'translational' research in this field describes not only bench-to-bedside but also bedside-to-bench (research that explores mechanism of action for clinically relevant benefits or harms) and evidence-to-practice and policy."</p>
The Impact of the Proposal is	See 'Purpose'.
Replaces/Revises (eg, policies,	N/A

resolutions)	
Timeline/Implementation Date	Upon final approval.
Estimated Cost	See attached proposal.
Sources of Funding	See attached proposal.
Notes	N/A

Alignment/Compliance

Alignment with Guiding Documents	<i>Dare to Discover, Dare to Deliver</i> , University of Alberta Comprehensive Institutional Plan (CIP)
Compliance with Legislation, Policy and/or Procedure Relevant to the Proposal (please quote legislation and include identifying section numbers)	<p>1. Post-Secondary Learning Act (PSLA): The <i>Post-Secondary Learning Act (PSLA)</i> gives General Faculties Council (GFC) responsibility, subject to the authority of the Board of Governors, over "academic affairs" (Section 26(1)). Section 26(1)(o) provides that GFC may make recommendations to the Board of Governors on a number of matters, including "the budget" and "academic planning." GFC has thus established an Academic Planning Committee (GFC APC), as set out below. GFC delegates certain of its powers to the GFC Academic Planning Committee.</p> <p>The complete wording of the section(s) of the <i>PSLA</i>, as referred to above, and any other related sections should be checked in any instance where formal jurisdiction or delegation needs to be determined.</p> <p>2. University of Alberta Policies and Procedures On-Line (UAPPOL) Academic Centres and Institutes Establishment Procedure:</p> <p><u>PROCEDURE</u></p> <p>1. The proposal to establish an academic centre or institute must define its vision and purpose, explain the need for the unit within the priorities of the Faculty and/or University, and demonstrate that the proposed Centre/Institute does not duplicate other efforts at the University. Centres and Institutes are expected to position the University of Alberta as a national and international leader, therefore, the proposal must demonstrate the established or emerging excellence of the group of faculty involved, and the qualifications of the proposed director. The benefits and risks to the University must be presented, and support from partners within and outside the University must be documented.</p> <p>[...]</p> <p>3. All proposals for establishment of academic centres and institutes shall be submitted initially to the Provost and Vice-President (Academic) for assessment. Proposals deemed to be in good order will be forwarded by the proposer(s) to the GFC Academic Planning Committee (APC) for final approval.</p> <p>When the University of Alberta forms a partnership with another entity in creating an academic centre or institute, full approval processes must be followed with all partner entities prior to operation.</p> <p>The use of the words 'Centre' and 'Institute' are reserved by GFC, therefore, initiatives shall not use these words in public documentation</p>

FINAL Item No. 5

	<p>prior to receipt of notice of approval.</p> <p>All academic centres and institutes operating but not approved by APC shall come into compliance immediately or cease to use the reserved titles of 'Centre' or 'Institute'."</p>
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Routing (Include meeting dates)

<p>Consultative Route (parties who have seen the proposal and in what capacity)</p>	<p>The attached proposal expresses the vision and rationale for development of the IHI, which has involved extensive consultation with stakeholders and potential partners/linkages.</p> <p>In addition, Roger Epp, Vice-Provost (Academic) and Chair of the Centres and Institutes Committee (CIC) (Office of the Provost) was consulted; the proposal was reviewed by CIC membership (August 28 through September 2, 2014).</p> <p>The proposal was further reviewed by the University Initiatives Committee (UIC) membership (Provost and Vice-President (Academic), Vice-President (Research), and Vice-Provost (Academic)) on September 9, 2014.</p>
<p>Approval Route (Governance) (including meeting dates)</p>	<p>GFC Academic Planning Committee (September 17, 2014) – for final approval</p>
<p>Final Approver</p>	<p>GFC Academic Planning Committee</p>

Attachments (each to be numbered 1 - <>):

1. Attachment 1 (pages 1 – 75) - Proposal for the Establishment of the Integrative Health Institute (IHI) at the University of Alberta (with Covering Letter and Attendant Letters of Support)

Prepared by: Cindy Watt, Committees Manager, Office of the Provost and Vice-President (Academic), cindy.watt@ualberta.ca (with assistance from University Governance)

Academic Planning Committee
University of Alberta
Edmonton, AB

Dear committee members,

Re: Integrative Health Institute (IHI) Proposal

Please find attached our proposal to University of Alberta's Academic Planning Committee outlining the creation of the Integrative Health Institute (IHI).

The IHI builds on existing expertise in integrative health research and education across ten Faculties to create a position of strength provincially, nationally, and internationally. The Institute is designed to promote interdisciplinary collaboration at all levels of research. Our goal is scholarship that will inform health policy and practice on a topic that is of great relevance in Canada and internationally.

IHI will help our university to be more successful in the new funding environment of "patient-centered research", including the new CIHR and AIHS Strategy for Patient-Oriented Research programs. Such funding opportunities require functioning multidisciplinary teams and the IHI will play a major role in promoting and supporting collaboration necessary for success in our new funding landscape.

The IHI will focus on three priority areas based on the University's strengths and our ability to develop national and global leadership in the field. The themes are:

- natural health products/functional foods
- mind-body therapies, such as mindfulness meditation
- traditional and indigenous health practices, such as Aboriginal health practices, Traditional Chinese Medicine, etc.

These themes allow for research across the spectrum (basic science to clinical research to population health and health policy/services research). Of note, "translational" research in this field describes not only bench-to-bedside but also bedside-to-bench (research that explores mechanism of action for clinically relevant benefits or harms) and evidence-to-practice and policy.

The IHI has linkages both within and outside the University of Alberta, such as to the Neuroscience and Mental Health Institute, the Drug Development and Innovation Centre, Community University Partnership, the College of Physicians and Surgeons of Alberta as well as to Alberta Health Services. There are also national linkages to the University of Toronto's Center for Integrative Medicine and international linkages to institutes such as the National Research Center in Complementary and Alternative Medicine in Norway and the National Institute of Complementary Medicine at the University of Western Sydney in Australia.



Faculty participating in IHI are very successful researchers, and have brought in millions of dollars of research funding to the university. As these faculty already run successful research teams, centres, and institutes at the University of Alberta, we will start IHI with modest funding support. IHI leadership will leverage this initial investment with provincial and national funding awards and partnership opportunities. IHI is a philanthropic priority for the U of A Central Advancement team and the goal is to secure a major naming donor in the next 12 months to provide a substantial investment.

We look forward to discussing this important initiative with you.

Sincerely,

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Centennial Professor
University of Alberta

Earle Waugh BA, MA, PhD
Adjunct Professor, Dept. of Family Medicine
Co-Director, Centre for the Cross-Cultural Study of Health and Healing

David Zakus BSc, MES, MSc, PhD
Professor, Preventive Medicine
Director, Global Health

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September 5, 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Department of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta
Edmonton AB T5K 0L4

Dear Dr. Vohra:

Re: Integrative Health Institute

I would like to congratulate you on the vision to establish the Integrative Health Institute at the University of Alberta. As we are all aware, many of our citizens look to both conventional medicine as well as alternative health care practices for their personal health care needs. Indeed, natural health care products are becoming extremely popular. Based on this rapid growth of alternative health care practice, it is a great opportunity for the University of Alberta to be a leading academic centre in this field to complement our strength in conventional health care.

Since this institute transcends multiple faculties and its foundation is in the research arena, it makes sense to have it report to the Vice-President (Research) as do some other inter-disciplinary, multi-faculty centres. I am happy to strongly endorse the Institute and to indicate that I will work with you and the Provost to assist in identifying funding to ensure sustainability of the Institute as well as to negotiate future space needs as the Institute gains success.

I wish you success as you and your colleagues embark on this exciting journey.

Sincerely,



Lorne A. Babiuk, O.C., SOM, PhD, DSc, FRSC
Vice-President (Research)
LAB/cf

University of Alberta Template for Proposals to Establish New Academic Centres and Institutes

1. **Name and Faculty of Reporting Dean:** Dr. Lorne Babiuk (Vice President Research)

Signature:	Date:
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2. Name and Detailed Purpose of the Proposed Centre or Institute:

The University of Alberta Integrative Health Institute

Vision: Optimal health and well-being through evidence-informed patient-centered integrative care

Mission: To support excellence in scholarship in integrative, traditional, and indigenous health

The Integrative Health Institute (IHI) at the University of Alberta represents a leadership opportunity, bringing together the considerable depth and breadth of faculty expertise in integrative, traditional, and indigenous health.

Integrative Health “... focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, health care professionals and disciplines to achieve optimal health and healing”¹. Adhering to the core principle of patient-centered care, Integrative Health recognizes the broadest concept of health as the “state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”². Integrative Health endorses the conventional health care focus on patient-centered evidence-informed care founded on rigorous scientific study, and promotes this approach for complementary and alternative health care (CAHC), often defined as “health care approaches with a history of use or origins outside of mainstream medicine”³. Examples of CAHC include whole systems of care (such as Traditional Chinese Medicine, Aboriginal health practices, Ayurveda), natural health products (such as vitamins, minerals, herbs, etc.), and a wide array of health care practices (such as massage therapy, mindfulness meditation, music therapy etc.). CAHC is anchored in rich traditions and unique concepts of well-being. In encompassing both approaches, Integrative Health supports the “science” as well as the “art” of health and wellness. Integrative Health is based on a collaborative, interdisciplinary model of care that promotes disease prevention, health maintenance, patient autonomy and resilience, alongside illness management.

In Canada and around the world, the public health ramifications of widespread CAHC use cannot be overstated. The World Health Organization has found that 80% of the population in some Asian and African countries depends on traditional medicine for their primary health care². In Canada, best available data suggest that 72% of adults and half of Canadian children use CAHC⁴, and that utilization is even higher in individuals living with cancer, diabetes, pain, and other chronic illnesses^{5,6,7}. The use of CAHC is increasing across all populations, including maternity and pediatric patients⁸. Natural health products (NHPs) are the most popular type of CAHC⁸, with widespread use and popular appeal among the lay public and press, despite research and regulations that are less evolved than those for pharmaceuticals. Our multicultural population, including First Nations, Inuit, and Metis families, can

have traditional health care practices that differ markedly from Western standards of care and may not be well understood by conventional health care practitioners. While economic data are scant from most parts of the world, the popularity of CAHC in the United States is also reflected by the increasing out-of-pocket spending: almost U.S. \$34 billion in 2007⁸. Yet despite the staggering rates of use, patients do not yet discuss their CAHC use with health care providers, nor do health care providers routinely ask⁹, creating a potentially serious gap in the provision of quality health care. It has been said that the alternative to integrative health care is “dis-integrative” health care⁵, where patients and families are left to make health decisions without the benefit of open, evidence-informed communication with and between their health care providers.

Although credible, evidence-based resources are necessary basics in providing safe and effective care, high quality, accessible information about CAHC is generally limited in scope and scale compared to conventional medicine. Other limitations include lack of awareness (by both health care providers and patients) of existing research evidence and resources, and a dearth of Canadian academic centres with expertise in Integrative Health. Considering that the quality of studies of CAHC is comparable to conventional Western medicine¹⁰, and that the number and quality of peer-reviewed journals that include or are devoted to CAHC is increasing, there is an opportunity to build capacity and promote evidence-informed policy and practice. The World Health Organization has recognized the importance of Integrative Health globally with regards to its continued uptake, its impact on health systems, and the tremendous amount of emerging research¹³.

Integrative Health is relevant across all academic pillars, from basic science to clinical care, from public health to public policy. It is also relevant across all health care disciplines, including medicine, nursing, pharmacy, dentistry, nutrition, rehabilitation medicine, and public health. Integrative Health recognizes other disciplines that are being increasingly recognized for their contribution to health. The arts and health field (e.g. narrative medicine, medical ethnomusicology, music therapy, art therapy) has expanded exponentially in Canada within the last decade¹¹. In addition, areas of studies in the sciences (e.g. botany, ecology), and social sciences (e.g. sociology, musical anthropology, religious studies) are being recognized for their impact on health and well-being. In Canada, we have an ethnically and culturally diverse population with specific health needs. Health care decisions affect quality of life and long-term outcomes, impacting both the individual and society at large. Without better awareness and understanding of the myriad and complex concepts of wellness and disease, the health needs of multicultural Canadians are at disproportionate risk of being underserved.

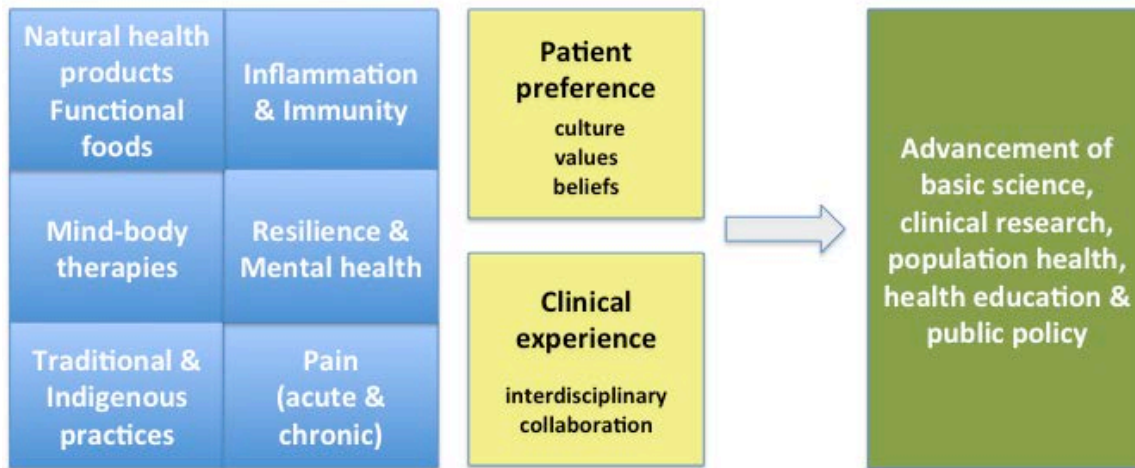
As the relevance and popularity of Integrative Health soars among the public, academic interest is also growing in research, education, knowledge translation, health policy, and clinical care. Although in its infancy in Canada, academic Integrative Health is growing rapidly across North America and internationally. Represented by the CARE Program (Department of Pediatrics, Faculty of Medicine and Dentistry), the University of Alberta has been a member of the prestigious Consortium of Academic Health Centers for Integrative Medicine (www.imconsortium.org), a group of 57 renowned universities, including Harvard, Yale, Stanford, and Duke, all with dedicated Integrative Health programs. While faculty who have confirmed their interest to participate in IHI (hereafter referred to as “IHI faculty”) have demonstrated successes in winning research funding (more than \$150M in research funding since 2012), the Institute would significantly enhance collaborations across a broad range of interests and strengthen funding applications across the breadth and depth of local expertise in Integrative Health. Funding support for Integrative Health research exists at provincial, national, and international levels, such as Alberta Innovates-Health Solutions (AIHS), Canadian Institutes of Health Research (CIHR), and the U.S. National Institute of Health on Complementary and Alternative Medicine (NCCAM). With

credible academic engagement, opportunities to expand our cultural concepts of wellness, inform public policy and attract donor support follow. Scholarship in Integrative Health is well aligned with philanthropic donor interests and their potential to contribute to long-term support for the Institute. IHI will promote the leadership and innovation that characterize the University of Alberta and its faculty, and be at the forefront of academic excellence in Integrative Health.

The proposed Integrative Health Institute at the University of Alberta will harness local expertise, promote excellence in scholarship, and build capacity in the broad domain of Integrative Health. Faculty affiliated with IHI will pursue excellence by creating and disseminating high quality, meaningful research, teaching and mentoring future scholars and clinicians, and promoting collaboration between academic, industry and public institutions. The Institute will serve as a hub for interdisciplinary research and education, promoting innovative ways to study, apply, and promote evidence-informed patient-centered health care (see Figure 1).

Figure 1: IHI as a living lab

INTEGRATIVE HEALTH INSTITUTE



As the U.S. Institute of Medicine noted in its 2009 Summit on Integrative Medicine and the Health of the Public, Integrative Health represents an opportunity to shift the focus of health care towards more personalized, predictive, and participatory approaches, with the ultimate goal of “orienting the health care process to create a seamless engagement by patients and caregivers of the full range of physical, psychological, social, preventive, and therapeutic factors known to be effective and necessary for the achievement of optimal health throughout the life span.”¹³

IHI is ideally suited to positively impact the provincial health care system through collaboration with Alberta Health Services (see letter of support, Drs. Verna Yiu (VP Quality and CMO, Alberta Health Services) and Kathryn Todd (VP Research, Innovation and Analytics, AHS). Opportunities include acting

as consultants for expert opinions and working jointly on evidence-based practices and policies. In the long-term, the Integrative Health Institute's success will be measured by its impact on policy and practice, promoting optimal health and well-being, regardless of origin (conventional or complementary), making the term "integrative" obsolete.

