



## **BACKGROUND**

Health Canada's Centres of Excellence for Women's Health Program was created in 1995. The Maritime Centre of Excellence for Women's Health (MCEWH) opened its doors in 1996, following a regional consultation and a successful grant application to Health Canada. In 1997, MCEWH and Dalhousie University signed a memorandum of agreement with the IWK Health Centre to create a partnership in support of women's health research. In 2002 the name of MCEWH was formally changed to the Atlantic Centre of Excellence for Women's Health to reflect more accurately the Centre's work in and focus on all four Atlantic Provinces.

The mandate of the ACEWH entails:

- Contributing to the breadth and scope of research on women's health issues;
- Promoting an understanding of gender as a critical variable in women's health, and;
- Enhancing the responsiveness of the health, broadly defined, to the health needs and concerns of women and girls.

More specifically, ACEWH's approach to policy research focuses on advancing our understanding of and response to the social, economic, political, cultural, and geographic factors that influence women's health and health needs in the Atlantic Provinces, across Canada, and around the world – particularly as they affect the lives of vulnerable, marginalized, and disadvantaged women and girls. Our aim is to work with and for women and girls in these communities to improve their health through the development of gendered, equitable policies and programs.

In addition to core funding from the Women's Health Contribution Program, the work of ACEWH has been supported by a variety of funders. For many years, the IWK Health Centre provided ACEWH with office space, until the recent economic downturn forced the termination of this support in 2009. Dalhousie University contributed a yearly stipend to the Executive Director's salary until 2005, but the university continues to provide financial, administrative, and research oversight for the Centre.

ACEWH has also successfully leveraged resources from other agencies and partners to pursue lines of research and capacity development, including: multi-year research grants from CIHR to investigate women's paid and unpaid caregiving work and the health of African Nova Scotian women living in rural and remote communities; a developmental grant on the health and well-

being of lone mothers, funded by CIHR; CIDA and Commonwealth Secretariat support for a variety of projects related to Gender and HIV/AIDS in Africa and Canada; a multi-year project on social and economic inclusion and exclusions funded by the Population and Public Health Branch Atlantic, Health Canada; funding from PrioNet to explore the impact of prion disease (Creutzfeldt-Jakob disease) on farm family health; funding from the Public Health Agency of Canada and Centre for Crime Prevention to establish the Atlantic Summer Institute on Healthy and Safe Communities. The range of funders has also included provincial governments in all four Atlantic Provinces, Federal Government Departments, the Nova Scotia Health Research Foundation, non-government organizations, national organizations and coalitions, and private donors.

In its founding phase, MCEWH was governed by a steering committee that included representatives from research, policy and community across the Atlantic region. Since 2003, ACEWH has operated on a “Principal Investigator Model” of governance with the Executive Director being accountable to the Dean of the Faculty of Health Professions and the Vice President, Research at Dalhousie University. The current incumbent, Dr. Barbara Clow, is further accountable to the Dean, the Vice President, Academic, and the President of Dalhousie University by virtue of holding an academic appointment. Centre staff are defined as “grant-paid employees” of Dalhousie University. ACEWH has always maintained a core of 4-5 staff, but the number of employees has reached upwards of 12 with the work and resources involved in funded research. Currently, we have 5 full-time staff: Barbara Clow, Executive Director; Linda Snyder, Assistant Director; Greta Rasmussen, Administrative Coordinator; Jennifer Bernier, Researcher; Andrea Papan, Researcher.

Initially, the Centre fostered research by providing seed funding for university and community-based research projects, supporting graduate students, developing synthesis papers and research project proposals. Gradually, ACEWH began to undertake its own research and four key areas of work emerged: unpaid caregiving; social and economic inclusion and exclusion; gender and HIV/AIDS; and women’s health and the environment. Since 2003, ACEWH has expanded its research into many new areas, such as women and cancer, women and obesity, women in the North, food security, domestic violence, and the health of criminalized women, among other topics.

For many years, ACEWH operated on 5-year contribution agreements with Health Canada and worked with an average annual core budget of \$400,000. Since 2009, Health Canada has shifted to project-based funding and the Centres must compete with one another for funding on a yearly basis. In the past two years, ACEWH has worked with a budget of \$450,000 - \$550,000. Successful grants from CIHR and other funders have augmented the ACEWH’s budget considerably – by several million dollars over the life of the Centre.

