

Challenging Normative, Heteropatriarchal Ideologies in today's Healthcare

Harley Bray BSc*

Max Rady College of Medicine, University of Manitoba
727 McDermot Avenue, Winnipeg, R3E 3P5

Abstract

Patriarchy has not been removed from our society, it has merely adapted to ensure subtle, dominating power over the women of today. Many women pursuing a career in medicine, including myself, exist in environments that oppose a world where women are expected to live in the shadows of, or at least inferior to, men. Women in medicine who highlight social injustices and challenge heteronormative gender roles are, in turn, perceived as the problem for simply exposing the problems. The multiple internalized and externalized power inequalities between men and women have contributed to the construction of the way healthcare perceives the strength and ability of women. The oppression of patriarchy exists within healthcare and will be explored through the lens of Sara Ahmed's theory of 'Feminist Killjoys'.

Keywords: feminist killjoys, patriarchy, healthcare

I believe feminism is about recognizing and appreciating the diversity of men and women yet providing all with equal opportunities in learning spaces, workplaces, politics, and healthcare.

Gender roles and binaries have become the foundation of how most cultures organize their thoughts and have permeated into our institutions, such as our healthcare systems. Societies are constantly reminded and judged according to the stereotypical and gender-specific responsibilities that such institutions have promoted. I argue that developing equity and equality, both locally and globally, is an imperative attribute in growing and investing into a successful healthcare system. Despite the changes made by feminist movements and the accomplishments of feminist scholars, traditional gender attitudes, which are demeaning to women, are alive and thriving today. Gender roles and the multiple internalized and externalized power inequalities between men and women have contributed to the construction of the way healthcare perceives the strength and ability of women. The oppression of patriarchy exists within healthcare and will be explored through the lens of Sara Ahmed's (2010) theory of 'Feminist Killjoys'.¹

The power imbalance between men and women exists in a variety of different settings, including our communities, schools, homes, workplaces, politics and healthcare². We as a society must fight the assumption that patriarchy is universal and eternal. Marsha Robinson (2013), feminist scholar and author, classi-

fies institutionalized sexism as a "powerless incubator" for women and claims that inverting patriarchal hegemony will help construct a view of women as equal and empowered proprietors of their own lives³. Patriarchal societies are not only male-dominated, but they are male-identified, male-centered, and oppressive of women by devaluing the work they do or treating them as though they are not worthy of notice and reward⁴. These oppressive attitudes present a continuous challenge to women in science, a classic historical example of these oppressive attitudes being when Rosalind Franklin's work on DNA structural modelling being credited to her male counterparts. Patriarchy has not been eliminated from science and healthcare, it has merely adapted to ensure subtle, dominating power over the women of today.

A deeply rooted problem of patriarchal systems is that such traditional mindsets are passed from generation to generation. Children's minds are vulnerable, dynamic and highly responsive to the examples set to them by adults⁵. From a scientific perspective, it is safe to assume that all children are impressionable and sensitive to their environment. This begs the need for our generation to realize that our choices and decisions can have lasting impacts on our children and future generations to come. Past generations' inclination to enforce ideas of traditional, power divided relationships between genders onto their children are the true preservers of patriarchy and hostility towards women in today's social structure. Institutionalized sexism is not

*correspondence to: brayh@myumanitoba.ca

something we know at birth; it is learnt. Women in professional fields, such as healthcare, being painted as demanding, bossy and ‘scatter-brained’ builds a culture that accepts sexist attitudes and promotes spaces where sexual harassment in the workplace is tolerated.

Change is inevitable, yet people (namely those whom are privileged in the current time) allocate copious amounts of energy resisting it. In “Feminist Killjoys,” Sara Ahmed highlights that those who work towards improving and challenging present day issues, such as patriarchal gender roles, are perceived as “killing the joy”. Feminist Killjoys upset people’s ability to enjoy what they have been taught by societal norms to be ‘happy objects’, such as women being socially, physically, and financially inferior to men¹. A number of us are identified by society as feminist killjoys by making non-normative choices that challenges the patriarchal order and disrupts the happiness of others by exposing patriarchal and sexist cultural norms¹ as unacceptable and vulgar.

