

ADDRESSING THE GENDER GAP IN CANADIAN HEALTH RESEARCH FUNDING

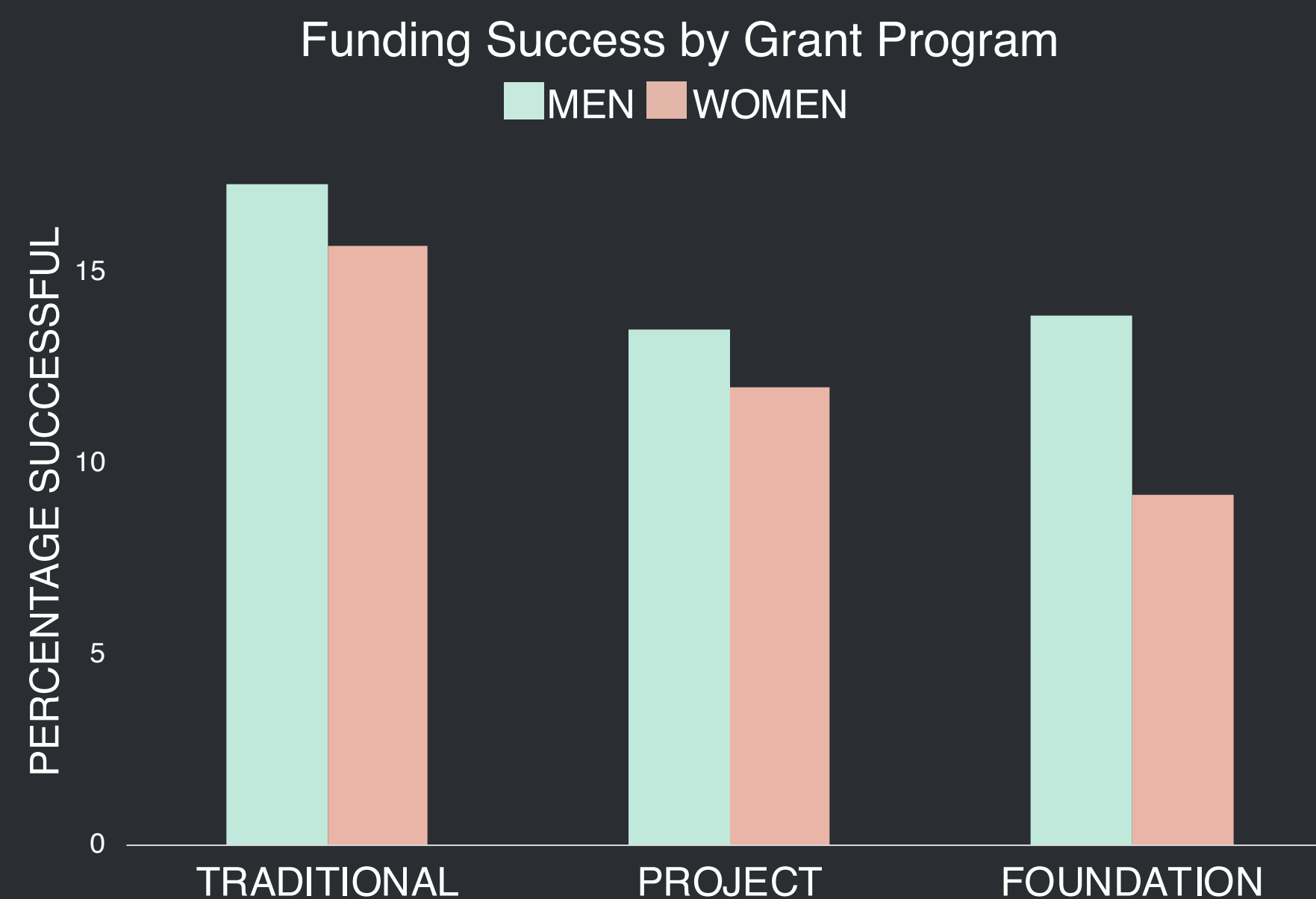
HH/NURS 4516 Nadia Nazarali, Mariam Oliva Nieto, & Brittney Wright

BACKGROUND

Much research has been published on the inequalities faced by women in research.^{1,2}

