

Bringing Gender and Diversity Analysis to our Work

A Checklist

Sex, Gender and Diversity-based Analysis (SGDBA) is an iterative process that aims to integrate biological, social, economic and cultural equity into public health policy and practice, including into substance use initiatives for Canada's population (Status of Women Canada, 2001; CCSA, 2009). It is essential to the development of effective health policies and initiatives, as research shows that differences in sex, gender and diversity contribute to differences in health risks, service use, system interactions and outcomes.

The purpose of this tool is both to encourage and provide guidance for taking the initial steps towards applying SGDBA to activities undertaken by the substance abuse workforce. The checklist was developed based on recommendations from:

- a workbook developed by Status of Women Canada (2004);
- reports by CCSA (2009), three Canadian Centres of Excellence for Women's Health (Clow et al., 2009), the European Commission (2003), Health Canada (2003), the Prairie Women's Health Centre of Excellence (2000), the UK Equality and Human Rights Commission (2007), and the World Bank; and
- discussions from a Virtual Community of Practice on Girls, Women and Substance Use held between February and July 2009.

The approach outlined in this document is introductory. It summarises the processes of applying a sex, gender and diversity lens when developing initiatives, including providing a helpful checklist to guide you through the first steps. This simplified process lays the groundwork for future and more comprehensive Sex, Gender and Diversity-based Analysis as resources become available.

INTRODUCTION TO SEX, GENDER AND DIVERSITY-BASED ANALYSIS

Using SGDBA can help achieve a comprehensive understanding of equity issues and therefore ensure that human rights are considered and respected. To be optimally effective, SGDBA should be applied throughout the entire project or policy cycle, from initial planning (how we define our problem) to implementation (whom are we treating?) and evaluation (how do we know?).

SGDBA:

- examines the differences in the lives of diverse populations, particularly those that lead to inequality;
- recognizes that not all boys, girls, men and women are the same by examining the varying perspectives of Aboriginal, Inuit and Métis people, as well as individuals of differing age, sexual orientation, colour, race, ethnicity, ability/disability and socioeconomic status;
- applies this understanding in an integrated and systematic approach to policy and program work; and
- aims to achieve equity rather than equal treatment, as treating everyone the same may not necessarily produce equitable results.

SGDBA as a 'best practice' is widely accepted throughout Canada, including in the addictions and substance abuse field. For example, one of the *National Treatment Strategy's* component and guiding principles is that "services and supports must be informed by gender- and diversity-based analysis" (National Treatment Strategy Working Group, 2008). Additionally, the guiding principle in *Building on Our Strengths: Canadian Standards for School-based Youth Substance Abuse Prevention: A Guide for Education and Health Personnel* (Canadian Centre on Substance Abuse, 2009) is to "[u]nderstand and engage diverse student populations... [based on the] understanding that students bring a mix of social and cultural experiences to school, some of which may place students at great risk for substance abuse problems."

SGDBA can be particularly useful when considering the impact of policies or programs for Aboriginal populations. The Assembly of First Nations (March 2007) identified a need to clearly define procedures and indicators for a gender-balanced approach to develop policies that enhance First Nations family wellness. The Native Women's Association of Canada (2008) also recommends that the process generates a checklist of 'upgrades' that are needed for project or policy planning.

In working with diverse populations, it is important to ensure meaningful and respectful engagement of individuals, programs and communities. Beyond cultural awareness and sensitivity, cultural competency and safety are key concepts to reach these outcomes. A culturally safe and competent

system is "one that acknowledges and incorporates—at all levels—the importance of culture, assessment of cross-cultural relations, vigilance toward the dynamics that result from cultural differences, expansion of cultural knowledge, and adaptation of services to meet culturally unique needs" (Betancourt et al., 2003). As such, cultural safety and competency extend beyond cultural sensitivity to analyze power imbalances, institutional discrimination and colonial relationships as they may apply to public health care. Cultural competency is the actual action of 'safe' practice whereby one recognizes his or her cultural beliefs and value systems to ensure that they do not perpetuate unequal power relations at the individual, family, community or societal levels (National Aboriginal Health Organization, 2008).

There are challenges to the practice of applying SGDBA. The European Commission (2003) identifies several limitations to conducting gender-based analysis: the complexity of evaluating an initiative on many dimensions, the limited availability of guidelines on a systematic application of this approach, the lack or incompleteness of baseline data, and the difficulty in measuring and modelling indicators and observations. Nonetheless, these limitations can be managed by making use of several evaluation models and experts in the field.

This tool was developed by the Canadian Centre on Substance Abuse, in collaboration with Nancy Poole, Colleen Dell, and the National Advisory Group on Youth Substance Abuse Prevention, to ensure that the needs and realities of boys and girls, women and men, and diverse populations are considered within *A Drug Prevention Strategy for Canada's Youth*—a national prevention strategy that aims to reduce illicit drug use by Canadian youth between the ages of 10–24. The tool can be applied to all substance abuse initiatives, from treatment to prevention to workforce development and enforcement.

