



## Research in Gender and Ethics (RinGs): Building stronger health systems



November 2014

# Snapshot of Needs Assessment Findings

## What's the demand and capacity for gender and ethical analysis in health systems research?

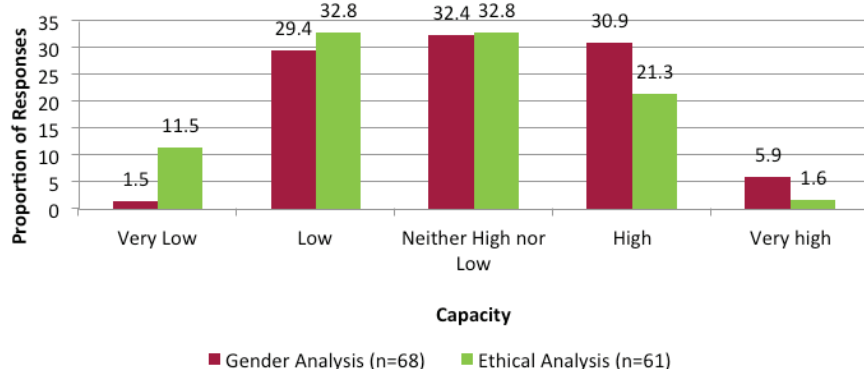
All RPCs have made efforts to mainstream gender analysis into their work. However, capacity for this work within the three RPCs was mixed, with large majorities of respondents reporting modest, low, or very low capacity to conduct analysis incorporating gender or ethics. Overall, respondents felt that they had more capacity with regards to gender analysis than ethics.

Among those who are already undertaking gender and ethical analysis,

respondents reported that gender analysis is conducted primarily through the disaggregation of data or findings by sex. Ethical analysis is usually conducted through the application of ethical principles in the research cycle. Further capacity building, experience and motivation are required to examine gender power relations and their interactions with social exclusion in health systems more broadly.

A number of barriers were found to be preventing gender and ethical analysis, the most significant being a lack of knowledge, expertise, or capacity to conduct gender and ethical analysis. In contrast to ethical issues within health systems research, more respondents were likely to report lack of relevance, focus or interest as a reason for not undertaking gender analysis. At the same time, it was encouraging that several respondents noted the importance of gender and ethical analysis in health systems research. More needs to be done to build on

Capacity for Gender & Ethical Analysis



## About this brief

Research in Gender and Ethics (RinGs): Building Stronger Health Systems, is a project bringing together three health systems focused Research Programme Consortia: Future Health Systems, ReBUILD and RESYST to galvanise gender and ethics analysis in health systems. Over time it is expected that this partnership will grow to include other experts from the field. In 2014 RinGs conducted an online survey with its RPC partners to assess their demand and capacity to incorporate gender and ethics considerations into health systems research. Over seven weeks (July-August), 71 RPC members participated in the needs assessment from a diverse range of countries; 18 from Future Health Systems, 18 from ReBUILD, and 35 from RESYST. This report summarises key findings in relation to: the demand and capacity for gender and ethical analysis, resources used and needed to incorporate gender and ethical analysis, suggested literature review topics, preferred medium of communication, and community of practice membership.



the experiences and resources that do exist in the RPCs and beyond, to build capacity and to facilitate dialogue on the relevance of gender and ethical analysis to health systems research.

### How do people currently source information?

Respondents reported a number of resources used to incorporate gender analysis into their health systems research, these included (in order of frequency of use): literature reviews and readings, frameworks, case studies, research, websites, journals, research or thematic groups, discussions or experience, training, and books. For ethical analysis respondents reported using (in order of frequency of use): literature reviews, journals, frameworks, case studies, research, websites, ethical reviews boards, research and thematic working groups, and experience. Several respondents reported having no resources to consider or incorporate ethical issues within health system research.

Training and the development and use of frameworks were the main additional resources respondents felt they needed to incorporate gender and ethical analysis; training was needed more for ethical analysis, while frameworks were needed more for gender analysis.

