



DEFINITIONS

GENDER

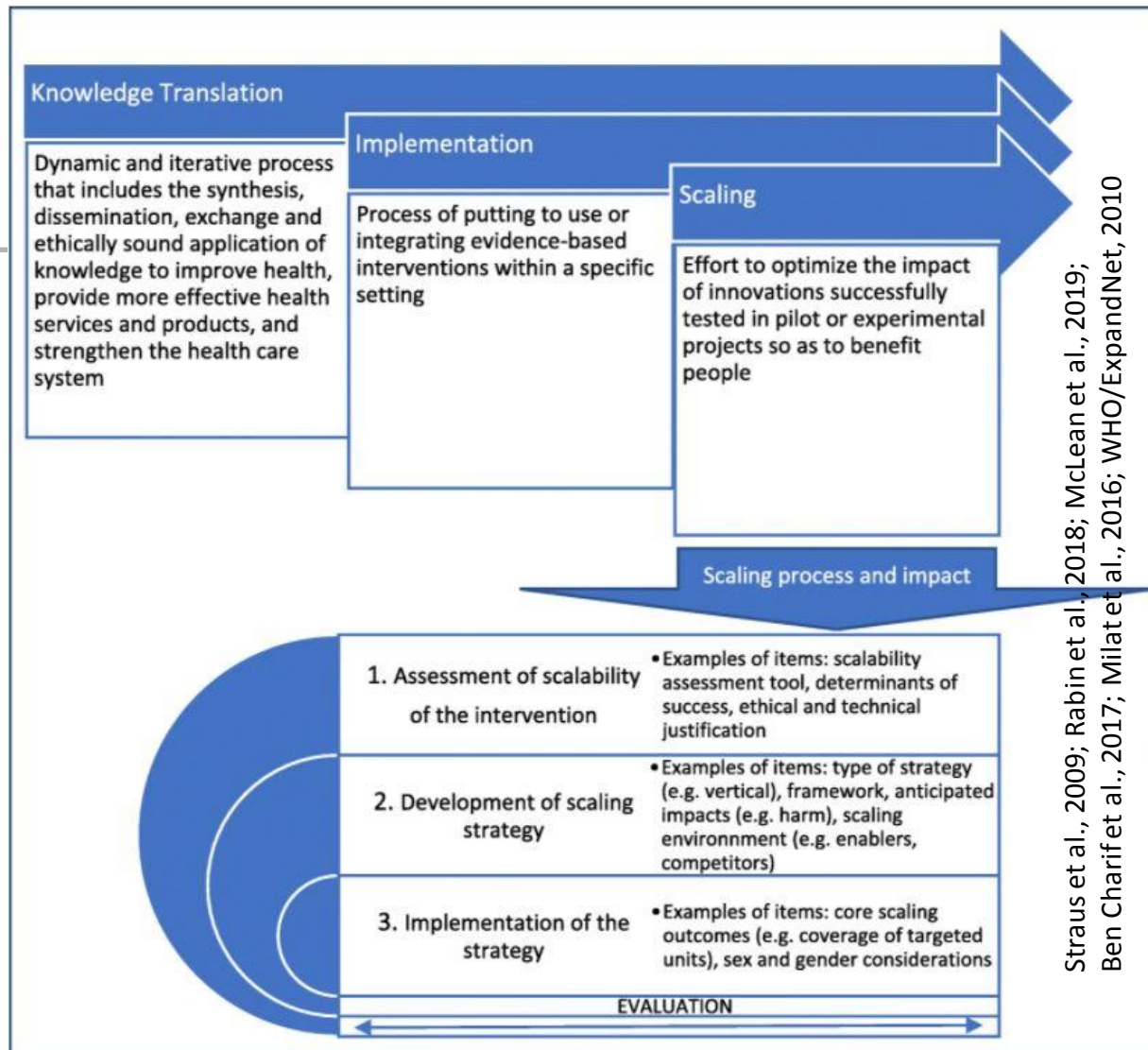
Socially-constructed roles, behaviours, expressions and identities of girls, women, boys, men and gender diverse people.



SEX

Biological attributes of humans and animals, including physical features, chromosomes, gene expression, hormones and anatomy.





