



Women's Health Research Cluster

Strategic Plan
2022-2025

Land Acknowledgement

The Women's Health Research Cluster recognizes that we live, work, play and participate in community on the unceded, ceded and traditional territories of the 203 First Nations, along with 38 Métis Chartered Communities, each of which possess their own unique traditions and history here on this land that we now refer to as British Columbia.

We acknowledge the importance of the Truth and Reconciliation Commission of Canada's Call to Action, the United Nations Declaration on the Rights of Indigenous Peoples and the BC Declaration on the Rights of Indigenous Peoples Act.

In all of our work, we are committed to ensuring Indigenous women's rights to health and safety, and the equal opportunity to participate in a manner that recognizes and respects Indigenous cultures and traditions.

This Strategic Plan was written in Vancouver which is part of the unceded homelands of the Coast Salish Peoples and the traditional territories of the xwməθkwəyəm (Musqueam), Skwxwú7mesh (Squamish), Stó:lō and Səlílwətaʔ/Selilwiltulh (Tseil-Waututh) First Nations.

Terminology

As part of our ongoing commitment to equity, diversity, and inclusion, we would like to clarify intended meanings of language commonly used by the Women's Health Research Cluster and within the pages of this document.

We use the terms female/male to indicate biological sex and use women/men to encompass sex and gender. We recognise that gendered terms are constantly evolving and chose to use the term 'women' to reflect individuals that identify as women as well as young people that identify as girls. However, we acknowledge the importance of other gendered groups, such as those who identify as non-binary or transgender, that have been neglected by past research.

Sex describes the biological and physiological characteristics that define males and females. Gender is a complex psychosocial construct that includes gender identity, and how a given society may expect an individual to act given their gender, including gendered roles, educational gender, and institutionalised gender. Neither sex nor gender are binary constructs. Although some have called for inclusive terms such as 'people with uteruses', this unfortunately is not inclusive as it does not include women who have had their uteruses removed but still identify as women, or transgender women. Similarly using the term 'people who menstruate' leaves out women who use hormonal contraceptives that block menstruation and postmenopausal women who no longer menstruate.

Although the Women's Health Research Cluster has a strong emphasis on women and girls, we recognise and provide content for other gendered groups. Our goal is to be inclusive without erasing any one group. We recognise that studying women is not the same as studying trans, non-binary people or men. Many factors will interact with both sex and gender in different ways resulting in 'intersectionality'. This is why we believe that it is important to study all genders, ages and sexes, which is the way forward to gender equity in health.

Women’s Health Research – Overlooked and Underfunded

Women’s health is often not considered a distinct phenomenon. Yet, women and girls have distinct factors that contribute to their overall health. Sex chromosomes are not limited to the reproductive organs but are located in every cell in the body which will influence functioning throughout the entire body. Females have female-specific organs, different hormonal compositions, physiological factors such as metabolic rates, and social factors that contribute to health. This means women experience female-specific diseases, differences in disease susceptibility, display distinct symptoms and react to treatment differently, when compared to much of the current health knowledge, which is based on male bodies and experiences.

Women and girls of reproductive age were excluded from clinical trials until the 1990s. In the United States women have only been incorporated into National Institutes of Health (NIH) funded clinical studies since 1993, and they only fund approximately 5% of clinical trials across the world. Furthermore, even in trials in which women are included, their data is not analysed such that discoveries can be made where treatment efficacy may differ between sex or gender.

Despite mounting evidence necessitating a greater focus, women’s unique health needs have been overlooked. This is resulting in misdiagnoses, minimized symptoms, poorly targeted treatment, and ultimately poor health outcomes in women.

This is compounded by chronic underfunding for women’s health research and little attention across the spectrum of health research, from funding to publication, education, and academic opportunities. Research informs investment, policy, and practices both locally and globally. Without this funding or focus, women’s health outcomes will continue to be at jeopardy.

There is a desperate need to grow the discipline of women’s health research to overcome the concerning gaps in knowledge. While there are organizations dedicated to health research in general, and local research groups, there is a pressing need to actively facilitate and catalyze women’s health research on a broader scale.

Women's Health Research Cluster

Aware of the many health inequities but inspired by a future where women's health is seen as unique, valued and prioritized, the Women's Health Research Cluster (WHRC) was established as an international network of researchers, clinicians, community partners and trainees, working together to advance the health outcomes of women worldwide.

Our purpose:

To have a future where women and girls can live equitably healthy lives across the lifespan.

