Inclusion, Diversity, Equity, and Accessibility Toolkit

NEWFOUNDLAND AND LABRADOR
SUPPORT
Support for People and Patient-Oriented Research and Trials

Quality of Care NL

Overview

About this Toolkit

It is important for researchers/evaluators to consider the concepts of Inclusion, Diversity, Equity, and Accessibility (IDEA) to ensure that they are designing projects, programs, and policies that work for the populations impacted by their work.

This toolkit is for anyone involved in designing, conducting, and/or using health/social research/evaluation to help you learn about these concepts, how to apply them to your work, and provide suggestions for related training/resources for you/your project team.

Background

Inclusion, Diversity, Equity, and Accessibility (IDEA) should be considered throughout the research process. You may see this work referred to by different acronyms in other contexts (i.e. "Inclusion, diversity, equity, and accessibility [EDI]", or "Diversity, Equity, and Inclusion [DEI]") or including additional considerations. We have added the consideration of "Accessibility". Other considerations include: "Indigenization", "Anti-Racism", "Belonging", etc.

Reflecting on IDEA in your project design can improve the validity of the data you collect and your potential project impacts. One person cannot represent or know about all of the relevant perspectives. Diversifying your team, reflecting on ways to be more inclusive and equitable, and making your project processes and outputs accessible improve project quality.

As a researcher/evaluator or research/evaluation partner, consider how an IDEA lens may be applied to your work. It is best to consider these points at the start of the research/evaluation process when the question, methodology and funding application are being developed. However, they are helpful at all stages, especially if new team members join.

Definitions

Inclusion

Inclusion encompasses both actions and feelings. Inclusion is an intentional and continuous process lived through day-to-day practices aimed at addressing inequities in power and privilege. Acts of inclusion form safer environments where people feel welcome, respected, valued and able to bring their authentic selves. Ultimately, inclusion fosters a respectful and diverse community and ensures opportunities to flourish for all.

Diversity

Diversity is about the individual. It is about the variety of unique dimensions, qualities and characteristics we all possess, and the mix that occurs in any group of people. Race, ethnicity, age, gender, sexual orientation, religious beliefs, economic status, abilities, language and geography, together with living/lived experiences and other perspectives can make up diversity. Diversity is a fact, and inclusion is a set of choices that demonstrates how diversity is valued.

Equity

Equity is about treating people according to their diverse needs in a way that enables everyone to participate, perform and engage to a similar extent. Equity is a critical element of inclusion. Equity acknowledges that disparities exist and aims to eliminate disparities, systemic biases and barriers that are rooted in historical and contemporary injustices and oppression.

Accessibility

Accessibility refers to the design of products, devices, services or environments for people who experience disabilities, as well as the continuous commitment to the removal of political, social, economic, historical and systemic inequities that limit full experience in social space and life. To fully address accessibility, we must commit to addressing systemic ableism, oppression and historic inequities encoded in policies, practices and services.

Reference: Health Data Research Network Canada. June 2023. Inclusion, Diversity, Equity & Accessibility: Definitions & Principles for Working Together. Retrieved from: https://www.hdrn.ca/wp-content/uploads/IDEA-Definitions-and-Principles-June-2023-compressed.pdf

Definitions

More resources to learn about what these concepts mean: 🔗

▷ Memorial University Equity, Diversity, Inclusion, and Anti-Racism resource page
  ▷ Memorial Libraries digital resource guide
▷ Government of Canada Guide on Equity, Diversity and Inclusion Terminology
▷ Government of Canada Best Practices in Equity, Diversity and Inclusion in Research Practice and Design

Getting Started

Step 1: Choosing Your Team

Step 2: Deciding Your Research/ Evaluation Team

Step 3: Sharing Your Project Messages

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Choosing Your Team

> 1. **Does your team include a variety of perspectives? Has equity, diversity, and inclusion been considered in the selection and hiring process?**

☐ Have you thought about how to remove unconscious bias and limit barriers in your recruitment processes?

Note that in instances where you may be recruiting for specific perspectives, someone revealing that they identify with a particular group should be voluntary. The information provided should be kept in confidence unless the person self-identifying consents to sharing.

> ▷ Government of Canada's Best Practices Guide for Recruitment, Hiring and Retention may be helpful to guide these considerations.
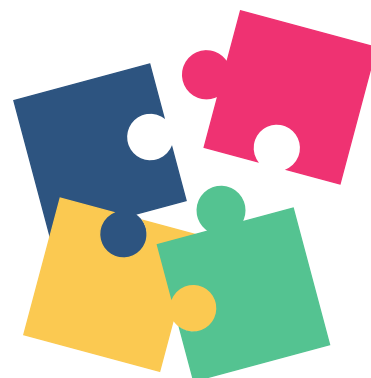
☐ How are positions advertised?