Gogovor et al., *Systematic reviews* 2020.



Reporting guideline

A checklist, flow diagram, or explicit text to guide authors in reporting a specific type of research, developed using explicit methodology

Sex and Gender Considerations in Reporting Guidelines: A Systematic Review

Background

- Reporting guidelines help reduce waste in health research by addressing the deficiencies in the quality of its reporting.
- Omission of sex and gender considerations is a recurring deficiency in research design and reporting, despite the growing recognition of their importance.



Sex and Gender Considerations in Reporting Guidelines

Research question

- How sex as a biological attribute and gender as a socially constructed identity are integrated in reporting guidelines of health research?

Sex and Gender Considerations in Reporting Guidelines

Objectives

- To assess the integration of sex and gender considerations in published reporting guidelines based on the use of sex and gender related terms
- To assess the correct use of sex and gender terms

Sex and Gender Considerations in Reporting Guidelines

- Protocol registration: PROSPERO CRD42019136491
- Study design: systematic review, PRISMA-statement
- Inclusion criteria and database: All reporting guidelines (original and extensions) listed in the EQUATOR registry (www.equator-network.org) up to December 2018.
- Data extraction: Pairs of reviewers independently extracted the data using a pre-tested extraction form
 - Also manual extraction: count of sex and gender related words from the printed guidelines (10%, n = 41)

