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2020 Health Canada Science Forum
January 20-21, 2020
Shaw Centre

Call for Abstracts

The Health Canada Science Forum (HCSF) is an opportunity to learn about scientific activities involving the Health Portfolio, and to network with a wider group of colleagues.

Submissions are encouraged to enable those involved in scientific work to share material that may be of interest to others at Health Canada. The material needs not be related to Science Forum themes or current Health Canada priorities. It is the responsibility of the submitter to ensure that the abstract has been prepared in accordance with the Health Canada and Public Health Agency of Canada Scientific Integrity Policy, which aims to foster a culture that supports and promotes scientific integrity in the design, conduct, management, review and communication of research, science and related activities. Necessary approvals by managers, supervisors or other relevant personnel may be required.

Each abstract will be reviewed by at least two members of the HCSF Abstract Review Committee (ARC). Abstracts where sex, gender and/or diversity were considered will also be looked at by Gender and Health Unit staff. For any questions pertaining to this submission process, you may consult the Secretariat by sending an email to hc.scienceforum-forumscientifique.sc@canada.ca

Please fill out all areas and return by deadline of September 11, 2019

A. Presentation Options

All abstracts will be considered for poster presentation. Posters will be displayed for both days of the Forum. An author is required to be stationed by the poster during poster viewing sessions to engage with Science Forum participants. The decision on the presentation format, if other than a poster (e.g. artistic work), will be at the discretion of the Abstract Review Committee.

How do you want to present your abstract at HCSF? Please check the appropriate box.

- ☐ Poster only
- ☐ Poster and consideration for oral presentation
- ☑ Poster and consideration for alternative format (please specify):

  Screen to display functionality of the data visualization tool
- ☐ Information Booth

B. Best Poster Competition (optional)

There is a possibility to enter your poster in a competition. Should you decide to participate, your poster will be judged by at least 2 persons mandated by the Health Canada Science Forum.

Would you like your poster judged? (Response Mandatory)

- ☑ Yes
- ☐ No

For those of you who have your poster judged, the judging criteria will be sent to you in the coming weeks.

The presenter must be available during specified judging times to enable participation in the Best Poster competition.

A prize category is Best Student poster. If the poster will be presented by a student:

Please provide student name. Note that all students are eligible to compete, but a PRI is required for winners to claim a prize.

Please provide the name of the student's supervisor, along with their email address.

C.Sex and Gender Considerations in your Health Research

To find out more about sex and gender in research click here.

Questions:

Has sex (biological considerations) been taken into account in your study?	Yes ☐	No ☑
Has gender (socio-cultural considerations) been taken into account in your study?	Yes ☐	No ☑
Have other diversity considerations been taken into account in your study?	Yes ☐	No ☑

If you answered "yes" to one or more questions above, please describe how these considerations have been taken into account at the different stages of your science initiative as you complete your application below. To find out how the sex, gender and diversity considerations will be assessed, please use this link for the criteria.

If you answered "no" to one or more questions, it is because (check all that apply):

a. Sex/gender/diversity is not applicable in this context ☑
b. Sex/gender/diversity data cannot be collected ☐
c. Sex/gender/diversity data cannot be analyzed ☐
d. Other reason (please specify) ☐

D.Abstract Submission

Provide the following information about your abstract:
Title of your abstract in this box. Technical titles are permitted.

A picture is worth a thousand words – The creation of a web tool for visualizing nutrition surveillance data

Name of Main Contact: Julie Ennis
Name of Poster Presenter: Julie Ennis
Name of the Oral Presenter (if applicable): Julie Ennis

List of Authors: (example: A.F. Tayabali[1], P.S. Shwed[1], and N. Corneau[2])

J.K. Ennis1, F. Dussault1, N. Petronella1, A. Brown2, S. Van Millingen3, H. Liang2, I. Massarelli1

Provide list of affiliations: (Example: Bureau Name, Branch, Organization)

1 Bureau of Food Surveillance and Science Integration, Health Products and Food Branch, Health
2 Centre for Surveillance and Applied Research, Health Promotion and Chronic Disease Prevention
3 Centre for Chronic Disease Prevention and Health Equity, Health Promotion and Chronic Disease
4
5

Should you have more than 5 affiliations, please provide additional information in the comment box at the end of the form.

