



Canadian Institutes
of Health Research

Instituts de recherche
en santé du Canada



Building the Foundations of Life

ANNUAL REPORT 2005 • 2006

IHDCYH

Institute of Human Development,
Child and Youth Health



CIHR IRSC

Canada

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01 Message from the President



Dr. Alan Bernstein, O.C., FRSC
President, Canadian Institutes
of Health Research

I am pleased that CIHR's Institute of Human Development, Child and Youth Health (IHDCYH) has pursued its emphasis on large, multidisciplinary Request for Applications (RFAs), as exemplified by the launch of its pregnancy/birth cohort study of the roles of indoor air quality, genes, and gene-environment interactions in the etiology of asthma and allergy in young children. The large and diverse group of partners contributing to this initiative, both within and outside CIHR, as well as the inclusion of government regulators, ensures that the results of this study will impact policy making at the highest levels concerning a crucial health issue for Canadians: the quality of air inside our homes and its effect on our children's health. IHDCYH's Scientific Director, Dr. Michael Kramer, has also helped to develop and refine plans for the Canadian Lifelong Health Initiative, an ambitious multi-generational cohort study encompassing reproductive and child health, cancer, and healthy aging. Finally, IHDCYH continues to be active in the international arena, promoting collaborative research funding and training with the U.S., Japan, China, and Mexico. I congratulate Dr. Kramer, his capable Montreal- and Ottawa-based Institute staff, and the IHDCYH Advisory Board for their creativity and energy in spawning research initiatives to improve the health of mothers and children around the world.



Dr. Michael S. Kramer
Scientific Director, IHDCYH

02 Message from the Scientific Director

In 2005-06, IHDCYH awarded three large multidisciplinary grants after the successful re-launch of our Healthy Pregnancy RFA. We also launched our most ambitious RFA to date: a pregnancy/birth cohort study to examine the role of indoor air quality, genes, and their interactions in the etiology of asthma and allergy in young children. This RFA involves a large and diverse group of funding and scientific partners within and outside CIHR; to our knowledge, it is the largest single investment thus far by CIHR in research on health and the environment. The Institute continued its operating grant support for new investigators through its partnership with the SickKids Foundation's program for early-career researchers and the funding of 10 start-up grant applications submitted in CIHR open competition. IHDCYH also held two joint (with the National Institute of Child Health and Human Development, NICHD) Summer Institutes: one in maternal-fetal pharmacology and one in reproductive and perinatal epidemiology. Both were resounding successes, providing skills development to research trainees and young faculty in these areas from Canada, the U.S., and abroad.

In addition, 2005-06 was marked by two important and overlapping activities: an external review and evaluation of all of CIHR (including all 13 Institutes) and an IHDCYH-specific strategic planning process to chart our course for the next 5 years. These two activities provided valuable reflections on IHDCYH's strengths and weaknesses over our first 5 years and helped us to revise our goals and strategic priorities for the future. The evaluation was based on data gathered in surveys and interviews, and on the deliberations of a prestigious International Review Panel. The strategic planning process also benefited from an outside consultant, Jacques Larivière, who, in collaboration with Anne-Cécile Desfaits, carried out individual interviews and held focus groups across the country in the spring, summer, and fall 2005. This was followed by a strategic retreat with our Institute Advisory Board (IAB) and stakeholders in October, and our new 5-year strategic plan was released in March 2006. Despite an uncertain funding climate, we embark on these next 5 years with confidence and optimism for innovative and useful research that improves the health of mothers and children in Canada and throughout the world.

03 Outstanding Research

IHDCYH promotes and supports the creation and application of knowledge that contributes to the improvement of the health of children, youth, and mothers in Canada and throughout the world.

HEALTHY PREGNANCY

In 2002, IHDCYH issued a first RFA entitled "Healthy Pregnancy for Great Life Beginnings" to support multi-disciplinary research on the determinants, mechanisms and therapies for adverse fetal growth or preterm birth and their subsequent impact on the health and health care of mothers, children, and adults. Owing to insufficient integration among the 4 CIHR research pillars, only one project was funded under this initiative. In June 2004, IHDCYH launched a second RFA on Healthy Pregnancy; this time, three projects were approved for funding in October 2005 (see Table below), for a total of \$5 million over 5 years.