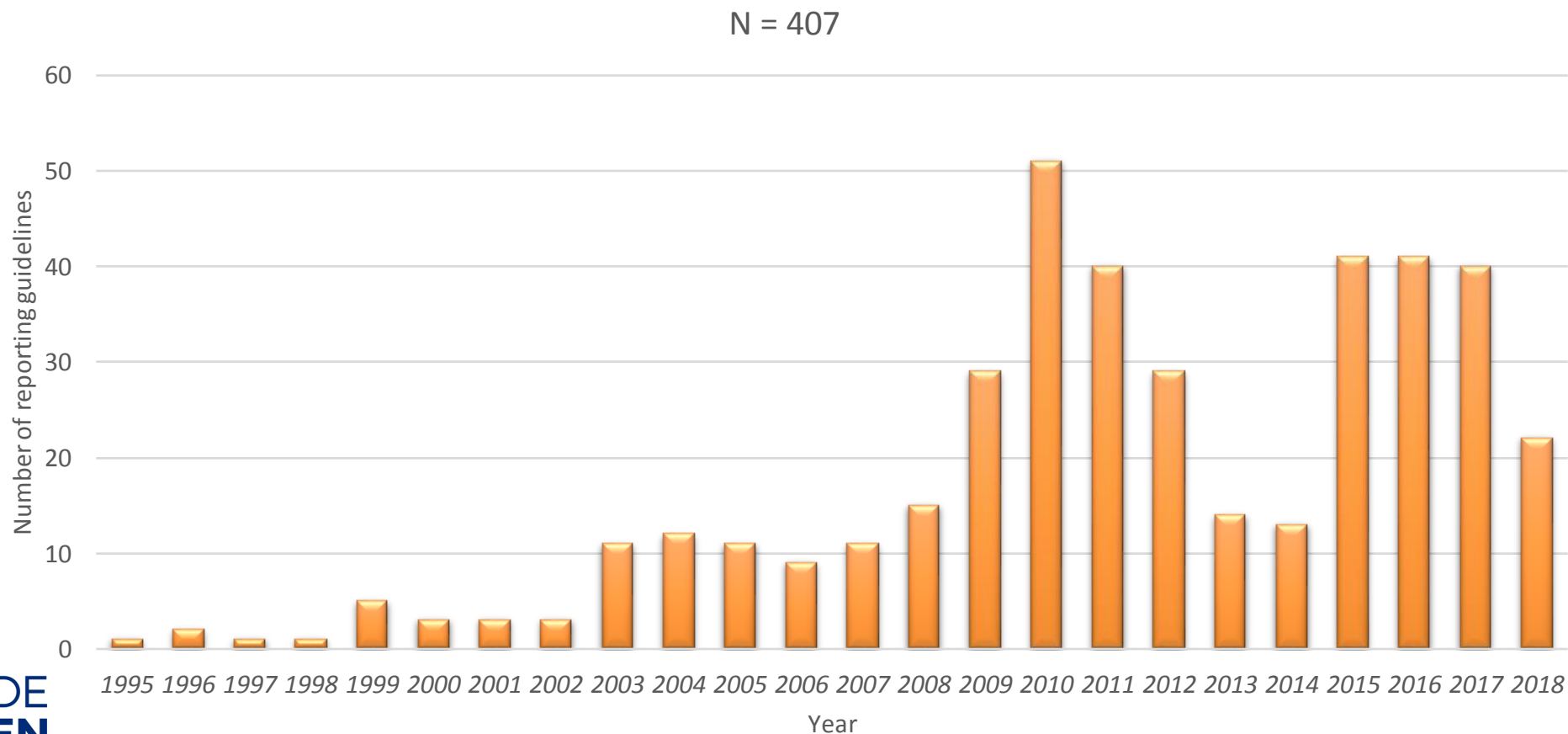


Sex and Gender Considerations in Reporting Guidelines

- Correct use of sex or gender based on three criteria (Adisso et al.,)
 - Non-binary use
 - Use of appropriate categories
 - Non-interchangeable use
 - Correct use: if all the three criteria were met
- Analysis

Descriptive statistics: reported the numbers and percentages of reporting guidelines that used sex and/or gender related items; percentage of reporting guidelines that met each the three criteria for correct use, trends in the use of sex and gender terms

Sex and Gender Considerations in Reporting Guidelines



Sex and Gender Considerations in Reporting Guidelines

- 159 (39%) mentioned "sex" and/or "gender" in the checklist/abstract/main text
- In the checklist of the reporting guidelines (n = 363), "sex" and "gender" were mentioned in 50 (13.8%) and 39 (10.7%)
- Correct use of sex and gender: Only one reporting guideline met the three criteria (SAGER: Sex and Gender Equity in Research)
- Trends in the use of sex and gender terms: "gender" has been used since 1996, while "sex" only started in 2003



Discussion

- Very low use of sex and gender related words : similar findings in previous studies
- Remain to determine the appropriate level of sex and gender information in reporting guidelines
- Recommendations



PROTOCOL

Open Access

Essential items for reporting of scaling studies of health interventions (SUCCEED): protocol for a systematic review and Delphi process



Amédé Gogovor^{1,2,3,4}, Hervé Tchala Vignon Zomahoun^{1,3,4}, Ali Ben Charif^{1,2,3,4}, Robert K. D. McLean^{5,6}, David Moher^{7,8}, Andrew Milat^{9,10}, Luke Wolfenden¹¹, Karina Prévost^{4,12}, Emmanuelle Aubin^{4,12}, Paula Rochon¹³, Giraud Ekanmian^{1,4}, Jasmine Sawadogo^{1,4}, Nathalie Rheault^{1,4} and France Légaré^{1,2,3,4*}



Background

- Scaling of evidence-based health interventions
- Adequate reporting of studies
- Systematic review on scaling up strategy: deficiencies in reporting

SYSTEMATIC REVIEW

Open Access

Effective strategies for scaling up evidence-based practices in primary care: a systematic review



Ali Ben Charif^{1,2,3,4,5}, Hervé Tchala Vignon Zomahoun^{1,3}, Annie LeBlanc^{1,3,4,5}, Léa Langlois^{1,3}, Luke Wolfenden^{6,7,8}, Sze Lin Yoong^{6,7,8}, Christopher M. Williams⁶, Roxanne Lépine^{1,3} and France Légaré^{1,2,3,4,5,9*}

- No standards for reporting scaling up studies (EQUATOR Network)



Objectives

- To develop SUCCEED reporting guideline
 - 1) Establish an Executive committee
 - 2) Identify relevant items
 - 3) Prioritize the items
 - 4) Pilot test the new guideline
 - 5) Disseminate