2.1 Research

The Institute encompasses tremendous breadth and depth of research expertise, spanning all CIHR pillars and involving health products and practices. It provides for novel interdisciplinary opportunities for discovery and innovation.

Below are some examples of the breadth and depth of IHI expertise, with relevant faculty members identified. Major thematic areas of faculty expertise include: (i) natural health products/functional foods; (ii) traditional/indigenous/Aboriginal health; and (iii) mindfulness and other mind-body therapies (e.g. meditation, music therapy, art therapy).

2.1.1 Basic (Biomedical) research:

Natural health products and functional foods: natural health products (NHPs) for hepatitis (Lorne Tyrrell); drug/NHP safety, toxicology and monitoring, pharmacokinetic interactions between traditional medicines and Western therapeutic agents (Don LeGatt); cultural influences in genetics (Fiona Bamforth); cultural-ethnic referents for health states, culturally sensitive laboratory testing (George Cembrowski); gut microbes, dietary interactions, probiotics and prebiotics (Anita Kozyrskyj, Karen Madsen and Michael Gänzle); biomarkers in psychiatric and neurological disorders, metabolism and mechanisms of action of drugs, development of potential neuroprotective agents (Glen Baker); endocrinology/sex hormones, preterm birth, nutrient and fetal development (David Olson); use of nutrients to improve the action of chemotherapy drugs (Catherine Field), foods/products/supplements for fetal development and prevention of brain injury (Jerome Yager); role of NHP on immune development and function (Catherine Field, Jianping Wu), investigation of relationship between nutrition and human health (Michael Gänzle); and the application of genomics and proteomics to probe molecular responses to integrative health approaches (Nataraj Kav).

2.1.2 Translational research

(i) Bench to Bedside – e.g. collaboration with Drug Development and Innovation Centre and Alberta Agriculture to develop and study *Rhodiola rosea* (Raimar Loebenberg, Sunita Vohra, Karin Olson); impact of nutrition on health across the age spectrum, (Catherine Field, Jianping Wu, Michael Gänzle, Jerome Yager, Leah Gramlich, Sangita Sharma) and its effects on later development of disease.

(ii) Bedside to Bench – Since use of CAHC far exceeds understanding re: mechanism of action, there is an opportunity to learn from what is happening at the bedside (perceived positive and negative effects) and take it to the lab to better understand it. Examples include: (i) mindfulness research, where mindfulness was taught in a clinical trial where participants were then evaluated by fMRI and ERP (Anthony Singhal, Sunita Vohra, Catherine Phillips); (ii) SONAR (Study Of Natural health product Adverse Reactions) whereby NHP-drug combinations are identified clinically, and those appear to have clinically relevant adverse effects taken to the lab for investigation of mechanism of action (Sunita Vohra, Candace Necyk, George Cembrowski, Don LeGatt); (iii) research into the safety of spinal manipulation therapy, in which health law issues (Timothy Caulfield) are examined side-by-side with active surveillance reporting and learning systems (Sunita Vohra), and discovery research regarding the

mechanism of action of adverse effects and potential mitigation strategies (Greg Kawchuk); and (iv) the Pediatric Environmental Health Specialty Unit (Irena Buka, Alvaro Orsonio-Vargas), which focuses on promoting and protecting children's health through prevention, education, diagnosis, and treatment of environmentally related diseases.

The IHI also poses new opportunities for translational research, such as collaboration between “omics” researchers (e.g. Nataraj Kav and Fiona Bamforth: genomics/proteinomics), with population health/clinical researchers (e.g. Anita Kozyrskyj, Sunita Vohra, Lisa Hartling) to conduct outcomes research to measure population health indicators, using valid/reliable measures and clinical research methods that fit at the level of the individual (e.g. N-of-1 trials), with detailed investigation (expression of genes and proteins) to determine predictive models of effectiveness or adverse effects.

(iii) From evidence to policy – arguably, one of the most important roles for health research is to inform policy. IHI faculty have expertise in “knowledge translation” and policy research (see also sections 1.1.5. and 1.1.9) to help inform decision-makers and make a meaningful difference to how health care is delivered. Given the expertise of IHI faculty, there is opportunity to inform policy and practice related to NHPs/functional foods; mind-body therapies and their relationship to promote mental health and resiliency; and how better to meet the health needs of indigenous populations in light of their health-related practices, beliefs, and values.

2.1.3 Clinical research

The IHI has expertise in quantitative clinical research methods, especially clinical trials, in numerous clinical areas: sleep (Cary Brown), acute and chronic pain (Lisa Hartling, Cary Brown, Hsing Jou); anxiety (David Kelner, Amanda Newton, Ara Parker), mental health (Amanda Newton, Liana Urichuk, Glen Baker, Candace Necyk, Catherine Phillips, Anthony Singhal), oncology (Anil Abraham Joy, Peter Venner), and cardiology (Andrew Mackie, Jennifer Conway).

IHI also has considerable qualitative expertise through faculty members Sylvia Barton (community, global, and Aboriginal health) and Maria Mayan (knowledge translation and policy change) and Sangita Sharma (Aboriginal health and wellness).

2.1.4 Health system, services and policy research and social, cultural, environmental, and population health research

IHI faculty has expertise in health systems research (Belinda Parke). There is great interest in changing or broadening the definition of what constitutes effective health care treatment. IHI will work with faculty partners engaged in health policy research to inform policy direction. IHI also has considerable research expertise in cross cultural/indigenous and Aboriginal health needs and practices (Lola Baydala, Earle Waugh, Michael Frishkopf, Jean Triscott, Sangita Sharma), allowing IHI to study and promote culturally sensitive health care approaches that meet the needs of the communities they serve.

IHI has considerable expertise in global, traditional, and community health (Sylvia Barton, Lynette Schultz, Geoff Ball, David Zakus, Sangita Sharma, Amanda Newton), and the relationship between the environment and health (Irena Buka and Alvaro Osornio-Vargas). IHI faculty explore the social, cultural, environmental, and population health implications of both products (e.g. how biome/microflora affect health (Anita Kozyrskyj, Karen Madsen) and practices, such as Ayurveda (Neil Dalal), spirituality (Steven Aung, Doreen Oneschuk, Ara Parker), art therapy (Ara Parker), music and music therapy (Patricia Tao, Lisa Hartling, Hsing Jou, Sunita Vohra), and Traditional Chinese Medicine (Steven Aung, Hsing Jou,

Raimar Loebenberg). IHI faculty are interested in fieldwork-based social science research on integrative approaches of maintaining health and well-being.

2.1.5 Knowledge synthesis

IHI faculty are recognized for their expertise in knowledge synthesis, such as the AHRQ-funded Evidence-based Practice Center at the U of A (Lisa Hartling). Several faculty have expertise in systematic reviews (Lisa Hartling, Amanda Newton, Sunita Vohra) and methods research to improve their conduct and reporting (Glen Baker, Sunita Vohra, Jerome Yager, Hsing Jou, Sangita Sharma).

2.1.6 Education Research

Described also in Section 4.2 (Education), IHI faculty are experienced in education research and will evaluate the effectiveness of novel interdisciplinary educational curricula in achieving profession-specific learning goals (Cheryl Cox, Anita Kozyrskyj, Kevin Hall, Pamela Brett-MacLean). Education research can also enhance collaboration between universities, such as the courses taken by undergraduate pharmacy students at the Chinese University of Hong Kong, or facilitating other international initiatives. IHI faculty are world leaders in global education (Lynette Schultz, David Zakus, Steven Aung) and have earned national recognition for teaching excellence (Billy Streen).

2.1.7 Methods Research

IHI faculty are innovative and productive researchers, and a particular area of strength is methods research. For example, IHI faculty are working to improve how outcome measurement instruments are chosen and reported (Sunita Vohra, Lisa Hartling); they are pioneering new ways of conducting safety research (Candace Necyk, George Cembrowski, Don LeGatt, Sunita Vohra, Liana Urichuk, Greg Kawchuk, Lisa Hartfield, Belinda Parke).

IHI research is timely, and an excellent fit with Alberta Innovates-Health Solutions, including the new SPOR (Strategy for Patient-Oriented Research) initiatives (please see attached letter of support from Pamela Valentine).

2.1.8 Knowledge Translation

IHI has faculty expertise in knowledge translation (KT) research (Lisa Hartling, Sunita Vohra, Lynette Schultz, Amanda Newton). A variety of KT activities are hosted by IHI faculty, such as a variety of Speakers' Series to enhance faculty and learner awareness:

- Pediatric Integrative Medicine Rounds are monthly rounds accredited by the Royal College of Physicians and Surgeons for health care providers to learn about complementary therapies. These rounds are available via Telehealth and are recorded and available online (Sunita Vohra)
- Global Health Rounds - weekly rounds offered by the Office of Global Health (David Zakus)
- Global Health Weekly – weekly news bulletin produced by the Office of Global Health (David Zakus)
- Arts & Humanities in Health and Medicine (AHHM) Speaker Series organized by the AHHM (Pamela Brett-MacLean)

2.2 Education

The Integrative Health Institute will allow for coordination of educational efforts across many different faculties and programs, on all levels of learners (undergraduate, graduate, post-graduate, and continuing education). As Integrative Health is interdisciplinary by definition, there are many ways an

institute can support and streamline educational initiatives in many different faculties - reducing redundancies in curriculum development about Integrative Health, saving valuable curriculum dollars, and providing a hub for collaboration. IHI faculty have extensive experience and represent many Faculties allowing IHI to impact multiple educational areas.

2.2.1 Undergraduate Programs

- Opportunity for coordinated curriculum development and delivery. At present, similar overlapping programs are being developed in different Faculties. By identifying and connecting these initiatives, IHI will save development time and will ensure the highest quality is reached and maintained.
- Development of a repository of high quality lectures and lecturers, many of which are interdisciplinary and are currently offered independently of each other in different programs. Examples:
 - “Global health” is applicable for all learners in any health sciences program, including Nursing, Nutrition, Medicine, Rehabilitation medicine, Pharmacy or Social studies. (Sylvia Barton, Anita Kozyrskyj, Kevin Hall, Lynette Schultz, David Zakus)
 - “Mindfulness Based Stress Reduction” is applicable for any learners working with patients (e.g. Medicine, Nursing, Dietetics, Physical therapy, Occupational therapy, Psychology, Psychiatry)
 - “Natural Health Product – Drug Interactions” is applicable for those in Pharmacy, Medicine, Pharmacology, Botany, Physiology, Nursing, and Dietetics. We can prevent redundancy and optimize faculty time by centralizing expertise (Candace Necyk, Raimar Loebenberg, Sunita Vohra)
 - “Arts-based Therapies” is applicable for Psychology, Medicine, Nursing, Occupational Therapy, Arts, English, and Music programs (Ara Parker, Pamela Brett-Maclean)
 - Qualitative research taught in IntD540 is interdisciplinary, making it applicable across faculties (Belinda Parke)
- Development of an annual Integrative Health Week. IHI faculty have extensive experience organizing and planning large-scale events for undergraduate learners, such as the Complementary and Alternative Medicine Fair, the Global Health Fair, and the Festival of Teaching.
- Support for student groups with a strong interest in integrative health (e.g. the student-led Health & Wellness team in the University Wellness Services, a student group focusing on Aboriginal methods of healing, a mindfulness meditation group, a yoga group, and student based multicultural groups with an interest in bettering the health of their members).
- Coordination of the Integrative Health Stream of IntD410 “Interprofessional Health Team Development” or other such novel interdisciplinary undergraduate programs (Sunita Vohra, Cary Brown, David Kelner, Deanna McFayden, Candace Necyk, Gregory Kawchuk)
- Coordination of Electives for undergraduate medical students, such as:
 - Pediatric Integrative Medicine (PIM) research elective offered by the CARE Program for Integrative Health & Healing (Sunita Vohra, Hsing Jou)
 - International Global Health electives (50-60 / year to approximately 20 countries), including pre-departure preparation (David Zakus)
 - Art in medicine, and spirituality in health care electives (various) offered by the AHHM Program (Pamela Brett-MacLean)

2.2.2 Graduate Programs

- IHI Participants have extensive experience supervising graduate students.

- Development of novel Interprofessional Graduate Studies, for example, graduate studies in natural health products could be offered as an interdisciplinary program offered by IHI faculty from the Faculties of Medicine and Dentistry (Sunita Vohra), Pharmacy and Pharmaceutical Sciences (Candace Necyk and Raimar Loebenberg), and Agricultural, Life, and Environmental Sciences (Catherine Field, Jianping Wu, Michael Gänzle). There is also interest to develop an interdisciplinary graduate studies program exploring the intersection between the environment (Alvaro Vargas, Irena Buka) and health (Sunita Vohra).
- IHI would be able to support graduate students by promoting interdisciplinary supervisory committees, promoting the development of cross-cutting trainees.
- IHI will offer studentships to attract the best learners.

2.2.3 Clinical Education

- IHI will offer training opportunities for clinical learners to observe and practice culturally sensitive patient-centred evidence-based care. Examples include electives, selectives, practicums, as well as a dedicated post-graduate training for specialty fellows.
- Expertise exists across a broad array of disciplines, including: pediatric integrative medicine (Sunita Vohra, Hsing Jou); mindfulness (Catherine Phillips, Priscilla Koop); Reiki (Deanna McFayden); Traditional Chinese Medicine (Steven Aung, Hsing Jou); arts-based therapies (Ara Parker, Pamela Brett-MacLean); hypnotherapy (David Kelner, Sherry Hood, Fred Janke); spirituality (Ara Parker, Doreen Oneschuk, Steven Aung); environmental health (Irena Buka, Alvaro Osornio-Vargas) and laughter yoga (Billy Strean).

There are few Canadian University-based Integrative Health programs that offer post-graduate clinical training. Those that exist are largely in the United States and are in great demand (e.g. University of Arizona integrative medicine fellowship). IHI would allow the University of Alberta's leadership and expertise in Integrative Health to be recognized, attracting learners from all over the world.

2.2.4 Continuing education for practicing providers

- There is growing demand for continuing education in Integrative Health as this core area was not taught in undergraduate training until quite recently. Topics with broad interdisciplinary appeal could be offered, such as: role of nutrition in inflammation and immunity; integrative approaches to cardiac health; integrative oncology; integrative mental health; integrative pediatrics; etc. These could be offered as stand-alone topics, and the possibility of a certificate program for providers who attend multiple topics will also be explored.
- Experience organizing International Symposia / Conferences, such as:
 - Organization of the North American Research Conference on Complementary and Alternative Medicine 2006 (Sunita Vohra)
 - Development of an annual Biomedical Global Health Research Network symposia (2012, 2013 and 2014 upcoming June 2) (David Zakus)
 - Ongoing "Creating Space: Arts and Humanities in Health Professions Education" pre-conference symposia associated with the Canadian Conference on Medical Education (since 2011) (Pamela Brett-Maclean)
 - Earle Waugh has organized many Symposia – the last one in Norway in 2010 and another is planned for 2015

- Billy Streaan helps coordinate the annual Festival of Teaching at the University of Alberta, and his work involves bringing a whole person (somatic) perspective to leadership development at the University
- Fred Janke has initiated hypnotherapists as Associate members of the College of Family Physicians of Canada
- Steven Aung twice hosted the international World Congress of Medical Acupuncture and Natural Medicine in 1995 (first time held outside China) and in 2000

2.2.5 Community engagement

- The public has enormous interest in integrative health and IHI can promote novel community-based initiatives with University faculty and learners, or enrich existing initiatives, such as the Mini-Medical School
- By working with multicultural populations, IHI ensures its initiatives are culturally relevant and sensitive, to help people thrive while respecting their values and norms.
- IHI will actively seek collaboration with Alberta Health Services to promote patient-centred evidence-informed care (IHI can be an information resource for AHS clinicians) as well as inform wellness programs for AHS staff and physicians
- The Office of Global Health (under the direction of David Zakus) has extensive educational programs reaching into third world countries, such as teaching in outreach stations in Zambia (with the School of Public Health)
- Center Town Gown Lecture Series (In 2013/2014 the focus was Integrative Therapies, in 2012/2013 it was Traditional Chinese Medicine). It is monthly, public (held at the Roots On Whyte building), and is offered by the Centre for Cross-Cultural Health, Department of Family Medicine (Earle Waugh), and jointly offered by the Office of Global Health (David Zakus) .
- InSight and InSight2 exhibits at the FAB (Fine Arts Building) Gallery were organized in 2013 and 2012 to community outreach events focused on recognizing the medical/health humanities as an interdisciplinary domain of study at the University of Alberta, and engaging university and community members in identifying, and co-creating solutions to health care issues and problems (Pamela Brett-MacLean, with Bonnie Sadler-Takach and Aidan Rowe).
- Hear's to your Health, a free live classical music series offered in Bernard Snell Hall for hospital staff/patients/families) (Patricia Tao)
- IHI will seek collaboration with other educational bodies (e.g. Edmonton Public School Board) to promote student and staff wellness
- Some IHI faculty (Dawn Hartfield, Liana Urichuk) have leadership roles with Alberta Health Services and can support and promote effective collaborative relationships to better meet the needs of our provincial health system

3. Provide a Statement of the priority of the proposed centre or institute within the overall priorities of the Faculty and/or the University of Alberta. Include a statement of benefits the University of Alberta could expect to receive through creation of the proposed centre or institute, including benefits to students.

