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Use of Intersectionality Theory and Interpretive Descriptive Qualitative Method to Address Inequalities in Marginalized Communities

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ABSTRACT

To understand the application of Intersectionality theory in conducting qualitative interpretative research on exploring inequalities and discriminatory healthcare practices towards marginalized communities. Method: Narrative Review. Data Sources: Systematic Literature search. Findings: Qualitative research on exploring discriminatory healthcare practices towards marginalized communities requires a research methodology that is practice-oriented and flexible in using theoretical knowledge. The theory of intersectionality exposes how socially constructed identities are intertwined with discriminatory healthcare practices toward marginalized communities. On the other hand, Interpretative Description (ID) is a clinical-based qualitative methodology that aims to identify gaps in healthcare and nursing practices and create evidence-based interventions to address such gaps. Using intersectionality with ID methodology allows researchers to identify discriminatory healthcare practices towards racialized communities and create resources to provide equalized care to marginalized communities. Conclusion: The theory of Intersectionality provides theoretical scaffolding to understand the impact of power, race, and social identities on marginalized populations. Using ID with intersectionality theory will be a novel approach to conducting research on marginalized communities and identifying ways to address the inequalities in nursing and healthcare practices.

INTRODUCTION

Addressing health disparities and inequalities in healthcare practices towards marginalized communities calls for enhanced theoretical and empirical attention, particularly focusing on their lived experiences as an oppressed group. It requires theoretically driven research that represents the struggles and challenges of marginalized communities (Ocean et al., 2022). The theoretical model can guide to the research framework and research to best showcase the marginalized communities' challenges around accessing healthcare services. However, the theoretical model, which ignores the voices of marginalized communities, is meaningless and may mislead the research findings (Macdonald et al., 2016). Moreover, the involvement of in-field experts or practitioners is significant to implementing research outcomes into practice and bringing change in

discriminatory healthcare practices toward marginalized communities (Mitchell et al., 2021). Therefore, to address health disparities and inequalities in healthcare practices towards marginalized communities, the research methods need to be theoretically driven and practice-oriented so the research knowledge can be implemented to improve care practices. In nursing and social science research, the use of disciplinary knowledge is essential with the consultation of knowledge users such as nurses, doctors, and therapists to explore disparities in healthcare practices in various settings towards marginalized communities.

Using a traditional quantitative top-down research approach that situates researchers as experts and orients the inquiry from the researcher's perspectives cannot justify exploring the lived experiences of marginalized communities (Throne, 2016). Therefore, using qualitative research will be

significant in unraveling the lived experiences of discrimination in healthcare practices toward marginalized communities. Qualitative research also allows research to be people-driven rather than researcher-driven. However, qualitative research alone is insufficient to bring change in everyday discriminatory practices. Therefore, the qualitative research method that focuses on applied and disciplinary knowledge will be meaningful to address inequalities in healthcare practice towards marginalized communities (Ocean et al., 2022). Applied qualitative research is a method used in qualitative research to generate knowledge that can be applied to reform practice (Throne, 2016).

The Interpretative description (ID) method is based on the principles of applied qualitative research, which aims to implement change in clinical practices based on research outcomes (Chu et al., 2022). ID uses clinical and disciplinary knowledge to decolonize research, allows the investigation of real-world questions, and its flexible nature allows the researcher to use a theoretical lens to investigate discriminatory healthcare practices toward marginalized communities (Burgess et al., 2021; Wright et al., 2021). Marginalized communities encounter various discrimination and inequalities in healthcare systems. Knowing the history of oppression and marginalized practices towards certain communities can provide great insight to researchers to address gaps in healthcare practices and make the research process participant-oriented.

The theory of Intersectionality will provide a framework to conduct research on marginalized communities and use the evidence to enhance healthcare practices. The theory of Intersectionality explores the impact of overlapping or intersecting social identities of individuals and the system of oppression and its influence on marginalized communities (Crenshaw, 1989). Marginalized populations are defined as groups and communities that experience inequalities in healthcare, discrimination, and exclusion (social, political, economic) due to oppression or colonialism based on their gender, sex, race, and culture (Crenshaw, 1989).

To represent the voices of marginalized populations in the research process, an applied qualitative approach with the integration of theoretical knowledge of decolonization and

marginalization is necessary to bring change in healthcare practices. Therefore, using the theoretical lens of Intersectionality with ID will provide researchers with theoretical and practice-based knowledge and skills to explore the inequalities and disparities in healthcare practice towards marginalized communities in nursing research.

The purpose of this paper is to use Interpretive Description (ID) as one methodological option that aligns with the theory of intersectionality in qualitative research in researching and exploring the health inequalities in accessing healthcare services for marginalized communities.