## **REPORT ON 2010-2011 ACTIVITIES**

In April 2010, ACEWH received funding from Health Canada to carry out research dealing with four Health Canada priority areas; addressing differing vulnerabilities and persistence of health status inequalities; chronic disease management issues; emerging issues; and, promoting integration of Sex- and Gender-Based Analysis (SGBA) and performance measurement into health policy and planning. Core activities for each priority are described below:

- 1) **Addressing differing vulnerabilities and persistence of health status inequalities** – ACEWH’s work within this priority area included studying: 1) the physical health of criminalized women in provincial corrections facilities; 2) assessing the merits of absolute versus relative health measures of poverty in relation to sex, gender and health, and; 3) contributing to the development of curriculum on vulnerable populations that are sensitive to sex, gender and health considerations.
- 2) **Chronic disease management issues** – ACEWH’s work within this priority area included: 1) contributing to knowledge about the health and care experiences of overweight and obese pregnant women from diverse communities, including First Nations communities; 2) synthesizing knowledge about young women with breast cancer and the range of services and supports available to and tailored for them, and; 3) contributing to knowledge about the needs of women experiencing domestic violence in rural and remote communities.
- 3) **Emerging issues** – in this priority area, the ACEWH’s work focused on developing a new analytical paper on methods and evidence in relation to health services and health services research as a member of Women and Health Care Reform at the National Network on Environments and Women’s Health, York University, Toronto.
- 4) **Promoting integration of Sex- and Gender-Based Analysis (SGBA) and performance measurement into health policy and planning** – Stemming from its publication the book, *Rising to the Challenge: Sex- and Gender-based Analysis for Health Planning, Policy, and Research in Canada*, ACEWH had two large pieces of work within this priority area: 1) contributing to knowledge and uptake of SGBA among Federal government employees across the Health Portfolio through the development of a web-based curriculum, and; 2) contributing to knowledge about the implications and impact of sex and gender on health care reform through the development and publication of a manuscript of selected topics.

Other areas of work included: the Atlantic Summer Institute on Healthy and Safe Communities; recruitment and placement of CIDA Interns with a South African partner; research on the relationship between Aboriginal women and water; an economic costing of overweight and obesity in First Nations communities; the health challenges facing refugee and immigrant women; collaboration on a SSHRC-CURA grant, titled FemNorthNet, which examines the impact of economic restructuring on the health of women in the North; and projects with partners in the Atlantic region and across Canada.

## **OUTLINE OF 2011-2012 ACTIVITIES**

ACEWH's core work for this fiscal year consists of an integrated program of research on women and healthy living, comprised of three projects that are linked by area concentration, themes, methodologies, and Women's Health Contribution Program (WHCP) outcomes.

**Project 1: A Profile of Women and Health Living in Canada** - involves the development of a Canadian Profile of Women and Healthy Living. It will be undertaken in collaboration with the British Columbia Centre of Excellence for Women's Health (BCCEWH) and Prairie Women's Health Centre of Excellence (PWHCE). Using a mixed methods approach, we will generate a sex and gender-based analysis of the concept of healthy living, healthy living indicators and healthy living strategies to complement to the ongoing work of federal, provincial and territorial governments. Specific indicators identified for analysis include healthy weights, healthy eating, food security, tobacco, physical activity, injury and healthy sexual practices. The project results will generate new knowledge about women's health and draw attention to gender as a critical variable in our understanding of and efforts to promote healthy living in Canada.

**Project 2: Full Plate: Women, Obesity and Food Security** - is a mixed methods study of the relationship between obesity, food security and chronic diseases in the lives of women in Atlantic Canada. Many quantitative studies have established a significant link between these conditions in women, but have not explained the connection. Qualitative data, collected through focus groups, offers an opportunity to explore both women's experiences and their explanation of the association between obesity, food insecurity and chronic disease. This project will consequently contribute to the knowledge base on obesity and overweight among women, and will increase understanding of the role of sex and gender – as well as other social determinants of health – in achieving and maintaining healthy weights in the face of food insecurity. This project also involves an economic costing of obesity, food security and chronic diseases among women and men in Atlantic Canada, which will contribute to awareness of the importance of gendering policies, programs and practices to promote healthy living.

**Project 3: Weight Expectations: Experiences and Needs of Overweight and Obese Pregnant Women and Their Healthcare Providers** - is based in Nova Scotia and Saskatchewan. This ground-breaking qualitative study will generate new knowledge about the healthy management of gestational weights. Through a series of interviews, we will gain a new understanding of the experiences and needs of overweight or obese pregnant women and those providing care and support to this vulnerable population of women. This research will lead the way in Canada to a new appreciation of how best to support a range of health care providers and women in the quest for healthy weights during pregnancy.

In addition to the work supported by a contribution agreement with Health Canada, ACEWH will continue working on established projects. Programs such as the Atlantic Summer Institute on Healthy and Safe Communities and the CIDA International Youth Internship Program continue to bolster long-term partnerships locally and globally. Equally, new opportunities for

knowledge sharing, networking, and partnership-building are being built through our SGBA Online Learning Resource, the FemNorthNet project, and Café Scientifique activities.