The proposed goals of the Integrative Health Institute of Alberta are closely aligned with those of the University, in that they acknowledge the value of collaborative, interdisciplinary relationships in addressing the complex challenges involved in health research, and also as vehicles for linking research to teaching, policy development and service delivery. IHI's goals also support the University of Alberta's mission, "to serve our community by the dissemination of knowledge through teaching and the

discovery of knowledge through research.” The Institute’s research goals support health outcomes research, one of the key research priorities of the Faculty of Medicine and Dentistry at the University of Alberta¹².

The Institute encompasses tremendous breadth and depth of research expertise, spanning all CIHR pillars, involving health products and practices. Major thematic areas of faculty expertise include: (i) natural health products/functional foods; (ii) traditional/indigenous/Aboriginal health; and (iii) mindfulness and other mind-body therapies (e.g. meditation, music therapy, art therapy). IHI provides for novel interdisciplinary opportunities for discovery and innovation. IHI is timely, as it fits well with other U of A initiatives as well as provincial and federal health research funding priorities (e.g. AIHS and CIHR Strategy for Patient-Oriented Research). IHI has relevance to all 13 CIHR institutes, as it spans all age groups and most clinical populations. It is also well positioned to take advantage of international funding opportunities, such as the Patient Centred Outcomes Research Institute (United States) and partnership with other universities that share common interests (e.g. “Food for Health” initiative with Zhejiang University, China, and natural health product research with China Pharmaceutical University in Nanjing). Short, medium, and long term Institute goals are described in Appendix 1.

IHI research is fully aligned with U of A’s new Translational Science Institutes (see letter of support, Dr. John Greer, Director, Neuroscience and Mental Health Institute). “Translational” research in this field is not only bench-to-bedside, but also bedside-to-bench, where therapies that demonstrate clinical benefit or harm can be investigated further in the lab re: mechanism of action. Successful research requires a comprehensive approach that brings together experts from all research fields along the “bench to bedside” continuum (basic discovery to application). IHI will not duplicate the efforts invested in the Women and Children’s Health Research Institute and the TSIs – rather, IHI will complement them and facilitate U of A faculty research success in an area that is broadly relevant across diseases, populations, in Canada and around the world.

At present, Canada only has few university-based Integrative Health initiatives, such as the newly launched Centre for Integrative Medicine at the University of Toronto (see attached letter of support, Dr. Heather Boon, Dean, Leslie Dan Faculty of Pharmacy). The breadth and depth of expertise at the U of A allows us to position ourselves in leadership position. Given the sheer number of patients using CAHC, there is a pressing need for basic science, clinical research, population-based and health services research to inform practice and policy.

An overall statement of benefits to the University of Alberta is as follows:

- To provide structural organization and develop an interdisciplinary interfaculty framework for Integrative Health research that promotes scholarship
- To promote translational research (bench-to-bedside; bedside-to-bench; evidence-to-policy and practice)
- To harness local expertise and build capacity through development of new training opportunities for undergraduate and graduate students
- Enhanced funding opportunities, including team grants (e.g. patient-oriented research), industry partnerships, and collaboration with other Universities
- Enable new funding opportunities through philanthropy
- Enhanced profile of the university – locally (with public and government) and internationally
- Increased strengths in pillar III and IV research that generates relevant evidence to inform policy and practice

4. Provide a description of the proposed centre/institute governance structure/reporting lines. Include a diagram of organizational structure

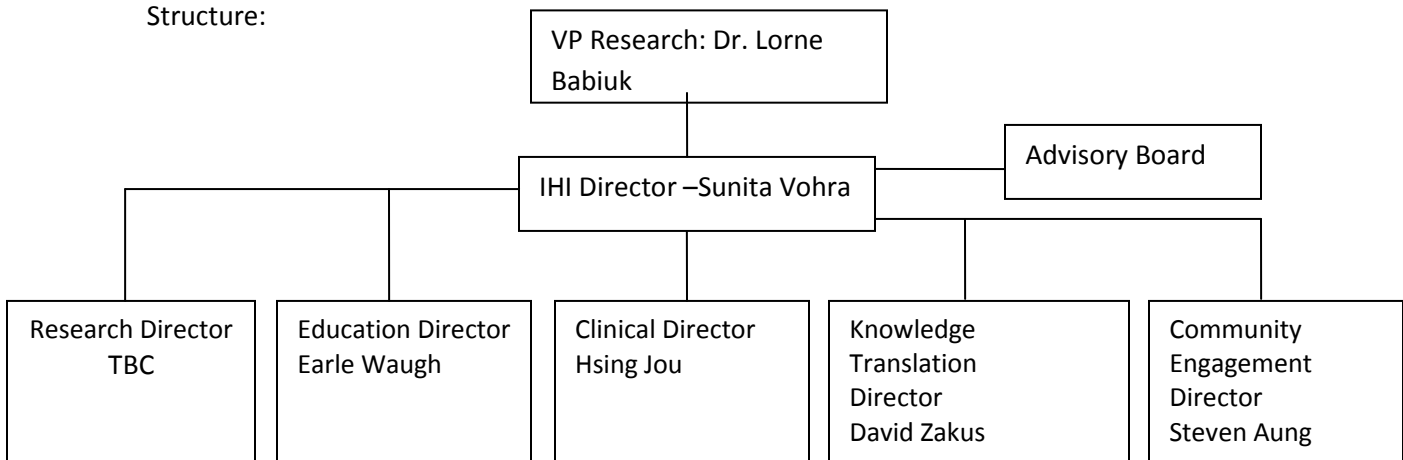
IHI will be a University entity, and will follow University policies and procedures governing institutes. Executive decisions will rest with the Director of IHI, who will be a full-time academic faculty member or affiliate from one of the Health Sciences Faculties. The Director will be appointed for a five year term, and the appointment may be renewed upon favorable review. Annual reports will be prepared at the end of each calendar year and will be submitted to the Vice-President, Research of the University. Each year, the Vice-President, Research may respond to the annual report in a meeting with the Director. The Director will be ultimately accountable to the Vice-President, Research and Provost at the University of Alberta.

The IHI Director will work closely with the IHI Management committee, comprised of Directors of each arm of IHI: Research, Education, Clinical, Knowledge Translation, and Community Engagement. There will be clinical and basic science (discovery) research directors, with research leads for each of IHI's major research themes.

IHI will form an ad hoc Advisory Board of 5-7 members. The Advisory Board will be interdisciplinary, comprised of senior University faculty and at least one student (ie, Students' Union Vice President Academic (or appointed delegate)), complemented by an external nationally recognized expert in Integrative Health. The Advisory Board will meet bi-annually with the IHI Director and its Management Committee to provide input on the Institute's research agenda and strategic direction.

The Director's function is to model a philosophy of collaboration and innovation, and provide the academic and strategic leadership to ensure that the Institute conducts rigorous research that is relevant to its mission and useful for its target audiences. Additionally, the Director will ensure that all research is carried out according to the University's policies and procedures, meeting all standards for ethical research. The Director will also be fiscally accountable for developing and monitoring an annual budget for the Institute in conjunction with University policies and practices. The IHI Director will report to the Vice-President, Research.

Structure:



Provide a statement of the role and qualifications of the Centre/Institute lead of the proposed Centre or institute

A strong leadership team is essential for IHI, with a range of necessary expertise. Fortunately U of A has international leaders in their field of expertise with substantial leadership skills and experience. Interim leadership has been identified; an open nomination and selection process will be pursued in IHI's third year.

The role of Institute Directors is to manage the affairs of the Institute, guide its strategic development, and to be formal channel of communication between the Institute and external agencies.

Listed below are the key leadership positions and the people we propose to fulfill inaugural interim roles in these positions.

Director of IHI: Clinician Scientist with international reputation, strong leadership skills and experience: Dr. Sunita Vohra. Dr. Vohra has received continuous salary support from AHFMR/AIHS from the time of her recruitment in 2003 to 2015 when the AHFMR salary support program will end. She has held long-term parallel CIHR and AIHS funding in areas of research for which her research team has gained an international reputation, including methods research (e.g. N-of-1 trials) and patient safety research (e.g. NHP-drug interactions). Dr. Vohra is a Professor at the Department of Pediatrics, Faculty of Medicine, University of Alberta, with a cross-appointment in the School of Public Health. She is the founding director of Canada's first academic pediatric integrative medicine program, the Complementary and Alternative Research and Education (CARE) program at the Stollery Children's Hospital. In 2013, she was awarded the Dr. Rogers Prize for excellence in complementary and alternative medicine (CAM) and elected into the Canadian Academy of Health Sciences, one of the highest honours for individuals in the Canadian health sciences community.

Scientific/Research Director: Scientist or clinician-scientist with strong clinical or basic research background, international research recognition and leadership experience (to be confirmed)

Education Director: Faculty member with extensive education experience and background: Dr. Earle Waugh. He is Professor Emeritus of the Department of Religious Studies and Director of the Centre for the Cross-Cultural Study of Health and Healing, Department of Family Medicine, University of Alberta. His early research and writing focused on two cultural areas critical today: Islamic Studies and Aboriginal Studies. He has written or edited over a dozen books, dictionaries and studies. His awards include: Gold Medal, Best Documentary Films/Adult Educational, Houston International Film Festival, *The Sacred Circle*, Canadian Studies Book of the Year (*Alberta Elders Cree Dictionary*), the Henry Kreisel Award of Excellence in Teaching, and the UA's Middle East Studies Lifetime Achievement Award. His study on Morocco was short listed for the prestigious Albert Hourani Best book on the Middle East in 2007. Professor Waugh lectures and consults widely on health-care and culture and has provided seminars for hospitals, pharmacy seniors, graduate physicians and health care professionals throughout the province.

Clinical Director: Physician with strong clinical leadership experience. Dr. Hsing Jou. Dr. Jou is an Assistant Professor of Pediatrics in the Division of Pediatric Emergency Medicine at the University of Alberta and has a clinical staff position in the pediatric emergency department at the Stollery Children's Hospital in Edmonton, Alberta. She has been involved in several clinical trials and research projects studying pain, anxiety, nausea/vomiting, concussion, anaphylaxis, fever, as well as CAM safety,

probiotics, music and other non-pharmacologic interventions. She was a honoured recipient of the Family Medicine Residents' Certificate of Teaching Excellence in 2007. Dr. Jou is the CARE Program's clinical director and the program director for Pediatric Integrative Medicine. She has a special interest in Traditional Chinese Medicine and completed the University of Alberta's Certificate Program in Medical Acupuncture in 2002. She was Associate Director of the Faculty of Medicine and Dentistry's Medical Acupuncture Program from 2010-2013.

Knowledge Translation Director: Scientist with experience effecting change at a local, provincial, and national level: Dr. David Zakus. He is a Professor in the Division of Preventive Medicine, Department of Medicine, and Director of Global Health in the Division of Community Engagement in the Faculty of Medicine and Dentistry at the University of Alberta. In these positions he carries out a broad portfolio of international program development, implementation, support and research. He currently holds appointments at the University of Toronto as well as universities in Beijing, Shanghai and Kunming. He has extensive knowledge and experience with academia, non-governmental organizations and multilateral institutions, having occupied senior roles within each. Dr Zakus' teaching and research focus is on international and global health, primary health care, human resource and health systems development, management and reform, community-based health services, community participation, eHealth solutions and environmental sustainability.

Community Engagement Director: U of A affiliated faculty member whose primary work is in the community, with history of exceptional achievement: Dr. Steven Aung. Dr. Aung serves as an associate clinical professor in the Departments of Medicine and Family Medicine at the University of Alberta. He also shares his expertise in acupuncture to the University of Alberta Hospitals, the Cross Cancer Institute, Covenant Health (formerly Caritas Health Group) and the Glen Sather University of Alberta Sports Medicine Centre. He is a pioneer in the integration of western, traditional Chinese and complementary medicine. His unique approach to medicine, combined with the remarkable compassion he brings to all that he does, has made him a highly respected teacher, researcher and physician. Dr. Aung was inducted into the Alberta Order of Excellence in 2002, and was invested as a Member of the Order of Canada in February 2006.

3 Employees

- a) Provide a statement of the employment status of employees (ie, are they University of Alberta Employees?)
- b) Specific source(s) of any "University funding" must be identified
- c) Personnel expenditures must include adequate provisions for benefit costs, salary settlements, and other escalating factors

The faculty involved with the IHI are already employed by the University of Alberta and are paid as such through operational funding sources of their Departments and Faculties. This includes that IHI Directors. Additional initial staff would include a 1.0 FTE Research Associate and 0.5 FTE Administrative assistant.

The Institute Director will work VP Research and the Provost to assist in identifying funding to ensure sustainability of the Institute.

4 Detailed Budget

- a) Include key sources of operating funds, and include revenue sources and expenditures for (ideally) 5 years projected.
- b) State specific source(s) of any “University funding”
- c) Personnel expenditures must include adequate provisions for benefit costs
- d) Escalation factors must be built into expenditure projections (ie, escalation due to inflation, future salary settlements, etc.)
- e) If in-kind support is identified, the specifics of that support must be listed separately

The Integrative Health Institute will be funded through a combination of grants, awards, philanthropy, and in-kind contributions from the University such as space, IT and data management services, human resources, communications and other infrastructure. Since the Institute draws its expertise from several Faculties, we propose that the relevant Deans recognize these academic faculty and staff FTE as in-kind contributions towards the Institute’s work, including interdisciplinary research and education.

IHI faculty participants are accomplished researchers with considerable expertise in securing research funding. Since 2012, they published over 200 peer-reviewed manuscripts, given over 350 presentations, and won more than \$150M in funding (all funds won as PI, co-PI, or co-I).

The longer term goal is to cultivate significant and sustained donor support and use such funds to enable program development in all arms. This will result in a self-sustaining core infrastructure, which in turn will continue to increase the Institute’s capacity to compete for larger, more collaborative grants. The Institute’s long-term goal is internationally recognized scholarship that influences policy and practice.

Short term budget

The start-up budgetary requirements of the institute will be modest and are derived from both existing revenue sources and potential new sources. The Institute Director will work with the VP Research and the Provost to assist in identifying funding to ensure sustainability of the Institute. Anticipated budget expenses include start-up funds for group activities and research facilitation, accomplished with the support of 1.0 FTE research associate and 0.5 FTE administrative assistant.

1.0 FTE PhD trained Research associate (\$90K)

0.5 FTE Administrative assistant (\$35K/year)

Administrative support

As the Institute secures additional funding, there will be an Administrator who will oversee the Institute’s facilities and operations, including finances, grants management, space and equipment procurement and human resources. S/he will operate within the University’s policies and guidelines and works closely with the Director to develop and monitor the Institute’s budget and support each of the arms. S/he will also develop an annual Administrative work plan for the Institute.

Budget Assumptions:

Salaries for the IHI Directors are not listed as they are all academic university employees. The IHI is a philanthropic priority for the U of A Central Advancement team and the goal is to secure a major naming donor in the next 12 months to provide a substantial investment. Please refer to detailed budget in Appendix 3.

5 Space Requirements

Space is required for the IHI on site at the University of Alberta. Our academic research team is currently occupying AHS/Covenant Health space and we have been advised we need to relocate to suitable space within the University. Physical space needs will expand over time, as IHI grows. The Institute Director will work with VP Research and the Provost to negotiate future space needs as the Institute gains success. Space needs will be planned for and communicated annually as part of the Director's report to the VP, Research. Funding for future space needs can be met from endowments and donations.

- a) If rent/lease or license is required, what is the University of Alberta's commitment?
Not required
- b) If new space or modifications to existing space are required, has Facilities and Operations been contacted and has this been included in the budget?
Not required

6 Potential Risk to the University of Alberta

Risks are inherent in any undertaking and IHI does not impose any additional risk to those of usual university teaching and research activities. Examples of risk associated with the creation of IHI, like those of any University entity, may fall into the categories of financial risk, public affairs risk, or breach of ethical standards in clinical care or research. Risks also include Institute faculty being recruited away from the University or leaving for some other reason, and/or loss of funding beyond the current commitment. These risks will be managed through the same mechanisms as any other University unit. IHI will take steps to minimize risks through its governance and reporting structure, accountability, and vigorous pursuit of additional funding. IHI will abide by all UA policies, procedures, and ethical codes with regard to research.

Other potential risks, such as those for research participants or related to the media will also be managed through the same mechanisms as any other University unit. For example, all faculty and staff involved in human subjects research will hold a current 'human subjects protection' certificate according to University policy. In addition, the Director of the Institute will work closely with the University of Alberta public affairs department on any media-related issues. A communication strategy for the Institute will be developed jointly with this department.