### Examples of resources respondents reported using for gender and ethical analysis

#### Gender Analysis - Literature Review/ Readings

- di Leonardo, Micaela (ed.) (1991). Gender at the crossroads of knowledge: Feminist anthropology in the postmodern era. Berkeley, CA: University of California Press
- Gender and Health Group LSTM (1999). Guidelines for the analysis of Gender and Health. Liverpool, Liverpool School of Tropical Medicine.
- George, A. (2007). Human Resources for Health: A Gender Analysis. Review Paper prepared for the Women and Gender Equity, and Health Systems, Knowledge Networks (KNs) of the WHO Commission on the Social Determinants of Health.
- Standing, H. (2000). "Gender - a Missing Dimension in Human Resource Policy and Planning for Health Reforms." Human Resource Development Journal 4(1): 27-42.

#### Gender Analysis - Frameworks and Case Studies

- Canadian Institute for Health Research. Gender, Sex and Health Research Guide: A Tool for Applicants <http://www.cihr-irsc.gc.ca/e/32019.html>
- Payne, Sarah (2009). How can gender equity be addressed through health systems? World Health Organization [http://www.euro.who.int/\\_\\_data/assets/pdf\\_file/0006/64941/E92846.pdf](http://www.euro.who.int/__data/assets/pdf_file/0006/64941/E92846.pdf)
- WHO (2003). Gender sensitivity and gender-based analysis in women's health development: Historical outlines and case studies. Women and Health Programme, World Health Organization Centre for Health Development. [http://whqlibdoc.who.int/hq/2003/who\\_wkc\\_tech.ser.\\_03.3.pdf](http://whqlibdoc.who.int/hq/2003/who_wkc_tech.ser._03.3.pdf)

#### Gender Analysis -Websites

- Rand Corporation <http://www.rand.org/topics/gender.html>
- Women in Informal Employment: Globalizing and Organizing (WIEGO) <http://wiego.org/>



## Ethical Analysis -Literature Review/ Readings

- Emmanuel et al. (2004). What makes clinical research in developing countries ethical? The benchmarks of ethical research. Journal of Infectious Diseases 189: 930-7.
- Kass (2001). An ethics framework for public health. American Journal of Public Health 91: 11. pp 1776 – 1782.
- Nuffield Council on Bioethics (2002). The Ethics of Research Related to health care in developing countries. London, Nuffield Council on Bioethics.

## Ethical Analysis -Frameworks

- ESRC (2010). ESRC Framework for Research Ethics (FRE) 2010. Economic and Social Research Council.
- MSF (2013). Médecins Sans Frontières - Research Ethics Framework Guidance Document.

## Ethical Analysis -Websites

- Medical Research Council <http://www.mrc.ac.uk/>
- Social Determinants of Health Network (SDH-NET) <http://www.sdh-net.eu/#7>

## What topics should we focus on?

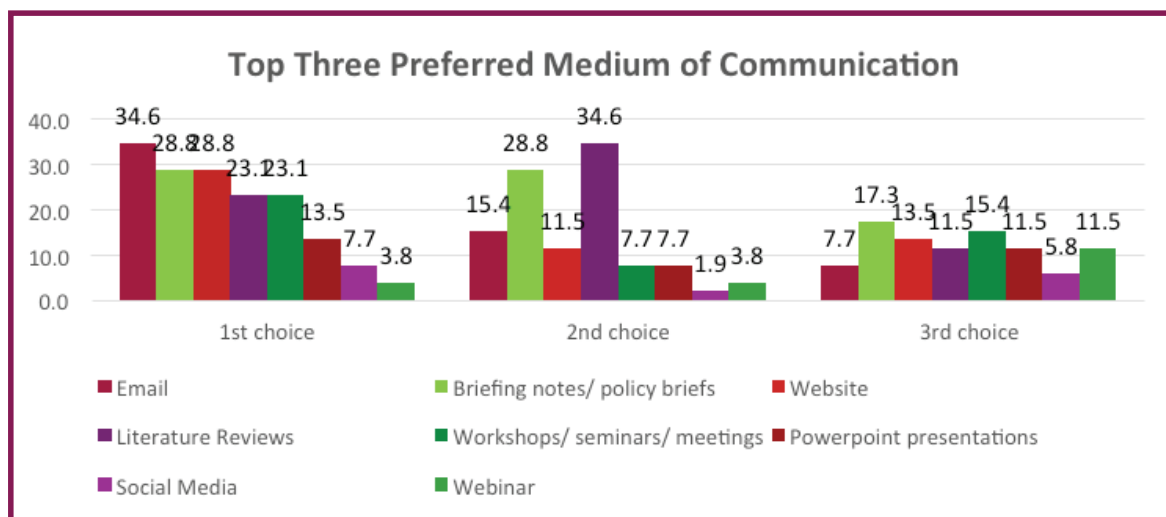
One of the tasks that RinGs will undertake over the coming year is to produce a range of literature reviews. Respondents felt that reviews on human resources would be most useful followed by equity

