#### Incorporating Gender-Based Analysis to Reproductive Health: Polycystic Ovary Syndrome

Developed in WGH 207: Advanced Topics of Women, Gender, and Health Harvard School of Public Health, Spring 2023

Course Instructed by Amanda Raffoul and Ariel L. Beccia

Teaching Example Authored by Lauren Gullett, Paola Bojorquez-Ramirez, and Fatou Wurie

#### Appropriate HSPH Core Course:

This teaching example can be incorporated into Embodying Gender: Public Health, Biology, and the Body Politic (WGH 250).

#### Brief Background:

The conceptualization of gender (e.g., expression, identity, attribution) and its embodiment (i.e., the shape, feeling, and behavior of one's body as shaped by cultural factors and social interactions) is a necessary consideration for addressing health inequities (Dubois, 2022). Disproportionate access to resources, imbalances in power, discrimination, and low-quality healthcare contribute to a multitude of health problems experienced gender minority individuals (Salcedo-Betancourt, 2022). For instance, transgender, non-binary, and gender non-conforming people are less likely to receive tailored and inclusive health care related to gynecological health and disorders such as polycystic ovary syndrome (PCOS). PCOS is a common endocrine disorder characterized by symptoms such as polycystic ovaries, hyperandrogenism (e.g., acne, hirsutism), weight gain, insulin resistance, and period irregularity. PCOS is associated with an increased risk of diabetes, infertility, and cardiovascular disease and can have an impact on daily life (Liu, 2020). Research and clinical care for PCOS overwhelmingly centers cisgender women, which perpetuates disparities in the detection and treatment of PCOS among other marginalized gender groups (e.g., transgender men, nonbinary people). Existing treatments for PCOS assume that all individuals identify with the norms, expectations, and societal standards of 'womanhood.' Although some cisgender women may experience gender dysphoria (i.e., discomfort between one's biological sex and gender identity) because of their PCOS symptoms, some manifestations of PCOS may be desirable by gender minority individuals (Brown, 2022). For example, the presence of hirsutism (i.e., facial and body hair) may align with some gender minority individuals' identities and can "produce euphoria" (Brown, 2022).

### Learning Objectives for Students:

- 1. Describe how gender-based analysis in research and health care can improve the health of people with PCOS of all genders.
- 2. Apply concepts of gender multidimensionality, expression, identity, and attribution to PCOS and related care.

3. Use health-related media literacy skills to critically analyze mainstream scientific visual imagery related to gynecological health.

# Teaching Method

## 1. Distribute a pre-class survey to assess students' knowledge about PCOS.

Prior to completing the assigned readings and watching the short introductory videos, students should be asked to complete a quick and anonymous two-question survey (see supplemental material). Survey results should be shared orally (approximately 5 minutes) the day of the facilitated discussion. These findings may be used by the instructor to lead discussions.

## 2. Assign readings to be completed before class.

The following readings are required:

- 1. Polycystic Ovary Syndrome and Gender Identity
- 2. <u>How PCOS can create gender euphoria for trans and nonbinary people</u>
- 3. Gender inequality and restrictive gender norms: framing the challenges to health

## 3. Facilitate in-class discussion.

Instruct students to watch the following two videos, which will provide an overview of PCOS. Ask them to take brief notes on interesting facts or anything that surprised them. This will help with discussion.

- 1. Understanding PCOS
- 2. Do I Have Polycystic Ovarian Syndrome?

Prompt discussion with the following statement and questions:

- What do you like about the videos? Which one do you like more and why?
- Imagine the video you just watched was shown to a group of health professionals (e.g., epidemiologists, reproductive health scientists, endocrinologists, psychologists, general practitioners) attending a conference to raise awareness about and improve the treatment and management of people diagnosed with PCOS. How was the **multidimensionality of sex and gender** incorporated (or not) into the videos? To what extent is gender expression represented in the videos?
- How may these videos **perpetuate negative stereotypes about gender and discriminatory experiences in medical settings** that translate to research that is not gender-inclusive?
- What can we do to improve the rigor of reproductive health research so that gender-based analysis is a norm and not an exception?
- How (if at all) has PCOS been portrayed in other forms of media you encounter (e.g., social media, television shows, books)?