> ▷ Memorial University's EDI in Employment Policy may be helpful to identify underrepresented groups and the consideration of recruitment, inclusion, and self-identification

☐ Is inclusive language used in the job posting?

☐ Is your interview process standardized to minimize bias?

> ▷ This training module on Minimizing Implicit Bias in Recruitment may be helpful

See an example of diverse team building with the Women's College Hospital Equity Mobilizing Partnerships in Community (EMPaCT) model. Take a look at their Diversity Jigsaw Activity and Asset Mapping Tool.

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Choosing Your Team

> **2. Does your team work in a way that supports the inclusion of diverse team members (i.e. so that individuals from underrepresented groups, different career stages, etc., can meaningfully contribute)?**

☐ Is work-life balance encouraged and demonstrated?

☐ Would certain team members benefit from mentorship opportunities (i.e. with people from similarly diverse groups in leadership positions). This may be particularly important for new/international members.

☐ Consider resources such as:

  ▷ Request a Woman in STEMM may be a helpful resource if your networks do not include senior female scientists who can provide mentorship to early-career researchers.

☐ Do any of your team members require physical or other accommodations to enable them to contribute equitably?
For example: physically accessible meeting locations; additional time to complete tasks; low stimulation environments; translators or other language aids; aids for people experiencing hearing impairment; etc

☐ Are members aware of the relevant supports available to them?
  ▷ Indigenous Student Resource Centre
  ▷ Office of Indigenous Affairs
  ▷ Internationalization Office
  ▷ LGBTQ+ Resources

> The HDRN Canada Public Advisory Council provides guidance on communicating with the public, advise on organizational priorities, and responds to relevant emerging themes. It is made up of 12-15 individuals that have diverse backgrounds and experiences, including several Francophone members. To accommodate members, all organizational communication (e.g. interviews, emails, meetings, publications) is translated into both French and English. See the Public Advisory Council to the Health Data Research Network Canada Annual Report.

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Page 6

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Choosing Your Team

3. Do you have practices that support the engagement of partners and knowledge users from underrepresented groups?

☐ Are work events scheduled in consideration of personal needs (e.g. childcare, elder care)?

☐ Are all members supported in attending training and conferences, regardless of socioeconomic background?

☐ Have you considered IDEA (EDI/DEI) training for your team to ensure everyone is familiar with and mutually understands the principles?

☐ Is there an open-door policy so members feel safe bringing up concerns?

The NL SUPPORT/Quality of Care NL Patient and Public Advisory Council (PPAC) provides advice and guidance on the work of the unit to help determine patient-oriented research priorities and patient/public engagement in research projects and unit activities. The PPAC meets no less than four times per year. Meeting scheduling is flexible to include evenings and weekends to better meet the diverse needs of members.

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Choosing Your Team

More resources to help you choose your team: 🔗

▷ Memorial University Employment Equity

▷ CIHR Equity, Diversity, and Inclusion Resources

▷ NSERC Guide for Applicants: Considering Inclusion, Diversity, Equity, and Accessibility in your Application

▷ University of Western Ontario's Indigenous Considerations

▷ Canadian Centre for Diversity and Inclusion Resources (Educational and Inclusion Guides)

Potential training for project teams: 🔗

▷ CIHR Online Modules – Integrating Sex & Gender in Health Research

▷ Implicit Bias Test

▷ Unconscious Bias e-Lesson

▷ Cornell University Diversity and Inclusion Certificate

▷ Memorial University Diversity Training

▷ Canadian Centre for Diversity and Inclusion Webinars (Note: Access to these webinars is free for employees of Memorial University; a registration fee may apply for non-employees.)

▷ Memorial University Human Resources webinars on Diversity, Inclusion, and Well-Being

▷ Memorial University School of Graduate Studies Diversity and Inclusion in Graduate Studies (Note: This includes links to lunch and learn sessions for graduate students on these topics.)

▷ Michael Smith Health Research BC Supporting Diversity Interactive Tapestry Tool (Note: To expand resources on a specific topic, click "view" under the title in the description box on the right-hand side of the page.)

▷ First Nations Information Governance Centre's The Fundamentals of OCAP (Ownership, Control, Access, and Possession) Course

Deciding Your Research/Evaluation Plan

> **1.   Have you considered the potential IDEA implications of your proposed research/evaluation question?**

For example: does the question affect males, females, and gender diverse individuals differently; could racial groups be impacted differently by the topic area; are there social determinants of health variables that you may need to include in your analysis; etc.?

☐ Are there variable groups who should be considered in your analysis plans? For a definition of "variables" in a research context, click here.

For example: could belonging to a certain variable group increase or decrease a participant's likelihood of experiencing/displaying a project outcome; could this outcome be obscured if you aggregated participants' data; etc.?

