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**METHODOLOGICAL ISSUES:**

**INTERSECTIONAL STUDY DESIGN**

**QUANTITATIVE PRIMARY DATA COLLECTION**

Greta Bauer. D., is Professor of Epidemiology and Biostatistics at Western University and holder of a CIHR Chair in Sex and Gender Science.

She studies epidemiological methods to advance the intersectional science of sex and gender.

In the first part of this issue, which is split in two, we spoke with Greta Bauer about intersectional approaches to quantitative health research and her favourite methods for study design and data collection.

Don't miss the second part, in which she will introduce us to intersectional analysis methods.

What is intersectionality and why is it important in quantitative health research?

Intersectionality is a black feminist theoretical framework whose origins date back to 1850. The term was coined by Kimberlé Crenshaw, who coined it in 1989 to name the experience of black women facing cumulative forms of oppression and discrimination (racism and sexism).

An intersectional framework assumes that a person's experience is not simply equal to the sum of its parts, but that it represents an intersection of axes of social power.

For example, the health experience of immigrant women may be different from that of immigrants and non-immigrants.

In the analysis based on sex and gender (ACSG+), intersectionality is an extension of this analysis, but it also draws its origin from critical race theory and can be applied to other social identities or (social) positions in society.

While qualitative intersectional approaches are well developed, quantitative ones are less so, due to the challenges inherent in capturing and analysing intersections between social power and their causal effects in the form of discrete, categorical data.

In quantitative intersectional research, a key question arises: whose experiences are being examined or made visible? Are experiences, outcomes or processes being examined or made visible?

By examining population heterogeneity in the context of social power and studying processes of oppression, discrimination and privilege, we can design interventions that directly address specific communities.

When should quantitative research specialists incorporate intersectional analyses into their gender and sex-based comparative studies?

The inclusion of 'pluses' in CGBA+ should be standard practice.

It is essential not to incorporate intersectional factors only after the study has been completed.

What steps should be taken to conduct intersectional research?

One must first decide whether a qualitative, quantitative or mixed method is the most appropriate to answer the research question.

If you plan to use quantitative data, you can follow the steps described on the next page.

Here are some examples of dimensions of identity and social position, and processes of oppression, discrimination, privilege and power that can be included in cross-sectional analyses.

These examples are based on a Canadian perspective that constitutes a position of power that may vary depending on intersectionality and context.

This also applies to the variables and dimensions you will include in your research.

NOTE: Cisgender is a term used to describe people whose gender identity corresponds to the sex assigned to them at birth, while the term transgender is used to describe people whose gender identity does not correspond to the sex assigned to them at birth.

Two-spirit identity, sometimes described as gender identity, defies Western terms designating gender and sexual orientation.

Read more in the second issue of the series.

Question of method: what is bi-spirituality and who is bi-spiritual? and who is bi-spiritual in the field of health research?

1. **Decide which intersections to focus the research on.**

Search for existing qualitative, quantitative or mixed research work

which suggest that the impact of sex, gender, age, race/ethnicity or other identity characteristics may be different for different groups.

Questions can also be formulated on the basis of the

knowledge of the communities, gathered through an exchange with members of these communities. Even if there is no data in the literature or if communities do not report data, be open to conducting an exploratory analysis.

Data-driven scans can be used to highlight the heterogeneity of existing data, which you may never have thought you would find. Whichever approach is taken, it is essential to determine the intersections of interest in advance.

1. **Exchange with communities**

Include representative voices in the methods design group.

If necessary, seek additional community knowledge to better understand the role of social power in guiding the research and formulating its conclusions.

1. **Design a sampling strategy that ensures the production of results for all intersections of interest**

To avoid overanalysis, it is important to consider the sampling strategy from an intersectional perspective from the outset.

If some priority intersections of interest are unlikely to be sampled as part of an overall strategy, consider stratified sampling and oversampling of some groups.

An increase in sample size may be necessary, depending on the intersections of interest in the study.

1. **Consider multidimensionality**

Multidimensionality refers to multiple dimensions: identity and social position, processes of oppression, discrimination and privilege.

We need to precisely define its intersections of interest and how to measure participants' identity for each of them.

For example:

if race and ethnicity are of interest, participants may respond differently if we measure their ethnic identity, how others perceive them or their experiences with racism.

If gender is of interest, dimensions that could be explored include gender identity, gender roles and/or norms, gender relations and institutionalised gender.

1. **Ensure that the study measures are appropriate and valid for all intersections**

Consider whether specific measures should be included in the intersections. The formulation of survey questions will vary depending on the type of study being conducted and so will the intersections of interest for the research.

First, it must be determined whether one wants to design a survey of the general population or a specific survey of a specific community. This will help in choosing which response to include and the degree to which the target audience is familiar with the terminology used in the survey.

Secondly, questions should be presented to focus groups and rehearsed beforehand to make sure the questions are clear, inclusive and comprehensive.

In population surveys, if majority groups misunderstand a question, their answers may be able to 'drown out' those of small minority groups and distort the measures. In this case, poorly designed measures risk not accurately reflecting people's multiple and/or minority identities.

Consider asking an open-ended question before asking a fixed-choice question. This way, participants can describe how they define themselves.

Then ask the follow-up question: "If you were to choose one of the following options for the purposes of this survey, which one would best describe you?". This approach helps to understand how people decide in which category they classify themselves.

If only open-ended questions are used, it poses ethical problems for researchers who have to guess the category in which someone is defined for a quantitative analysis. It is therefore better to ask him or her to choose.

Furthermore, this approach allows one to describe the heterogeneity of each category and observe that the proposed response options may not include or reflect the identity of all respondents.

1. **Analyses the data so that results and effects are evident for different intersections**

More information will be available in the second part of this issue.

1. **Ensure that the interpretation of results is inclusive**

For example, it is important to recognise the heterogeneity of an intersection to avoid stigmatising a group.

HINT: we talk about cisnormativity when, mistakenly, we assume we know all dimensions of sex and gender while we only know one. For example, in a study on uterine cancer, uterine status could be used as an inclusion criterion rather than the sex assigned at birth. Cisgender women and transgender men, those who have had a hysterectomy, would thus be classified well.

*The views expressed in this paper are those of Greta Bauer and do not necessarily reflect those of the Institute for Women's and Men's Health IRSC or the Government of Canada.*