DESIGNATED PRINCIPAL APPLICANT	GRANT TITLE
Jean-Claude Forest Université Laval	Pregnancy disorders and impact on child development and wellbeing: Maternal, placental and fetal considerations
William D. Fraser Hôpital Ste-Justine (Montreal)	Maternal-infant research on oxidative stress (MIROS study): The effects and mechanisms of antioxidants for healthy pregnancy
Victor Han University of Western Ontario	Fetal growth restriction: Mechanisms and outcomes

ETHICS RESEARCH

In collaboration with the CIHR Ethics Office, IHDCYH launched an RFA in December 2004 entitled "Empirical and Conceptual Research on Ethical, Legal and Social Issues in Studies Involving Pregnant Women and Children." The ultimate objectives of this RFA are a better understanding of current practices in research involving pregnant women and children and the development of a normative framework to protect pregnant women and children who participate in research, especially in longitudinal studies. In October 2005, one project was accepted for funding; an average of \$93,511 per year for 3 years was awarded to Dr. Roberta L. Woodgate for her project entitled "Perceptions and assessment of the risks to involving children in research: Perspectives of research ethics board members, child health researchers, and parents."

GENES, INDOOR AIR EXPOSURES AND ASTHMA AND ALLERGY IN YOUNG CHILDREN

In North America, the incidence of asthma, atopic eczema, and allergic rhinitis in children has increased markedly over the past 20 years. The health care burden associated with these conditions is very large. In June 2005, the Institute and multiple partners (see list in the Partnerships section) launched an RFA for a pregnancy/birth cohort study aimed at advancing knowledge about the etiology of childhood asthma and allergy, particularly the roles of indoor environments, genes, and the interactions of genes with indoor and other environmental exposures. This targeted investment should yield new leads about the causes of these common diseases in children; the development and testing of preventive interventions; the establishment of new guidelines for housing construction, renovation, and maintenance; and the design of ventilation and heating systems for homes and day care facilities for infants and young children. This strategic initiative will provide up to \$12 million in funding over a 6-year period. Results of this competition will be available in December 2006, with funding to begin in early 2007.



OTHER CIHR INSTITUTE STRATEGIC INITIATIVES

In 2005-06, IHDCYH co-funded research grants, New Emerging Team (NET) grants and Interdisciplinary Capacity Enhancement (ICE) grants in areas of strategic importance through RFAs and Priority Announcements (PAs) led by other Institutes. The Institute provided funds to:

- Research grants for the RFAs on “Genomic Medicine and Human Development” (Institute of Genetics, IG); “Toward enhanced Quality of Life Through Injury Prevention, Acute Response and Rehabilitation” (Institute of Health Services and Policy Research, IHSPR, and Institute of Musculoskeletal Health and Arthritis, IMHA); “Research in Addictions” (Institute of Neurosciences, Mental Health, and Addiction, INMHA); “Childhood Obesity” (Institute of Nutrition, Metabolism, and Diabetes; INMD), and “Population and Public Health Research Methods and Tools” (Institute of Population and Public Health, IPPH)
- Research grant for the PA on Health Disparities (IPPH and Institute of Gender and Health, IGH)
- NET grant for the Palliative and End-of-Life Care RFA (Institute of Cancer Research, ICR)
- ICE grant for the RFA on Health Disparities (IGH)

ONGOING INITIATIVES

In 2005-06, IHDCYH continued to fund interdisciplinary strategic grants from past RFAs: 3 grants from our RFA on Healthy Gametes and Great Embryos, for a total of \$1,698,290; one grant from our first RFA on Healthy Pregnancy, for a total of \$650,000; and 3 grants from our RFA on Healthy Developmental Trajectories, for a total of \$714,134.

In partnership with other CIHR Institutes, IHDCYH also provided \$674,368 to 10 NETs covering many areas of the Institute's mandate.