SEX, GENDER AND DIVERSITY-BASED ANALYSIS: BEGINNING THE PROCESS

The following checklist represents the type of information that should be collected and analyzed during the planning and initial development of your initiative when applying SGDBA. An initiative refers to any product or process that your organization is developing, such as a policy statement, research document or service delivered to a client population. SGDBA is an ongoing process—it is applied at the beginning of your initiative when it is being conceptualized and carried through to its application. SGDBA is also a continually evolving process in which lessons learned can be incorporated into your group's

subsequent initiatives. Documenting information gaps and acknowledging the need for enhanced efforts in the different planning stages will build a strong foundation for ongoing SGDBA.

The aim of the fifteen question checklist below is to guide your group in the process of applying SGDBA in the conceptualization and initial planning of your initiative. By reflecting on and answering each question below, you will be able to consider the extent to which your group is ready to put into practice an initiative guided by an SGDBA framework. The fifteen questions will help you to consider taking tailored approaches to address gender and diversity specific needs and inequities in your initiative.

A 'group' or 'subgroup' can refer to males and/or females of differing age, sexual orientation, colour, race, ethnicity, ability/disability, geographical location and socioeconomic status.

SEX, GENDER AND DIVERSITY-BASED ANALYSIS CHECKLIST:

The following is a checklist of fifteen key questions to ask when undertaking Sex, Gender and Diversity-based Analysis. Complete the checklist individually or with colleagues!

PLANNING

- Yes No Have you considered your own biases and assumptions about the issue?
- Yes No Have you considered the special needs of different groups and subgroups in defining the objectives of your initiative?
- Yes No Is there enough information available to establish an accurate baseline of information on the diverse needs of different groups related to your initiative?
- Yes No What are the constraints that might prevent men, women or members of diverse groups from equitable participation in the initiative? Are there barriers and constraints that might limit access to opportunities, resources and decision making?
- Yes No If it is likely that men, women or members of diverse populations would be underrepresented in project activities, are there specific actions to enhance their participation? Does the initiative include measures to equalize opportunities and access?
- Yes No Are the project design team and implementation staff aware of Sex, Gender and Diversity-based Analysis? If not, might they benefit from additional training?
- Yes No Has your initiative been evaluated in terms of cultural competency?

CONSULTATION

- Yes No Have key stakeholders, such as members of diverse populations and gender- and culturally-aware organizations, been consulted in the project planning process? Are regular consultations held with all key stakeholders?
- Yes No What have other departments, organizations or colleagues done in determining relevant information that may be transferrable so as not to overconsult particular groups?
- Yes No Are there particular cultural protocols to consider, such as speaking with Elders?
- Yes No Are there partnerships that could be built that would enhance outreach and improve access to ensure equality and equity?

OUTCOMES AND IMPLEMENTATION

- Yes No Are any sex, gender and diversity-related outcomes anticipated?
- Yes No Have you considered which supports are needed to improve program equity?

EVALUATION

- Yes No Is Sex, Gender and Diversity-based Analysis included in the terms of reference of the evaluation team?
- Yes No Will disaggregated data (such as sex, age, ethnic and socioeconomic disaggregated indicators) be collected and analyzed so as to evaluate if your initiative brought about positive change for the populations of interest?

EVIDENCE-BASED POLICY AND DATA COLLECTION

Evidence-based policy aims to apply the best available evidence to decision making. Professionals should make conscientious and judicious decisions in their work, based on the best evidence available. Reviewing published research studies is a major method used for evaluating particular options. Sex, Gender and Diversity-based Analysis is stronger when employed in an evidence-based policy setting. Key considerations include:

- How will the data be collected?
- Is the available data reliable?
- Are there any gaps in the data?
- Is there enough information to establish an accurate baseline of the current situation?
- Can any of the patterns be explained?
- Are there any risks of using the existing data to make decisions on future initiatives?
- Can you partner with community members and other organizations to collect data and fill in the gaps?
- Are there any regulations that need to be followed when collecting the data? (For example, you may need to obtain ethical approval or support from community Elders prior to collecting the information.)
- Has a culturally competent approach been adopted by decision makers in their project planning or in their interaction with members of their committees or working groups?

GET A HEAD START: DATA SOURCES

Research and prevalence data may already exist for the target population(s) of your initiative. Useful sources of information in Canada include:

- [Women's Health Data Directory](#)
- [Canadian Institute for Health Information](#)
- Health Canada
 - [Canadian Alcohol and Other Drug Use Monitoring Survey](#)
- [Canadian Institute for Health Information Annual Health Indicators Report](#)
- [Ontario Student Drug Use and Health Survey](#)
- [Gender, Alcohol and Culture: An International Study \(GENACIS\)](#)
- [The Demographics of Ontario Gaming Revenue](#)
- Statistics Canada
 - [Family Violence in Canada: A Statistical Profile](#)
 - [Women in Canada in 2005: A Gender-based Statistical Report](#)
 - [The Aboriginal Children's Survey](#)
 - [Aboriginal Peoples Survey](#)
 - [Ethnic Origin and Visible Minorities](#)
 - [Families and Households](#)
 - [Age and Sex](#)
 - [Canadian Community Health Survey](#)
- [Native Women's Association of Canada](#)
- [Pauktuutit](#)



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