The field of Integrative Health has many diverse, polarized opinions surrounding it; some CAHC therapies are a source of considerable controversy. The understanding of Integrative Health amongst policymakers, health care providers, health insurance companies, etc. remains limited and highly variable, posing an ideal opportunity for impactful research that can advance the field. Since IHI focuses on excellence in research and education, it can address topics that are highly relevant to the public, health care providers, and policy-makers, and enhance the reputation of the University of Alberta (please see attached letters of support from Dr. Heather Boon (Dean and co-lead Center for Integrative Medicine, University of Toronto), Dr. Brian Berman (Director, Center for Integrative Medicine, University of Maryland, USA), Dr. Vinjar Fonnebo (Director, National Research Center in CAM, Norway), Dr. Alan Bensoussan (Director, National Institute of Complementary Medicine, University of Western Sydney, Australia)).

5. Annual Reporting and Strategic Review: In accordance with UAPPOL Policy

Annual reports outlining progress and accomplishments as well as a financial year-end summary will be prepared at the end of each calendar year and will be submitted to the Vice-President, Research of the University. Each year, the Vice-President, Research may respond to the annual report in a meeting with the Director. Every five years, the Director will arrange for an external review of the Institute by an external committee of national and international leaders. The external review will provide a “SWOT” analysis to inform long-term strategic planning. The Director will be ultimately accountable to the Vice-President, Research and Provost at the University of Alberta.

6. Intellectual Property (IP) and Copyright

Intellectual Property: All copyright or patentable IP created by IHI will be handled by the Patent policy and Commercialization of Patentable Intellectual Property Procedure of UAPPOL.

12. Termination Plan/Provisions

The IHI is intended to be long-standing, sustainable, and evolve with changes and shifts that may occur in the field of Integrative Health. However, if unforeseen circumstances lead to dissolution of the Institute, the plan will be as follows:

If physical and/or financial resources remain upon termination, a plan for consultation with donors or agencies associated with the institute must be included in the dissolution plan.

Staff: Current U of A staff would remain with U of A as per their individual appointments/agreements. Administrative positions that are on contract would be terminated or reassigned with adequate notice.

Facilities & Equipment: Any equipment belonging to the University of Alberta would stay with the relevant Faculty. Facilities designated to and for use by IHI would be returned to central administration for redistribution at their discretion.

Financial: Donor agreements will be honoured provided that the gift can continue to be aligned with donor intent. Grants and sponsored research remain the responsibility of the PI under which they are held with oversight by their home Faculty.

13. Letters of Support

Members and Linkages

IHI has demonstrable linkages to many Departments, Faculties, Centers, and Institutes at the University of Alberta, as well as to a variety of external programs, institutes, and initiatives (please see appended letters of support).

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Appendix 1: IHI Goals

Short, medium, and long-term Institute goals

Short-term goals (Years 1-3)

In its first three years, IHI will focus on expanding its membership, developing relationships with other U of A institutes and centers, identifying national and international centres for potential partnership, and setting long term goals. Specific additional activities are detailed below.

Research:

IHI will support research success by greatly enhancing the environment for funding applications and promoting new interdisciplinary research teams. IHI faculty have diverse expertise and although they are co-located at one university, they do not yet have opportunity to network with interested colleagues at their own institution. IHI will host monthly networking opportunities for identified major themes (institute “nodes”), and encourage the development of novel nodes. Facilitated interdisciplinary workshops will help faculty from different disciplines communicate and collaborate more effectively.

Education:

- Development of database of educational activities happening across campus so curricular redundancies can quickly be identified, and a database of lecture topics and lecturers be created
- Accredited monthly speaker series
- Monthly Newsletter
- One town hall meeting per University term to connect participants and to share information
- Curriculum development and coordination of an IntD410 specialty stream
- Initiation of a Journal club for learners
- Development of a U of A Integrative Health Network

Medium-term goals (Years 4-9)

- To develop a centre of excellence in integrative health research and education

Research:

- Promote interdisciplinary research, including partnerships between Faculties
- Pioneer novel research methods
- Incubator for NHP discovery research
- Develop visiting scholars program
- Develop knowledge translation tools for decision-makers
- Successful pilot projects that include new collaboration between IHI members

Education:

- Development and initiation of continuing education programs that are financially self-sustaining
- Development of centralized, peer-reviewed educational resources and materials
- Development of integrative health curriculum for undergraduate health science students
- Development of novel graduate programs (such as the Natural Health Products Graduate Program)
- Initiation of IHI graduate scholarships and other student awards to recruit high quality learners

- Development of clinical training programs led by U of A faculty, e.g. medical acupuncture, hypnotherapy, mindfulness
- Development of integrative health clinics to allow U of A learners to practice and model patient-centred collaborative care

Long-term goals (Years 10+)

- To be recognized internationally for scholarship that influences global policy and practice

Appendix 2: Faculty Membership

Institute membership (n=64) by Faculty

Faculty of Medicine & Dentistry (n=34)

Aung, Steven
Baker, Glen
Ball, Geoff
Bamforth, Fiona
Baydala, Lola
Brett-MacLean, Pamela
Buka, Irena
Cembrowski, George
Conway, Jennifer
Hartfield, Dawn
Hartling, Lisa
Hood, Sherry
Janke, Fred
Jou, Hsing
Joy, Anil Abraham
Kelner, David
Kozyrskyj, Anita
LeGatt, Don
Madsen, Karen
Newton, Mandi
Olson, David
Oneschuk, Doreen
Osornio- Vargas, Alvaro
Phillips, Catherine
Salvalaggio, Ginetta
Sharma, Sangita
Singhal, Anthony
Triscott, Jean
Tyrrell, Lorne
Urichuk, Liana
Vohra, Sunita
Waugh, Earle
Yager, Jerome
Zakus, David

Faculty of Pharmacy and Pharmaceutical Sciences (9)

Barakat, Khaled
Hall, Kevin

Loebenberg, Raimar
Necyk, Candace
Sadowski, Cheryl
Seubert, John
Velazquez-Martinez, Calos
Yuksel, Nese

Faculty of Nursing (n=4)

Barton, Sylvia
McFayden, Deanna
Olson, Karin
Parke, Belinda

Faculty of Agricultural, Life and Environmental Sciences (4)

Field, Catherine
Gänzle, Michael
Kav, Nataraj
Wu, Jianping

Public Health, School of (4)

Carroll, Linda
Eurich, Dean
Ohinmaa, Arto
Springett, Jane

Faculty of Arts (3)

Dalal, Neil
Frishkopf, Michael
Tao, Patty

Faculty of Rehabilitation Medicine (2)

Brown, Cary
Kawchuk, Gregory

Faculty of Education (1)

Shultz, Lynette

Faculty of Physical Education and Recreation (1)

Strean, Billy

Faculty of Extension (1)

Mayan, Maria

St. Stephen's College (1)

Parker, Ara

Appendix 3 : Detailed Budget

This budget provides a high-level plan for funding IHI for the next 5 years. As the Institute develops further, this budget will be adjusted based on evolving programs, collaborations and directions of the associated researchers. IHI faculty participants already run successful research teams; core IHI staff will facilitate their enhanced success.

Budget assumptions and high-level sustainability projections:

1. An **investment from the VP Research** of \$102,500 in Year 1 and \$34,600 in Year 2 will allow immediate establishment of IHI and allow the Institute to grow and develop effectively.
2. Through her general research funds, Dr. Vohra and the **CARE program will subsidize** the Institute \$100,000 in Year 1 and \$34,000 in Year 2 in order to allow a firm establishment of IHI within the University.
3. In Year 2, it is expected that **industry contracts and donations will be developed** in order to help fund IHI. Multiple organizations are possible collaborators in this research area.
4. Potential University partnerships may potentially be developed with Chinese universities, as well as other potential academic partners .
5. Provincial and national team grant proposals will be developed to help IHI expand its capabilities and role within the University, provincially, nationally and internationally.
6. **Philanthropy opportunities will be actively pursued with the assistance of UA central advancement.** This field is of particular interest to many potential donors.
7. An additional Research Associate and Admin. Assistant will be hired to meet anticipated activity increases of IHI in Years 3, 4, and 5.
8. It is anticipated that more duties will result in an increase of required APO time by Year 4.
9. An Education Coordinator will be hired in Year 3 to assist in curriculum development, student exchanges, and other learner-focused activities.
10. In Year 3, a Research Assistant will be added to help with ongoing research.
11. Also in Year 3, a Knowledge Broker will be added who will be key in effective knowledge translation with community partners
12. It is expected by Year 3 additional IHI staff will require additional furniture, computers, etc. and potentially space renovations. These funds have been planned to address these needs.

	Note	Year 1	Year 2	Year 3	Year 4	Year 5
REVENUE/INCOME						
VP Research	1	102,500	34,600			
CARE Program (P.I. S Vohra)	2	100,000	34,000			
Industry partnerships, contracts, donations	3		100,000	150,000	200,000	250,000
Partnerships with other Universities	4		30,000	40,000	50,000	50,000
Team Grants	5			1,000,000	1,000,000	1,000,000
Philanthropy (not included)	6			(2,000,000)		
TOTAL REVENUE/INCOME		202,500	198,600	1,190,000	1,250,000	1,300,000
EXPENDITURES						
<i>Personnel: includes base salary, benefits (22%), annual COLA (4%)</i>						
Research Associate (1.0 FTE at \$100K base)		122,000	126,880	131,955	137,233	142,723
Research Associate (1.0 FTE at \$100K base)	7			131,955	137,233	142,723
Admin. Assistant (0.5 FTE at \$50K base)		30,500	31,720	32,989	34,308	35,681
Admin. Assistant (1.0 FTE at \$50K base)	7			65,978	68,617	71,361
Sr. APO (0.5 FTE at \$120K base)				82,340	85,634	89,059
Sr. APO (0.5 FTE at \$120K base)	8				85,634	89,059
Education Coordinator (1.0 FTE at \$80K base)	9			97,600	101,504	105,564
Research Assistant (1.0 FTE at \$80K base)	10					105,564

				97,600	101,504	
Knowledge Broker (1.0 FTE at \$90K base)	11			109,800	114,192	118,760
<i>Sub-total personnel</i>		152,500	158,600	750,217	865,859	900,494
<i>Office supplies</i>						
Admin, conference calls etc.		5,000	5,000	15,000	20,000	20,000
<i>Sub-total office supplies</i>		5,000	5,000	15,000	20,000	20,000
<i>Travel, hosting, seminars</i>						
Conferences		20,000	20,000	40,000	40,000	50,000
Invited speakers		15,000	15,000	15,000	15,000	15,000
IHI Retreat		10,000		10,000		10,000
<i>Sub-total travel, hosting, seminars</i>		45,000	35,000	65,000	55,000	75,000
<i>Infrastructure</i>						
Computers, Office Furniture etc.	12			60,000	70,000	80,000
TOTAL EXPENSES		202,500	198,600	830,217	940,859	995,494
NET* (REVENUES MINUS EXPENSES)		0	0	359,783	309,141	304,506

* Net funds will be reinvested based on Institute priorities.

Appendix 4: Letters of Support

UAlberta Linkages (letters of support appended):

Office of the President (letter of support from Dr. Martin Ferguson-Pell, Senior Advisor to the President)

Faculty of Agricultural, Life and Environmental Sciences (letter of support from Dean Blade)

Faculty of Arts (letter of support from Dean Cormack)

Faculty of Education (letter of support from Dean Snart)

Faculty of Extension (letter of support from Dean Connor)

Faculty of Native Studies (letter of support from Dean Hokowhitu)

Faculty of Nursing (letter of support from Dean Molzahn)

Faculty of Pharmacy and Pharmaceutical Sciences (letter of support from Dean Kehrer)

Public Health, School of (letter of support from Dean Young)

Faculty of Rehabilitation Medicine (letter of support, Dean Haennel)

St. Stephen's College (letter of support from Dean Sharam)

Faculty of Medicine and Dentistry (see letters of support from):

TSI Neuroscience and Mental Health (letter of support from Dr. John Greer, Director)

Li Ka Shing Institute of Virology (letter of support from Dr. Lorne Tyrrell, Director)

Alberta Transplant Institute (letter of support from Dr. Lori West, Interim Director)

Alberta Research Centre for Health Evidence (letter of support from Dr. Lisa Hartling, Director)

Office of Global Health (letter of support from David Zakus)

Centre for Health and Culture in Family Medicine (letter of support from Earl Waugh, Director)

Arts & Humanities in Health and Medicine Program (letter of support from Pamela Brett-MacLean, Director)

Department of Pediatrics (letter of support from Dr. Yager, Director of Research)

Other UAlberta Institutes and Centres

Drug Development and Innovation Centre (letter of support from Dr. Raimar Loebenberg, Director)

Centre for Health Promotion Studies (letter of support from Jane Springett, Director)

Community-University Partnership (CUP) (letter of support from Dr. Laurie Schnirer, Director)

China Institute (letter of support from Dr. Gordon Houlden, Director)

External Linkages (letters of support appended):

Alberta Health Services (letter of support from Dr Verna Yiu, VP Quality and CMO, and Dr. Kathryn Todd, VP Research, Innovation, and Analytics)

Cancer Control, Alberta Health Services (letter from Dr. Paul Grundy, SMD/SPO Cancer Control)

College of Physicians and Surgeons of Alberta (letter of support from Dr. Theman, Registrar)

Alberta Innovates Bio Solution (letter from Cornelia Kreplin, Executive Director)

Physiotherapy Alberta (letter of support from Dianne Millette, Registrar)

Native Counseling Services of Alberta (letter of support from Dr. Patti LaBoucane-Benson, Director of research, training and communication)

Leslie Dan Faculty of Pharmacy, University of Toronto (letter of support from Dr. Heather Boon, Director and co-lead of Center for Integrative Medicine)

Center for Integrative Medicine, University of Maryland (USA) (letter of support from Dr. Brian Berman, Director)

National Research Center in Complementary and Alternative Medicine (NAFKAM, Norway) (letter of support from Dr. Vinjar Fonnebo, Director)

National Institute of Complementary Medicine, University of Western Sydney (Australia), (letter of support from Dr. Alan Benssouan, Director)

29 August 2014

Dr. Carl Amrhein
Provost & Vice-President (Academic)
University of Alberta

Dear Provost Amrhein,

I am writing to support the proposal to establish an Integrative Health Institute (IHI) at the University of Alberta.

I understand that Dr. Sunita Vohra has been in discussions with a number of researchers from the Faculty of Agricultural, Life and Environmental Sciences (ALES) and they are excited about this opportunity. With a group of >50 interested investigators from many Faculties across the campus, the scholarship goals of the Institute to support practice and policy can be effectively accomplished through the establishment of IHI. I am aware that this group of accomplished individuals have collectively brought many millions of research dollars to the University of Alberta and are excited about the new possibilities IHI will bring. I envision that a large portion of the research in ALES in our Food for Health Initiative that is centered in the Department of Agricultural, Food and Nutritional Science would be strengthened by the formation of the IHI.

The Faculty of ALES is working towards the establishment of the Centre for Nutrition and Health in collaboration with the School of Public Health. We look forward to complementary and collaborative activities between the CNH and IHI once both groups are established at the University of Alberta. Finally one of my goals as the Dean is to facilitate new research initiatives in the developing world. A strong IHI, together with an equally vibrant CNH at the U of A campus could help realize this goal.

Sincerely,



Stanford F. Blad, Ph.D., P.Ag.
Dean

Enterprise Square
10230 Jasper Avenue NW
Edmonton, Alberta, Canada T5J 4P6
Tel: 780.492.2681
Fax: 780.492.6735
bill.connor@ualberta.ca
www.extension.ualberta.ca

September 3, 2014

Dear Dr. Sunita Vohra,

Re: Support for the Proposed Integrative Health Institute (IHI)

I am pleased to express the Faculty of Extension's support for the Integrative Health Institute initiative.

I believe the Integrative Health Institute will bridge an important gap at the University, to better connect the University to healthcare practices happening everyday in our communities. These practices may be happening in cultural communities within Alberta in our melting pot society, passed down from generations (such as with native traditional medicine), non-pharmacological stress reduction techniques that many people use to support their health (such as yoga or meditation), or various complementary and alternative medicine practices (such as massage therapy, acupuncture, chiropractic, or herbal medicine use). Much is currently unknown about many of these practices, and by focusing energy and efforts on this unknown area, we can ensure the safety and good health of our communities – as well as keeping the university relevant to the community.

The IHI members, led by Dr. Roger's Prize for Excellence in Complementary and Alternative Medicine winner Sunita Vohra and including her distinguished team (e.g. David Zakus, Earle Waugh, Steven Aung), have strong track records of successfully bringing together diverse communities within and outside of the university, with different underlying belief systems to meet common goals.

I believe that this is an important field to focus attention on, and the leadership team is one that will do it successfully. I look forward to the collaboration opportunities that the IHI will provide the Faculty of Extension and its members.