04 Outstanding Researchers in Innovative Environments

Over the past few years, IHDCYH has developed and offered new opportunities and initiatives to build capacity and strengthen research in the area of reproductive and child health. In 2005-06, the Institute focused its activities on supporting new investigators and trainees.

START-UP GRANTS FOR NEW INVESTIGATORS

Since March 2003, IHDCYH has provided 26 first-year operating support to IHDCYH-affiliated new investigators through CIHR PAs. The objective of these PAs is to strengthen research that relates to the Institute's mandate by increasing research capacity. This targeted investment should lead to increased success rates for new principal investigators (PIs) in future CIHR regular open competitions and in competitions for operating grants from other agencies. In 2005-06, 10 new investigator start-up grants were approved for funding, for a total of \$862,887 (see Table below). These new investigators were highly rated in the March or September 2005 CIHR open grants competition but were just below the threshold for funding. The criteria for a "new" investigator include time since completing research training (less than 6 years) and no previous history as principal investigator on a CIHR-funded operating grant.

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MARCH 2005 OPEN COMPETITION

PRINCIPAL APPLICANT	GRANT TITLE
Brenda L. Banwell Hospital for Sick Children (Toronto)	Impact of multiple sclerosis on myelin and neuronal integrity in children
Magdalena Janus McMaster University	Early school adjustment for children with special needs: Does the process of transition to school affect outcomes?
Stefan Parent Hôpital Sainte-Justine (Montreal)	Analysis of local three-dimensional spinal and pelvic measurements as predictive factors for progression of the spinal deformity in adolescent idiopathic scoliosis
Richard B. Thompson University of Alberta	Development of magnetic resonance for pediatric cardiovascular imaging
Yang Yang University of Calgary	Regulation of autoimmune diseases by pregnancy associated immune modulation

SEPTEMBER 2005 OPEN COMPETITION

PRINCIPAL APPLICANT	GRANT TITLE
Andy V. Babwah* University of Western Ontario	Regulation of GnRH-R1 activity during placentation in humans
Anick Bérard Hôpital Sainte-Justine (Montreal)	Effect of discontinuing gestational use of antidepressants on maternal behaviours during pregnancy, and on the cognitive and behavioural development of infants
Loydie A. Jerome-Majewska The Montreal Children's Hospital	Molecular determinants of placental development in mice (Montreal Children's Hospital Research Institute)
Melissa Mann* University of Western Ontario	Molecular analysis of genomic imprint maintenance during embryogenesis
Sébastien Michaud Centre hospitalier de l'Université Laval	Contribution of the SUMOylation pathway to myogenesis

* Grants will start in fiscal year 2006-2007



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NEW PRINCIPAL INVESTIGATOR MEETING

In partnership with the Institute of Genetics, IHDCYH co-hosted a meeting in November 2005 for new PIs. This event was organized for new faculty (in their first 4 years) at Canadian universities, including scientists and clinician-scientists in the reproductive, child health, and genetics communities. Approximately 100 new PIs from across the country were invited. The objective of the meeting was to facilitate the career development of new PIs by fostering the formation of peer networks and by mentoring the new PIs through formal presentations and informal discussions. Sessions on grant and paper writing, running a “lab” (research program) and interacting with lab personnel were also offered. The meeting was also an opportunity for exchanges between the new PIs, the mentors, and the staff from both Institutes.

IHDCYH - NICHD SUMMER INSTITUTES

IHDCYH and the U.S. NICHD held their first Annual Summer Institutes in July 2005. The Summer Institute in Reproductive and Perinatal Epidemiology was held in Woods Hole (Massachusetts). During this week, 20 epidemiology PhD students from Canada, the U.S. and abroad, with a background and interest in reproductive and/or perinatal epidemiology enjoyed highly interactive presentations, methodologic discussions, and debates with distinguished faculty from both countries.

The Summer Institute in Maternal-Fetal Pharmacology was held in Gray Rocks (Quebec). Graduate students, postdoctoral and clinical fellows, and faculty planning or beginning a research career in pharmacology during pregnancy or the newborn period interacted with Canadian and American faculty around substantive topics and by developing research protocols in such diverse topics as pharmacokinetics, gestational diabetes, drugs in human milk, tocolytic therapy, illicit drug use during pregnancy, and treatment of nausea and vomiting during pregnancy.

