



## **CAEP Voluntary Demographic Survey**

**Why Collect Sociodemographic Data?** The Canadian Association of Emergency Physicians (CAEP) is committed to fostering equity, diversity, and inclusion (EDI) within emergency medicine. Collecting sociodemographic data will enable CAEP to:

- Understand who is represented within its membership and leadership.
- Identify gaps in inclusion, access, and engagement, particularly among underrepresented communities.
- Take steps to reduce barriers to engagement
- Support advocacy that reflects the diversity of lived experiences of emergency medicine physicians in Canada.

**What Information Is Collected?** At your next membership renewal, you will have the opportunity to complete a voluntary demographic survey. This includes questions on gender identity, sexual orientation, disability status, Indigenous and racial identity, ethnicity, religion, primary language, career stage, and practice location. All questions are optional, anonymous, confidential, and used only in aggregate form.

### **Common Myths and Misconceptions**

Myth 1: “This is unnecessary. We treat everyone equally.” Fact: Equity requires more than treating everyone the same, it requires a commitment to understanding and addressing structural disparities. Data can be a powerful tool to identify and address equity gaps.



Myth 2: “This data could be used against me.” Fact: All data is anonymized and used solely to assess trends, identify inequities, and guide CAEP’s strategic efforts. Individual identities are never disclosed or linked to responses. The survey will open in a new window and is separate from your membership renewal. There is no way for us to link your response to your account

Myth 3: “I don’t identify with any specific group, should I still answer?” Fact: Yes. All perspectives matter. Indicating “prefer not to say” is a valid response and helps reflect the diversity of experiences across emergency medicine.

Myth 4: “EDI work doesn’t benefit people like me”  
Fact: Equity, diversity, and inclusion are fundamental principles in the practice of emergency medicine. EDI efforts, like using sociodemographic data to understand opportunities for addressing disparities are relevant for all emergency medicine clinicians. The purpose of collecting this data is not to compare groups in terms of how much better or worse off they are, but to identify ways of supporting all of us to bring our best to our chosen profession for the benefit of our colleagues, our learners, and our patients.

Sociodemographic data collection is an important tool for CAEP to ensure its membership, services, and leadership reflect the diversity of Emergency Physicians within Canada, and to become a place of belonging for all. Participating in this effort is one small but important step toward lasting change.