

Women, Gender and Health: Looking back, thinking ahead

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This presentation mixes

- Some History
 - Some Critique
 - Some Feminism
 - Some Challenges
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Goals

- Review the past five decades of women, gender and health
 - Trace the trends in knowledge and activism on the influences of sex and gender on health
 - Identify challenges going forward
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Inspired by, almost 50 years of (women's) advocacy – reacting to a range of practices in health care and research

- Oversights and omissions
 - Gender-neutrality
 - Gender-blindness
 - Exclusion from trials
 - Lack of women in science
 - Sexism
 - Over-medicalization
 - Paternalism
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The past five decades

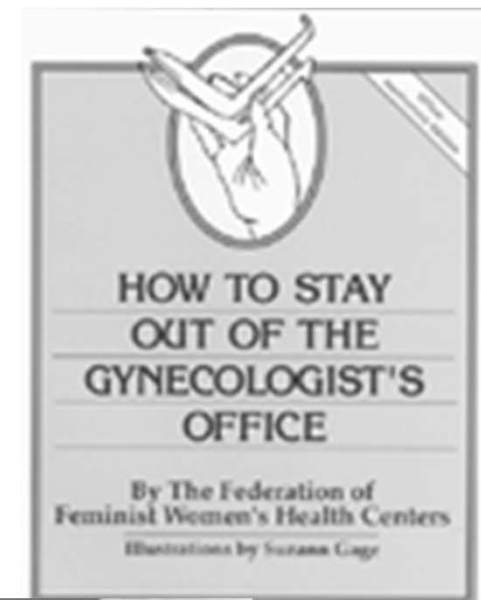
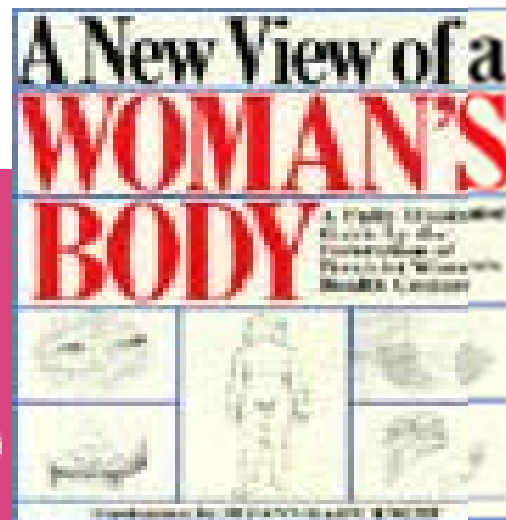
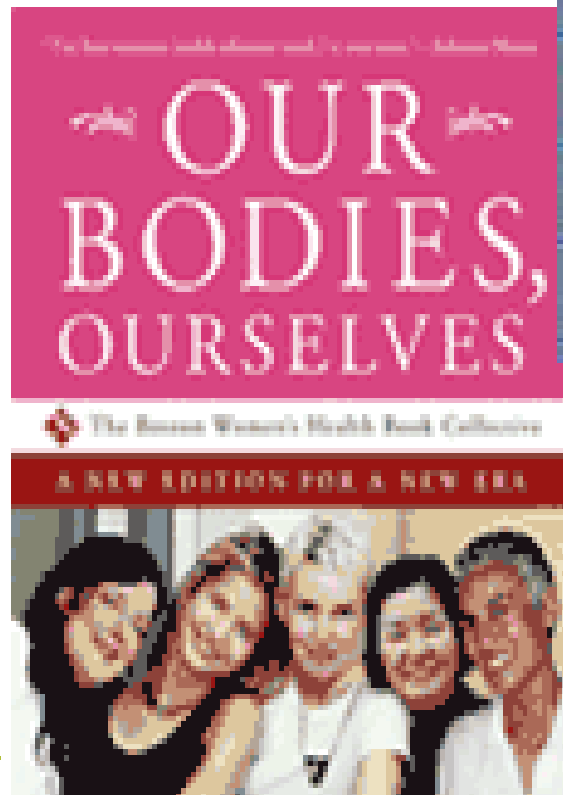
- 1960- Birth of the “Second Wave”
 - 50th Anniversary in 2010
 - Second Wave Women’s Project
 - publishing books
 - sponsoring celebrations Jan 1, 2010
 - recognizing the 40th anniversary of the Royal Commission on the Status of Women.
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2nd wave women's movement