- See Statistics Canada's (2024) video series about "The Importance of Disaggregated Data":
  - Watch Part 1
  - Watch Part 2
- Learn more about the importance of sex- and gender-based analysis in patient-oriented research:
  - Read the George and Fay Yee Centre for Healthcare Innovation's (2017) blog post
  - Watch Health Data Research Network Canada's (2024) webinar about "Using Sex & Gender in Routinely Collected Data"
- Learn more about Equity, Diversity and Inclusion in the Research System

☐ Has sex, gender, and diversity been considered and included, where applicable, in the research design and process?
  - These areas are evaluated in some grant applications

☐ Do you need to consider best practices for projects impacting specific groups in your research/evaluation plans?

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Deciding Your Research/Evaluation Plan

1. **Have you considered the potential IDEA implications of your proposed research/evaluation question?**

For example: when working with First Nations data, the principles of OCAP (Ownership, Control, Access, and Possession) should be considered in your data collection and management plans; if you are using data that includes International Statistical Classification of Diseases and Related Problems (ICD Codes), do you understand potential biases inherent in the use of these codes (see the Canadian Institute for Health Information Tips for Coders on 'Homelessness' for information about how this code is applied)?; etc.

Data management is also a consideration when working with non-First Nations Indigenous groups in Canada. See the example of the "Qanuippitaa? National Inuit Health Survey (QNIHS)" data management approach.

Qanuippitaa?
National Inuit Health Survey

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Deciding Your Research/Evaluation Plan

1. **Have you considered the potential IDEA implications of your proposed research/evaluation question?**

How and from whom data are collected impact the information available in datasets. For example, in Canada, maternal mortality and morbidity data are not collected in the same way across the country. It is known that certain racial groups are likely to experience higher rates of maternal mortality and morbidity, however these data collection differences and the challenges related to race-based data collection might obscure this reality. See "<u>Measuring Maternal Mortality and Morbidity in Canada</u>", "<u>Racial Variations of Adverse Perinatal Outcomes: A Population-Based Retrospective Cohort Study in Ontario, Canada</u>" and "<u>Birth Outcomes Among First Nations, Inuit and Metis Populations</u>" for more details on this issue.

More resources to help you plan your project: 🔗

⟩ CIHR Equity, Diversity, and Inclusion Resources

⟩ Gender-Based Analysis Plus

   ⟩ Gender-Based Analysis Plus introductory course

⟩ NSERC Guide for Applicants: Considering Inclusion, diversity, equity, and accessibility in your Application

⟩ NSERC guide on integrating equity, diversity and inclusion considerations in research:

⟩ Maritime SPOR SUPPORT Unit Justification Criteria for Gender/Sex Consideration in Research

⟩ Maritime SPOR SUPPORT Unit Gender and Sex Considerations in Research

Choosing How To Share Your Project Messages

1. **Has your research been discussed with relevant individuals from various backgrounds?**

☐ It may be helpful to think about any groups that may be affected by your project topic in a way that is different from the majority.

For example, if you were researching cancer and found that most people receiving cancer treatment reside in major cities, your target group would likely be folks in those cities. However, people living in rural or remote areas may have the added experience of having to travel and sometimes stay outside of their communities for treatment, even if the number of people receiving cancer treatment in these areas is lower.

☐ Have individuals from relevant groups been engaged throughout the project lifecycle?
  ▷ Were knowledge users from diverse groups engaged in co-developing research questions, project methodology, and dissemination strategies?

In 2021, the Black population represented 4.3% of the total population and 16.1% of the total racialized populations in Canada. See "The Diversity of the Black Populations in Canada".

In March 2021, 49% of Canadians said they were not very likely to get a COVID-19 vaccine, however when looking at Black Canadians, the number was 77%. Given this and the over-representation of Black people in front-line work, increasing their risk of contracting COVID-19, the Black Health Vaccine Initiative in Toronto worked to target Black communities to build vaccine confidence and increase vaccine uptake.

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Choosing How To Share Your Project Messages

> **2.** Have a variety of knowledge mobilization strategies been explored to ensure information reaches a broad audience?

☐ Do these strategies consider typical IDEA related barriers?

For example: is content visible in areas or on platforms accessed by a diversity of audiences; are you using plain language; does the content need to be translated into several languages or non-text-based formats; have you included alternative text for images for visually impaired audiences; have you considered the culturally relevant ways information is shared with the groups you are sharing information with; etc.?

Health Accord NL translated a summary of its final report into various formats to improve its accessibility in Newfoundland and Labrador. The summary report was published in English, plain text English, an audio recording, French, ASL interpretation video, and three Indigenous languages (Labrador Inuktitut, Innu-Aimun, and Mi'kmaq).

More resources to help you share your project messages: 🔗

▷ Research Impact Canada Accessible & Inclusive Event Planning for Knowledge Mobilization

▷ Michael Smith Health Research BC Plain Language Guide

▷ SickKids Knowledge Translation Training Tools