Cautioning against the cooptation of intersectionality in Gender Mainstreaming

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Introduction

Intersectionality is being increasingly positioned as complementary and necessary to advance gender equality. As such, there is growing support to integrate intersectionality into international gender mainstreaming (GM) efforts via a “synthesis of the two approaches” (Lamprell & Braithwaite, 2017: 9) and a “re-framing” of GM that can “enable effective strategies to address gender as an intersecting component of wider structural inequalities” (Tolhurst et al., 2012: 1831). In this short note we argue that this additive approach – where intersectionality is seen as a logical addition to a GM or ‘gender-first’ framework – is inherently contradictory.

The recognition that gender interacts with other forms of inequality and greater attention to better capturing these interactions within GM is an important one. However, there is a prevailing assumption that intersectionality can engender more robust GM, exemplified by the following question: How do we examine gender inequities through an intersectional framework that encompasses the lived realities of all women? (CIGR, 2017: np).

At this critical juncture, there is a need for caution in how intersectionality is being taken up. In this short note, we briefly consider trends and examples in the world of international development that attempt to add intersectionality into GM work, yet continue to prioritize gender over other factors shaping inequity. We show how, in doing this, intersectionality is being coopted and misrepresented. We explain why intersectionality, if properly understood and applied, cannot simply be added to existing GM frameworks, or what we see as a ‘bend and stretch’ GM strategy. Instead, we advocate for a move beyond GM towards an intersectional approach that better reflects and addresses multiple forms of inequity. This intervention is particularly relevant to the field of international development, where efforts to take up intersectionality are in their nascent stages.

To illustrate the incompatibility of GM and intersectionality, we illustrate, using the example of migrant health, the differences in focus and evidence production between GM approaches that are attempting to integrate intersectionality vs. intersectionality approaches that integrate gender with other factors.

Intersectionality considerations: Current GM international trends

The global arena is seeing the explicit naming of new strategies that attempt to bring intersectionality to bear on GM.

Similar trends can be observed, within the United Nations (UN). For example, UN Women, the UN Children’s Fund (UNICEF), and the UN Development Programme (UNDP) recognize intersectionality as a key component of training and competencies required for GM (e.g., UN WOMEN, 2017; UNICEF, 2017; UNDP, 2014: 20). In addition, a UN Refugee Agency (UNHCR) report on achieving gender equality and reducing GBV quotes a stakeholder who argues that “intersecting vulnerabilities” need to be identified (UNHCR, 2018: 4). At the broader UN level, the importance of intersectionality has also be emphasized, particularly with respect to the SDG Agenda commitment to “leave no one behind” (UN, 2016: 11). A recent multi-agency guide on integrating an equity-focused and gender-responsive approach in SDG review states an “intersectional analytical lens” is essential to future SDG evaluations, however, a description of what this entails is absent (Bamberger et al., 2017: 16).

Lastly, a World Health Organization (WHO) handbook on reviewing national health programmes considers gender analysis to include “the intersection of gender with other contextual factors (such as ethnicity, income and age)” (WHO, 2016a: 20). Other WHO-related publications argue that seeing gender as intersecting with other factors (often termed taking an intersectional approach) can both strengthen gender analysis and resolve the challenges GM has faced to date in reducing inequality (e.g., Magar et al., 2019; Magar, 2015).

Discussion

While these examples demonstrate growing acknowledgement of how gender interacts with other factors, the key issue is that gender and gender inequality tend to be the a priori focus which is antithetical to intersectionality. Indeed, it needs to be emphasized that the purpose of GM, and its various tools (e.g. gender analysis), is to integrate a gender perspective into policies and programs with the goal of promoting equality between women and men. In essence, in seeking to capture intersecting dimensions of inequity, intersectionality resists assuming that any single factor (e.g., gender or gender inequality) has utmost significance or can explain any given situation. Rather, it recognizes that inequities are shaped by gendered forces and factors that are co-constituted by other diverse factors, systems and processes, and change across time and place. To summarize:

Intersectionality promotes an understanding of human beings as shaped by the interaction of different social locations (e.g. ‘race’/ethnicity, indigeneity, gender, class, sexuality, geography, age, disability/ability, migration status, religion). These interactions occur within a context of connected systems and structures of power (e.g. laws, policies, state governments and other political and economic unions, religious institutions, media). Through such processes, interdependent forms of privilege and oppression shaped by colonialism, imperialism, racism, homophobia, ableism and patriarchy are created. (Hankivsky, 2014: 2)

It is critical then that intersectionality is not considered an ‘add-on’ to global GM efforts, but rather an explicit rejection of the concept of ‘gender-first’, and by logical extension, a GM framework. We thus propose that to engage with intersectionality requires an alternative question (as opposed to the one posed earlier): How can we examine inequities through an intersectional lens to deepen our
understanding of the lived realities of differently situated persons, which includes, but is not limited to gender? Exploring this question reflects an imperative to move beyond GM.