CO-FUNDING OF TRAINING AWARDS WITH OTHER CIHR INSTITUTES

Over the past year, IHDCYH co-funded training awards through RFAs and PAs led by other Institutes. In 2005-06, these included post-doctoral fellowships in Health Disparities (IPPH and IGH) and Global Health Research (IPPH and the Institute of Infection and Immunity, III) and a doctoral research award in INMD's Target Obesity RFA.

ONGOING INITIATIVES

The Institute provided ongoing funds (\$1,022,354 in 2005-06) to 11 Strategic Training Initiatives in Health Research (STIHRs) within its research mandate.

The Institute also continued its fruitful collaboration with the SickKids Foundation (Formerly the Hospital for Sick Children Foundation) through the New Investigator Grants Program. By awarding 2-year operating grants to new PIs, this program aims to build capacity among new child health researchers by enhancing future success in competitions for grants from CIHR and other funding agencies. In 2005-06, IHDCYH and the SickKids Foundation co-funded 15 new investigators across Canada, for a total of \$1,930,553 over 2 years.

05 Translating Health Research into Action

Knowledge translation is an important aspect of IHDCYH's mandate. In 2005-06, IHDCYH increased its efforts to facilitate knowledge exchange between investigators and users of research at all stages of the research cycle, and to support the application of research findings to improve health products, practices, services, behaviours, and policies.

COCHRANE COLLABORATION

IHDCYH, in partnership with CIHR's Knowledge Translation Branch and other partners, awarded long-term funding (\$7.8 million over 5 years) to the Canadian Cochrane Network and Centre (<http://www.cochrane.uottawa.ca>) and to the Canada-based Child Health field of the Collaboration. The Cochrane Collaboration is an international non-profit organization, dedicated to providing up-to-date, accurate information about the effects of trials of health care interventions. It produces and disseminates systematic reviews of these interventions and promotes the search for evidence from randomized trials. The major product of the Collaboration is the "Cochrane Database of Systematic Reviews," published quarterly as part of the Cochrane Library. Cochrane systematic reviews are internationally recognized as important knowledge translation tools.

IHDCYH WORKSHOP PROGRAM

Through its workshop program, IHDCYH funded 7 multidisciplinary and cross-cutting workshops related to its research priorities, for a total of \$70,000 in 2005-06 (see Table below).

SEPTEMBER 2005 AND MARCH 2006 COMPETITIONS

PRINCIPAL APPLICANT	WORKSHOP TITLE	DATE AND LOCATION
Uma Athale McMaster University	Bridging the gap: early detection and comprehensive care for patients with sickle cell disease in Zambia and Kenya	December 7-8, 2005 Hamilton, ON
Debra Cameron University of Toronto	Rehab Research- It's our Move 2006	April 20-21, 2006 Toronto, ON
Aurore Côté The Montreal Children's Hospital	Bridging the gaps between pediatric and adult care	October 11, 2006 Montreal, QC
Laurette Dubé McGill University	Think tank: Accelerating the prevention of childhood obesity around the world: Forging a societal plan that works	October 26-27, 2006 Montreal, QC
Juan Little University of Ottawa	Etiology and management of cleft lip and palate	October 1-2, 2006 Ottawa, ON
Anton Miller University of British Columbia	Waiting for child development and rehabilitation services: an interdisciplinary and intersectoral workshop to address challenges and opportunities in wait-times and waitlist research and quality improvement	August 24-25, 2006 Vancouver, BC
Harold Siden University of British Columbia	Nutrition at end of life in a pediatric population	February 24-25, 2006 Vancouver, BC

06 Effective Partnerships and Public Engagement

Partnership is essential for leveraging funds to support the creation and application of knowledge in the area of reproductive and child health. In 2005-06, IHDCYH increased its effort to seek new partners in Canada and abroad. The Institute also nurtured and sustained existing partnerships, particularly with other CIHR Institutes, the SickKids Foundation and the NICHD. In 2005-06, our stakeholders also actively participated in evaluating the Institute and in developing IHDCYH's new strategic plan (see section on Organizational Excellence).

