

# CIHR 2000: Sex, Gender and Women's Health

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Vancouver  
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"We are just beginning to understand and appreciate the difference between men and women in virtually every system of the body, as well as the way men and women experience disease." (National Institutes of Health - Agenda for Research on Women's Health for the 21<sup>st</sup> Century, 1999: 10).

"Pursuing integrated women's health research in the CIHR will thrust Canada into a leadership role in women's health." - Lesley Doyal, Professor of Health and Social Care, School of Policy Studies at the University of Bristol and author of *What Makes Women Sick?*

## ■ ABSTRACT

This paper investigates the issues of sex, gender and women's health in health research. The advent of the Canadian Institutes for Health Research (CIHR) planned for April, 2000 offers a tremendous opportunity for Canada to reorient its health research system to include sex, gender and women's health in a more systematic and effective manner. It will also foster the integration of basic biomedical, applied clinical, health systems and social and cultural dimensions of health research in a new research environment.

Both of these directions will contribute to the transformation of the substance and process of health research in Canada. Clearly addressing and including sex, gender and women's health in this plan from the outset will position Canadian health research in the forefront internationally. Most importantly, it will improve the quality of science in the health research field and decrease knowledge gaps related to the impact of sex and gender in human health and in particular, women's health.

This paper distinguishes between sex and gender as concepts and articulates the interactive relationships between sex and gender that affect health. Several examples are offered to illustrate this complex and dynamic relationship. Second, the field of women's health is examined and defined and the vast knowledge gaps in this area articulated. Several examples are detailed to illustrate the extent of what we do not yet know.

The rationale for extending and developing the field of women's health research is described. Women constitute 52 per cent of the Canadian population and cut across all age groups, life stages and population health groups. Women are affected by most disease categories and are affected by biomedical processes and research in as yet unknown ways. The impact of improving women's health is felt on women, families and communities as women form the vast majority of the managers of family health and perform most of the formal and informal caregiving in Canada.

Canada has been a leader in international fora to improve the human rights of women. In this vein, Canada has signed several documents to improve women's health and to establish mechanisms to ascertain the effects of sex and gender within its national machinery. Domestically, the Women's Health Strategy announced by the Health Minister, the Honourable Allan Rock, in March 1999 articulated Canada's recognition of the need in this field. Several bodies including the Medical Research Council of Canada have identified the need for distinct research on women.

The field of women's health research in Canada is strong and growing. Several Chairs and Centres of Excellence are devoted to women's health research and several hundred researchers identify as women's health researchers. This paper examines three operational options for developing women's health research further in the context of the CIHR. We conclude that a Women's Health Research Institute, with an integrated and educative gender mainstreaming component would accomplish the dual goals of addressing knowledge gaps in women's health research and including the important variables of sex and gender across Institutes of the CIHR. Finally, a conceptual model of a Women's Health Research Institute and a second model depicting the CIHR illustrates these conclusions.

"A women's health research agenda which incorporates the four CIHR quadrants would be extremely far thinking in the field of women's health." – Martha Romans, Executive Director, Jacobs Institute of Women's Health, Washington DC.

"Accountability for and evaluation, monitoring and tracking of, the activities of all the Institutes regarding women's health should rest at the highest level in the organization. This is vital to the successful development and institutionalization of any substantive women's health research initiative." – Vivian Pinn, Director, Office of Research on Women's Health, National Institutes of Health, Bethesda, MD.