Secondly, we assert that an intersectionality approach is able to produce the best kinds of evidence about the different experiences and needs of the population (which includes, but does not begin with or prioritize gender) for decision makers to make knowledgeable decisions about how to combat discrimination and inequalities. Importantly, operational guidance for implementing intersectionality is emerging. For example, the Intersectionality-based Policy Analysis (IBPA) Framework (Hankivsky et al. 2012), includes principles to consider in such an analysis – e.g. intersecting categories, multi-level analysis, power, reflexivity, time and space, diverse knowledges, social justice and equity, as well as guiding questions, grounded in these tenets, to explicitly disrupt an assumption of the primacy of gender or sex in analyses and bring any relevant equity dynamics to the fore. 1

To illustrate the concrete different between a ‘bend and stretch’ GM approach and one that is entirely consistent with intersectionality, and thus, open to multiple factors without any assumption of which one is most important, we offer the example of migrant health.

An Example of Migrant Health

The urgency of improving migrant health has been highlighted by WHO and its partner organizations, in particular, ensuring gender sensitive care and attending to the gender dimensions of migration and health (e.g., WHO EURO, 2016b; IOM, 2017, UNHCR, 2016). However, intersectionality reveals how a predominant focus on gender as most important to migrant health can overlook other important factors (e.g. ethnicity, age, geographic location) and processes of power (e.g. xenophobia and racism) that influence the experiences of migrants (Grant et al., 2013; Viruell-Fuentes et al., 2012). Moreover, intersectionality resists simply bringing in other factors to consider - in addition to gender - such as migrant status or age for example, but focuses on the synergistic outcomes of various intersecting factors and processes that shape migrant health in a given context.

This allows for better understandings of how different forms of discrimination operate at both individual and structural levels, which have often been overlooked within health services (Gkiouleka et al., 2018; Seeleman et al., 2015). Intersectionality can also illustrate to health care and policy actors the

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1 For more information on how to conduct an intersectionality-based policy analysis (IBPA), see Hankivsky et al., 2012, which provides a detailed yet flexible framework (including grounding tenets and guiding questions) to operationalize intersectionality within policy processes. This framework has been recognized as a promising equity tool (e.g., Mendell et al., 2012; Palència et al., 2014; NCCHPP, 2015) and has taken up in various policy-related contexts including violence (Learning Network, 2015), mental health and substance use (Hunting et al., 2015;), social work (Mule, 2015), homelessness (Zufferey, 2017), HIV/AIDS policy (Jordan-Zachery, 2013), Indigenous policies (Clark, 2012; Hankivsky & Jordan-Zachery, 2019) and the representation of minority women in STEM fields (Armstrong & Jovanovitch, 2015). Despite the recognition across many sectors that intersectionality-informed frameworks are necessary to capture the complexity of people’s lives, they have not yet permeated the international development field.
complexity of migrant health among and between women and men - how a variety of factors such as migrant status, gender, race, disability, public policies all converge to shape experiences and concomitant health needs. In so doing, intersectionality can point to better tailored interventions for reducing bias and stigmatization for differently situated migrants within health care settings (EC, 2016).

As this example demonstrates, an intersectionality approach necessitates looking beyond only gender or bringing in other factors to gender in an additive fashion towards fully analyzing the impacts of multiple and simultaneously experienced social locations, structures and processes of power.

Conclusion

If the goal is to advance complex and accurate understandings of how gender intersects with other axes of diversity, then the international community needs to seriously consider the relationship and indeed concrete distinctions between GM and intersectionality. A GM framework prioritizes gender as an entry point to addressing inequity whereby intersectionality rejects the prioritization of any one factor in such understandings and responses. We propose that the practice of attempting to integrate intersectionality into GM halts, and instead, movement is made to engage with a broader framework of intersectionality in an accurate and meaningful way. The comprehensive understandings facilitated by intersectionality can develop and strengthen current responses to inequity much more than any GM or “GM plus intersectionality” framing and thus better align with the experiences and needs of diverse populations.

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