Sincerely,



Bill Connor, PhD
Professor and Acting Dean



3-118 Edmonton Clinic Health Academy Building
11405 – 87 Avenue
Edmonton, Alberta, Canada T6G 1C9
Tel: 780.492.3029
Fax: 780.492.2551
nudean@ualberta.ca
www.nursing.ualberta.ca

September 2, 2014

Dear Colleagues:

On behalf of the Faculty of Nursing, I am pleased to write a letter of support for the proposal for the Integrative Health Institute proposed by Dr. Sunita Vohra from the Department of Pediatrics. The vision of "optimal health and well-being through evidence-informed patient-centered integrative care" is both laudable and attainable.

As noted in the proposal, many people currently use integrative (alternative, complementary) health practices, often without notifying their health care providers. Additional knowledge regarding these practices would enhance patient-centred care and respect the diverse cultures and practices that underly these therapies.

Several faculty members in the Faculty of Nursing are currently interested in and working on projects related to integrative health practices. I anticipate that with establishment of the Institute, there would be more opportunities for collaboration in this field of study.

I also anticipate that philanthropists would have an interest in supporting this venture. I have had discussions with a donor (now deceased) who wanted to focus her gift on opportunities for nursing graduate students to visit American centres studying integrative health practices. Unfortunately, she passed away before her wishes were realized.

I believe that the area of integrative health is one that requires further exploration and that the general population would benefit from knowledge translation in this field. The Institute would provide leadership in this emerging field of study that will be of interest to the entire community. I am fully supportive of the goals of the Integrated Health Institute and look forward to its development and growth.

Sincerely,

Anita E. Molzahn, PhD, RN, FCAHS
Dean and Professor

September 3, 2014

3-48 Corbett Hall
Edmonton, Alberta, Canada T6G 2G4
Tel: 780.492.2903
Fax: 780.492.1626
www.rehabmed.ualberta.ca

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

Dear Sunita,

Thank you for the opportunity to review the proposal for the establishment of an Integrative Health Institute here at the University of Alberta. On behalf of the Faculty of Rehabilitation Medicine, I am excited about this initiative and pleased to express our support for the establishment of this Institute.

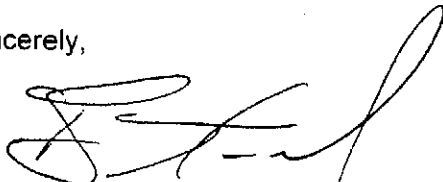
The Integrated Health Institute will help facilitate patient-centered care, focusing on the broader concept of health as a state of complete physical, mental, and social well-being. My hope for this Institute is that it will fulfill its mandate as a hub for interdisciplinary research and education, promoting innovation in novel ways to study, apply, and promote evidence-informed patient centred care, while respecting cultural diversity.

The Institute's broad research themes span the continuum of UofA expertise and capacity, from basic discovery to applied research. I agree with the assertion that the establishment of the Integrative Health Institute leads to excellence in scholarship in integrative, traditional, and indigenous health. I am also encouraged by the emphasis placed on engaging key partners from across the research spectrum, ranging from provincial funding agencies to health charities, academic institutions, and health research networks.

With its focus on trans-disciplinary research in the identified themes, the Integrative Health Institute should also enable investigators to capitalize on new funding opportunities. Finally, one cannot dismiss the suggestion that the designation of an Institute will markedly strengthen this University's competitive position when seeking research funding from provincial, national, and international agencies.

On behalf of the Faculty of Rehabilitation Medicine, we look forward to assisting you in any way we can in bringing this institute to fruition.

Sincerely,



R.G. (Bob) Haennel Ph.D. FACSM
Professor & Acting Dean

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program and PedCAM Network
AIHS Health Scholar and Professor
Department of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

8B19-11111 Jasper Ave
Edmonton, Alberta, Canada
T5K 0L4

Dear Dr. Vohra:

**Re: University of Alberta
Integrative Health Institute**

Please accept this letter and the accompanying documentation as firm support and interest in participating in the UofA initiative regarding the Integrative Health Institute (IHI).

As you know, I have been interested in complementary medicine and natural health products for several years now, and we have worked together on several projects. My own area of research for the past 21 years has been in the area of perinatal brain injury and developing animal models and therapies for newborns at risk of cerebral palsy. In this regard, recent work in the field has clearly shown that the majority (80%) of causes resulting in cerebral palsy occurs prior to the time of delivery and birth. As a result, therapeutic interventions that are aimed at preventing this disorder (responsible for over 30% of disability in children), must address treating the mother, in order to protect the fetus. Given that big pharma is wary of traditional pharmaceuticals for pregnant women¹, and that upwards of 80% of women already use complementary medications during pregnancy², the use of natural health products in the prevention of fetal brain injury became the focus of our work. We believe this innovative, yet simple approach, to show the greatest promise for therapeutic alternatives in this vulnerable population, world-wide.

Our Laboratory for Perinatal Brain Research, at the University of Alberta, is currently the animal model core and I the Co-director of the Cerebral Palsy Discovery Program, for NeuroDevNet, a Canadian National Centres of Excellence Project. We have developed models that mimic the cerebral palsy phenotype. Currently, we are investigating the role of broccoli sprouts (a potent anti-inflammatory and anti-oxidant) in the treatment and prevention of injury to the newborn. Our results have been extremely positive, and together with yourself, we have simultaneously completed a 'focus group' study on the willingness of pregnant women to alter their dietary habits, with supplementary natural health products, and completed a phase I clinical trial on the safety of broccoli sprout ingestion.

The development of the Integrative Health Institute at the University of Alberta would be, not only a tremendous asset to my own work, but to the enhancement of health care on a local, regional and global platform. It is clear that the public are interested in pursuing greater

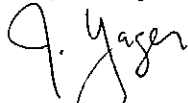
**Jerome Y. Yager, MD, Professor and Head
Pediatric Neurosciences and Director of Research
Department of Pediatrics**

Faculty of Medicine and Dentistry ♦ University of Alberta
Room 7317A ♦ Aberhart Centre One ♦ 11402 University Avenue ♦ Edmonton, Alberta ♦ Canada ♦ T6G 2J3
Phone (780) 407-1083 ♦ Fax (780) 407-8538

evidence-based support for the use of complementary medicines, and it is the scientific communities obligation to provide this data. The idea and vision for IHI at the UofA is innovative, forward thinking, and necessary. On a personal level, it will provide the necessary collaborative networks and access to funding sources that are required to take our findings from bench to bedside.

Therefore, I am most pleased that this initiative is taking place, and am honored that you have asked my participation. Best of luck. Lets continue this dialogue to move forward, and as I have indicated to you in the past, I am more than happy to help in any way I can.

Respectfully,



Jerome Y. Yager

1. Lachmann PJ. The penumbra of thalidomide, the litigation culture and the licensing of pharmaceuticals. QJM 2012;105:1179-89.
2. Hall HG, Griffiths DL, McKenna LG. The use of complementary and alternative medicine by pregnant women: a literature review. Midwifery 2011;27:817-24.

Dr. Jerome Y. Yager, MD, Director of Research
Department of Pediatrics

Faculty of Medicine and Dentistry ✦ University of Alberta
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St Stephen's College

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2 September 2014

Dr Carl Amrhein
Provost and Vice-President (Academic)
The University of Alberta

BY EMAIL

Dear Dr Amrhein:

Re: Letter of Support Integrative Health Institute

It is a great pleasure for me to write in support of the development of the new Integrative Health Institute here at the University of Alberta. As you know, St Stephen's College has for many years been keenly interested in an holistic and integrative understanding of what it means to be human; and the Faculty and Senate of the College look forward to participating in this new interdisciplinary venture!

With all good wishes to you, as ever,

Earle Sharam DPhil
Principal and Dean

04/09/2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar, Centennial Professor
Dept of Pediatrics, Faculty of Medicine & Dentistry
University of Alberta

Dear Dr. Vohra

Re: Letter of support from the Neuroscience and Mental Health Institute (NMHI) for the proposal for an Integrative Health Institute (IHI).

I have read your proposal for formation of an IHI with great interest and can see several areas where there could be productive collaborations between our two institutes relevant to patient health. These include using: 1. molecular biological, metabolomic, genomic, proteomic, physiological, neurochemical and/or imaging techniques available in the NMHI to conduct studies in cells, animal models and/or clinical samples to investigate possible molecular/cellular and/or system-related mechanisms of action of complementary and alternative health care (CAHC); 2. analytical chemistry, enzyme studies and pharmacokinetics to better understand the distribution and fate of natural products, nutraceuticals and their various constituents in the body; and 3. genomic and metabolomic/neurochemical protocols to study the effects of natural products, nutraceuticals and techniques such as mindfulness and music therapy on body fluid levels in patients of biomarkers such as neurosteroids, amino acids, lipids, biogenic amines, cytokines and various small molecules related to neuronal, glial and mitochondrial function. These biomarkers may be useful in predicting the effectiveness of CAHC (alone and combined with classical therapy) as well as also complementing studies mentioned in point 1 above to increase our knowledge of the potential mechanisms of CAHC. I understand that there is also a major concern about adverse interactions between natural products, nutraceuticals and prescription drugs or other drugs patients may be taking since many people self-medicate with natural products and nutraceuticals without informing their physician or other health care professionals that they are doing so. For example, I understand that St. John's wort, which is readily available without prescription, induces several cytochrome P-450 (CYP) enzymes involved in metabolism of a wide variety of commonly prescribed drugs. We have several members of the NMHI who have considerable experience in drug metabolism and drug-drug interactions who could interact very effectively with members of the IHI to make major research advances in this area and work with your IHI members to make the general public as well as health care professionals more aware of these potential interactions.

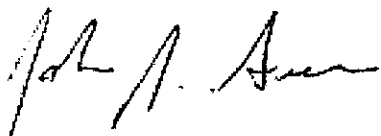
It is obvious from looking at your proposed list of members that some are also members of the NMHI and that others have areas of expertise that complement those of our members. A big advantage of forming such institutes is that we get researchers out of their silos and make them aware of the enormous untapped opportunities for collaboration that exist at the University of Alberta. Through collaboration, the two institutes should be able to make world-class contributions in the areas mentioned in the previous paragraphs and in enhancing the advancement of personalized medicine (not only through more reliable prediction of the responses to CAHC but by making the use of CAHC safer for patients

and increasing our knowledge of how CAHC and classical pharmacotherapy may be used together to maximum advantage).

Given the interests of the members of the each of the institutes, I think we could also benefit greatly from some joint educational seminars, and joint workshops on knowledge translation and dissemination. As you probably know, the NMHI has a comprehensive undergraduate and graduate training program, and we should consider in the future having lectures from IHI members in some of our courses; there are also the exciting possibilities of collaboration on team grants and of joint supervision of research trainees.

In summary, I can see great opportunities for collaboration between the two Institutes that will improve patient care (and should ultimately save the health care system substantial amounts of money), enhance translational research from the molecular through to the clinical level and provide excellent training programs for the next generation of health researchers. The proposal for an IHI has my enthusiastic support.

Yours sincerely,



John J. Greer, PhD
Director, Neuroscience and Mental Health Institute
Professor of Physiology, AIHS Scientist, University of Alberta
Edmonton, AB, T6G 2E1



Dear Sunita,

I want to express my great interest to support your application for the Integrative Health Institute (IHI) at the University of Alberta. I am the director of the Drug Development and Innovation Centre (DDIC) at the University of Alberta. You and I have a long history in working together in developing new therapeutic herbal remedies through the *Rodiola Rosea* project. The establishment of the DDIC was possible due to our collaboration at the time.

As you know the Drug Development and Innovation Center at the University of Alberta is specialized in the development of novel dosage forms and therapeutics. Our goal is to bridge the gap between preclinical and clinical research by providing clinical trial materials. Finding mechanisms to fill this gap, is very critical for the progress innovative new therapies and Natural Health Products. The DDIC's mission is to translate research and innovation into tangible benefits for the Alberta researchers. Which is important for the mission of the proposed Integrative Health Institute. The center is unique in its scope and unparalleled in its capabilities. Focusing on natural and synthetic product development, performance testing and regulatory affairs the center is an important ally for researchers and local companies in their bid to commercialize innovative products and new therapeutic remedies. Our expertise on the development of clinical trial materials or market-ready products will support translation of knowledge of the Integrative Health Institute research activities.

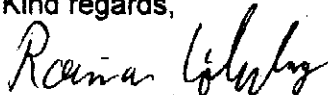
Since its establishment in 2009 DDIC has successfully supplied GLP/GMP pharmaceuticals and Natural Health Products for several projects or clinical trials. DDIC has also created pre-formulations for animal toxicity testing and provided startup companies with prototype dosage forms and samples, which are used for commercialization.

We will be happy to support translational projects of the proposed Integrative Health Institute which fit exactly within DDIC's scope and mission. We have a clean room facility and a quality control lab equipped with modern state-of-the art pharmaceutical testing equipment and analytical capabilities. To the best of our knowledge, DDIC is the only Canadian University based center, which holds a Health Canada Site License for production, packaging and labeling of GMP conform products.

We are looking forward to work with you and the new Integrative Health Institute in the near future.

I wish you success in establishing the Integrative Health Institute and look forward to working with you on exciting projects.

Kind regards,


Raimar Loebenberg, PhD
Professor and Director DDIC



September 3, 2014

Dear Dr. Vohra,

The Community-University Partnership for the Study of Children, Youth, and Families (CUP) is pleased to provide this letter of support for the proposed Integrative Health Institute (IHI). CUP was formed to promote reciprocal, sustained, and mutually beneficial interactions among researchers, practitioners, and policymakers in research, education, and knowledge mobilization. The Integrative Health Institute offers us the opportunity to link with other stakeholders who value transformative and multidisciplinary approaches to research and practice.

September 3, 2014

As you know, CUP is a community-driven coalition, and works to help better the lives of children, youth, and families in our society. This includes families of different cultures and backgrounds, and those often struggling in stressful and complex life situations. These individuals and families, along with practitioners, would love to know cost effective, proven ways to better their lives, or know which of the options available have evidence, are safe, and will work for them. The IHI can help meet these needs by providing community services such as mindfulness meditation groups, the development of a research base for low-cost effective stress reduction programs, or providing knowledge translation so they are aware of evidence behind therapies and practices they are considering.

I understand that Dr. Maria Mayan, Assistant Director of Women and Children's Health in CUP has collaborated with you on integrative medicine and education projects. We have been impressed with how you navigated diverse approaches to health to produce evidence-based strategies in your field – incorporating practices such as acupuncture, massage and reiki into pediatric patient care, and developing innovative education programs to teach health sciences students about complementary and alternative medicine.

We look forward to continuing and expanding on these collaboration opportunities with the Integrative Health Institute with research partnerships and other mutually-beneficial ventures.

Sincerely,

Laurie Schnirer, PhD
Interim Director and Assistant Professor
Community-University Partnership for the Study of Children, Youth, and Families



September 5, 2014

Dr. Sunita Vohra, MD, MSc, FRCPC, FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

Dear Dr. Vohra,

We are expressing our support for the proposed Integrative Health Institute at the University of Alberta, which will be under your capable leadership.

As the current VP Quality & Chief Medical Officer, and VP Research, Innovation & Analytics for Alberta Health Services, and former leadership positions in the Faculty of Medicine & Dentistry (Interim Dean/FoMD and past Chair of Psychiatry respectively), we recognize that there is need for reliable, knowledgeable, focused effort in the field of integrative medicine. There is much that we do not know about many integrative practices, such as herbal medicines or emerging complementary and alternative practices. Are they safe for patients, are they effective, how do they work, why do people use them? There are so many unknown questions. Evidence is emerging that certain practices, such as mindfulness meditation and reiki, can be adjuncts to healthcare provider burn out. How can we harness this information to help our patients, and our teams? Having a strong team with a depth of experience in various research methods, education, clinical practice, and knowledge translation with clear vision and leadership will help to assimilate this diverse field quickly with high quality – and provide a reliable source of information.

We know that you yourself are an international leader in the field of Integrative Health for many reasons, such as your evidence-based approach, a pursuit of the truth and interdisciplinary collaboration to incorporate all angles as opposed to taking sides. We feel that the Integrative Health Institute would fill an important gap in healthcare between the "conventional" and "complementary or traditional" medicines, and truly allow a neutral evaluation of what is best for the patient, the clinician, and system. We trust your leadership, and the support of your equally reputable and solid team members (such as David Zakus and Earle Waugh), and ability to bridge these worlds.

An institute like the IHI is what we have come to expect from the University of Alberta, which is at the leading edge of contributions to healthcare. Cutting edge and innovative, this institute has the potential to become an international powerhouse, reinforcing the University of Alberta's visionary reputation in health.

We look forward to the inception of the Integrative Health Institute, and in future collaborations and knowledge sharing with Alberta Health Services.

