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## WOMEN'S HEALTH IN HEALTH CANADA: VISION FOR THE FUTURE

This information page is provided to give background and to outline options for the future of Health Canada's investment in women's health, gender and health.

The member organizations of the Women's Health Contribution Program (WHCP) conduct policy-oriented research and provide evidence-based advice to policymakers and communities to improve the health and lives of girls and women in Canada. Firmly established across Canada, the agencies have more than 12 years of research and training expertise and have considerable partnership networks with academic institutions, policy-makers at many levels, and with grass-roots organizations across Canada and internationally.

The agencies receive modest core funding from Health Canada, which allows them to:

- undertake cutting-edge research on the determinants of health for women and girls – locally, regionally, nationally and internationally;
- leverage new research, knowledge translation and capacity-building resources;
- provide timely, evidence-based policy advice to the federal government on policies related to the health and well-being of women and girls;
- invest in the development of tools and opportunities to deliver gender-based analysis training;
- train and mentor up-and-coming researchers and policy analysts;
- establish and sustain diverse community partnerships and networks for the advancement of the health and well-being of women and girls in Canada and around the world.

Our work to date has demonstrated that there are distinct differences between men and women in health, and that those differences can be significant to the application of effective, efficient policy and planning. These differences between and among women and men have been shown, for instance in the areas of

- clinical trials;
- systematic reviews;
- tobacco policy;
- HIV/AIDS;
- Aboriginal and First Nations health;
- drug prescription guidelines;
- wait times; and
- mental health, among others.

Furthermore, the field of women's health and gender is still fairly new. The member agencies are well-positioned to move forward to investigate and provide advice about childhood and adult obesity, health and the environment, heart disease prevention and treatment and occupational health, and other federal priorities, in a timely and effective manner.

Our work, organizations, opportunities and networks distinguish us from other organizations such as the CIHR Institute on Gender and Health in a number of ways. We have the capacity and

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organizational basis for both quick turn-around on emerging policy issues, as well as sustained momentum on federal policy initiatives. We also have the capacity to provide knowledge translation through a variety of means; and in fact have been called upon for training and advice given our track record in KT. Similarly, as gender-based analysis is typically the foundation of our work, we frequently undertake training and capacity-building in GBA and its application in health and healthy living.

Although the WHCP represents a considerable return on the federal government's investment in women's health, it is our understanding that funding may conclude at the end of the 2008/2009 fiscal year. We would argue that it is critical for the federal government to sustain and expand its role in advancing women's health and, with our considerable experience and expertise, we are committed to supporting federal leadership in women's health and gender and health in the coming years.

We look forward to working with Health Canada to develop new directions that will enhance and expand the investment made to date. This could include, for instance capitalizing on our experience and networks to assist in the development of related fields of work such as men's health, the health of women and men in the far north and greater understanding of the gendered health needs of sub-populations in Canada.

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