Methods

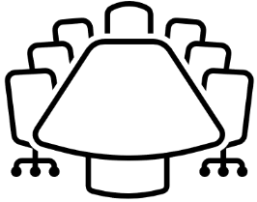
- Guided by the steps recommended for developing health research reporting guidelines
- Patient-Oriented Research (POR) principles and **sex and gender considerations**
- Systematic review
- Consensus process (e-Delphi, consensus meeting)
- Quantitative cross-sectional and qualitative methods



Sex, gender considerations

- All steps of the development:
identification of items, adequate representation of sexes in panel expert group, consensus meeting, presentation of disaggregated data
- New reporting guideline : specific instructions on how to consider sex and/or gender at the different sections



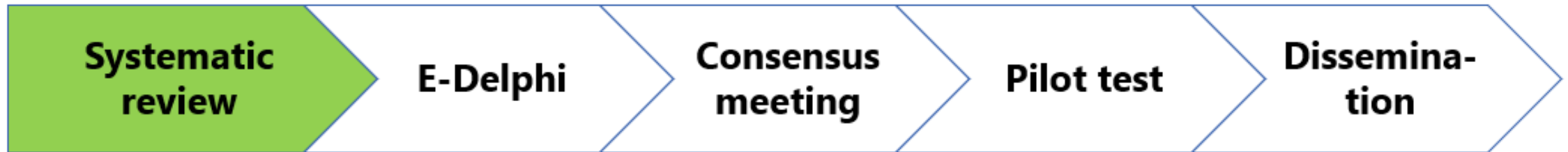


Executive Committee

- Core research team: A. Gogovor, F. Légaré, D. Moher, H.T.V. Zomahoun, A. Ben Charif (Canada)
- Patient partners: E. Aubin, K, Prévost (Canada)
- Scaling up: A. Milat, L. Wolfenden (Australia)
- Scaling in low- and middle-income countries : R. McLean (IDRC, Canada)
- Sex and Gender: P. Rochon (Canada)