Themes to help facilitate discussion (if needed):

• History of violence towards transgender and gender-nonconforming people in medicine, improving research standards for journals when researching sex and/or gender, gender norms and beauty standards (e.g., body hair), representation of the diversity of people who live with PCOS, terminology (e.g., 'normal'), infertility as a blanketed negative idea (which promotes the social normal that 'women' should get married and have children to be fulfilled), influence on mental health, sources of information

Divide the class into two groups. Instruct students to observe the graphics (see supplemental material) individually for 5 minutes. Select 1-2 questions for each group to discuss for  $\sim 10$  minutes. Ask each group to select someone who will share what they discussed with the entire class.

Prompt discussion with the following questions:

- How would you expect these symptoms to influence individuals across a **spectrum of gender identities and expressions**? What about across other **intersecting axes of social identity and position** (e.g., race, income, sexuality, nationality, etc.)?
- What are some of the potential **unintended consequences** of portraying PCOS in a manner that is not inclusive of all genders? What changes would you make to graphics like these (used either in clinical spaces or given to participants of research studies)?
- How can clinicians approach the discussion of treatment for PCOS in a gender-inclusive way?
- What assumptions do researchers make when investigating the **psychosocial impact** on people with PCOS?

Themes to help facilitate discussion (if needed):

• Intersectionality, qualitative research, gender identity vs. expression vs. perception, beauty standards (e.g., body hair, body fat), gender/sex multidimensionality, sources of information, media literacy

### **Supplemental Material**

References

Brown, SJ. 2022. How PCOS can create gender euphoria for trans and nonbinary people. *Prism*. <u>https://prismreports.org/2022/10/26/pcos-gender-euphoria-trans-people/</u>

Dubois, LZ., Puckett JA., Langer, SJ. 2022. Development of the Gender Embodiment Scale: Trans Masculine Spectrum. *Transgender Health*. <u>https://www.liebertpub.com/doi/10.1089/trgh.2020.0088</u>

Heise, L., Greene, ME., Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., Zewdie, D. 2019. Gender inequality and restrictive gender norms: framing the challenges to health. *The Lancet*.

https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)30652-X/fulltext#%20

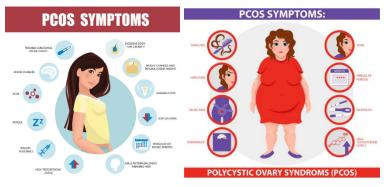
Liu, M., Murthi, S., Poretsky, L. 2020. Polycystic Ovary Syndrome and Gender Identity. *Yale J Biol Med.* <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7513432/</u>

Salcedo-Betancourt, JD., Farouk, SS., Reddy YNV. 2022. Ensuring health equity for sexual and/or gender minority individuals. *Nat Rev Nephrol*. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9170236/

### Additional Resources

a.

- 1. Pre-class survey
  - a. Suggested questions: 1) What are some words that come to mind when you hear Polycystic Ovarian Syndrome (PCOS)? and 2) What would you like to know about PCOS?
  - b. Survey questions can be shared using Survey Monkey, Google forms, or any other preferred survey tools.
- 2. Graphics for facilitated discussion



i. Images taken from medical centers that discuss PCOS:

- 1. Maple Leaf Medical Center
  - a. <u>https://mapleleafmedical.com.au/blog/2019/9/21/pcos-poly</u> <u>cystic-ovary-syndrome</u>
- 2. Fertility Center of Dallas
  - a. <u>https://fertilitycenterofdallas.com/blog/pcos-what-you-need</u> <u>-to-know/</u>

Upper lip					Chin				
	₹£	35	35	S.	10	10	20)	36	100
8) KW	2 liw tols 2 date 12 mage	A year north and a second a second se	Anuclaine aloraing halfway fair the outer heigh	A number volanding who middle of the lip	NE NO	A Record Contraction Tell rates	School rais In a rai groupe	Compression Ign	Congretation of the second sec
Chest					Upper abformen				
后子	EA	Fig	(jeag)	(A)	5.7	5:7	517	517	TR
N) 100	121/216/23 TO	Har areas for right, or hose right of the cost	References topics obsciegts the microsofte dest. parity cover	Civentian	NUND	A BACTARGE PE	Stude officiants In weather	Herrowskiller Investiller mäßis periol gener	Har order 11: beyond Bu mittight complete gover
Lower abdomen					Thighs				
/¥\	$(\downarrow)$	/4/	141	/4\		VI	131	团	
No Nair	3 levien site málo	Brook of sortin Re milling	Sent of hearts the mode	Instruct Schape gradit Charowar Considerciona	Nexo	Country to the state of the state	Spence panels covering most from the high bat not the antition bats	Tright care pit kiy carries light	This completed covered heavy

b.

- i. Image taken from research article on hirsutism, a common criterion for having PCOS
  - 1. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2856356/