

Honourable Allan Rock
Minister of Health
Minister's Office - Health Canada
Brooke Claxton Bldg.
Tunney's Pasture - P.L. 0913C
Ottawa, ON K1A 0K9

Dear Honourable Allan Rock:

I would like to take this opportunity to support you in your commitment to the health of Canadian women. I commend the Canadian government for its acknowledgement of the need to recognize women's health as important and distinct, as seen in its establishment of five research Centres of Excellence for Women's Health in 1996. I also want to commend the creation of the *Women's Health Strategy* which articulates that women's health will be promoted in the further development of Canadian research.

Significant knowledge gaps exist regarding women's health that need to be addressed in order to improve the health status of all Canadians. Although we may be at a point where differences between men's and women's health are beginning to be identified, there has not been enough gender-based research conducted to explain the reasons for the differences. It is time to "catch up" for all the years that health research has not incorporated sex and gender variables; women's health research is just good science

I am particularly concerned about the fact that the overall health and well-being of women, children and families in Atlantic Canada remains far behind the rest of Canada. Atlantic Canadian women have the highest female and child poverty rates; the highest blood pressure; the highest rates of pay inequity and unpaid work; the highest rates of teenage smoking among girls; the highest rates of environmental illness including the rate of cancers and asthma; and the highest rates of female cancer deaths in all of Canada. And yet, though the Atlantic region makes up 8.2% of the Canadian population, the region receives only 2.9% of all medical research funding in Canada & only 4.7% of all social sciences and humanities research funding. Considering the above, there is little doubt that we need to continue to strengthen the profile and capacity of Atlantic Canadian research to reflect and respond to the realities of our region. There is also little doubt that continued commitments to women's health research are crucial to making the best strategic investments for the health and welfare of future generations of Atlantic Canadian women, and ultimately, the children and families connected to them.

The year 2001 speech from the throne clearly indicated an emphasis on promoting research in Canada. It also placed an emphasis on the areas of people living in disadvantaged circumstances, specifically, women and children living in poverty and aboriginal communities. The "Inclusion" of such forgotten populations in society is the framework which distinguishes the research and activities of the Maritime Centre of Excellence for Women's Health (MCEWH).

The Centres of Excellence for Women's Health have a commitment to: creating dynamic partnerships and networks of community, academic, health care and government organizations and individuals throughout Canada; working to improve the health of women; hearing the voices of disadvantaged women not typically heard in health research or health systems; generating knowledge on key women's health issues; providing analysis, advice and information on women's health to governments, agencies and individuals involved in health and policy.

There are many ways in which MCEWH has worked to achieve its goals and many examples of its "excellent" work throughout our region: As a result of MCEWH's research mandate, the focus of health research has been broadened to address the interplay between the determinants of health and to include population health determinants and community-based research. As a result of MCEWH's communications mandate, the profile of women's health in Atlantic Canada has been raised through a variety of means used to reach different audiences, including the general public and media. As a result of MCEWH's networking mandate, new and integrated ways of thinking about health have been promoted as well as new multi-disciplinary approaches to academic research. As a result of MCEWH's policy mandate, MCEWH is seen as legitimate, professional, and relevant to the policy and research needs of decision makers in government and community; the Centre has evolved into a strategic regional/national partner, broker, and bridge institution which links science and community participation through research and policy dissemination.

With an initial 5-year funding amount of only \$2 million, MCEWH has attracted an additional 4 million in research dollars to the Atlantic region. This means for every dollar Health Canada has invested, MCEWH has generated two more dollars for research and employment in only 4 years. Despite this success in attracting research funding, MCEWH still needs core operational funds to keep the research going. We request the Centre's funding be increased from \$2 to \$3 million for the next 5 year period which would encourage greater research and policy activity in each Atlantic province.

The timing couldn't be better! MCEWH is scheduled for closure in March 2002. We urge the government of Canada to renew its commitment to research excellence and to women's health by announcing continued funding support for the Centres of Excellence for Women's Health Program.