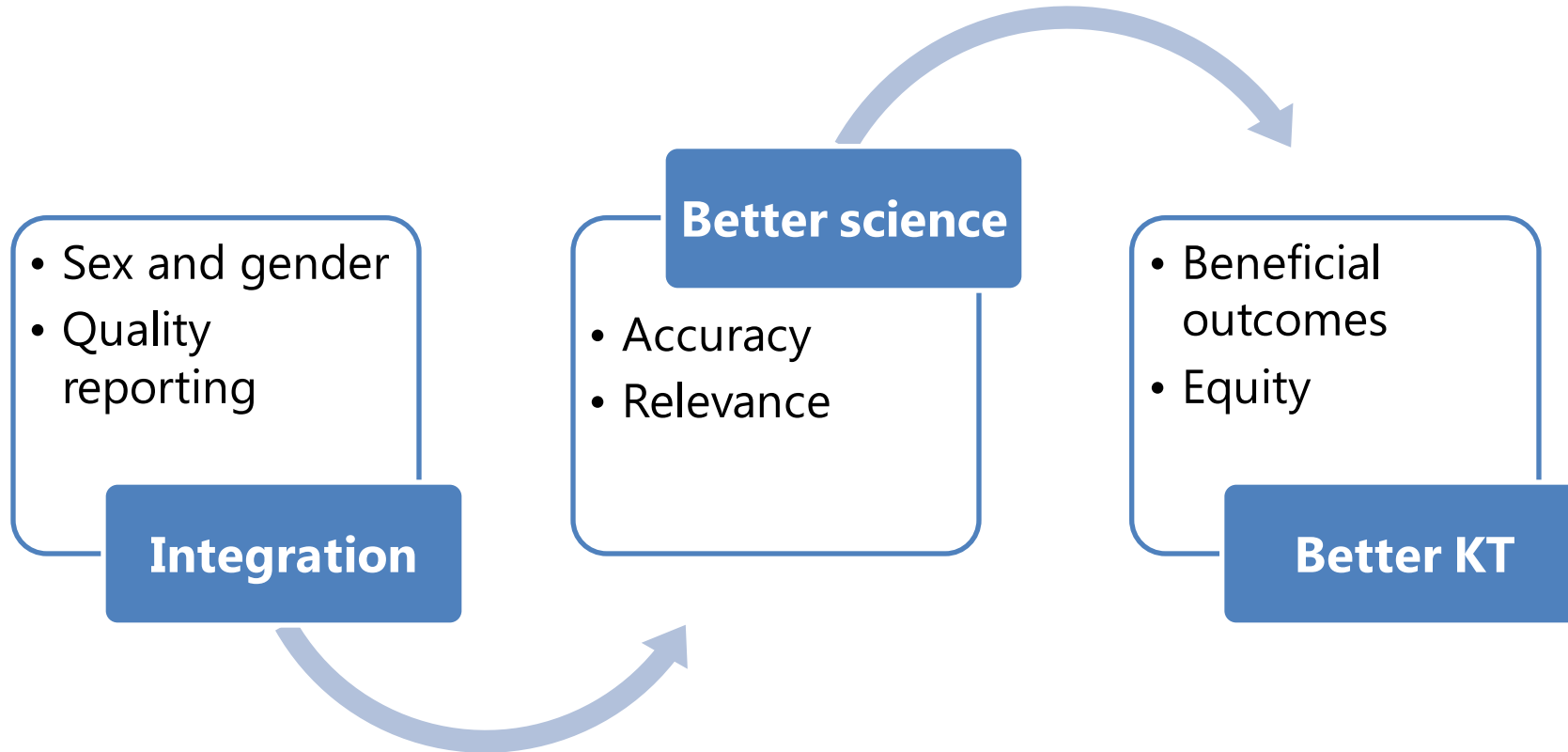
Next steps of development





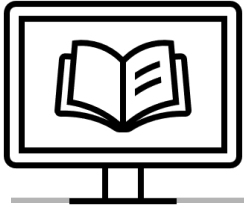
LESSONS LEARNED

Better science - Better KT



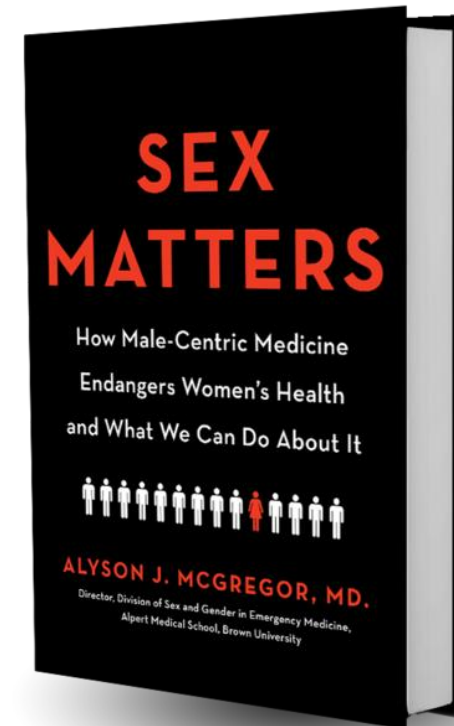
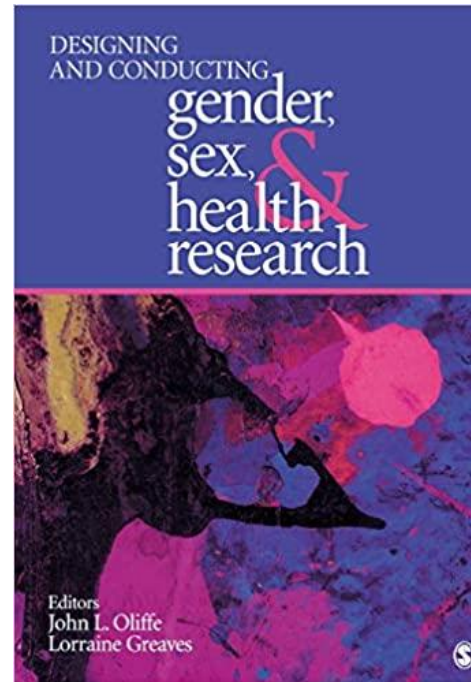
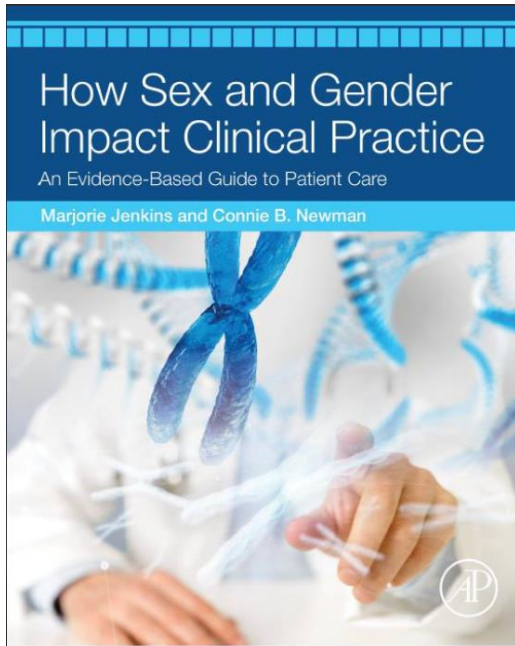