PARTNERSHIPS WITH OTHER CIHR INSTITUTES

In 2005-06, IHDCYH partnered with a number of CIHR Institutes to fund research grants and salary awards. These initiatives included:

- Palliative and End-of-Life Care (ICR)
- Genomic Medicine & Human Development (IG)
- Enhanced Quality of Life Through Injury Prevention, Acute Response and Rehabilitation (IHSPR and IMHA)
- Childhood Obesity (INMD)
- Target Obesity (INMD)
- Gene Therapy for Neurological Disease (INMHA)
- Research in Addictions (INMHA)
- Reduce Health Disparities (IPPH and IGH)
- Global Health Research (IPPH and III)
- Population and Public Health Research Methods and Tools (IPPH)

IHDCYH also partnered with IG to organize a meeting in the fall of 2005 for new principal Investigators (see section on Outstanding Researchers)

PARTNERSHIPS WITH NATIONAL ORGANIZATIONS

In June 2005, IHDCYH launched its largest RFA to date, to investigate the influence of indoor environments on the development of asthma and allergies in young children and how those environments interact with genetic factors. Over the past year, the Institute developed a unique consortium of partners:

- AllerGen Network of Centres of Excellence
- Canadian Mortgage and Housing Corporation
- CIHR - IGH, IG, III and the Institute of Circulatory and Respiratory Health (ICRH)
- Environment Canada
- Health Canada
- Healthy Indoors Partnership
- National Research Council
- Natural Resources Canada

In 2005-06, IHDCYH also partnered with the Natural Sciences and Engineering Research Council of Canada (NSERC) to co-fund 1 of the 17 successful applications in the 2005 Collaborative Health Research Projects Competition. Dr. Susan Scollie received a 3-year grant for her project entitled "Evaluation of frequency compression hearing aids for children."

CANADIAN LIFELONG HEALTH INITIATIVE (CLHI)

In partnership with IG, IPPH, ICR, and the Institute of Aging (IA), IHDCYH has been actively involved in planning the CLHI, a long-term multigenerational cohort study of child health, healthy aging, and cancer. An international advisory panel and key Canadian investigators from IHDCYH and the other participating Institutes was held in Toronto in December 2005 to identify the most important, feasible, and affordable scientific niche that CLHI should attempt to fill.



INTERNATIONAL COLLABORATIONS

JAPAN In collaboration with the Japan Society for the Promotion of Science, IHDCYH (with INMHA and IA) has already launched 2 competitions for the Japan-Canada Joint Health Research Program. The program was established in 2003 to promote research collaboration between universities or affiliated research organizations in Japan and Canada through the support of small project grants. In the last competition, 4 applications were approved for funding, of which one is directly related to IHDCYH's mandate. Dr. Allison B. Sekuler from McMaster University and her Japanese collaborator, Dr. Masayoshi Nagai, received a 2-year grant for their project entitled "Face perception in individuals with autism spectrum disorder: Understanding processing strategies and developing training protocols."

In January 2006, IHDCYH also organized a workshop in which 5 Canadian researchers met with Japanese researchers working in similar areas of investigation. New collaborations were spawned by this workshop, several of which are expected to apply to the 2006 competition of the Japan-Canada Joint Health Research Program.

CHINA In December 2005, CIHR's President and several CIHR Institute Scientific Directors (including IHDCYH's) met with the National Natural Sciences Foundation of China (NSFC) and researchers from other key Chinese health research organizations. An agreement was signed between CIHR and the NSFC, and a first competition of the CIHR-China Joint Health Research program was launched in partnership with 6 CIHR Institutes. Results of this competition will be available in October 2006.

MEXICO In collaboration with ICRH and Mexican organizations, IHDCYH participated in the launch of the 2005 Mexico-Canada Joint Health Research Program in Tuberculosis. The Program promotes collaborative multi-disciplinary, multi-institutional, multi-sectoral research on tuberculosis in Mexico and Canada. The first projects will be funded in 2006-07.