METHODS

A narrative literature search methodology was conducted to understand the broad perspective of using intersectionality as a theoretical framework with Interpretive Descriptive methodology (ID) in qualitative research focusing on marginalized communities and exploring discriminatory healthcare practices towards them. Qualitative research studies have been searched in nursing and other disciplines, chain searching, examining reference lists of shortlisted articles, and drawing on experts in qualitative research on marginalized populations. Librarian (MK) helped in conducting a systematic literature search using key terms. The search key terms were Intersectionality, Interpretative descriptive methodology, Qualitative research, Marginalized communities, nursing research, and healthcare practices. Existing and new theoretical ideas were gathered to offer an alternate perspective on how the theory of intersectionality may be better positioned to conduct research on marginalized populations in conjunction with the applied qualitative research method (ID) to address clinical discriminatory practices.

RESULTS AND DISCUSSION

Intersectionality and Applied Qualitative Research

The theory of intersectionality addresses questions related to identities and the power relationship. This theory explores the impact of social identities, such as the role of race, gender, color, and class, on individuals' unique experiences in different contexts (Collins et al., 2011). Kimberlee Crenshaw (1989) created this theory to respond to racialized behavior and violence toward

black women based on color. Later, her theory gained attention in healthcare, sociology, and other disciplines to address social and gender inequalities and their influence on marginalized individuals with different social and ethnic identities (Collins et al., 2011). The philosophical underpinnings of this theory are situated within the transformative paradigm, derived from critical social theory and feminism. The transformative paradigm focuses on marginalized communities' experiences and uses research findings to mitigate societal disparities (Jackson et al., 2018). The epistemological tenets of intersectionality theory assume that knowledge should arise from the oppressed and not the dominant social group (Beavis et al., 2015). Intersectionality theory helps researchers to understand the influence of social and historical context on marginalized communities and provides rich theoretical knowledge with practical applications to change discriminatory healthcare practices (Abrams et al., 2020; Nguyen et al., 2022). Intersectionality also facilitates the creation of person-centered holistic nursing practices and policies that address marginalized communities and their concerns in the healthcare environment. It will also allow nurses to explore the effects of healthcare inequalities on marginalized communities and plan health interventions appropriately to reduce disparities (Turan et al., 2019).

On the contrary, applied and practice disciplines such as nursing aim to address real-world challenges in clinical practices. Qualitative applied research tends to focus on addressing problems in practice, which often cannot be addressed without using disciplinary knowledge and skills (Throne, 2016). Interpretative Description (ID) is an applied qualitative research method that values subjective and experiential knowledge (Brewer et al., 2014). ID is an action-oriented research methodology that values implementing research knowledge to reform or enhance clinical practices. Integrating an intersectional lens with ID methodology will allow the researchers to identify gaps in clinical practices towards marginalized communities and use disciplinary knowledge with theoretical underpinnings to reform discriminatory clinical practices.

Interpretive Description and Marginalized Communities

Research focusing on clinical practices requires an applied qualitative research process where the knowledge generated is more praxis-oriented, which can reform healthcare practices and policies (Throne, 2016). Nursing research based on clinical and healthcare practices requires a research method that appreciates the use of disciplinary epistemological and ontological knowledge, which can be used as a guide to design a research study. Throne (1997) proposed an Interpretive Descriptive (ID) qualitative research methodology to address some of these challenges, focusing more on clinical practice and using disciplinary knowledge in the research process. ID is an inductive qualitative research methodology developed by Dr. Sally Thorne (Thorne et al., 1997), which is more applicable in research focusing on enhancing clinical practices and policies. It challenges the traditional qualitative research method and instead strives to generate usable knowledge (Thorne, 2016). ID methodology uses everyday nursing experimental and epistemological knowledge and generates practice-oriented research outcomes (Thorne et al., 1997). It addresses complex healthcare practices and identifies the gaps which cannot be easily studied using traditional qualitative methodologies.

ID methodology aims to answer research questions related to daily clinical practices, thereby providing evidence-based answers applicable to clinical practice (Thorne, 2016). ID is aligned with constructivism and naturalistic inquiry principles, where knowledge is co-constructed with the participants and informs research analysis and outcomes (Hyde, 2020). ID uses the nursing foundational knowledge and recognizes the need for research methodology, which can be implemented in practice-oriented disciplines to enhance nursing and healthcare practices (Thorne et al., 1997). Its flexible nature allows researchers not to feel pressured to use a theoretical framework in the research process but rather to use discipline-oriented knowledge and prior experiences and use theory based on the need that arises in the research process (Chiu, 2022; Throne, 2016). Moreover, the theory should be introduced cautiously to avoid over-representing the data analysis or study outcomes (Chiu et al., 2022). The iterative and

flexible approach allows nurse researchers to use theoretical scaffolding where they feel necessary and give meaning to the research analysis and findings. This methodology can be meaningful in reforming discriminatory healthcare practices to provide equalized access to care services to marginalized communities (Lapum et al., 2022).