Sincerely,


Dr. Verna Yiu
VP Quality & Chief Medical Officer
Alberta Health Services


Dr. Kathryn Todd
VP Research, Innovation & Analytics
Alberta Health Services

August 22, 2014

Dr. Sunita Vohra, Professor
Department of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta
8B19, 11111 Jasper Avenue
Edmonton, AB T5K 0L4

Dear Dr. Vohra:

Proposal for the Creation of an Integrative Health Institute

I write on behalf of the College of Physicians & Surgeons of Alberta in support of the draft proposal for an integrative health institute at the University of Alberta.

Physicians and regulators are increasingly challenged by the introduction new products (e.g., natural health products; vitamins; nutraceuticals) and ideas (e.g., Ayurveda medicine) that are not part of orthodox medical practice and not based on a body of scientific evidence. These ideas, approaches and products are promoted and promulgated in many ways -- from the public, from other health practitioners, from the media and from manufacturers -- and physicians need knowledge and tools in order to understand, evaluate and, where indicated, incorporate these ideas, products and practices into their clinical armamentarium. To that end, scientifically rigorous research and education are requirements.

The mission, vision and values, as well as the plans for research and education, as outlined in the proposal have great potential to meet these needs. The College, as the regulator of the practice of medicine, also needs policy guidance and clinical evidence in order to be able to provide some advice and direction to its members. I am, therefore, happy to support the creation of an integrative health institute at the University of Alberta.

Sincerely,



T.W. Theman, MD, FRCSC
Registrar



Physiotherapy Alberta
College + Association

September 8, 2014

Dr. Sunita Vohra
Director, CARE Program
Director, PedCAM Network
AIHS Scholar
Clinical Professor
Department of Pediatrics
Faculty of Medicine and Dentistry
University of Alberta

Dear Dr. Vohra:

As Registrar of the Physiotherapy Alberta – College + Association, I would like to offer my support for the development and start up of an Integrative Health Institute (IHI) at the University of Alberta under your strong leadership.

I have had the pleasure of working with you and your team recently, as you are the Principal Investigator of a large interdisciplinary study called SafetyNET. This multi-million dollar study is an academic and professional partnership dedicated to the safety of spinal manipulation therapy. Spinal manipulation therapy is used by many Canadians regularly, and therefore good quality research should be done to promote a culture of spinal manipulation therapy across professions. From academia, this project is spanning qualitative research, basic research, clinical research, and law / ethics / public perception research. I am pleased at how it is moving along and look forward to seeing the final results in the coming years. This project has the potential to change the perception of spinal manipulation therapy forever, by promoting a culture of patient safety in our profession.

Under the IHI, you will be able to embark on many more important interdisciplinary projects such as SafetyNET, making strong impact to the health and safety of all Canadians.

Yours truly,

Dianne Millette, Registrar
Physiotherapy Alberta - College + Association



UNIVERSITY OF TORONTO
LESLIE DAN FACULTY OF PHARMACY

OFFICE OF THE DEAN

18 August 2014

RE: Support for Proposed Integrative Health Institute at the University of Alberta

I am very pleased to write this letter supporting the proposed Integrative Health Institute at the University of Alberta. Given the high (and increasing) use of the many forms of complementary and alternative health care by Canadians (and patients around the world), there is a real need for University-based initiatives focused on exploring the safety, efficacy and health service opportunities associated with integrating these products and services with conventional health care options. Despite the widespread use, many questions remain and much research is needed to inform clinical practice and health policy.

I co-lead a similar (and complementary) initiative with the Dean of Medicine (Professor Catharine Whiteside) at the University of Toronto – our Centre for Integrative Medicine. Our Centre will have its public launch this fall. I am very excited to hear of this proposed institute at the University of Alberta. I see a common vision shared between the two initiatives - a focus on excellence in scholarship and interdisciplinary education to inform evidence-based patient centred integrative care. I am excited by the possibilities that may be created by the collaboration of the U of A Institute and our Centre to in creating a truly national network leading Canada's scholarship and education in this important emerging field.

I wish you the very best in the development of the proposed Integrative Health Institute at the University of Alberta and look forward to many future collaborations in this area.

Sincerely,

Heather Boon BScPhm, PhD

Professor and Dean

August 21, 2014

Sunita Vohra, MD, MSc, FRCPC, FCAHS
University of Alberta
8B19-11111 Jasper Ave
Edmonton Continuing Care Centre
Edmonton, Alberta
Canada
T5K 0L4

RE: Integrative Health Institute


Dear Dr. Vohra,

I am delighted to write this letter in support of an Integrative Health Institute at the University of Alberta. In the past ten years of knowing you, I have found you to be both a visionary leader and a thoughtful and accomplished researcher and this proposal is further evidence of this.

Our current health care systems in both Canada and the United States are fragmented, short sighted and not oriented toward health promotion or disease prevention. A shift in the orientation of our systems needs to occur in order for a health population to become a reality. Integrative Medicine and Integrative Health brings individuals into the center of their care over their lifespan. It attempts to individualize a person's health risks and strengths, taking into account our genetic makeup and susceptibility to chronic diseases, our reactions to environmental conditions and our use of health services. Additionally, it tries to take into account a full range of factors affecting health – physical, psychological, social and spiritual.

There is an increasing awareness of the benefits of using integrative medicine to treat patients. Patients are using integrative services and therapies more frequently to help them cope with or recover from a variety of medical conditions, including chronic diseases, such as obesity, diabetes, arthritis, low back pain and cancer. An integrative health practitioner looks at a wide variety of treatments to help find answers for their patients. A key to this way of practicing medicine is basing decisions and treatments

on a solid evidence base. The evidence will help indicate what works for what kinds of patients in what context, as well as how these therapies work. When you add in the recent push for comparative-effectiveness research and patient-centered outcomes research, there are many opportunities for integrative medicine to enhance clinical practice with research that is relevant in everyday patient care.

In 1991, I established, and still currently direct, the Center for Integrative Medicine at the University of Maryland, Baltimore – the first of its kind in an academic health setting. For 15 years, we were a National Institutes of Health (NIH) Center for Excellence in Research, also served for many years as an NIH International Center for Traditional Chinese Medicine Research and we have received over \$37 million in peer-reviewed, government funded research grants to study integrative medicine. We are also the coordinating center for the Complementary Medicine Field of the Cochrane Collaboration, an international organization that systematically reviews and summarizes worldwide scientific literature and research. In addition, the Center for Integrative Medicine currently has over 550 scientific publications and abstracts in a wide variety of peer-reviewed medical journals.

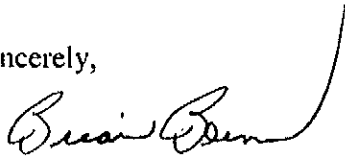
A particular strength of our Center is our collaborative network. We are an interdisciplinary research center within the University of Maryland School of Medicine and this structure has facilitated our collaborations with the Schools of Nursing, Social Work, Dentistry, Pharmacy, and Law, as well as with many of the departments within the School of Medicine (including Rheumatology, Epidemiology and Public Health, Psychiatry and the Institute of Genomic Sciences). We also work closely with researchers at Johns Hopkins, Harvard University, Duke University, the University of California at San Francisco and many others throughout the United States. Our collaborators span the globe and include Canada, Germany, Switzerland, Hong Kong, China, Korea, Bulgaria, United Kingdom and Australia – over 100 in all. We were one of the first six institutions to establish the Consortium of Academic Health Centers for Integrative Medicine and I was the first Chairperson. There are now 57 such institutions, including the University of Alberta, and we jointly aim to advance the principles and practices of integrative healthcare within academic medical centers.

I am extremely supportive of the establishment of the Integrative Health Institute (IHI) at the University of Alberta. After reading through the detailed plan you provided, I strongly encourage the University to approve the creation of this Institute. You and your IHI team will be in a prime position to bring together a critical mass of scientists, educators and clinicians, both within the University of Alberta and

with outside institutions, enabling great strides in advancing the scholarship and knowledge base of Integrative Health. This in turn will help inform both policy and clinical practice. I look forward to working with you in the future.

If you or the University have any additional questions, please do not hesitate to contact me at bberman@som.umaryland.edu.

Sincerely,

A handwritten signature in black ink that reads "Brian Berman". The signature is written in a cursive style with a long, sweeping flourish at the end.

Brian Berman, MD
University of Maryland School of Medicine
Professor, Family & Community Medicine
Director, Center for Integrative Medicine

Tromsø 08.09.2014

To whom it may concern,

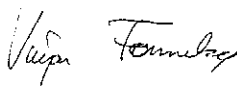
A high proportion of Western populations access complementary, alternative and traditional medicine on a regular basis. There is thereby an ongoing need for appropriate research to ensure that this sector delivers safe and effective treatments. In some societies these treatments are delivered outside the conventional health care system, while in others these services are offered as integrative medicine within health care. Research in this area can only be successful if there is a critical mass in complementing competencies and a productive relationship to other research areas within the field of medicine and allied health care sciences.

The National Research Center in Complementary and Alternative Medicine in Norway is situated within the Faculty of Health Sciences at the University of Tromsø - The Arctic University of Norway. The research center is funded by the Norwegian government through the Department of Health and Care Services, and is responsible for both research and information. In addition to the basic funding from the government, NAFKAM has achieved substantial funding from a number of other sources, for example The Research Council of Norway, The Norwegian Osteoporosis Society, The Norwegian Cancer Society, The Regional Health Authority of Northern Norway, and The 7th Framework program in the European Union. NAFKAM is considered one of the leading research centers in the area of CAM in the Western world, is designated as a WHO Collaborating Centre in Traditional Medicine, and has been used by the Korean government to evaluate the Korean Institute of Oriental Medicine. NAFKAM is also responsible for implementing the Norwegian responsibilities of the government-to-government collaborative agreement between the People's Republic of China and Norway regarding Chinese medicine. NAFKAM's director is the president-elect of the International Society of Complementary Medicine Research, and we also have the treasurer of the same organization.

The proposed Integrative Health Institute at the University of Alberta will, if established, be an important partner for NAFKAM in international research and information initiatives. My own long-standing contact with professor Sunita Vohra, and my visit to her Edmonton research group, gives me a high level of confidence that the institute will be able to generate high-quality research that can contribute to the international knowledge base in this field.

I look forward to a productive relationship in the years to come.

Sincerely,



Vinjar Fønnebo

Professor of Preventive Medicine
Director, National Research Center in Complementary and Alternative Medicine (NAFKAM)
University of Tromsø - The Arctic University of Norway
President-elect, International Society of Complementary Medicine Research

Prof Sunita Vohra
Director, CARE Program
Director, PedCAM Network
Department of Pediatrics, Faculty of Medicine & Dentistry
University of Alberta
8B19-11111 Jasper Ave
Edmonton Continuing Care Centre
Edmonton, Alberta
Canada T5K 0L4

Dear Sunita,

As director of the Australian National Institute of Complementary Medicine (NICM) at the University of Western Sydney I am pleased to provide my enthusiastic support for an Integrative Health Institute at the University of Alberta.

The National Institute of Complementary Medicine was established to provide leadership and support for strategically directed research into complementary medicine and translation of evidence into clinical practice and relevant policy to benefit the health of all Australians. NICM's programs encompass all aspects of the research agenda for complementary medicine, from pure basic research in the laboratory; to clinical trials tailored to address the challenges of testing the efficacy of medicines already in use; to the translation of research evidence into clinical practice and community use. With more than two in three consumers using complementary medicine regularly this guidance to the development of policy and evidence is a critical contribution to the public health landscape. The proposal before the University of Alberta will have equally important impact and serves to address an equally broad research and practice agenda.

NICM has established state-of-the-art laboratories for the investigation of the chemistry and pharmacology of herbal medicines. The laboratories are also supported by substantial university resources, such as outstanding nuclear magnetic resonance and confocal laser microscopy. NICM's Herbal Analysis Laboratory is one of only two university laboratories licensed by the Australian Therapeutic Goods Administration to provide certificates of analysis for herbal products in line with regulatory requirements. Chemical analysis of herbal products for quality assurance is an important extension to our clinical studies program and provides a wealth of opportunities for innovation in medicinal product development. Our laboratory research also provides a critical step in understanding how herbal medicines work in the body.

During its first three years of operation NICM established three Collaborative Centres with additional industry funding, funded several integrative healthcare pilot studies, demonstrated the cost effectiveness of a range of complementary medicine interventions, and has provided a vital link between researchers, practitioners, industry and government. The Collaborative Centres leveraged over \$6m in funding, supervised 17 PhD students and 21 postdoctoral research fellows and produced over 170 peer reviewed publications and in excess of 1800 citations. We have attracted State and Commonwealth funding and were the only Australian complementary medicine research centre to be ranked under the Commonwealth's *Excellence in Research for Australia* (ERA) scheme, receiving a top ranking of '5', signalling research well above world standard based predominantly on publications, citations and policy impact. NICM's Joint Collaborative R&D Centre with Xiyuan Hospital of the China Academy of Chinese Medical Sciences has been recognised by the Chinese Ministry of Science and Technology as one of its 38 key international collaborations across all scientific disciplines in

China's current 12th Five Year Plan. All these successes have taken considerable time to build, but clearly lie before you with the right investment and support from the University.

The Institute continues to identify and refine national research priorities, contribute to the development of clinical practice guidelines and work alongside government, consumers, industry and other stakeholders to strengthen relevant policy. It has established a reputation as an independent, authoritative voice for the complementary medicine sector. More recently NICM is focused on guiding sector reform, including creating better incentives to invest in research and improve integration of evidence-based interventions into mainstream practice.

I have read through your proposal for the establishment of the Integrative Health Institute at the University of Alberta and support this strongly. Its broad focus on developing preclinical and clinical evidence for translation into practice and policy is correct. The field needs a full bench to bedside approach for research to be effective. I hope this background to NICM provides some context to the potential for the University of Alberta Integrative Health Institute under your strong leadership and guidance.

Personally, I have been a clinician and researcher in Chinese medicine for over 25 years, and have worked closely with our Government regulator (including chairing the Advisory Committee for Complementary Medicines), served on our National Medicines Policy Committee (2008-11), serve with the Singapore Health Sciences Authority Expert Panel for Herbal Medicines and have served frequently as a consultant in traditional medicine to the World Health Organisation. Our report on the practice of traditional Chinese medicine in Australia led to national regulation of Chinese medicine practitioners in Australia in 2012. My experience in these contexts gives me confidence in the relevance and timeliness of your proposed Integrative Health Institute.

We have forged a broad network of links with national and international organizations within government and industry, including major collaborative research projects with key institutions in China. We would enjoy a similar collaboration with the proposed Integrative Health Institute in several areas you have identified.

On behalf of the National Institute of Complementary Medicine at the University of Western Sydney, we offer our strongest support for the University of Alberta's Integrative Health Institute and we look forward to future collaboration with you and your colleagues.

Sincerely,



Professor Alan Bensoussan
Director

8th September 2014

Integrative Health Institute Letters of Support

UAlberta Linkages (letters of support appended):

Office of the President (letter of support from Dr. Martin Ferguson-Pell, Senior Advisor to the President)

Faculty of Agricultural, Life and Environmental Sciences (letter of support from Dean Blade)

Faculty of Arts (letter of support from Dean Cormack)

Faculty of Education (letter of support from Dean Snart)

Faculty of Extension (letter of support from Dean Connor)

Faculty of Native Studies (letter of support from Dean Hokowhitu)

Faculty of Nursing (letter of support from Dean Molzahn)

Faculty of Pharmacy and Pharmaceutical Sciences (letter of support from Dean Kehrer)

Public Health, School of (letter of support from Dean Young)

Faculty of Rehabilitation Medicine (letter of support, Dean Haennel)

St. Stephen's College (letter of support from Dean Sharam)

Faculty of Medicine and Dentistry (see letters of support from):

TSI Neuroscience and Mental Health (letter of support from Dr. John Greer, Director)

Li Ka Shing Institute of Virology (letter of support from Dr. Lorne Tyrrell, Director)

Alberta Transplant Institute (letter of support from Dr. Lori West, Interim Director)

Alberta Research Centre for Health Evidence (letter of support from Dr. Lisa Hartling, Director)

Office of Global Health (letter of support from David Zakus)

Centre for Health and Culture in Family Medicine (letter of support from Earl Waugh, Director)

Arts & Humanities in Health and Medicine Program (letter of support from Pamela Brett-MacLean, Director)

Department of Pediatrics (letter of support from Dr. Yager, Director of Research)

Other UAlberta Institutes and Centres

Drug Development and Innovation Centre (letter of support from Dr. Raimar Loebenberg, Director)

Centre for Health Promotion Studies (letter of support from Jane Springett, Director)

Community-University Partnership (CUP) (letter of support from Dr. Laurie Schnirer, Director)

China Institute (letter of support from Dr. Gordon Houlden, Director)

External Linkages (letters of support appended):

Alberta Health Services (letter of support from Dr Verna Yiu, VP Quality and CMO, and Dr. Kathryn Todd, VP Research, Innovation, and Analytics)

Cancer Control, Alberta Health Services (letter from Dr. Paul Grundy, SMD/SPO Cancer Control)

College of Physicians and Surgeons of Alberta (letter of support from Dr. Theman, Registrar)

Alberta Innovates Bio Solution (letter from Cornelia Kreplin, Executive Director)

Physiotherapy Alberta (letter of support from Dianne Millette, Registrar)

Native Counseling Services of Alberta (letter of support from Dr. Patti LaBoucane-Benson, Director of research, training and communication)

Leslie Dan Faculty of Pharmacy, University of Toronto (letter of support from Dr. Heather Boon, Director and co-lead of Center for Integrative Medicine)

Center for Integrative Medicine, University of Maryland (USA) (letter of support from Dr. Brian Berman, Director)

National Research Center in Complementary and Alternative Medicine (NAFKAM, Norway) (letter of support from Dr. Vinjar Fonnebo, Director)

National Institute of Complementary Medicine, University of Western Sydney (Australia), (letter of support from Dr. Alan Benssouan, Director)

2-24 South Academic Building (SAB)
Edmonton, Alberta, Canada T6G 2G7
Tel: 780.492.3212
Fax: 780.492.9265
www.president.ualberta.ca

October 11, 2014

Dr Sunita Vohra
Director/CARE Program
Department of Pediatrics
3-508 Edmonton Clinic Health Academy
Edmonton, AB
Canada

Dear Sunita:

Integrative Health Institute

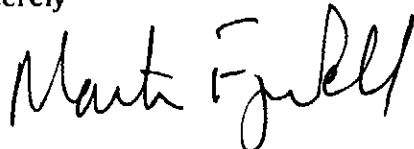
Thank you for outlining a proposal to establish an Integrative Health Institute at the University of Alberta. I would like to lend my support for the proposal. I have watched you and your colleagues develop this concept over a number of years and have been impressed by the academic quality of the membership and focus of the Institute as it has evolved. I remember well the challenges you and Greg Kawchuk had with securing funding from CIHR; despite the very high ranking you received. Lorne Babiuk's intervention not only ensured you received the funding you had successfully competed for, but also set the stage for establishing the Institute.