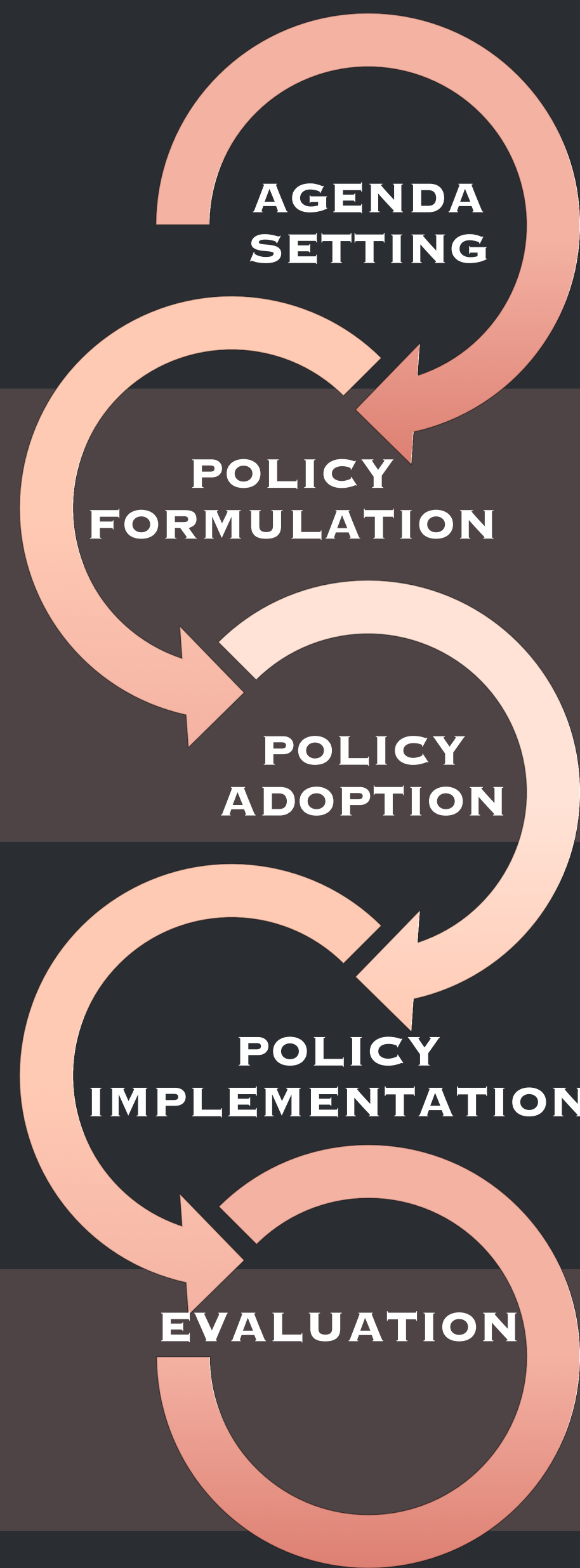
In Canada, the Canadian Institutes of Health Research (CIHR) is the national investment agency for health research, providing a billion dollars annually to researchers through various grants and awards.³

In 2019, Witteman, Hendricks, Straus, and Tannenbaum brought attention to the gender gaps present in CIHR funding through a comparison of three CIHR grant programs.



The largest gender gap occurred in the Foundation grant program, where the adjudication criteria focused mainly on the caliber of the principal investigator instead of the quality and importance of the proposed research.² It was concluded that these gender gaps arose from grant reviewers' evaluating women less favorably than men, rather than from differences in research proposal quality.²

POLICY CYCLE



- Target CIHR's Equity Strategy
- Identify key stakeholders
- Goal: Get CIHR to adopt a policy that will close the gender gap in CIHR's health research funding by 2030
- Follow the Canadian Research Chairs Program policy:
 - Setting targets based on various groups representation within the general Canadian population
- Policy: CIHR's Equity Strategy will set gender-based targets, ensuring that 50.9% of grant funding will be given to women.⁴
 - This will be implemented incrementally over a ten year period
- Engage key stakeholders:
 - Federal Science Minister
 - Researchers advocating for equality in research
 - Canadian Nurses Association
 - CIHR Vice-President of Research Programs
- CIHR to gather grant funding data and provide an annual progress report over the next ten years, and an annual report once the target has been hit

DISCUSSION

The underrepresentation of women as authors, peer reviewers, and editors has implications for their contribution of knowledge in the peer-reviewed research that is vital to advancing knowledge, policy, and practice in healthcare.¹

Women researchers are more likely to include sex- and gender-based analysis in their research, which is shown to improve the quality and accuracy of research findings.⁵

Until the implicit and explicit gender biases and gender norms currently held by society are changed, setting targets on the institutional level that are representative of the general

population should be an effective solution.

Changes also need to be made to the peer review process and how journals choose to publish articles, and the diversity and equity within the positions of peer reviewers, editors, and publishers.

CIHR's Equity Strategy also needs to include disability, race/ethnicity, and LGBTQ+, as this data is not currently collected from applicants and reviewers.⁶