Our vision:

To achieve sex-and-gender health equity.

Our mission:

To bring together a multidisciplinary collaborative network of researchers and stakeholders to promote, expand, and catalyse impactful women's health research.

Our pillars:

Research Facilitation – enabling researchers to do their best work.

Capacity Development – building the next generation of researchers.

Knowledge Translation – generating dialogue around women's health.

Advocacy – driving equity in policy and investment in women's health research.

Our values:

Inclusivity ● Compassion ● Respect

Knowledge ● Integrity

In our first Strategic Plan, we set out an integrated approach to tackle equity in knowledge and outcomes for women's health through our four pillars. Together, these four pillars represent a focus on growth and sustainability for the discipline, and systemic change for women's health outcomes. Included within this Strategic Plan and central to our mission are our values, our members, and our partners.

This Strategic Plan was developed with input from our member community and advisors through our Strategic Planning Town Hall. It will be used to centre us collectively in our purpose, as our guide for growth, to keep us true to our values, and as a reminder of how far we have come.

By combining our academic experience across the spectrum of women's health and contributing disciplines with our grassroots and inclusive approach, we offer a direct strategy to build capacity for future women's health researchers, encourage research in women's health to have a future where we have the knowledge to enable women and girls to be healthy. Within this document, you will find the passion and determination of our organization, an intentional departure from the status quo, and the framework for inclusive women's health research.

We feel strongly that our work makes a substantial difference to the international discipline of women's health, and the impact this will have on women's, girls and gender-diverse people's lives worldwide.

Please join us on this journey.



Research Facilitation

It is evident that we need to fast track women’s health research to close the gap in health equities for women globally. With this extensive knowledge gap and an average research-to-practice timeline of [17 years](#), it is paramount that focused support is provided to the women’s health research community.

We know that the most effective research is supported from conception to application by a diverse network of funders, research institutions, researchers, statisticians, voices from people with lived experiences, communicators, and policy makers working cooperatively and collaboratively. Research facilitation is the practice of supporting all parts of the research cycle. From generating ideas and obtaining research funding, to knowledge translation and clinical or policy application. Supporting the women’s health community with research facilitation services helps the discipline grow in terms of research quantity, quality, and

community. It ensures knowledge can be uncovered, translated, and mobilized into improved women’s health outcomes.

The WHRC is dedicated to supporting researchers and community partners with a cross-spectrum of research needs including:

- Identifying funding opportunities.
- Supporting grant applications.
- Networking and connecting women’s health researchers.
- Translating and communicating knowledge.
- Integrating equity, diversity and inclusion (EDI) practices into research.
- Understanding sex-and-gender-based analysis.
- Providing opportunities for knowledge dissemination.

WHRC three-year commitments



As part of the Research Facilitation pillar, over the next three years, the WHRC is committed to:

- Convening working groups on key research topics areas to facilitate networking and idea sharing.
- Developing an Expert Database to facilitate networking and collaboration.
- Foster greater connection between animal and human researchers.
- Supporting researchers to secure funding through grant facilitation.
- Establishing a database for Brain Health as a model for data sharing in women’s health.

Research Facilitation in Practice



As an early career investigator, the Women’s Health Research Cluster has been particularly useful for me as I build my research team and program. The WHRC has facilitated introduction to trainees and faculty that may be suitable for partnership. These introductions have led to valuable new collaborations for two projects. I have also attended grant facilitation workshops that provided useful feedback on my application by WHRC staff and other members.

Dr. Marianne Vidler, Assistant Professor in the Department of Obstetrics and Gynaecology at UBC.





Capacity Development

Supporting the next generation researchers is critical for the sustainability of any field of study. For women's health research, this is even more important due to both the lack of awareness about the field and the limited funding available.

When trainees have the opportunities for funding, training, knowledge translation and the space to explore ideas and concepts with a diverse community, they will inevitably become better researchers with greater impact.

As a central pillar to the WHRC mission, Capacity Development will be provided in the following ways:

- Providing volunteer and employment opportunities to be involved with the work of the WHRC.
- Networking opportunities with peers and wider academic and stakeholder community.
- Targeted women's health programs focused on building skillsets for all women's health researchers (trainee, early career, senior academics) and those in related disciplines.
- A platform for sharing ideas and research to help improve research questions, methodologies, analysis, networks, and publication.