I know you have a strong commitment to scientific rigour in establishing evidence that informs patients about the effectiveness of integrative treatments for often neglected chronic conditions. Too often our lack of knowledge about underlying mechanisms results in conditions such as chronic pain, insomnia, mental health issues and obesity to be left untreated, often leaving patients shunned by healthcare providers who have few tools to help. This leaves millions of Canadians trying to cope with unremitting pain, economic decline and collapse of family and workplace relationships. Frequently, conditions associated with integrative medicine are associated with multiple morbidities creating a complex array of disconnected treatments and fragmented evidence for effectiveness. The treatments currently available carry with them little incentive for venture funding and require clinical studies that cannot be conducted in a way that creates the gold-plated evidence associated with the clinical trials used to evaluate new pharmacological treatments. I am sure part of your Institute's remit will be to develop robust, peer reviewed research paradigms to generate evidence for effectiveness that is compatible with these complex medical conditions.

An increasing number of highly respected academic and clinical institutions are bringing structure and evidence to support a wide array of so-called complementary interventions. Some specific examples include, University College London in conjunction with the Royal London Hospital (<https://www.uclh.nhs.uk/OurServices/ServiceA-Z/INTMED/Pages/Home.aspx>; New York Presbyterian in conjunction with Columbia University undertakes rigorous clinical research in this area (<http://nyp.org/services/complementary.html>); the prestigious NYU Langone Medical Center is the home to the National Center for Complementary and Alternative Medicine (<http://www.med.nyu.edu/content?ChunkIID=24042>); and the Weil Cornell Medical College has established a Center for Complementary and Integrative Medicine (<http://weill.cornell.edu/ccim/>). This list goes on and includes Princeton, Mayo Clinic, Cleveland Clinic etc.

I therefore, without reservation, applaud your proposal to create an institute at the University of Alberta and am confident that it will be of significant value to Albertans suffering from these neglected conditions, will provide evidence to guide effective care in the future and raise in the consciousness of our healthcare trainees to the importance of holistic care. Wishing you every success going forward and trust you will let me know if there is any way I can assist you and your team.

Sincerely



Martin Ferguson-Pell, PhD.
Senior Advisor to the President

cc Lorne Babiuk, Vice-President (Research)
Carl Amrhein Provost and Vice-President (Academic)

6-33 Humanities Centre
Edmonton, Alberta, Canada T6G 2E5
Tel: 780.492.ARTS
Fax: 780.492.7251
www.arts.ualberta.ca

September 12, 2014

Dr. David Zakus
Director of Global Health
Division of Community Engagement
2-115 Edmonton Clinic Health Academy
University of Alberta

Dear Professor Zakus,

The Faculty of Arts is pleased to support the proposed Integrative Health Institute (IHI) at the University of Alberta.

The Integrative Health Institute's vision of 'optimal health through evidence-based patient-centered integrative care' lends itself well to facilitating research, teaching and outreach activities throughout the Faculty of Arts. Several of our faculty members are already active at the intersections of health and Arts, for instance, Michael Frishkopf (medical ethnomusicology), Patricia Tao (piano performance and health), and Neil Dalal (Religious studies), all of whom are participating in the IHI initiative. The Faculty of Arts has researchers and teachers in medical anthropology and sociology, and supports projects and programs in the Health Humanities with active involvement of faculty in our Department of Art and Design, as witnessed by recent "Visualizing Health Humanities" exhibitions in 2012 and 2013. A number of our faculty members are involved in the Centre for Health and Culture, based in Family Medicine, and directed by Professor of Religious Studies Emeritus Earle Waugh, where cultural issues in health delivery are central.

I believe that the IHI has the potential to stimulate important collaborations, research and teaching across the University and that it will draw significant interest from our departments and faculty members, who will contribute essential knowledge and expertise to this unifying campus-wide project.

Sincerely,



Lesley Carmack
Dean, Faculty of Arts
Professor of History
6-33 Humanities Centre
University of Alberta
Edmonton, AB T6G 2E5

845 Education Centre South
Edmonton, Alberta, Canada T6G 2G5
Tel: 780.492.3751
Fax: 780.492.0236
www.education.ualberta.ca

September 9, 2014

Dr. Carl Amrhein
Provost and Vice President (Academic)
2-40 SAB
University of Alberta
Edmonton, AB T6G 2G7

Dear Dr. Amrhein,

Re: Proposal for an Integrative Health Centre at the University of Alberta

I am pleased to offer support for the proposal for an Integrative Health Centre on our campus that would facilitate and support collaborative initiatives with researchers from many Faculties. Such a hub for scholars working in related areas would no doubt act as a catalyst and 'clearing house' and as such would enrich and expand our scholarship in several areas.

The overall concept of integrating non-western health knowledges into initiatives related to global health is a very comfortable one for the Faculty of Education. We would see many contributions to such an initiative that could come from individual scholars in areas such as global social justice and epistemic pluralism, educational policy and higher education governance, transdisciplinary knowledge and ethical internationalization, and Indigenous knowledges and education (historical, contemporary and global perspectives). There would also be much scope for collaborative scholarship in support of practice and policy based on the innovative work of our scholars and students within the Centre for Global Citizenship Education and Research.

Thank you for the opportunity to provide input; this is an exciting initiative with much positive potential.

Sincerely,

Fern Snart, Dean

September 12, 2014

Professor Sunita Vohra
Director, CARE Program
Department of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

Dear Professor Vohra,

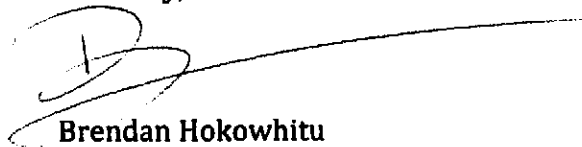
I am writing to you in regard to the Integrative Health Institute (IHI) Proposal that you recently sent me. I have reviewed the proposal and sent it to the most relevant faculty within the Faculty of Native Studies (FNS), including my Associate Deans. There is overwhelming support for the proposal.

Feedback I have received from FNS faculty suggest that the proposal's three priority focus areas on natural health products/functional foods, mind-body therapies, and traditional and Indigenous health practices anticipate an important epistemological shift within the academy more broadly and the University of Alberta specifically towards conceptualising health holistically, beyond disciplinary limits and not merely as the absence of disease.

The holistic and interdisciplinary focus of the proposed IHI very much aligns with my own Faculty's goal towards meaningful collaborative pedagogical and scholarly activities that look towards creative ways of producing knowledge across boundaries, while recognising the significance of 'local epistemological knowledges' often discounted by the Western academy.

I would like to reiterate my Faculty's enthusiasm for the IHI Proposal and look forward to working collaboratively with you on this project in the near future.

Sincerely,



Brendan Hokowhitu
Dean and Professor

September 11, 2014

Dr. Sunita Vohra
3-508 Edmonton Clinic Health Academy
Edmonton, AB

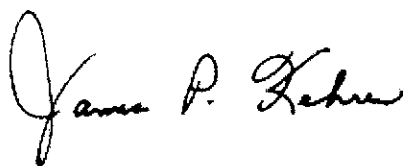
Dear Dr. Vohra:

I am pleased to provide this letter indicating the support of the Faculty of Pharmacy and Pharmaceutical Sciences for the creation of a new University of Alberta academic institute, the Integrative Health Institute (IHI). We understand that the purpose of IHI is to provide the structural organization to co-ordinate and enhance the work of researchers across the university campus that have a focus on patient-centered integrative care activities.

In the Faculty of Pharmacy & Pharmaceutical Sciences, there are nine individuals who have expressed an interest in participating in the IHI. Their research interests include natural and alternative health products, drug delivery, cardiovascular pharmacology, computer modeling and pharmaceutical care relating to menopause and aging.

I believe that the IHI structure will enable our researchers to better collaborate with others thereby facilitating the discovery, translation and dissemination of new knowledge in the broadly defined area of integrative health. Overall, this is a very timely initiative that will position the UofA to be far more competitive on the national scene. I am, therefore, pleased to provide my support.

Sincerely,



James P. Kehrer, Ph.D.
Professor and Dean

Kue Young, CM, MD, FRCPC, DPhil, FCAHS
Professor and Dean

3-300 Edmonton Clinic Health Academy
11405 - 87 Ave
Edmonton, Alberta, Canada T6G 1C9
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kue.young@ualberta.ca
www.publichealth.ualberta.ca

Sept 13, 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

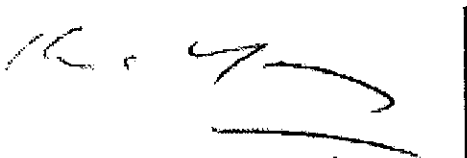
Re; Integrative Health Institute

Dear Dr. Vohra:

I am delighted at your taking the initiative to develop an interdisciplinary and interfaculty Integrative Health Institute at the University of Alberta. I believe this institute will advance considerably research into the cross-cultural dimensions of health care, concepts of health and well-being, and complementary and alternative medicine. I understand there are already several faculty members in our School who have indicated their interest in participating in the work of the proposed Institute.

My best wishes to you in securing University approval for this proposal and sustainable financial support.

Sincerely,



Kue Young, CM, MD, FRCPC, DPhil, FCAHS
Professor and Dean



September 15, 2014

Dr. Sunita Vohra
Associate Professor
Department of Pediatrics
Faculty of Medicine and Dentistry
University of Alberta

Dear Dr. Vohra:

Re: Integrative Health Institute

Thank you for providing me the opportunity to read the proposal for the Integrative Health Institute at the University of Alberta. I am aware of your long interest in complementary and alternative health care. I am also aware that many patients access complementary and alternative health care as well as traditional medicine. I believe there is a significant need to carefully evaluate the evidence for many complementary and alternative health care practices in order to determine and produce evidence that these alternative and complementary medicine practices are, in fact, beneficial. Obviously, there are some parts of traditional medicine that also require better evidence for their benefit as well. It will be a significant challenge to do the research and produce the evidence of benefit for many of the forms of alternative and complementary medicine that you have outlined in your proposal.

Within the Li Ka Shing Institute of Virology, we have studied some natural products (antioxidants) and their effect on the rate of development of fibrosis in patients with hepatitis. We also have a collaboration with the Helmholtz Institute, in which natural products are evaluated as potential antiviral agents. This work is being carried out primarily by Dr. Luis Schang.

I will be willing to serve on the Advisory Board for your Institute. My primary interests would be in research and developing evidence for the benefit of different forms of alternative and complementary therapy.

Sincerely,

A handwritten signature in cursive script that reads "D Lorne Tyrrell".

D. Lorne Tyrrell, MD, PhD, FRCP
Director
Li Ka Shing Institute of Virology

z:\admin.tyrrell\integrative health institute.vohra\letter of support.september 2014.docx



13 September 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
Dept. of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta
8B19-11111 Jasper Ave
Edmonton, Alberta, Canada T5K 0L4

Dear Sunita,

As Interim Director of the Alberta Transplant Institute (ATI) and Director of the Canadian National Transplant Research Program (CNTRP) I am happy to provide a letter of support for your submission to create the Integrative Health Institute at the University of Alberta. The ATI has brought together a talented interdisciplinary group of clinicians, researchers, educators and policy-makers entirely dedicated to advancing transplantation in Alberta and Canada. ATI is an exciting amalgamation that allows effective impact at all levels of the health-care system toward supporting clinical transplant care and moving cutting-edge research into improved patient outcomes. Our work incorporates at its centre strong patient engagement that informs our research efforts and clinical management. The CNTRP is a national initiative funded by CIHR and partners designed to increase organ and tissue donation in Canada and enhance the survival and quality of life of Canadians who receive transplants.

Individuals dealing with end-stage organ failure present complex medical challenges. For many patients, their physical condition is further complicated by the financial impact and increased social isolation they experience as their condition severely limits their ability to engage with their social and professional networks. The creation of the Integrative Health Institute will help further care in transplantation by providing evidence-based patient care, enhancing our ability to support our patients' emotional and social well-being while managing their pre- and post-transplant care. The ATI and CNTRP can play an important role in knowledge dissemination through links to our websites, participation in our lecture series and through direct communication with our researchers and partners. The core principles of patient-centered care shared by ATI, the CNTRP and IHI will provide additional synergies.

Lori J. West, MD, DPhil, FRCPC
Professor of Pediatrics, Surgery and Immunology
Canada Research Chair (Tier 1) in Cardiac Transplantation
Director, Canadian National Transplant Research Program
Interim Director and Research Director, Alberta Transplant Institute
University of Alberta
Edmonton, AB, Canada T6G 2E1
Phone: 780-492-3200 Fax: 780-492-8239
E-mail: ljwest@ualberta.ca



The ATI supports your application to establish the Integrative Health Institute at the University of Alberta. I look forward to working with you to advance and promote IHI. I wish you much luck with your application. Please do not hesitate to contact me should you have any questions.

Sincerely,

Lori J. West, MD, DPhil, FRCPC
Interim Director, Alberta Transplant Institute

Lori J. West, MD, DPhil, FRCPC
Professor of Pediatrics, Surgery and Immunology
Canada Research Chair (Tier 1) in Cardiac Transplantation
Director, Canadian National Transplant Research Program
Interim Director and Research Director, Alberta Transplant Institute
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Edmonton, Alberta, Canada T6G 1C9
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arche@ualberta.ca
<http://www.ualberta.ca/ARCHE/>

September 13, 2014

Dear Sunita,

I am writing to express my support for the proposed Integrative Health Institute at the University of Alberta (U of A), as Director of both the Alberta Research Center for Health Excellence (ARCHE) and the U of A Evidence-based Practice Center (EPC).

ARCHE produces high quality knowledge syntheses (such as systematic reviews) aimed at priority issues in health. We educate health providers and assist them in producing their own knowledge syntheses, and we support and foster the development of evidence-based practice. Our work has a solid reputation as being rigorous and trusted, and is in high demand. Our operating budget over the past 10 years has been \$1-2 million per year with the majority of funding in the form of peer-reviewed grants and contracts. We have published extensively with many papers in high impact journals such as *Annals of Internal Medicine* (impact factor, IF 16.104), *British Medical Journal* (IF 13.471), and *Pediatrics* (IF 5.391; highest pediatric IF). My contributions in the field of knowledge synthesis were recognized recently by being selected as Joint Lead of the Knowledge Translation Platform for the Alberta SPOR SUPPORT Unit.

Through the Evidence-based Practice Center, we produce knowledge syntheses to support the translation of evidence into practice. Our knowledge syntheses are completed in collaboration with clinical experts and other key stakeholders, and help inform guidelines for practice, insurance coverage decisions, quality measures, educational materials and tools, and research agendas. Our Center benefits from its strong interdisciplinary approach, and recognizes the value of working together across faculties and disciplines. It is a pleasure and an honor to be making real changes to how health is practiced in an evidence-based manner.

