

GUEST EDITORIAL

Intersecting everyday life and occupations with gender and sexuality: An ongoing discourse

Congratulations on the accomplishment of generating yet another special issue in the Philippine Journal of Health Research and Development (PJHRD)! Once again, the PJHRD has demonstrated its mandate of facilitating academic, empirical, and experiential discussions through the publication of works by Filipino and international authors concerned with health sciences and interdisciplinary research. As a guest editor, I am enthused to see how the oral presentations from the online conference “The Global Assembly on Everyday Life, Gender, and Sexuality” (GAELGS) held last October 2021 were all transformed into published papers with two special articles, six original articles, and one policy paper. Articulating different gaps, theorizations, methodologies, and implications, these published works were all anchored on how gender and sexuality play a pivotal role in people's everyday living and struggles. This editorial note contains my self-reflection on gender and sexuality, declaration of my positionality as the guest editor, synthesis of the papers in the special issue, and the articulation of what's next.

While working on this editorial note, I reflected on how gender and sexuality played a role in my education and practice as an occupational therapist. After completing my occupational therapy degree from the University of the Philippines Manila and obtaining my license to practice in 2009, I was employed to work in children and adolescent care in community clinics in Metro Manila. In my early years of practicing, I have had minimal considerations for gender and sexuality concepts as part of clinical evaluation, intervention and measuring health outcomes. Looking back, I cannot remember if these concepts of our occupational therapy curriculum at that time. If sexuality and gender were discussed during lectures, they were coincidental and unintended. During internship, I remember that there was a special case-based learning session we had about sexual rehabilitation. At that time, this was an emerging topic for discussion among occupational therapists especially for people with spinal cord injury who have difficulties in engaging in sexual intercourse with their partners due to their health condition. As an occupational therapy intern, asking about 'sexual rehabilitation' and topics on gender and sexuality was discomfoting. First because personally, I felt that it was inappropriate, and professionally I knew that gender and sexuality concepts were not included in occupational therapy documentation that we had to accomplish, implying that they were not necessary.

After six years of doing clinical practice (2009-2015), I transitioned to work in the academe (2016 until present) and along the way did my Ph.D. where I studied about occupational justice among citizens who use illicit drugs. One of my research questions was “What are the injustices experienced by people undergoing drug rehabilitation before and during rehabilitation?” [1]. My dissertation hypothesized that the process of drug rehabilitation per se will eradicate the injustice experience of recoverees in preparation for community reintegration. In contrary, my findings revealed that injustices were not eradicated, rather they simply mutated into a different form of injustice. For instance, recoverees who identify as openly lesbian were not allowed to socialize with the cisgendered women in their ward to avoid relationships. Men who identified themselves as “gay” cannot assume leadership roles in the therapeutic community approach because of certain stereotypes. Thinking about their future was also challenging because of “double marginalization”, which make them more susceptible to injustices after rehabilitation because one, they are recovering from drug addiction, and two, they are members of the LGBTQIA+ community. Although these

¹Occupational therapy: a regulated profession that promotes the therapeutic use of occupations to improve health, well-being and situations of people with disabilities and difficulties in daily life

²Occupational science: an academic and interdisciplinary discipline that examines and studies humans as occupational beings and human occupations, defined as things that people do that have meaning and occupy their time

³Health professions education: an academic discipline that prepares graduates of health-related professions to be able to teach, train, and assess future health care professionals

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are isolated cases, we can ascertain that members of the LGBTQIA+ community continue to experience participation restriction in everyday living.

While I am not a gender and sexuality expert, I am writing this editorial perhaps due to my disciplinary knowledge and professional background in occupational therapy, occupational science, and health professions education. Hence, I would like to frame this editorial note by asserting that these disciplines and professions are inextricably entangled with gender and sexuality. In other words, we cannot practice these disciplines and health professions without the conceptualizations of gender and sexuality and everything in between. This is articulated in the six articles that constitute this special issue, authored by development communication practitioners, occupational therapists, dentists, theologian, political scientists, and nurses working in the field and academe.