WHRC three-year commitments



As part of the Capacity Development pillar, over the next three years, the WHRC is committed to:

- Developing a learning resource webpage for academics.
- Providing an internationally accessible Trainee Research Presentation Series.
- Provide opportunities for our members to build skills related to grant writing, translating research into policy and sex and gender-based research methodologies.
- Creating Student Awards that allow trainees to fund their research and cultivate knowledge translation skills.
- Developing a multidisciplinary graduate course on women's health research.

Capacity Development in Practice



“ Because of the WHRC my CV has been bolstered with accomplishments and my content expertise has expanded, thus making me an incredibly competitive applicant for professorship jobs. As a WHRC Trainee Co-Lead, I've gained leadership skills by coordinating and hosting the Trainee Research Presentation Series. This has also sharpened my mentoring abilities and helped me practice creating a safe and inclusive space for other trainees of all backgrounds to develop their own skills. Additionally, the WHRC's other conferences, seminars and events has given me ideas about who I might want to work with in the future.

Dr. Travis Hodges, Postdoctoral Fellow, Department of Psychology, University of British Columbia

Knowledge Translation



Central to systemic change is the need for broader understanding and acceptance of issues affecting the world we live in. Women’s health is no different. The foundations of inequities women face in their health are embedded in the inequities in women’s health research. If we are to truly eliminate these inequities, we need to ensure that there is a greater appreciation of women’s health as unique and important, in addition to a deeper understanding of women’s health experiences. We

need to translate new research findings into digestible information and impart the power of research to directly improve health outcomes.

The WHRC is dedicated to fostering an interdisciplinary and public dialogue around women’s health through our Knowledge Translation pillar. We will do this by exploring topics across the women’s health discipline and communication methods, both locally and globally.

WHRC three-year commitments



As part of the Knowledge Translation pillar, over the next three years, the WHRC is committed to:

- Expanding the reach of our public content – including the [Women’s Health Blog](#) and [Women’s Health Interrupted Podcast](#) – to international contributors and audiences, whilst building structure and focus to content.
- Ensuring our [Women’s Health Seminar Series](#) incorporates diverse speakers across all disciplines within the broad spectrum of women’s health, including talks focussing on health in gender diverse groups.
- Facilitating the contribution of women’s health research outreach in free public events.
- Hosting and supporting multidisciplinary women’s health conferences to foster knowledge exchange and networking between trainees, academics, and other professionals.

Knowledge Translation in Practice



The WHRC offers so many opportunities for me to share my research with a wide audience and to learn from others. As a Young Investigator Award recipient, I was able to share my research with a diverse audience as part of the Women’s Brain Health Conference, and I’m currently helping to enhance the academic community’s sex and gender-based analysis (SGBA) competencies through the WHRC’s SGBA Working Group. I’m also grateful for the WHRC’s Women’s Health Seminar Series, which has helped me learn about so many women’s health topics that are outside my field of research. The WHRC clearly values knowledge translation and excels at it.



Dr. Cindy Barha, Postdoctoral Fellow, Department of Physical Therapy, University of British Columbia.

Advocacy



The inequity in health research is systemic. It can be seen in the differences in funding for women’s health projects, in publications of women’s health topics, in representation within academic institutions, and is experienced by women’s health researchers on a weekly basis in additional ethics approvals, difficulty publishing in high end journals, obtaining funding, and questioning of research methodologies. We need to ensure the decision makers at all levels of the healthcare system, funding system and wider policy recognize the importance of women’s health research for not only women, but the health of our entire population.

We are committed to moving forward the discipline of women’s health research through our advocacy work with decision makers by:

- Uncovering evidence of inequities in women’s health research, education, funding, opportunities, and publication.
- Collectively advocating to change the policies and practices that are impeding women’s health research.

Without any bureaucratic or political ties, we can ensure our efforts centre on women’s health researchers and women’s health outcomes rather than any alternate agendas.

WHRC three-year commitments



As part of the Advocacy pillar, over the next three years, the WHRC is committed to developing an advocacy program that will advance **funding** for women’s health and intersectional research, and **improve SGBA use** by:

- Uncovering evidence that shows women’s health research is inequitably funded.
- Publicly calling for better scientific funding for women’s health research through media.
- Understanding and using women’s health researcher experiences to direct and support advocacy efforts.
- Creating Women’s Health Roundtables in key geographic areas with stakeholders to collectively advocate for better funding for women’s health and intersectional research.
- Raising awareness about how SGBA, in its current iteration, is not used in a manner that will benefit women’s health.
- Surveying the scientific community to understand the current uptake of SGBA and promote proper implementation.