- Emerging politics of women's liberation
- Over- medicalization of women's bodies
- Control over health, especially reproductive health, childbirth and sexuality



INSPIRING A WORLDWIDE MOVEMENT OF WOMEN'S HEALTH



Especially abortion rights, home birth and midwifery

- *How to Stay Out of the Gynecologist's Office* 1979
- *A New View of a Woman's Body* 1982
- *Woman Centered Pregnancy and Birth* 1984

Self-examination kits to avoid doctors and be self sufficient



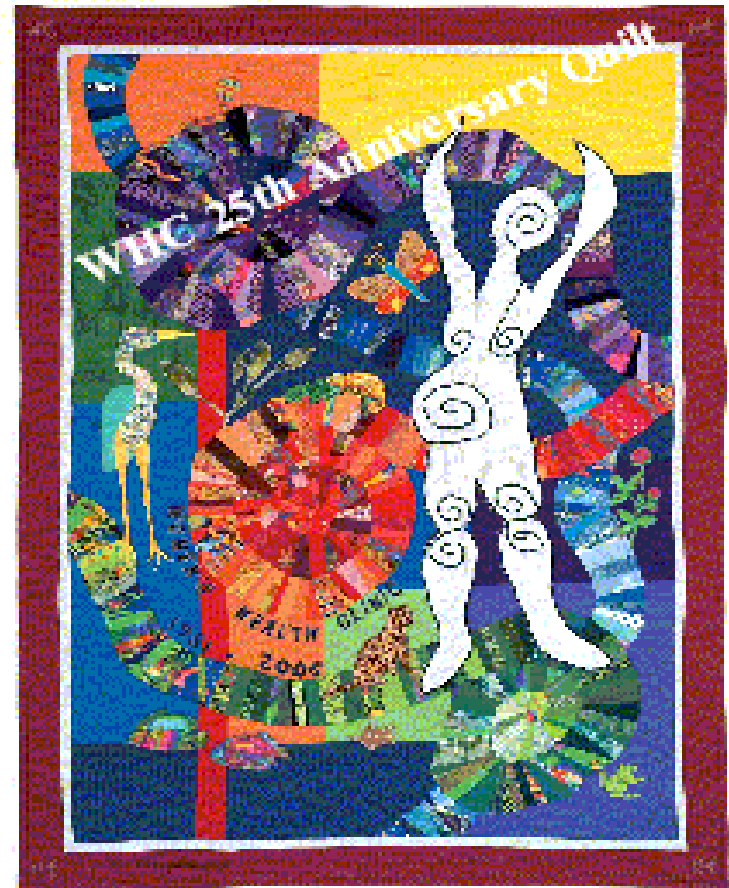
Feminist Women's Health Center, Oregon

Home birth and midwifery- staying out of hospital; having natural childbirth



Women's health movement identified basic values to underpin care and systems

- Inclusive
- Sensitive
- Respectful
- Empowering
- Accessible
- Comprehensive



Key dates



- **1966 – First funded birth control clinic**
 - **1969 – Becomes legal to distribute information on birth control**
 - **1970 – The Abortion Caravan crosses Canada and closes Parliament**
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Key Dates

- **1980 – 32% graduating doctors were women**
 - **1990 – C-43 defeated, abortion becomes similar to other medical procedures**
 - **1996 – Statistics Canada agrees to collect data on unpaid work**
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Activism affected trends in knowledge