07 Organizational Excellence

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During the year 2005-06, IHDCYH has undertaken a planning exercise and has produced a new strategic plan for the next five years. As our planning exercise has coincided with the international evaluation of CIHR, this has given us the opportunity to obtain input from our scientific community and our partners, not only on our past activities, strengths and weaknesses, but also on our future initiatives, via group discussions and interviews held across the country.

With the implementation of our new strategic objectives and new research priorities, we will be able to maintain the Institute's position as a Canadian leader in research funding for reproductive and child health.

IHDCYH'S NEW STRATEGIC PLAN

In September 2004, the Institute Directorate and IAB members decided that a new strategic plan was necessary to map the Institute's course over the next 5 years. In early 2005, IHDCYH initiated a new strategic planning process. Ideas, opinions, and suggestions from researchers, clinicians, policy makers, funding partners, and other stakeholders across the country were generated from almost 40 individual interviews, 5 focus groups, several regional forums and an open strategic planning consultation. Our new strategic plan also reflects the knowledge and experience we have gained over our first 5 years. The final plan was approved by the IAB in February 2006 and submitted to the CIHR President. The new strategic plan was officially launched March 29, 2006 at the IHDCYH open forum at the University of Saskatchewan. It is available on the Institute's website at: <http://www.cihr-irsc.gc.ca/e/8697.html>

IHDCYH AND CIHR EVALUATIONS

As part of the CIHR International Review required by the CIHR Act, all of the Institutes conducted a mid-term formative evaluation of their activities, outputs, and outcomes at the end of the first funding cycle in 2005. An evaluation report was developed in late 2005, outlining IHDCYH's strengths and weaknesses. The mid-term evaluations of the Institutes were one important input to the external review of CIHR and all the Institutes that took place in February 2006. The review was conducted by a prestigious international panel. The report of the international panel as well as a summary of the IHDCYH mid-term evaluation are now published on CIHR's website at: <http://www.cihr-irsc.gc.ca/e/31680.html>

IHDCYH'S STAFF

Michael Kramer has been the Scientific Director of IHDCYH since May 2003. The IHDCYH Office is located at The Montreal Children's Hospital. Like all CIHR Institutes, IHDCYH has staff located both at the Institute office and at CIHR headquarters in Ottawa.

MONTREAL

Dr. Michael Kramer, Scientific Director
Dr. Anne-Cécile Desfaits, Assistant Director
Ms. Stella DiPiano, Administrative Assistant
Ms. Anick Lambert, Administrative Assistant (Since September 2005)

OTTAWA

Ms. Louise Poulin, Assistant Director, Partnerships and International Relations
Ms. Gwendoline Simard, Project Officer (Until August 2005)



INSTITUTE ADVISORY BOARD

The IAB includes 16 members from the reproductive and child health research community, voluntary sector, health care system, and governmental agencies. Bruce Murphy has served as Chair since September 2004. The IAB supports and advises the Institute's Directorate on strategic priorities and orientations. This year, the Board also played an important role in the development of IHDCYH's new strategic plan.

During face-to-face meetings held in April (Calgary) and October (Ottawa) 2005, Institute staff and IAB members met with local researchers and partners to reinforce links with the local reproductive and child health research communities and to gather feedback about the Institute's past activities and future plans.

IHDCYH ADVISORY BOARD MEMBERSHIP

Dr. Bruce Murphy, Université de Montréal (Chair)
Dr. James Bonta, Public Safety and Emergency Preparedness Canada
Dr. Sandra Davidge, University of Alberta
Dr. William Fraser, Université de Montréal
Dr. Kathleen Glass, McGill University (Until September 2005)
Dr. Maureen Heaman, University of Manitoba (Since September 2005)
Dr. Victor Han, University of Western Ontario
Dr. Lucie Jeannotte, Université Laval
Dr. K.S. Joseph, Dalhousie University (Since September 2005)
Ms. Brenda Kirtzinger, Prairie North Health Region
Dr. Shoo Lee, University of Alberta
Dr. Catherine McCourt, Public Health Agency of Canada
Dr. Patrick McGrath, Dalhousie University (Until June 2005)
Dr. Hugh O'Brodovich, University of Toronto
Dr. Jim Roberts, University of Pittsburgh, Pennsylvania
Dr. Peter Rosenbaum, McMaster University
Dr. Bonnie Stevens, University of Toronto
Ms. Dawn Walker, Health Canada



