



**Summary and Notes:
WHRN Workshop**

**Research Methodologies in Women's Health Research
Friday, November 25th, 2005**

Video-linked sites:

**Children's & Women's Health Centre of British Columbia
Simon Fraser University – Burnaby Campus
Simon Fraser University – Harbour Centre Campus
Thompson Rivers University
University of British Columbia
University of Northern British Columbia
University of Victoria**

This two-hour session, entitled *Research Methodologies in Women's Health Research*, was the second in a series of video-linked workshops presented by the Women's Health Research Network of British Columbia. Led by WHRN Co-Leader Dr. Olena Hankivsky with the support of Rodney Hunt [SFU], the workshop brought together a large group of researchers representing diverse backgrounds and interests from across the province. The primary goals of the workshop were to present a discussion paper entitled *Research Methodologies in Women's Health Research/Gender and Health Research*, to generate dialogue around the issues presented in the paper, and to begin assembling a working group to further efforts in documenting new paradigms, methods, measurements and innovative developments in gender mainstreaming in health research.

Dr. Hankivsky began the workshop by providing some background on approaches and challenges to integrating concepts of gender and health into women's health research, as well as discussing the history of gender and health research. In her opening presentation, Dr. Hankivsky described some Canadian initiatives which are driving gender mainstreaming, expanding on traditional approaches in research and policy, and reducing barriers to access based on gender and other key determinants. For example, the creation of the Institute of Gender and Health [CIHR] has brought attention to the interaction of the many factors which impact health. Nevertheless, while it is generally understood that there is a need to increase research on women's health issues [with a

combination of biomedical and sociological methodologies], there is still a need for better integration of methodologies and the transfer of new knowledge into policy.

The workshop participants were asked to focus on three major questions:

1. What is the role of textual and discourse analysis in women's health research [i.e. the effect of policy on women's health]
2. Who is being left out of the picture [acknowledging that narrow definitions of gender can limit debates within women's health research]?
3. How are these approaches received by the different 'pillars' of research [i.e. clinical researchers, policy makers, etc.]?

This framework sparked a complex dialogue about current issues in women's health research. Participants agreed that researchers have yet to come to a place where discussions can flow easily between one sphere of research and another, and concluded that there is a need to find methodological approaches to bridging the gaps.

Truth Claims and Paradigms in Interdisciplinary Research

- Women's health research is often reduced to explorations of maternal and reproductive health and/or the health of pre- and post-pubescent girls
- Newer feminist social approaches emerged from a distinct paradigm, creating a divide in current women's health research
- There is a tendency in health research to group all women together and to imagine women's experiences as being identical; cultural contexts have tremendous impacts on women's health [i.e. the effect of men having ultimate decision-making authority in some cultural contexts; differences in femininities, sexualities, and experiences/expressions of gender]
- Community-based agencies sometimes lack an understanding of differences in women's experiences, which can limit the kinds of research being done
- These 'paradigm collisions' can result in significant populations of women being left out of the research picture

Challenges in Multidisciplinary/Interdisciplinary Women's Health Research

- Many voices are not included because they do not enter the health sphere; there is a need to bridge this gap and overcome misrepresentations in who is being included in health research

- There is a need for more interdisciplinarity in women's health research, rather than compartmentalizing research paradigms or trying to wedge research into one sphere or another
- Nevertheless, some research questions demand a specific approach: there are times when selecting out a particular variable and divorcing it from its context can be useful
- There is a need to move from the micro to the macro level and incorporate a multiplicity of factors and contexts into research and analysis
- Tensions exist between the micro and macro levels of analysis because trying to understand the health of a woman within a broader context [sociocultural, economic, gender/sexuality-based, etc.] complicate the research questions being asked
- Researchers from different disciplines speak different languages and need to find new approaches to communicating with each other
- Compiling the results of multidisciplinary research can be a complicated endeavour [if the biomedical results reveal one thing, and the sociological research reveals something else, how can this be explained? Should the factors be isolated or integrated? Furthermore, what sorts of policy will emerge from the work?]
- The 'output' area for multidisciplinary, intersectoral research can be limited [i.e. peer-reviewed journals which do not acknowledge mixed methods]: How can researchers write up such studies so that they will be recognized by the broader research community?

Bridging Gaps – Approaches to Conducting Effective Research

- *Representation* and *reflexivity* are key factors in creating useful portrayals of women's experiences in health research
- Much can be learned from feminist literature regarding ways of incorporating critical theory into research
- There is a need for the development of economic models which integrate qualitative and quantitative methodologies and push the boundaries of what is counted and capture narrative and context along with the more quantifiable information
- For example, the IMPART program [addictions research] has taken on a transdisciplinary approach, creating a collaborative learning environment, challenging individuals to create a new 'recipe' for research, and fostering new approaches to conducting research by looking at women as whole beings [from cell biology to sociological methods]
- The intersectional integration of methodologies challenges researchers to think in new ways and to escape the boundaries of their own disciplines/paradigms

- If researchers take *methodological direction from the research question itself* [i.e. choose the right tools to suit the situation], they will be able to conduct the best research possible
- Multidisciplinary teams should be assembled in a sort of 'community of concern' to approach a question, coming together organically around a shared issue
- In trying to understand which constellation of factors will work together in a particular context, the strongest possible research team can be assembled, recognizing the complexity of women's health [e.g. early trauma can be embedded at a genetic level and affect the individual later in life => biological and psychosocial impacts of the same event => measuring resiliency/susceptibility in populations]

Researchers carry disciplinary conceits and paradigms. Ways of knowing the world are created and embedded through study and practice. It is a difficult journey to escape the hegemony of any discipline, but new approaches and methodologies can be helpful in beginning to transcend these limits.

Theory, Methodology, Policy

- Translating the theory of intersectional, multidisciplinary research into methodology is a complex task
- The advantages of intersectionality might reveal themselves through the discussion and analysis of the results after the research has been conducted [gathering a large amount of data and distilling it to unearth the most complete results possible]
- On some levels, many researchers are already tackling interdisciplinarity and intersectionality in their work; because it can seem overwhelming to explore so many factors at once, it is common to study populations in cultural context, but still in isolation [i.e. First Nations women living on Reserve, Chinese-Canadian women in Vancouver]
- Intersectional analysis could be especially helpful in examining health disparities in Canada
- The architects of policy can have significant influence on the kinds of questions that are asked and investigated: Intersectionality and interdisciplinarity could lend credibility to new knowledge [demonstrating solidarity and strength to policy makers]

Next Steps

- The Women's Health Research Network will create a list of interdisciplinary journals [integrating biomedical and sociological approaches]; suggestions are welcomed
- Participants are invited to provide feedback on the draft discussion paper
- Comments on the discussion paper, as well as ideas emerging from this workshop will be integrated into the paper and a working group will be assembled to move forward with this initiative

Individuals with an interest in participating are asked to contact
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For more information about the WHRN, please visit our website at
www.whrn.ca