

Mainstreaming gender in EU research

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Pioneering gender sensitive guidelines

- The National Institute of Health (NIH) formulated *Guidelines on the inclusion of women and minorities as subjects in clinical research (1994,2000)*
- Norway developed *Guidelines for the inclusion of women in medical research (2001)* and
- Health Canada bases her procedures on the work of Eichler (1988) *Nonsexist Research Methods*.

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Gender equality & gender mainstreaming I

- 1992 Treaty of Maastricht. Positive discrimination for women is accepted.
- 1995 United Nations Fourth World Conference on Women in Beijing. Worldwide adoption of
- *gender mainstreaming*, i.e. ‘the (re)organisation, improvement, development and evaluation of policy processes so that a gender equality perspective is incorporated in all policies and at all stages by the actors normally involved in policymaking’.

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Gender equality & gender mainstreaming II

- 1997 Treaty of Amsterdam. Commitment to gender mainstreaming of all EU policy levels, also EU science policies. Integrating gender and sex into all major European policy areas, has formed the strategic approach to the question of equal opportunities between women and men.
- 1998 When launching FP5, the EC decided to include an equal opportunities dimension by promoting women's participation in European research.

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Gender Mainstreaming EU research

- In 2000-2001 Gender Impact Assessments of FP5 were conducted. These assessments showed that sex and gender differences were addressed in a very limited way. It was concluded that “the evaporation of gender was evident” (Klinge & Bosch, 2005).

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Gender Mainstreaming EU research

- In FP6:
- New formula for promoting gender equality: $GE = GD + WP$
- Promoting gender equality is about two issues:
 - Consideration of gender dimension of research content
 - Promoting the participation of women at all levels of research

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Implementation GIS recommendations in FP6 (guide for proposers)

- *Clear articulation of sex and gender differences is necessary*
- *Researchers have to pay attention to gender aspects in research whenever appropriate*
- *Attention to sex and gender aspects is made an evaluation criterion*
- *B10 forms: Gender Action Plan; gender issues*

(Vademecum Gender Mainstreaming in the 6th FP, 2003)

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FP7 work programme

- Theme1 *Gender aspects in research*
- Gender aspects in research have a particular relevance to this Theme as risk factors, biological mechanisms, causes, clinical manifestation, consequences and treatment of disease and disorders often differ between men and women. The possibility of gender/sex differences must therefore be considered in all areas of health research where appropriate.

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FP7 work programme

- Theme 2 Food Agriculture and biotechnology
- *Participation of women and gender aspects in research*
- The pursuit of scientific knowledge and its use in service to society requires the talent, perspectives and insight that can only be assured by increasing diversity in science and technological workforce. Therefore, an equal representation of women and men at all levels in research projects is encouraged.

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FP7 work programme

Theme 2 (continued)

- Gender aspects in research have a particular relevance to this theme as risk factors, biological mechanisms, behaviour, causes, consequences, management and communication of diet related disease and disorders may differ in men and women. Furthermore, roles and responsibilities, the relationship to the resource base (land management, agricultural and forest resources etc) and the perception of risk and benefits may have a gender dimension. Applicants should systematically address whether, and in what sense, sex and gender are relevant in the objectives and in the methodology of projects.

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Applying for EU funds: recommendations

- Find out if gender and/or sex issues are relevant for your research project. Based on this information you can choose and substantiate if you adopt a gender dimension in your research proposal.

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Applying for EU funds: recommendations

Search strategy for sex and gender as determinants:

“disease name” (of disease you are investigating)

AND sex factor

AND all following terms separately: aetiology, prognosis, incidence, prevalence, symptom, perception, diagnosis, treatment, prevention, effect modification

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Thank you for your attention

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