The first paper explored the emerging gender myths across visual images used to communicate health information to the public through a social semiotic analysis. The paper revealed that the perpetuation of gender myths is rooted from the portrayal of anatomical parts, thus ascertaining that gender roles and identities within health communications are depicted based on universal rather than on historical and cultural truths. The second paper aimed to describe the experiences of working gay men during the COVID-19 pandemic using focus groups and in-depth interviews guided by the Occupational Justice Health Questionnaire - Filipino Version. Findings revealed overt and covert injustice experiences exacerbated by the lockdown restrictions. Although the Philippines is known to be one of the most gay-friendly countries in Asia, Filipino gay men still experience discrimination every time they participate in community activities. The third paper intended to determine the cultural competences of dentistry students towards sexual and gender minorities. While gender neutrality has been endorsed and exercised in health science campuses, hegemonic perpetuation of heteronormative ideologies remains evident. Written in Filipino, the fourth article is a commentary that aimed to intersect the concepts of 'queerness' (bakla) and 'Muslim'. Traditionally, these concepts are perceived to be contradicting and can never be married even at an ideological level. The goal of the commentary is to challenge canonical ideations in the Muslim context concerning gender and sexuality. The paper problematizes how gender expression is a requisite to true liberation, which when achieved can consequently aid occupational and religious participation. The fifth paper used a gender lens in examining the role of women in community organizing towards obtaining safe and decent housing. The paper asserts the position of women in the community as empowered in the public sphere (governmental policies and human rights), yet burdened in the private sphere (home management, motherhood). The author proposed that to demonstrate gender equality, it is important that women are given the agency to feel safe and empowered both in public and private spaces. The sixth paper in this special issue used a concept analysis to understand self-control behaviors of men who have sex with men. The authors found that self-control is not merely about inhibiting sexual urges but about being highly conscious of one's sexual thoughts, emotions, and actions with consideration of contextual, social, and environmental structures. The last article is a policy paper from the Center for Gender and Women Studies from the University of the Philippines Manila which provides practical recommendations to integrate gender and sexuality concepts in different spaces of everyday living including education, advocacy work, policy development, research, and practices.

While not always explicitly stated, the papers in this special issue revealed that intentionally integrating gender and sexuality conceptualizations into daily living and health discourses allow for a nuanced understanding of people's doings, knowings, feelings and sayings individually and collectively. Indeed, this special issue is one of the many initiatives that espouses the public discussion of gender and sexualities, but we still have a long way to go. As academics, practitioners, policy makers, allies, advocates, and public stakeholders, it is important to recognize our privileges [2] *i.e.*, being stereotypically male or female,

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biologically male, heterosexual, white, of European heritage, able-bodied, credentialed, young, physically attractive, having a light and pale complexion, coming from the upper and upper-middle class, Anglophone, a non-Jew/Gentile, and fertile when discussing gender, sexualities, and other identities in private, public, and educational spaces. Doing so will allow us not just to be more sensitive, but to stop the reproduction of injustices to those who are already oppressed. Moreover, as mentioned above, the papers were written by authors coming from different disciplines and professions as evidenced by the utilization of various theorizations and methodologies. However, I still challenge scholars and practitioners in the field of gender and sexuality studies to engage in interdisciplinary and transdisciplinary scholarship where authors and practitioners from different disciplines and professions (whether in health and social care) could intentionally team up to produce research, projects, and policies that will benefit all people, groups, and communities. Doing so will also allow us to disrupt the statutory and hegemonic practices in health research, service delivery and policy making that have, for so long, oppressed people—intentionally and unintentionally—based on their gender and sexualities, producing practices that are not anymore discipline- or profession-specific, but practices that are community-focused, people-centered, and truly justice-orientated.

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