Plain Language Summary (350 words maximum):

Description: The abstract should be clear and concise enough to be understood by anyone with a basic understanding of scientific principles. Technical terms should be kept to a minimum and defined if mentioned.

Tips: Write the summary as if it were to appear in a newspaper or magazine article. Ask a non-scientist family member or friend to read the abstract and tell you what is not clear. Try to balance accuracy with simple language.

Background/Issue(s) and Objectives: Introductory information relevant for understanding the work being done. What is the issue? Why is it important? What is the goal? The question/problem being addressed?

A vast amount of nutrition surveillance data has been collected through various survey programs. These critical data support Health Canada activities related to developing evidence-based nutrition policies and regulations, risk assessment and program evaluation. Further, data are used by a broad external audience including researchers, provincial and territorial policy makers, health professionals, educators, students, food industry and health media. The existing approach to sharing these data is mainly through large tables that are cumbersome for users. The objective was to develop an innovative, user-friendly and interactive

Design/Method/Description: How was the issue addressed? What was done to address your question/problem?

The initial pilot project involved the development of visualizations of data presented in the Compendium of Usual Intakes of Energy, Nutrients & Other Dietary Components from Food (2004 and 2015 CCHS-Nutrition). Visualizations were developed by the Food Surveillance Integration and Bioinformatics Divisions in the Bureau of Food Surveillance and Science Integration (BFSSI; FD, HPFB). The web visualization was built using the JavaScript framework D3.js. A scan of data visualization methods used by Federal departments was conducted to identify potential options for where the nutrition data visualization could be housed.

Results/Outputs: What was achieved?

Tools were developed to enable users to display usual intake data in customizable, graphical and tabular forms. After consulting with the Centre for Surveillance and Applied Research at the Public Health Agency of Canada (PHAC), the Health Infobase was considered as the ideal location to host the web visualization. Through this collaboration the Nutrition Surveillance Data tool was created to host the BFSSI-generated visualizations. The Hotjar software suite will collect quantitative and qualitative information on how users are interacting with the web tool.

Conclusions/Impacts/Outcomes/Implications/Next Steps: What does/could this result mean in the context of the question being addressed?

The web visualizations created for usual intake data from CCHS – Nutrition enable users within and outside the government to access the data in an interactive and easily-interpretable manner. The creation of the Nutrition Surveillance Data Tool and the success of the initial pilot project lays the foundation for existing and future nutrition surveillance data to be disseminated to the Canadian public.

Relevance: Insert a short description on the potential impact this project will have, e.g. on the Department/ Policies/Regulations or on Canadians. Ensure that the relevance from the study is not over-reaching.

The Nutrition Surveillance Data Tool directly responds to challenges outlined in the Data Strategy Roadmap for the Federal Public Service.

Please use the box below to include any additional information including any additional affiliations.

We would like to have access to a screen to display a video recording of how the Nutrition Surveillance Data Tool works and enable the presenter to demonstrate the functionality of the tool. We can bring our laptop but would need access to a power source and wifi.

THANK YOU FOR FILLING THE ABSTRACT FORM

SUBMIT

VIA E-MAIL BY WEDNESDAY SEPTEMBER 11, 2019.

Please send any questions to
hc.scienceforum-forumscientifique.sc@canada.ca

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To find out more about sex and gender in research -

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You have integrated sex and /or gender into your initiative if...

Question: Is sex (biological considerations) taken into account in your study/initiative?
You have considered "sex" if you have looked at the impact of biological differences such as anatomical, physiological or hormonal differences, between female and male cells, animals and/or individuals.

Question: Is gender (socio-cultural considerations) taken into account in your study/initiative?
You have considered “gender” if you have looked at the impact of differences such as socially constructed gender roles, gendered behaviour norms, gender identities between different groups of individuals.

Question: Have other diversity considerations been taken into account in your study/initiative?
You have considered “diversity” if you have looked at the impact of differences such as age, ethnicity, geography, education level, sexual orientation or non-gendered differences between groups of individuals.