### **1) Sex- and Gender-based Analysis Online Learning Resource (<http://sgba-resource.ca/en/>)**

In September 2011, our new SGBA Online Learning Resource will be launched. The learning resources stems from our book *Rising to the Challenge: Sex- and Gender-based Analysis for Health Planning, Policy, and Research in Canada*, which was released in 2009 in English and 2010 in French. Prompted by the confusion surrounding sex- and gender-based analysis we developed a new resource that describes the concepts and process of SGBA, and provides many case studies and commentaries to illustrate SGBA in action. Developing the book was the first step in sharing knowledge about SGBA. The second step was to meet with people to introduce them to the book and allow them to practice SGBA using the core concepts and process outlined in *Rising to the Challenge*. We organized a series of six half-day workshops across Canada with health planners, policy makers, researchers, and community organizations.

Inspired by the expressed needs of those who participated in the workshops, the **SGBA Online Learning Resource** is the third step in knowledge sharing. The goals of this website are to:

- Serve as a companion resource to the book *Rising to the Challenge*
- Provide training opportunities to introduce learners to the concepts and process of sex- and gender-based analysis
- Help learners to apply sex- and gender-based analysis in their own work

This site features a number of free tutorials that will allow learners to explore the core concepts and process of sex- and gender-based analysis (SGBA). It is expressly designed to be a fun and interactive experience that will provide plenty of opportunities to practice SGBA, including the application of examples from one's own work.

### **2) CIDA International Youth Internship Program**

In 2010, under a joint proposal supported by International Research and Development, ACEWH received funds from the Canadian International Development Agency (CIDA) for a 3-year International Youth Internship Program. Since 2005, ACEWH has sent five rounds of research interns to work with our partner the Human Sciences Research Council (HSRC) in South Africa and Senegal. Working in partnership with the Global Health Office at the Faculty of Medicine, two research interns were sent to Cape Town, South Africa in 2010 and two more interns will be sent to Pretoria, South Africa for five months from July to December 2011. The program continues to be an excellent opportunity to strengthen ties with our partners in Africa, as well create exceptional opportunities for young graduates to access firsthand experience working on the sex- and gender-based analysis, health promotion and the determinants of health in the context of the Global South.

### **3) Atlantic Summer Institute on Healthy and Safe Communities**

As a founding member of the Atlantic Summer Institute for Healthy and Safe Communities, ACEWH has provided support and leadership since 2004, including applications for and management of resources from the Public Health Agency of Canada and the Centre for Crime Prevention. The ASI is now an independent organization and staff and volunteers but ACEWH continues to provide intellectual and programmatic leadership for the annual Institute workshops and related activities. The theme of this year's event, which has been made possible through funding from Status of Women Canada, is women and community leadership. In a two-day symposium, participants from community, research and government will gather in Charlottetown, PEI to learn how to overcome barriers and realize the potential of women as community leaders in Atlantic Canada. During the next two years, we will build on the experience of this event and other workshops in the region to create a model for capacity development around women and community leadership.

### **4) Café Scientifique**

ACEWH will host a Café Scientifique in September 2011 with support from the Canadian Institutes of Health Research (CIHR). The first goal of the Café Scientifique will be to engage the community in a discussion of the difference between sex and gender. This discussion will include an examination of how gender roles are socially constructed and entrenched in our daily lives and in particular influenced by media. The second goal is to consider why sex and gender make a difference in health, health care and health research. This second goal will highlight why gender is included as a social determinant of health and will explore the health needs of sexual minorities. Although the presentation will be delivered with the non-scientific community in mind, members of the academic and healthcare communities may also be interested in attending. To bring a gender balance to the proposed Café Scientifique, we will have presenters with expertise in women's health, men's health and the health of sexual minorities: Dr. Barbara Clow, Dr. Blye Frank, and Mr. Jim Oulton.

**5) FemNorthNet (CRIAOW)** – This SSHRC-CURA grant is being led by researcher Jane Stinson at the Canadian Research Institute for the Advancement of Women and includes 20 community representatives and researchers, including ACEWH. The project involves studying the impact of economic restructuring on women in three Northern communities: Laloche, SK; Brandon, MB; Happy Valley-Goose Bay, NL. The project team has its inaugural meeting in Brandon in 2010 and teams of community representatives and researchers were formed to explore key themes, including migration and settlement, social and economic inclusion and exclusion, and community infrastructure. The team is also pursuing additional funding to support research that deals more explicitly with the health needs and challenges of women in these communities (since SSHRC no longer funds health research).