Women's health research, care and policy

- The women's health movement moved from reactive to proactive
 - Women-specific issues got defined
 - Gender and other social determinants became critical variables in women's health
 - Coalitions with other equity based movements
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Expressing these values made a difference

- Affected the definition of women's health
 - Served as a political basis (feminist) for getting commitment to women-centred care, policy and research principles
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Women's health movement inspired the women's health research movement

- Identified **values**
 - Improved **science**
 - Contributed to new **structures**
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Exposed the sociology of knowledge production

- There is no value-free science
- Science is defined by who does it, how it is done and why it is done
- Knowledge is power
- Therefore all science is political



Counteracted with a laywoman's guide to evidence Women and Health Care Reform

- See “*Just the Facts, Ma’am*” –Evidence about Health and Health Care
 - Truth and values
 - Defining the research problem
 - Asks “What counts as evidence?”
 - Critiques authority and credibility
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Evolving politics define the concepts; the issues

- Sex
- Gender
- Diversity

- Language
- Measurement
- Capacity
- Institutionalization



Sedimentary layers of terminology and analytic frames have evolved

- Sex
 - Gender
 - Sex and gender
 - Sex differences
 - Gender differences
 - Sex differences and gender influences
 - Sex and gender related factors
 - Sex stratification
 - Sex differentiation
 - Gender (based) analysis
 - Determinants of health
 - Sex and gender (based) analysis
 - Sex, gender and diversity (based) analysis
 - Disparities, inequities of health
 - Intersectional analysis
 - Intersectional-type analyses
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Fields evolved

- Health
 - Women's health
 - Gender and health
 - Men's health
 - Gender and women's health
 - Gender and health, (including women's health and men's health)
 - Now three fields: (at least)
 - gender and health
 - women's health
 - men's health
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Different interests need nurturing

- Layered terminology, analytic frameworks and field domains need to be encouraged and built upon
 - Many different interests, goals, 'projects' and players:
 - Clinical treatment
 - Health system improvement
 - Program design
 - Policy design
 - Academic research
 - Community based advocacy and research
 - Capacity building
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Organizational changes and key events



Some examples...

- advisory councils
 - women's bureaus
 - women's health strategies
 - gender analysis policies
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Landmarks

- Medical Research Council committee paper on women's health research 1996
 - Canada-USA women's health forum 1996
 - Centres of Excellence for Women's Health Program 1996
 - Ontario Women's Health Chairs 2000 onward
 - CIHR developed 1999-2000 – Institute of Gender and Health established
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The historical evolution of seeking sex and gender in research

- The Double Standard: A Feminist Critique of Feminist Social Science (1980) M Eichler. Croom Helm London
- Taking Sex into Account: the policy consequences of sexist research. (1984) ed. J Vickers. CRIAW
- On the Treatment of the Sexes in Research. (1985) Eichler and Lapointe. SSHRC
- Gender Based Analysis Policy (2000) Government of Canada
- World Health Organization. (2002) WHO gender policy