Sara Ahmed’s definition of the feminist killjoy is someone who challenges traditional gender roles. A woman who is not married with kids by the time she is forty is ultimately viewed as a failure to our hetero-patriarchal society and her value and worth is diminished as she is reminded of what and who she is supposed to be: “the happy housewife”¹. Normative society condemns individuals who step outside the boundaries of of normative expectations; female physicians being a key example. Women are told that they must choose between the personal and professional, but as a woman who is pursuing a career in medicine, I do not find happiness in being the “happy housewife”. Many women pursuing a career in medicine, including myself, exist in environments that oppose a world where women are expected to live in the shadows of, or at least inferior to, men. Women in medicine who highlight social injustices and challenge heteronormative gender roles, in turn, are perceived as the problem for simply exposing the problems. Several female physicians have disclosed to me their refusal to preserve the image of the “happy housewife” and, as a result, have become alienated because of their resistance to conform to the social patriarchal order. Ahmed highlights that if one dares to comment on or correct a social injustice in certain spaces, such as harassment in healthcare settings, or political climates, they are going to be blamed for killing the joy. Happiness for such discriminatory yet traditional systems are used to excuse social injustices¹. Today’s society shapes individuals to be passive and conforming to help protect the appearance of Canada’s inclusive healthcare system. People adhere to normativity to avoid becoming the spectacle when in actually, those who do not conform are highlighting the true spectacle.

Furthermore, happiness is defined as a social norm¹, especially in patriarchal societies. Consequently, if one is not happy with what may be an oppressive patriarchal social structure it is seen as their problem, and not a problem with society. A hetero-normative society

dictates how and when people should feel certain emotions. However, Ahmed states that “you cannot always close the gap between how you do feel and how you should feel”¹. By stating this, Ahmed highlights that compromising your values in order to avoid confrontation with others is not a plausible solution, which many women in the profession of healthcare are advised to do. By questioning oppressive societal systems and killing the joy you may become isolated from the majority of society who find happiness or may even benefit from such hetero-patriarchal structures.

It is a natural human instinct to look for a single source to blame for such injustices, however, this is not the result of individual perpetrators, but rather a multi-fold cultural problem. Various institutions in our society, such as healthcare, the justice system, and political structures, help to produce sexist and oppressive policies, attitudes and social environments at pandemic rates. We need not just women, but everyone to be a part of ending this stigma and changing the image of feminist movements from anti-male to gender inclusive. Changing reality requires changing perspective. If we can eliminate or at least minimize the bystander effect and start promoting a culture in which gender inequality is viewed as objectionable, we can cause a paradigm shift.

Just think about how powerful our society would be if our children were instead taught the meaning of feminism and equal opportunity as a fundamental unit in their educational curriculum⁶. Dr. Michael Kimmel, an American gender studies sociologist, stresses that it is crucial to realize that we cannot fully empower women and girls unless we engage boys and men⁷. We need to evaluate, and reshape the way society defines women based solely in relation to their male counterparts, The first step to addressing this is simply putting our feminist practices and ideologies into our everyday lives, both at work and at home.

As a young woman trying to pursue a career in a male-dominated field I am a strong advocate for the movement against institutionalized patriarchy and misogynistic attitudes. We need to call on everyone to embrace feminism and demand equality within healthcare. I shout out to all women to embrace their complexity and be unapologetically strong and present in politics, businesses, workplaces and healthcare. We need to unlock the power, strength and greatness that the female population holds and bridge the gap between our generation and gender equality; a world free of exploitation, patriarchy, domination and violence against our sisters, mothers, and daughters. A new foundation must be built, and I believe it is critical for us not to learn, as Gloria Steinem⁸ says, but to begin unlearning the inequalities that our society has placed on women of all identities, religions and cultures.

References

- [1] Sara Ahmed. Feminist Killjoys (And Other Willful Subjects). *SEF Online*, (8.3):1–3, 7, 2010.
- [2] M Krause, D Cortis, S Smith, and D Dolderman. *An Introduction to Psychological Science*. Perason Learning Solution, Onatrio, Canada, 2015.
- [3] Marsha Robinson. *Women Who Belong: Claiming a Female’s Right-Filled Place*. Cambridge Scholars Publishing, 2013.
- [4] Melinda R York. *Gender attitudes and violence against women*. LFB Scholarly Pub., 2011.
- [5] R Nuwer. Teenage Brains Are Like Soft, Impressionable Play-Doh. Smithsonian.com.
- [6] T Nudd. Ashton Kutcher: Why We Don’t Have a Nanny. *People Magazine*.
- [7] Valerie Fortney. Fortney: Michael Kimmel, “world’s most prominent male feminist,” says gender equality good for all. *Calgary Herald*, October 2016.
- [8] P Mehta. Common Theme Throughout My Class: Unlearning and Learning – Gloria Steinem, 2016. UMLearn.