However, the flexible nature of ID can be challenging, especially if the research is on marginalized communities to explore healthcare disparities in clinical practices. First, a significant concern of researchers with the ID approach is the clear distinction between when and where to use theory in the research process or not to use theoretical knowledge at all (Hunt, 2009). The flexible use of theory can be cumbersome for novice researchers to understand where to use theoretical knowledge in connection with praxis knowledge to inform change in clinical practices. In ID, researchers are encouraged to use multiple theoretical frameworks, which can be used in any process during research design (Ocean et al., 2022). Theoretical scaffolding in ID is more iterative and can be used during data collection or analysis and interpretation phases (Throne, 2016).

This can be challenging for novice researchers as they may need help identifying where to use the theoretical lens in the research process, which may lead to under or overuse of theory to represent the research study. Ultimately, it can lead to a potential threat to data interpretation and analysis, which may limit the use of study findings to reform clinical practice (Hunt, 2009). As Jackson and Mazzei (2013, p.261) stated, the term 'thinking with theory' can assist researchers in theory application within the research process in a more analytical way. Having a clear orientation and linkage of theory can augment the research process and give direction to researchers. More specifically, research on marginalized communities requires theoretical knowledge which allows researchers to understand participants' history and culture, which may influence their health choices (Abrams et al., 2020). It will also reduce the risk of disrespecting individuals' customs and culture. Moreover, a theoretical framework gives researchers an insider perspective that helps them consider individuals' identities, be mindful of their struggles, and use appropriate language during the research process to

build rapport and trust with participants (Abrams et al., 2020).

The second major challenge with ID methodology is data analysis and interpretation (Hunt, 2009). Data analysis in the ID approach is based on interpretation, which can be supported by theoretical or disciplinary epistemological knowledge (Throne, 2016). Data analysis in ID is inherently analytical, where the use of theory can be determined based on the need for data analysis, resulting in more robust and in-depth data analysis. However, analyzing the appropriate use of theory in the data analysis process can be stressful and challenging, as novice researchers may require clear directions on when to use theory in the data analysis process (Hunt, 2009). Moreover, research-oriented toward marginalized communities requires more in-depth skills to interpret the research findings, which can be challenging without having theoretical knowledge of various intersecting identities and their impact on racialized communities. However, as ID focuses on enhancing clinical knowledge and refining clinical practices, using theoretical and disciplinary grounded knowledge gives direction for data analysis and interpretation to the researcher, enhancing the data interpretation quality.

The knowledge created under the guidance of theory is person-centered and applicable in different contexts, which is required in qualitative research, especially for novice researchers (Abrams et al., 2020; Williams et al., 2020). Moreover, the theory of intersectionality highlights the need to give voice to marginalized communities in reforming healthcare practices, which aligns with ID methodology, which aims to construct knowledge with the participants to reform clinical practice (Hyde, 2020; Van Herk et al., 2011). Thus, using a theoretical framework is beneficial in qualitative applied research to derive valuable knowledge extensively applicable in other contexts.

Challenges in Accessing Healthcare Service in Marginalized Communities and Qualitative Research

Health disparities and accessing healthcare services is an ongoing global challenge in marginalized communities, especially for refugees, asylum seekers, older adult immigrants, ethnic or sexual minorities, and homeless individuals who struggle to share their voices to seek equitable healthcare resources (Baker et al., 2021).

Discriminatory healthcare practices toward marginalized groups can lead to poor health outcomes and impact their overall quality of life. Nurses play a significant role in advocating for equalized care and distribution of resources for people in society (ICN, 2021). To address the issue of discriminatory healthcare practices within healthcare settings, nurses and researchers need to adopt a research methodology that is rooted in theory and can lead to practical change. By utilizing a research methodology that is focused on praxis and integrates the lived experiences of marginalized communities, healthcare professionals can work towards reducing discriminatory healthcare practices (Mitchell, et al 2021). This approach aims to ensure that all individuals, regardless of race, ethnicity, or identity, have equal access to healthcare services. Marginalized communities face various challenges in accessing healthcare services such as structural barriers, cultural and language barriers, and financial barriers (Baker et al., 2021). Moreover, fear of being stigmatized and lack of knowledge to access resources is another major layer of complexity that restrains marginalized communities from accessing healthcare services. To explore some of these barriers embedded in healthcare practice, researchers required an applied research methodology and theoretical framework that explore the complexities around marginalized communities and healthcare practice. Therefore, using the theory of intersectionality and ID methodology will be useful to explore some of these discriminatory healthcare practices and identify ways to address these challenges.