and social justice/equitable access to health care, and ethical issues in health system research process.

## How should we keep in touch?

RinGs will try and provide information in formats which suit the needs of

users. Respondents suggested that we communicate with them via synthesis documents (policy briefs/literature reviews) which are shared by email and accessible on the website. Social media was not listed as preferred medium of communication among RPC members who responded to this online survey.



## Where do people currently source information on gender and ethics?

Respondents are members of various communities of practice/groups on ethics and gender. Many of these were groups that were active in their own organisations. Respondents mentioned the SHAPES Thematic Working Group in Health Systems Global as a source

of information on gender and ethical analysis, and the Ethics of Health System Research Thematic Working Group in Health Systems Global as a source of information on ethical analysis. More needs to be done to encourage people to draw on the multiple platforms that exist for the discussion of gender related issues, for example: Gender and Evaluation, and the Association for Women's Rights in Development (AWID).



## Community of Practice Membership

### Gender

### Ethics

- |  |   |
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| <ul style="list-style-type: none"> <li>• Gender and Health Group, Liverpool School of Tropical Medicine</li> <li>• Gender Working Group at the Cambodia Development Research Institute (CDRI).</li> <li>• Gender and Development, University of Bergen</li> <li>• Women in Informal Employment: Globalizing and Organizing (WIEGO)</li> <li>• SHAPES Thematic Working Group of Health Systems Global</li> <li>• National AIDS Control Organisation, India</li> </ul> | <ul style="list-style-type: none"> <li>• Ethics of Health System Research Thematic Working Group of Health Systems Global</li> <li>• Liverpool School of Tropical Medicine Research Ethics Committee</li> <li>• National Ethics Committee (Zimbabwe)</li> <li>• Sierra Leone Health Research and Scientific Review Committee</li> <li>• Communication and Consent Committee in Kenya - an institutional review committee that supports investigators in strengthening the communication and consenting aspects of their consent forms.</li> <li>• SHAPES Thematic Working Group of Health Systems Global</li> </ul> |
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## Contact Us

If you would like more information about RinGs e-mail:

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## What next?

The needs assessment, while only a brief online survey, provides a good indication of how gender and ethical analysis is incorporated into health systems research by the three RPCs, and what additional resources are needed to encourage gender and ethical analysis.

People identified the need for: training; frameworks on ethics and gender; direct experience; and dialogue to build capacity and broaden understanding of the relevance of gender and ethical analysis in health systems research. Key issues of interest included gender and ethical concerns in relation to human resources, health financing, and equity/vulnerable groups.

As our work develops we will synthesise and exchange information via literature reviews, briefing notes/policy briefs, email, and the RinGs' website. Resources that are generated by the RinGs Steering Committee will be enriched by knowledge generated by the partners who will work on our small grants project.

By collaborating across the RPCs, this partnership will: enhance the quality of health systems research to create new knowledge; broaden the pool of expertise on gender, ethics and health systems; facilitate greater engagement with policy and programme stakeholders; and raise the profile of gender and ethics more generally with stakeholders who are interested in strengthening health systems.