RESOURCES



- CIHR IGH Integrating Sex & Gender in Health Research (Bilingual)
 - <https://cihr-irsc.gc.ca/e/50003.html>
- Women's Xchange - The Health Researcher's Toolkit
 - <http://womensxchange.womensresearch.ca/resources/the-health-researchers-toolkit.html>
- NIH Office of Research on Women's Health (ORWH) - Bench to Bedside
 - <https://orwh.od.nih.gov/career-development-education/e-learning/bench-bedside>
- GBA+ Government of Canada
 - <https://cfc-swc.gc.ca/gba-acsc/course-cours-en.html>







ACTION PLAN

To modernize gender, sex and sexual orientation (GSSO) information practices in digital and electronic health records (EHRs) in supporting the health of sexual and gender minorities (SGM) in Canada

GUIDE

VISION AND GOALS

Envisage an equity- and SGM-oriented intervention that embraces diversity and aligns with other SGM-related initiatives. The ultimate goal is to have inclusive organizational policies, culturally competent staff and enabling EHR systems with modernized GSSO information practices to help achieve equitable health care access, experiences and outcomes for SGM.



FOUNDATIONAL



ENGAGEMENT AND PARTNERSHIPS

Engage communities and organizations across Canada to modernize GSSO information practices in EHRs that support equity-oriented health care and can meet SGM needs. Examples include SGM and Indigenous Two-Spirit communities, patients, advocates, executives, clinicians, staff, professional associations, government jurisdictions, vendors, IT professionals, legal and privacy experts, researchers, educators and the public.

GSSO TERMINOLOGY

Establish a precise, inclusive, appropriate, evolving and multi-level GSSO terminology with standardized data definitions, coding schemes and value sets that will support affirming patient care, provide complete and accurate health system use of data and inform health research.



STRATEGIC

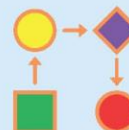


ENABLING EHR SYSTEMS

Adopt a common set of EHR functions that support the collection and use of standardized GSSO data, SGM-oriented clinical care guidelines information governance, health system performance tracking, clinical quality improvement, data-driven analytics and health evidence generation

GSSO POLICY/PRACTICE GUIDELINES

Integrate and tailor GSSO data collection and use, including secondary uses, within all organizational structures, policies, practices, governance, use cases and workflow processes in order to be responsive to specific care needs of SGM.



IMMEDIATE



EDUCATION AND TRAINING

Educate and train health care staff to enhance their capacity to provide culturally competent and safe care, and implementers, policy-makers and researchers to ensure required safeguards are in place to protect GSSO data. Inform patients on the need for GSSO data collection and protections for safe access and use.

CENTRAL HUB FOR COORDINATION

Establish a central hub to liaise, guide, assist and monitor the progress of this action plan over time. To do so, the hub needs a pan-Canadian mandate, stakeholder commitment, consensus process and proper resourcing. An immediate next step is to have a national conversation about this action plan and reach consensus on a path forward.



SELECT ACTIVITIES BASED ON ASSESSMENT OF NEEDS, READINESS AND SUSTAINABILITY



Acknowledgements

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Primary

France Légaré

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CIHR POR Award

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