Advocacy in Practice



Women’s health research is chronically underfunded. In a 2019 report commissioned by B.C. Women’s Health Foundation, we found that over the past ten years, grants dedicated to women’s health made up only 8% of Canadian Institutes for Health Research (CIHR) grants. Given that women make up over 50% of the population, these percentages are dishearteningly low.

Policy Options Article uncovering evidence of the bias in health research funding co-authored by Dr. Liisa Galea, Lead of the Women’s Health Research Cluster.

Our Values

These five values capture the enduring tenets that drive everything we do. They serve as a reminder of *who* we are and *how* we work towards our achieving our vision. The WHRC is committed to using these values to guide our decisions and actions so we always stay true to what is important.



Inclusivity—to intentionally and actively address inequities in power while building a diverse community and allowing our work to be driven by that community.



Compassion—to have concern for the suffering of others and to respond with thoughtful and supportive action alongside them.



Respect—to recognize and honour human dignity and self-determination.



Knowledge—to pursue the responsible search for truth and embed that truth as the foundation of our work.



Integrity—to be honest and truthful as we seek justice for the communities we serve.

Our Members



We believe that by unlocking the great potential of our member community to address the gaps in women's health, we can achieve sustainable growth in the field and improve women's lives worldwide.

Our membership is free and open to anyone interested in women's health, and has grown to include over 350 members from 17 countries across the world. Our membership base includes trainees, researchers, community members, and women's rights advocates that are in health-related fields or are interested in

women's health or sex-and-gender differences. Meet some of our members [here](#).

Members' subject matter expertise bridges basic science to clinical research, spans rhetoric to economics, encompasses the entire body from kidneys to brain, and stretches across the life course.

WHRC three-year commitments



As part of our dedication to our community of members, over the next three years the WHRC is committed to:

- Growing our membership internationally to 700 members across 20 countries.
- Deepening and broadening our research focus to span the breadth of the women's health discipline and associated fields, and the depth of knowledge in these fields internationally.
- Developing strategic partnerships that advance our ability to deliver on our commitments.
- Holding annual Town Halls to ensure our member community is central to the development of our organization.
- Measuring our impact and publishing our progress against our Strategic Plan.
- Obtaining sustainable funding to continue our work in women's health research.

Our Partnerships

Our mission to bring together a multidisciplinary collaborative network of researchers and stakeholders to better women's health research is reflected in the breadth of our partnerships.

Funders

We are grateful for the financial support of the following organizations and individuals, which enable us to drive our mission forwards:

- University of British Columbia
- Michael Smith Foundation for Health Research
- Canadian Institute of Health Research
- BioTalent Canada
- Dr. Elizabeth Rideout - CIHR Sex and Gender Science Chair in Genetics
- Dr. Liisa Galea
- Elsevier
- Women's Brain Health Initiative
- Social Sciences and Humanities Research Council
- UBC Global Lounge
- Peter Wall Institute for Advanced Studies
- Djavad Mowafaghian Centre for Brain Health
- UBC Faculty of Medicine
- Institute for Gender and Health Trainee Network
- Dr. Suzanne Campbell



Djavad Mowafaghian
CENTRE FOR BRAIN HEALTH



Djavad Mowafaghian
CENTRE FOR BRAIN HEALTH



Partners

We are pleased to recognize our long-term partnerships with the following organizations:

- Women's Health Research Institute
- Institute for Gender and Health Trainee Network
- Canadian Perinatal Mental Health Collaborative
- Djavad Mowafaghian Centre for Brain Health
- BC Brain Wellness Program
- UBC Action on Sepsis Research Cluster
- UBC Biomedical Imaging and Artificial Intelligence Cluster
- Dynamic Brain Circuits in Health and Disease Research Cluster



Collaborators

We are thankful to have collaborated with:

- McGill - Healthy Brains, Healthy Lives
- UBC Public Humanities Hub
- Data Science and Health Cluster (DASH)
- Gynecologic Cancer Initiative
- Designing for People Cluster
- BC Regenerative Medicine Cluster
- BC Diabetes Research Network
- Centre for Artificial Intelligence Decision-Making and Action (CADIA)
- REMAP-Digital Research Excellence Cluster
- Bionics Network
- Centre for Heart Lung Innovation's Airway Centre
- Pacific Post-Partum Support Society
- Canadian Organization for Gender and Sex Research (COGS)

WOMEN'S

Health Research Cluster

Building a future where women can live
equitably healthy lives from birth to old age