Gender-based Analysis and Health Planning, Policy and Research in Canada

Preface

This book was inspired by the response to a guide on gender and health planning prepared by the Prairie Women’s Health Centre of Excellence in 2003. This original guide, intended for health planners in Manitoba’s regional health authorities, became a “best seller” among a variety of health care planners and managers interested in understanding how to apply sex- and gender-based analysis (SGBA) in their work. The guide was well received because it offered background material explaining sex- and gender-based analysis as well as practical case studies using population health surveillance data. The cases demonstrated that SGBA is possible when data are collected and reported by sex and that gender-based analysis is essential for understanding the health status or care outcomes of both women and men and important sub-populations among them. The current book builds on the success of the Manitoba guide, expanding the range of evidence and topics dealt with in case studies and modeling changes in the conceptualization and application of SGBA that have taken place in the intervening years.

This project is the result of collaboration among numerous people, many of whom are linked through a Canadian program in women’s health research and knowledge translation. Indeed, this book is a showcase of the extent to which members of the Women’s Health Contribution Program of Health Canada have developed expertise and technical skills in the use of sex- and gender-based analysis. The overall project leader was Barbara Clow, Executive Director of the Atlantic Centre of Excellence for Women’s Health (ACEWH). She was supported by an Advisory Committee comprised of Margaret Haworth-Brockman, Executive Director of Prairie Women’s Health Centre of Excellence and Ann Pederson, Director of the British Columbia Centre of Excellence for Women’s Health. The Advisory Committee oversaw the conceptualization and development of the guide, including co-writing the introductory and concluding chapters as well as contributing to the writing and editing of the case studies. Jennifer Bernier, Gender-based Analysis Coordinator at the ACEWH, supported the team in a multitude of ways, writing and revising case studies, liaising with contributors and the advisory committee and ensuring that all materials were written and edited to a common style. Other staff at the ACEWH, notably Jean Steinberg, Janet Allen and Mary Ann Martell, also contributed to the development of case studies and the production of the book.

This book is divided into eight chapters. The first three chapters provide background material on sex- and gender-based analysis, including a discussion of core concepts in sex- and gender-based analysis as well as an explanation of the approach to SGBA embodied in this guide. Chapters 4 through 7 comprise a series of case studies and commentaries illustrating the application of SGBA to surveillance data, literature reviews and systematic reviews, health surveys, health policy making, health protection and health program development. These two sections together demonstrate that sex- and gender-based analysis is a process that involves asking critical questions of all kinds of evidence and that can be applied to many different dimensions of health research, healthy planning and policy-making and communication. Chapter 8 includes our concluding remarks as well as a look at emerging directions in sex- and gender-based analysis. A list of resources is included at the end of the book to support readers wanting additional information.

We would like to acknowledge the many sources of support that have helped to make this volume a reality. First and foremost among these is the Bureau of Women’s Health and Gender Analysis at Health Canada, which has funded the Centres of Excellence for Women’s Health through the Women’s Health Contribution Program (WHCP) for many years and, more recently, has provided funding for the development of specific case studies as well as the guide as a whole. Other government departments and agencies have also contributed to the research that informs some of the case studies, including the Canadian International Development Agency, the National Crime Prevention Centre, Manitoba Health and Healthy Living and the Nova Scotia Advisory Council on the Status of Women. International agencies, including the World Health Organization and the Pan-American Health Organization, have likewise supported specific projects that inform some of the case studies. We are also grateful for peer-reviewed research funding from the Canadian Institutes of Health Research and the Social Sciences Research Council of Canada.

The case study on transport accidents is included with the kind permission of the Pan-American Health Organization.

The views expressed herein do not necessarily represent the views of Health Canada.