08 Institute Support Grant

IHDCYH

Institute of Human Development,
Child and Youth Health

For the year ended march 31, 2006

Available Funds

\$1,210,456

Expenses

INSTITUTE DEVELOPMENT

Conferences, symposia and workshops	\$174,538	
Institute advisory board	50,774	
Professional services	91,496	
Travel expenditures	67,504	\$384,312

INSTITUTE OPERATIONS

Salaries and benefits	\$319,424	
Office accomodations	19,398	
Telephone and communication services	4,433	
Supplies, material and other services	2,614	
Travel expenditures	71,521	\$417,390

Total Expenses

\$801,701

Unspent Balance*

\$408,755

* Note : The balance as of March 31, 2006 is carried forward to the subsequent fiscal year.

09 Investments in Strategic Initiatives

For the year ended March 31, 2006

CONTRIBUTIONS THROUGH GRANTS AND AWARDS

STRATEGIC INITIATIVES	NB	2005•2006	2006•07	2007•08	2008 AND +	TOTAL
Healthy Gametes & Great Embryos	3	1,698,290	1,698,290	1,273,719	-	4,670,299
Healthy Pregnancy	4	1,411,419	1,590,260	1,640,865	2,380,394	7,022,938
Healthy Developmental Trajectories	3	714,134	831,345	831,345	1,088,411	3,465,235
ELSI in Studies with Pregnant Women	1	37,564	53,628	54,828	34,514	180,534
Childhood Asthma and Indoor Air	1	30,000	-	-	-	30,000
Operating Grants	9	689,244	94,105	48,153	25,000	856,502
New Emerging Teams	10	675,368	656,686	43,010	-	1,374,064
Strategic Training Initiatives in Health Research	7	1,022,354	1,423,139	1,359,864	390,401	4,195,758
Palliative End of Life Care	1	200,000	200,000	200,000	260,000	860,000
Genomic Medicine and Human Development	6	118,874	100,000	200,000	600,000	1,018,874
Enhanced Quality of Life	2	99,292	-	-	-	99,292
Target Obesity	1	18,333	18,333	4,383	-	41,049
Childhood Obesity / Health Body Weight	1	99,670	99,255	100,000	-	298,925
Gene Therapy - Neuro Diseases	1	50,000	-	-	-	50,000
Research in Addictions	1	10,000	100,000	100,000	300,000	510,000
Reduce Health Disparities	9	22,500	-	-	-	22,500
Training Awards in Global Health Research and Health Disparities	2	30,417	64,583	50,000	51,667	196,667
Methods and Tools	4	60,000	-	-	-	60,000
SickKids Foundation	2	100,000	-	-	-	100,000
NSERC-CIHR Initiative	1	3,287	4,652	3,216	-	11,155
Cochrane Collaboration	1	25,000	50,000	50,000	125,000	250,000
JSPS-CIHR Joint Health Research	2	60,000	60,000	-	-	120,000
	71	\$7,174,746	\$7,044,276	\$5,959,383	\$5255,387	\$25,433,792

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* Note : Grants and awards in respect to these programs are approved for 1 to 6 years. Figures displayed represent financial commitments for these programs in 2005-06 subsequent years. Availability of these funds in future years are subject to funding appropriations by Parliament.

10 IHDCYH's Management Team

Team as of September 2006

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MONTREAL



Dr. Michael S. Kramer
Scientific Director



Anne-Cécile Desfaits, PhD
Assistant Director



Stella DiPiano
Administrative Assistant
to Scientific Director



Anick Lambert, M.Sc.
Project Officer



Lindsay Wallace
Administrative Assistant

OTTAWA



Louise Poulin
Assistant Director
Partnerships and
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Lynne Renaud
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