## **GUEST EDITORIAL**

## Towards Understanding Women's Health through a Social Determinants Lens

## **Judith Wuest**

Women's health is a compelling, complex, and prodigious domain for nursing research. Our ways of thinking about and studying the health of women have been influenced by shifting models of health, from absence of disease, to personal responsibility through lifestyle choices, to, finally, social determination. The strength of a social determinants perspective for understanding women's health is its acknowledgement of the influence of social context, at macro and micro levels (Moss, 2002), not only on health outcomes but also on patterns of promoting, maintaining, and regaining health. Neither biology nor personal responsibility are ignored, but rather they are understood within the context of social, economic, environmental, and political contexts at the societal, familial, and individual levels. Health Canada's 1999 *Women's Health Strategy* provides an excellent background to the complexity of a social determinants perspective.

While nurses recognize the importance of a social determinants model for understanding the intricacy of women's health, rarely do they explicitly situate their research studies in this framework. More often, the social determinants perspective is introduced after the fact. If a social determinants model guides the research, frequently the focus is on one or two determinants or solely at an individual level. To some extent, this relates to the complicated nature of the social determinants perspective. Making sense of women's health in a way that accounts for multiple determinants at both macro and micro levels requires advanced research skills and a complex research plan, whether the approach is rooted in traditional science or in naturalism. Another deterrent is the fact that research situated in a social determinants framework may be less identifiable as "health" or "nursing" research, especially if the implications focus on policy or structural changes outside the realm of what is traditionally considered health or nursing. While lip service is given to the notion of healthy public policy, editors of health-research journals often have difficulty seeing findings with implications for the justice, housing, employment, or immigration sectors as relevant to health research.

Despite these challenges, in my judgement findings from research with a social determinants orientation offer us the best chance for understand-

ing the tangled patterns of women's health within a family, social, cultural, political, and economic context. Such knowledge is essential for informing the construction, evaluation, and promotion of nursing interventions that promote equity and well-being. Hence, the call for papers for this issue invited theoretical and research-based manuscripts that addressed the cumulative and interactive effects of multiple social determinants at various levels (individual, family, community, organizations, services, policy, laws). The response was overwhelming, with almost 40 papers submitted. Finding almost 80 scholars to review these submissions in midsummer, not just for scholarly merit but also for relevance to the issue, was no mean feat! My heartfelt thanks to those of you who did reviews. They were thoughtful, substantive, and encouraging for authors; indeed, some authors have indicated that these reviews were exemplary and provided extraordinary direction for strengthening future submissions.

The manuscripts submitted reflect the fact that authors considered their studies to be relevant to a social determinants perspective, regardless of whether they had explicitly used a social determinants model. Some manuscripts targeted named social determinants such as income, gender, social support, culture, employment, or environment. In other manuscripts the connection to social determinants was tenuous, almost an afterthought. Many of the studies addressed single determinants at an individual level; the cumulative and interactive effects at macro and micro levels were less well addressed.

This collection of six scholarly papers reflects the current state of health research with respect to the social determination of women's health. Issues addressed are wide-ranging, with social determinants situated diversely as foreground or background. I am heartened that several of the papers are reports of doctoral research, suggesting that new scholars recognize the importance of a social determinants perspective. The first paper focuses on cardiac disease, a growing concern for women. Kathryn King and her colleagues have drawn on their extensive program of research exploring the complexities of ethnocultural affiliation, gender, and management of cardiac risk factors to present an analysis of the gender-based challenges of older Sikh immigrant women when facing and responding to the risk of coronary artery disease. The analysis reveals the effects of multiple health determinants at individual, familial, and community levels and offers suggestions for more targeted intervention. The next paper is a noteworthy report of Carol MacDonald's doctoral exploration of the experience of lesbian disclosure. These findings help us to shift our assumptions and illuminate sexual orientation as a determinant of health. Mental health among single mothers is the focus of the third paper, contributed by Joan Samuels-Dennis, a doctoral student who has embraced the social determinants perspective. SamuelsDennis makes a contribution to the untangling of relationships among employment status, stressors, and symptoms of clinical depression. Another important issue for women is screening for breast and cervical cancers. Tam Truong Donnelly reports the findings of her doctoral research in her exploratory study of the influence of cultural knowledge and values on Vietnamese women's decisions with regard to cancer screening. These findings tap the intersection of the determinants of culture and health services. The fifth paper in our collection addresses the health of First Nations women. Helen Vallianatos and her colleagues explored weight gain and weight loss related to pregnancy among First Nations women, elucidating not only the effects of cultural beliefs, but also the influences of community and environmental constraints. The final paper is an exploration of dementia care by daughters from the perspectives of the mothers receiving care. Catherine Ward-Griffin and her colleagues demonstrate at a family level how social support is enacted in this vulnerable population.

Our collection is augmented by several invited papers. Joan Anderson provides a thought-provoking Discourse, exploring our progress in understanding women's health as socially determined and, through a critical examination of racialization, demonstrating the depth and detail of analysis necessary to understand social determination. In Happenings, Shirley Solberg offers a splendid discussion of the findings related to women's health from a major collaborative research initiative to understand how reduced fish stocks and subsequent loss of the fisheries interacted with social changes to affect human and environmental health and well-being in Newfoundland coastal communities. Finally, Marilyn Ford-Gilboe and her colleagues, in Translating Research, discuss the development of an intervention model to improve the health and well-being of women in the aftermath of leaving an abusive partner. The proposed intervention model is informed by their previous qualitative and quantitative findings from research studies situated in a social determinants perspective.

Finally, my thanks to Laurie Gottlieb and Joanna Toti for their guidance over the past months. I have gained an appreciation of the dedication, time, and determination needed to produce an issue of a scholarly journal. My thanks to all editors who do this important yet difficult work month after month, thus providing scholars a venue for sharing their work.

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