Intersectionality is ‘the interaction between gender, race, and other categories of difference in individual lives, social practices, institutional arrangements, and cultural ideologies and the outcomes of these interactions in terms of power’ (Siira et al.,2023). It shows the interconnectedness between social identities and structural inequalities. Using intersectionality allows nurses to use theoretical knowledge in nursing practice to advocate for change in systems and address societal inequalities within healthcare practice. Using a theoretical lens allows nurses to critically analyze the influence of colonialism, power, and structural racism in nursing practices and identify ways to provide equalized care to the marginalized population. Aligning intersectionality theory with

Interpretative descriptive (ID) methodology in qualitative research will allow researchers to explore social injustice in healthcare practices (Hankivsky et al., 2014). Moreover, it enhances the credibility and transferability of study outcomes to different healthcare contexts and at policy levels, where marginalized communities face challenges in voicing their concerns related to the inequitable distribution of healthcare resources (Van Herk et al., 2011).

Intersectionality and ID augment each other because they enable researchers to explore inequalities and gaps in healthcare practice and address complex healthcare practices intertwined with power, race, and structural inequalities. It allows researchers to use cultural knowledge in conducting research with marginalized patients and be mindful of individuals' cultural and ethnic diverse needs in nursing care. It also allows the researcher to initiate change in nursing and healthcare practices and policies based on the ethnocultural needs of marginalized communities.

Moreover, ID involves an inductive approach to data analysis, which, in combination with intersectionality theory, gives flexibility to the researcher to go back and forth in the research process and use theoretical knowledge (Chiu et al., 2022; Hunt, 2009), which assists in exploring the malpractice and structural inequalities in nursing and healthcare practices towards marginalized communities. Using theory in ID is more iterative and flexible, allowing the exploration of multiple perspectives in the data analysis and interpretation process for inductive analytical reasoning. Having a grounded knowledge of intersectionality will enhance the quality of data interpretation, and the research study's outcome can be implemented at practice and policy levels (Bell, 2021). In ID, the unclear nature of where to use theory in the research process can be challenging, especially if the research explores social injustice and inequalities in nursing and healthcare practices. Therefore, having an intersectionality theoretical framework as a guidepost may provide valuable research outcomes to address oppression and power toward marginalized patients and communities. Using Intersectionality and ID in qualitative research will enable researchers to provoke culturally oriented healthcare practices and implement change to

address inequalities in healthcare towards marginalized communities.

Significance of this Review

This review addressed the significance of applying qualitative research methodology in alignment with the theoretical framework to address health inequalities and disparities in clinical practice and policies toward marginalized communities. Nursing is a practice-oriented discipline, and nurses are responsible for identifying the health disparities and malpractice toward marginalized communities in the healthcare system through research. The knowledge gained from this review will assist novice researchers, students, and researchers in using the Interpretative descriptive with the theory of intersectionality to reform discriminatory healthcare practice and create resources to provide equalized care to marginalized communities.

Describe your research findings according to the research problem and purpose of the study. Discuss your findings according to the perspective of theory, concept, or previous findings. Should describe this section in a comprehensive, simple, and detailed manner. The author can make subchapters in this section.

CONCLUSION

Research plays a significant role in exploring malpractice in healthcare for marginalized and oppressed individuals. The theory of intersectionality articulates the influence of multiple social identities and societal practices that create significant challenges for oppressed groups and marginalized individuals to uphold their right to access quality healthcare. ID's methodological challenges include the flexible use of theory, data analysis based on interpretation, and uncertainty about the degree of data interpretation, which creates challenges for novice researchers in using such qualitative research methodology. To overcome these challenges, using intersectionality theory with ID methodology will provide a medium to address the complex needs of marginalized communities and address inequalities in clinical practices.

Using intersectionality theory within ID methodology enhances research outcomes on marginalized communities and enables researchers and their participants to be involved in the co-construction of knowledge (Guba & Lincoln,

2000; Thorne, 2016). Therefore, using ID in combination with intersectionality theory is innovative in unfolding the complex issues of marginalization in healthcare practices, beginning a paradigm shift in praxis. This novel approach will enable researchers and clinicians to identify discriminatory healthcare practices and explore the health inequalities encountered by marginalized communities in accessing healthcare services.

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