Integrative therapies, such as those known as Complementary and Alternative Medicine (CAM) practices, traditional health practices, or cultural health practices, are used by many Canadians. These therapies may seem "outside of the box" of conventional medicine, but are increasing in popularity and public opinion. Many CAM therapies are now being considered by policy makers as real possibilities within patient therapeutic management. The evidence base for some of these therapies is growing, and by synthesizing this information we can provide answers and guidance. We have developed systematic reviews on topics such as music therapy, mindfulness meditation, and melatonin for sleep disorders. This work has gained public recognition and has started changing perception of these therapies; however, there is much more to be explored in this field.

I would like to offer my strong support for the Integrative Health Institute. I believe this will centralize some very important work being done at our university in a very solid way, and I look forward to future collaborations with the IHI and both ARCHE and EPC so we truly can make the health of all Canadians better.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lisa Hartling', written in a cursive style.

Lisa Hartling
Associate Professor, Department of Pediatrics
Director, Alberta Research Center for Health Excellence (ARCHE)
Director, Evidence-based Practice Center



Office of Global Health
2-115 Edmonton Clinic Health Academy ECHA
Edmonton, AB T6G 1C9
Tel: 780.492.6348
Fax: 780.248.1163

September 14, 2014

To Whom It May Concern:

Dear Dr. Vohra,

As Director of the Office of Global Health and Professor in the Division of Preventive Medicine it is my great pleasure and honour to write this letter of support from the Office of Global Health, in the Faculty of Medicine and Dentistry (FoMD). Ever since my arrival at the University of Alberta in July, 2011 I have been working to promote the integration of health and medical disciplines with other forms of health and wellness including Traditional Chinese Medicine. I have networked among many of the disciplines of medicine and among various university faculties. I have noticed great interest by both faculty and students for this approach. This has included several winning funding applications for health and development in Ethiopia (\$6.1m), two Grand Challenges Canada applications and three on campus for the development of two inter-professional courses (in China and Zambia) and a music based public health program in Ghana, the organizing of various Global Health Rounds on the topic, two years of community lectures series focused on TCM and other types of health and wellness, including music and art therapy, traditional herbal medicinal plants of Alberta and indigenous health, which brought me also into close contact with our Aboriginal healer in the Department of Family Medicine.

I have always believed strongly in an integrative approach to health and fully understand the great potential at the University of Alberta for such an Institute in all areas of scholarship including research, education and community service. I know that we have garnered huge interest from around campus for this initiative and eagerly await its implementation. I fully support the implementation of a UAlberta Integrative Health Institute and will continue to be dedicated to its implementation.

Sincerely,

David Zakus, BSc MES MSc PhD
Director, Global Health
Division of Community Engagement
Professor, Division of Preventive Medicine
Department of Medicine
Faculty of Medicine & Dentistry, University of Alberta
zakus@ualberta.ca



Sept 12, 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry

Re: Integrative Health Institute

Dear Dr. Vohra

The *Centre for Health and Culture* in Family Medicine firmly and vigorously supports this initiative. There are several advantages to it. The Institute will bring focus and scientific rigor to the examination of a wide range of therapeutic systems that are widely embraced in many cultures around the world; it will allow us to address health issues of great consequence that seem intractable with the tools we currently have in place; it will serve as a catalyst to bring us into dialogue with procedures arising from different peoples in our own culture; and it will, in a formal and structured way, address the health lacuna so obviously present among our own Indigenous peoples.

At the academic level, there is constant and refined pressure for such an Institute. Family Medicine has long worked with diverse cultural groups to address their specific training issues—less than a year ago a delegation from Shanghai attended lectures and prompted discussion with our physicians on how to address many of the daily health problems they must face. Among the group were Traditional Chinese Medicine practitioners. It was striking how much we could learn from the kind of integrated practice in China. Other countries have inquired about how our Centre addresses these systems. This Institute could open our students to knowledge from very old and trusted knowledge in places like China and India, bringing about new synergies for the well-being of Canadians.

It is reassuring to examine the depth of this proposal...one that will link researchers from many faculties in the common purpose of applying high standards of investigation to the data, and

Department of Family Medicine - Research
Faculty of Medicine and Dentistry, University of Alberta

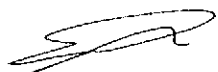
901 College Plaza · University of Alberta · Edmonton · Canada · T6G 2C8
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that will also apply that kind of analysis to educational and policy initiatives in health care. It comes at a time when Canadians apparently are willing to support significant innovation in health care, since they privately pour multi-millions into alternative options. This proposal puts the University at the forefront of this cultural shift.

Finally, it is especially noteworthy that this initiative will effectively open a dialogue with Canadian Aboriginal practitioners. Long operating below the radar, and with little public support, these people have significantly contributed to the well-being of special populations. Indeed there are many stories of their support of the early European pioneers to this country. With allopathic results being so apparently poor for Aboriginal peoples, it is now time to accept that positive health outcomes requires many perspectives. The Institute will assure that these voices are heard, examined and acted upon.

The CHC in Family Medicine believes this proposal is an ideal opportunity to open a new chapter in health knowledge in Alberta and Canada, bringing skills together for the betterment of our health culture.

Cordially

A handwritten signature in black ink, appearing to be a stylized name with a long horizontal stroke at the end.

Director, CHC, Family Medicine

15 September 2014

Dr. Carl Amrhein,
Provost and Vice-President (Academic)
2-40 South Academic Building (SAB)
University of Alberta
Edmonton, AB T6G 2G7
Canada

Dear Dr. Amrhein,

RE: Letter of Support for the Proposed University of Alberta “Integrative Health Institute”

The Arts & Humanities in Health & Medicine (AHHM) Program in the Faculty of Medicine & Dentistry at the University of Alberta offers explicit recognition that medicine and health should properly focus on the whole person. Recognizing that that clinical practice is both an art and a science, the AHHM program is concerned with the many relationships that exist between the arts, humanities, social sciences and medicine, including complementary and alternative health care, in particular those related to arts-based therapies and spirituality.

I am pleased to provide this letter of support for the Integrative Health Institute which has been proposed for the University of Alberta. As noted in the proposal that is being submitted, the Integrative Health Institute will promote excellence in scholarship and build capacity in this rapidly growing area by harnessing the local expertise of over 60 faculty members across the University of Alberta.

With respect to the field of arts and health, the past few decades have witnessed tremendous increasing interest in therapeutic uses of the arts in health and healing (encompassing narrative medicine, art and music therapy, and so on), in Canada and elsewhere. Innovative work and great enthusiasm on the part of diverse practitioners attest to the field's salience and impact. A recent review of the CIHR funding database revealed that from 2009-2012, more than 4 million dollars in funding was directed to projects using the arts in health research. In addition, there is increasing interest in the educational impact of the arts for learners, particularly for learners in the health sciences.

Likewise, there is increasing scholarly activity in the area of spirituality and health at the University of Alberta, including educational and patient-care research supported by funding opportunities that have recently emerged (e.g., Covenant Health's Faith, Spirituality and Health grants).

The Integrative Health Institute offers a wonderful opportunity for stimulating collaborative efforts of researchers in these areas and other related complementary and alternative health areas.

The AHHM program exists to initiate and contribute to activity and inquiry into the many intersections that exist between the arts and health, across the Faculty of Medicine & Dentistry, the University of Alberta, and elsewhere. I strongly support the proposal for an Integrative Health Institute. I look forward to building on the individual successes we have each achieved, by collaborating with others involved who are actively involved in this area, and furthering the reputation of the University of Alberta for its support of innovative, transformational scholarship that recognizes the changing landscape of health and healthcare in Canada.

I respectfully submit this letter of support and look forward to this proposal being supported by the review committee, and approved by the Provost, and Vice-President (Academic).

Sincerely,



Associate Professor, Department of Psychiatry, and
Director, Arts & Humanities in Health & Medicine Program (Undergraduate Medical Education),
1-128 Katz Group Centre
Faculty of Medicine & Dentistry,
University of Alberta
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September 12, 2014

Sunita Vohra
Department of Pediatrics, Faculty of Medicine and Dentistry
University of Alberta
8B19-11111 Jasper Avenue
Edmonton Continuing Care Centre
Edmonton, Alberta, Canada T5K 0L4

Dear Ms. Vohra:

As the Director of the Centre for Health Promotion Studies (CHPS) I am pleased to support the new proposed Integrative Health Institute. The Centre was established in 1996, with a directive to support interdisciplinary social science graduate education to provide practitioners of health promotion with the skills necessary to promote the health of communities and populations. It includes a group of researchers and collaborators from diverse disciplines and methodological methods, alongside the community, to explore the various ways in which health can be promoted from a socio-ecological perspective. The Centre endorses a high level of engaged scholarship with a particular interest in participatory approaches to health research, by working closely with a number of organizations and agencies, as well as community members at the local, national and international scale. The Centre prefers a collaborative approach to research and integrated knowledge translation, and its faculty and instructors are deeply committed to supporting the continuing education of health promotion practitioners.

I am pleased to support the new proposed Integrative Health Institute, as it aligns with our mandate to support an interdisciplinary and collaborative approach to health promotion. Integrative health is relevant to our Centre because its main themes incorporate a holistic approach to health, which complements conventional medicine and scientific research.

The Institute would provide a valuable channel for multi-disciplinary collaboration and knowledge sharing. The underlying goal of the proposed Integrative Health Institute would provide health practitioners from diverse disciplines with knowledge and approaches that would inform practice and policy in a comprehensive manner that correlates with the Centre for Health Promotion Studies. I strongly support the development of the Integrative Health Institute and look forward to our future collaboration.

Sincerely,

R Jane Springett

Jane Springett
Director and Professor

September 10, 2014

203 TELUS Centre, 87 Ave & 111 St
Edmonton, Alberta, Canada T6G 2R1
Tel: 780.492.1263
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www.china.ualberta.ca

To whom it may concern:

I am writing in support of the Integrative Health Institute initiative.

The China Institute at the University of Alberta is the only China-focused research institute in Canada. The CIUA's mission is to advance the studies of China at the University of Alberta, to enhance and support new teaching and research activities between Canada and China across disciplines, and to promote strong academic linkages between the University of Alberta and Chinese universities. The CIUA is involved in multi-disciplinary China initiatives across campus and in collaboration with various research organizations and the provincial and federal governments.

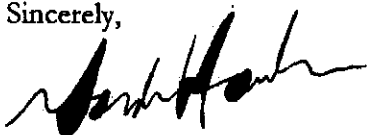
The China Institute has been supportive of Traditional Chinese Medicine (TCM) initiatives, on campus and in the wider community, as well as of collaborate health initiatives with Chinese partners. For example, in 2012, on behalf of the China Institute, I served as the moderator for the "Traditional Chinese Medicine Roundtable" which was chaired by the then federal Minister of Health Hon. Leona Aglukkaq. This discussion served to inform the federal government's approach to TCM. On campus, the CIUA has actively supported partnerships between the Faculty of Medicine and Dentistry and various Chinese universities.

TCM, as an important part of integrative health approach, has always, and continues to be, of great interest to the University of Alberta. To have an initiative that systematically supports and enhances evidence-based TCM research, teaching and learning would be invaluable not only to the University community but also to opening collaborative opportunities with Chinese universities and research institutions.

The China Institute greatly looks forward to collaborating with the Integrative Health Institute and its many partners, including the promotion and support of its China linkages and partnerships.

Please do not hesitate to contact me with any questions you may have. I anticipate the many great opportunities that this initiative will bring to the University of Alberta.

Sincerely,



Gordon Houlden
Director, China Institute
Professor, Political Science
Adjunct Professor, Alberta School of Business
University of Alberta
GH/my



September 9, 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta

Dear Dr.Vohra:

Re: Support for the Proposed Integrative Health Institute (IHI)

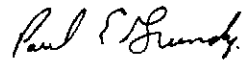
On behalf of CancerControl Alberta (CCA), I would like to offer strong support for the development of an Integrative Health Institute at the University of Alberta.

Cancer is a devastating, stressful, and potentially long term or fatal illness that increasing numbers of Albertans face. Many Albertan patients and families turn to alternative practices, both to try to find the "magic bullet" that might help cure their illness, or to try to find a better quality of life to minimize side effects or reduce their stress levels. However, the safety and compatibility with conventional treatment is largely unknown. By evaluating these practices in a safe, controlled, and methodologically valid way, we can ensure that our patients and families struggling with cancer diagnosis and treatment can be safe, and also receive the best, most effective care possible.

The proposed Integrative Health Institute brings together a number of researchers and leaders in the field of integrative medicine research under one roof, to allow them to work in a streamlined fashion to find the answers for us as quickly as possible. This work is absolutely essential, and very little is being done anywhere else. I am grateful that such a strong team is coming together here in Alberta to help our patients. It is ground-breaking, completely relevant, and it is my hope that the IHI will be able to ultimately improve the quality of life and outcomes of our patients.

CCA would be pleased to partner with the IHI after it has been established, to work together to ensure effective research for advancements in cancer prevention, treatment, and care.

Sincerely,

A handwritten signature in black ink that reads "Paul Grundy". The signature is written in a cursive style with a large initial 'P' and 'G'.

Paul Grundy, MD, FRCPC
Chief Program Officer and Senior Medical Director
CancerControl Alberta, Alberta Health Services

Native Counselling Services of Alberta

Dr. Sunita Vohra
Faculty of Medicine & Dentistry
University of Alberta
8B19-11111 Jasper Ave
Edmonton, Alberta
Canada
T5K 0L4

Dear Dt. Vohra;

I am pleased to offer this letter of support to demonstrate Native Counselling Services of Alberta's (NCSA) willingness to collaborate with the Integrative Health Institute at the University of Alberta. NCSA supports the central theme of fostering excellence in scholarship in integrative, traditional, and indigenous health at Alberta's largest and most prestigious university.

Native Counselling Services of Alberta (www.ncsa.ca) is a diverse, large non-governmental Aboriginal organization that has been a leader in social justice programs, services and research for 44 years. Our most recent research endeavour includes a three year project funded by the Alberta Water Research Institute (*Alberta Innovates*) that explored the sacred relationship between Aboriginal peoples and water. It included peer reviewed publications, an internationally-recognized documentary video, as well as a grade five and six, science and social studies curriculum (15 videos and 23 lesson corresponding plans). We have considerable depth and a unique expertise in the production of evidence-based documentary videos that engage a popular audience in rigorous research findings. Further, NCSA publish the peer-reviewed journal "*Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health*" for eight years, in collaboration with Indigenous health organizations in Australia, New Zealand and Hawaii.

We look forward to collaborating with the Integrative Health Institute in a number of ways: as research partners, advisors and community collaborators. Indeed, we believe that community-based research that engages Aboriginal people in the discovery of evidence that can make substantive changes in their lives, and the lives of their communities and families, must be a top priority for funders, researchers and leaders. As such, we would be committed to participating in this Institute, which could be a nexus for this critical undertaking.

Respectfully submitted,



Dr. Patti LaBoucane-Benson

Director of Research, Training and Communication



September 15, 2014

Sunita Vohra MD MSc FRCPC FCAHS
Director, CARE Program
Director, PedCAM Network
AIHS Health Scholar
Centennial Professor
Dept of Pediatrics
Faculty of Medicine & Dentistry
University of Alberta
8B19-11111 Jasper Ave
Edmonton, Alberta T5K 0L4

Dear Dr. Vohra:

RE: Letter of support from Alberta Innovates Bio Solutions (AI Bio) for the creation of an Integrative Health Institute (IHI)

Please accept this letter as support, in principle, for the creation of an Integrative Health Unit. In particular, we are interested in developing new and innovative natural health products and functional foods.

Food Innovation is a key business area for AI Bio. We are investing in research and innovation leading to new or improved food ingredients, food products, beverages or supplements that:

- Are competitive in the domestic and global marketplace.
- Respond to domestic and/or international consumer demand
- Add value to Alberta livestock and crop commodities
- Promote wellness and/or prevent/treat chronic diseases.

In 2013, AI Bio developed a Food Innovation Plan that identified “functional foods and nutraceuticals to promote wellness” as one of the most promising areas for AI Bio investment.

We are supportive of an interdisciplinary approach and encourage collaboration in delivering solutions that will support population health. We wish you all the best very in your new endeavor.

Sincerely,

Cornelia Kreplin, Ph.D.
Executive Director

Cc: Dr. Carl Amrhein, Provost & Vice-President (Academic), University of Alberta

September 15, 2014

Dr. Sunita Vohra
Director, CARE Program
Director, PreCAM Network
Centennial Professor
Department of Pediatrics
Faculty of Medicine and Dentistry
University of Alberta

Dear Dr. Vohra:

I am pleased to provide this letter in support of the Integrative Health Institute (IHI) at the University of Alberta. I believe that the development of IHI will provide an opportunity to provide leadership in integrative health that focuses on the patient and seeks to provide evidence on the use of therapeutic approaches to achieve optimal health needs of patients in Edmonton and throughout Alberta.

If I can supply any further information in support of your development of IHI, please do not hesitate to contact me directly.

Sincerely,



Pamela Valentine
Alberta Innovates - Health Solutions