And more recently, in health research

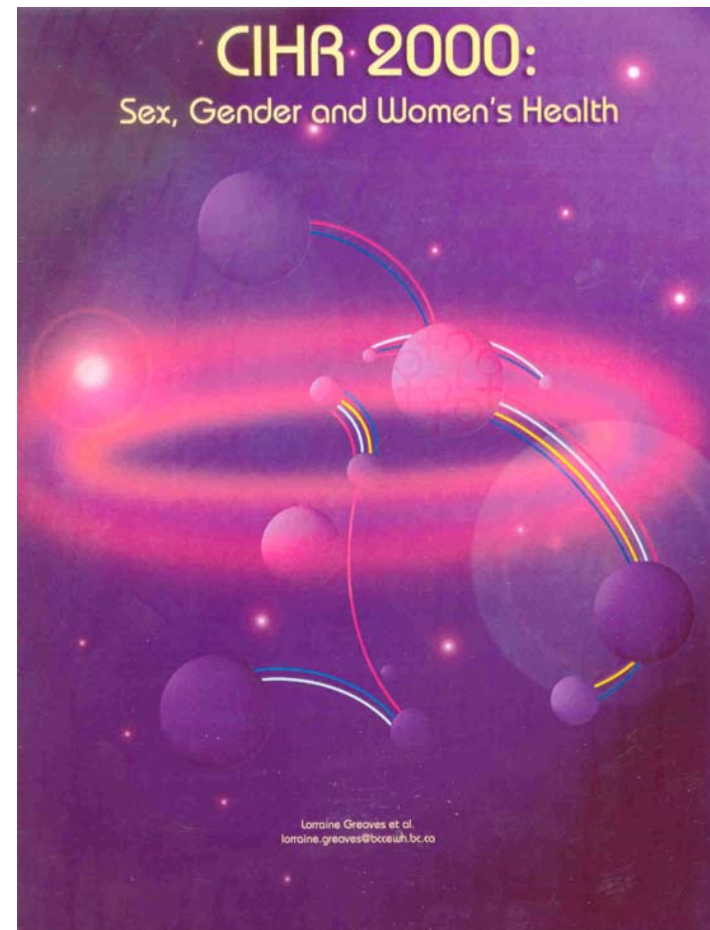
- CIHR 2000: Sex, Gender and Women's Health (1999) Greaves et al. BCCEWH
 - Health Canada. (2003). Exploring Concepts of Gender and Health. Ottawa: Women's Health Bureau, Health Canada
 - Gender and Sex-Based Analysis in Health Research: A Guide for CIHR Peer Review Committees (2006) D Spitzer CIHR
 - Better Science with Sex and Gender: A primer for Health Research. Women's Health Research Network, BC (2007). Johnson et al. WHRN
 - Gendering the Health Determinants Framework: Benoit and Shumka (2009) WHRN
 - Intersectionality: Moving women's Health research and policy forward. Hankivsky et al (2009) WHRN
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And in women's health policy

- Women's Health Strategy, 1999 Health Canada
 - Women's Health Surveillance Report, 2003 Health Canada and CIHI
 - Provincial Strategies
 - Provincial Profiles
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Arguments for sex and gender in health

- Biological differences: women's and men's bodies are different
- Social differences: being male and being female are gendered experiences
- Redress: research on women has been overlooked
- Mistakes: research on men has been applied to women
- Vacuum: "We don't know what we do not know"
- Science: Sex and gender mean better science



Rationale for addressing women's health issues

- Generalizability and validity in question
- Inadequate evidence base, hence
 - inadequate treatment
 - incomplete or ineffective health policy
 - untailored health programs



What did we say about sex?

- Biological construct encompassing hormones, genes, anatomy, physiology etc
- Affecting: trajectories, prevalence and treatment of health conditions and diseases
- Often represented and categorized as a binary