If you indicate in your abstract application that sex, gender and/or diversity have been taken into account, Gender and Health Unit (GHU) staff will review the application. The purpose of the review will be to identify the extent to which you have taken the elements into account. The review will be based on an adapted Sex and Gender Equity in Research (SAGER) guidelines. The SAGER guidelines are a comprehensive procedure for reporting of sex and gender information in study design, data analysis, results and interpretation of findings. They were developed by an international panel of experts with input from journal editors, scientists and other specialists and are promoted by the CIHR.

Once again, we will ask the Deputy Minister to acknowledge the abstracts that best meet the adapted SAGER guidelines at the Health Canada Science Forum 2020.

You may also want to do one of the Canadian Institutes of Health Research (CIHR) SGBA training modules for integrating sex and gender in health research to confirm that the concept was applied appropriately in your initiative.

Glossary

Sex refers to a set of biological attributes in humans and animals. It is primarily associated with physical and physiological features such as chromosomes, gene expression, hormone levels and function, and reproductive/ sexual anatomy. Sex is usually categorized as female or male but there is variation in the biological attributes that comprise sex and how those attributes are expressed.

Gender refers to the socially constructed roles, behaviours, expressions and identities of girls, women, boys, men, and gender diverse people. Gender influences how people perceive themselves and each other, how they act and interact, and the distribution of power and resources in society. Gender has traditionally been conceptualized as a binary (girl/woman and boy/man) yet there is considerable diversity in how individuals and groups understand, experience, and express it.

Gender expression refers to how a person publicly presents gender. This can include behaviour and outward appearance such as dress, hair, make-up, walk, mannerisms, body language and voice. A person's chosen name and pronoun are common ways of expressing their gender. Gender expression is independent of gender identity and sexual orientation. For example a metrosexual male may practice many behaviours associated with femininity such as getting manicures, pedicures, special haircuts and colours etc. but is usually not gay.

Intersex is defined Intersex persons are born with a wide range of natural variations in their sex characteristics that don't fit the typical definition of male or female, including sexual anatomy, reproductive organs or chromosome patterns.

Transgender is a term that refers to people whose gender identity is different from their sex assigned at birth. It includes people who identify as transgender, trans woman (male-to-female), trans man (female-to-male), gender non-conforming, gender fluid and/or gender queer.

Cisgender is a term that refers to people whose gender identity is the same as their sex assigned at birth.

Sex and gender are interrelated. There is no simple "recipe" for integrating sex and gender into health research (or for accounting for their relationships with other determinants of health and in other aspects of our work). Thus it is important for the researcher/analyst to think through how sex and/or gender may be impacting the outcome of each step of an initiative.

Sex and gender-based analysis (SGBA) is a systematic approach to research, legislation, policies, programs and services that explores biological (sex-based) and socio, cultural (gender-based) similarities and differences between women, and men, boys and girls and gender diverse people. It involves asking additional questions in research and/ or policy and program development about men and women, boys and girls and gender diverse people, identifying existing evidence and gaps in evidence. It challenges us to identify how differences will be considered.

SGBA is meant to be applied within the context of a diversity framework, which attends to the ways in which identity factors such as ethnicity, socioeconomic status, disability, sexual orientation, migration status, age and geography interact with sex and gender to contribute to exposures to various risk factors, disease courses and outcomes. Using a SGBA lens brings these considerations into focus and can help to formulate research, policies, programs and legislation that are relevant to the diversity of the Canadian populace.

BACK

Adapted SAGER guidelines used by the GHU in the abstract review

- Authors should use the terms sex and gender carefully/appropriately in order to avoid confusing both terms.

Criteria by section of the abstract

Title: If only one sex is included in the study, or if the results of the study are to be applied to only one sex or gender, the abstract title should specify the sex of animals or any cells, tissues and other material derived from these and the sex and gender of human participants (i.e 'in males' or 'in females').

Introduction: Authors should indicate, whether sex and/or gender differences may be expected.

Methods: whether they ensured adequate representation of males and females, and justify the reasons for any exclusion of males or females.

Results: gender-based analyses should be reported regardless of positive or negative outcome. In clinical trials, data on withdrawals and dropouts should also be reported disaggregated by sex.

Discussion: a sex and gender analysis was not conducted, the rationale should be given. Authors should further discuss the implications of the lack of such analysis on the interpretation of the results.