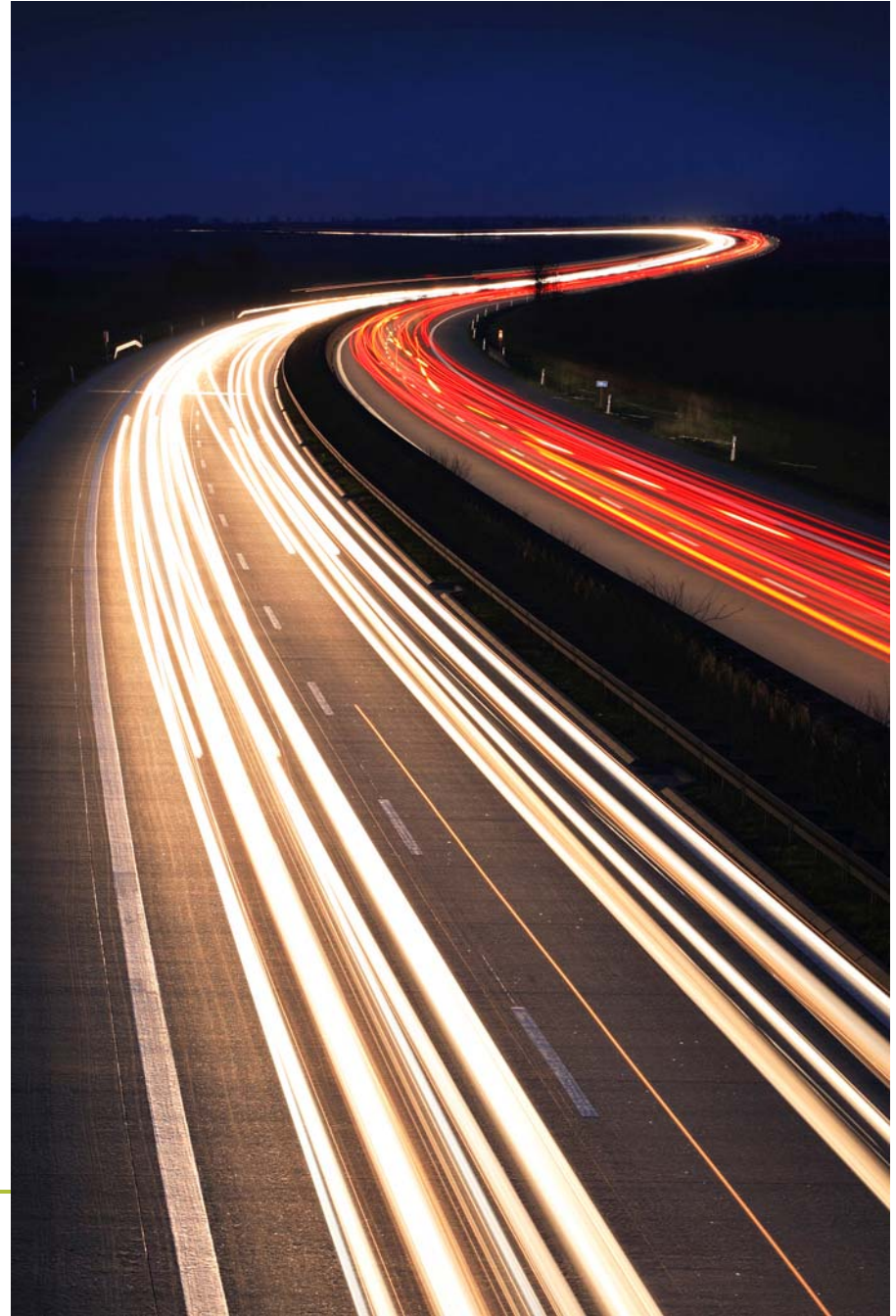


And gender?

- A social science construct
- Linked to economic and social status, culturally specific, and temporal
- Reflects equity issues; globally male valued over female



Going forward,
thinking ahead



We have recognized issues with...

- Equity for women
 - Language usage
 - Measurement vagaries
 - Conceptual clarity
 - Interactivity of factors
 - Importance of social determinants
 - Sources of evidence
 - Political will
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Challenges going forward

- Developing more accurate surveillance of women's health
 - developing indicators,
 - getting uptake,
 - improving measurement
 - addressing intersections
 - Developing advocacy principles in all sectors
 - training,
 - politics,
 - persuasion,
 - argument,
 - evidence
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Thinking ahead

- Maintaining interest in, and funding for, women's health
 - Resisting conflation with gender and health
 - Focusing on equity-enhancing initiatives and goals
 - Resisting equality propositions regarding men's health
 - Resisting doing men's work
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What will enhance women's health?

- Doing more advocacy, at community, policy and scientific levels
- Welcoming complexity in thinking about sex, gender and diversity in women's health
- Respecting all “projects” and players in women's health
- Identifying relevance to and resonance with the public
- Building on the past



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