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# **ENFERMERÍA Y PERSPECTIVA DE GÉNERO**

# Focus Group discussion as tool to study gender relations in urban community members

Grupo Focal de discusión como herramienta para el estudio de las relaciones de género en miembros de una comunidad urbana

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Palabras clave: Estereotipo de género; relaciones de género; Enfermería en Salud Comunitaria.

#### **ABSTRACT**

**Aim**: This qualitative research with gender perspective aims to illustrate the usefulness of Focus Group Discussion in the study of factors influencing gender relations, based on the conceptions of urban community members.

**The methodology** included focus groups with n=5 women and n=5 men members of the community selected. For the systematization of the data handled Atlas ti 6.2 (Demo) and the stage of reasoning of the testimony was used discourse analysis.

The results showed: Gender relations based on the traditional gender represent a risk to physical and mental health of the group being studied. Demonstration of manhood, individuality and promiscuity in the male gender, put them in such risk. In female gender submissiveness may trigger low self-esteem, blaming and mental suffering.

**Conclusions:** This study describes how Focal Group Discussion represented an effective tool during the exercise of community nursing because this kind of technique promoted dialogue and exchange with community members.

#### RESUMEN

**Objetivo**: Esta investigación cualitativa con perspectiva de género tiene como meta mostrar la utilidad del Grupo Focal de discusión en el estudio de los factores que influyen en las relaciones de género partiendo de las concepciones de los miembros de una comunidad urbana.

La metodología incluyó la realización de un grupo focal con un total de n=5 mujeres y n=5 hombres, todos pertenecientes a la comunidad seleccionada para el estudio. Para la sistematización de los datos se manejó Atlas ti 6.2 (versión Demo) y en la etapa de razonamiento de los testimonios fue usado análisis del discurso.

Los resultados mostraron: Las relaciones de género basadas en el modelo de género tradicional representan un riesgo para la salud física y mental del grupo estudiado. Las demostraciones de hombría, individualidad y promiscuidad en el género masculino ponen su salud en riesgo. En el género femenino la sumisión puede desencadenar baja autoestima, sentimientos de culpa y sufrimiento mental.

**Conclusiones**: Este estudio describe cómo grupo focal de discusión representó una herramienta efectiva durante el ejercicio de la enfermería comunitaria, ya que este tipo de técnica promueve el dialogo y el intercambio con miembros de la comunidad.

#### INTRODUCTION

# **Focus Group Discussion in community work**

For community health nursing is appropriated to show this experience where has been used Focus Group Discussion (FGD) to study of relations between men and women in an urban community. In essence, the FGD allowed us to observe, interpret and describe reality as seen from various approaches, because the discursive interaction between participants facilitated the expression of personal experiences. This constitutes a richness that emphasizes the community work, especially to identify behavior, values or mandates in which women's health and theirs quality of life could be affected.

In matter of gender studies is important that men and women gather to discuss the issue because it is possible to capture their description of the positions which are occupied by women compared to men in different dimensions of everyday life.

Our main goal was to illustrate the usefulness of FGD in the study of factors influencing gender relations, based on the conceptions of urban community members. The activity carried out daily in the put us in touch with situations that could affect the health of community members. This allows the community health nursing analyze the epidemiological picture and take action to promote health, prevent illness, during treatment and rehabilitation. In practice, it is difficult doing from a single vision because our performance continually encourages the participation of the individual, family and community. A great alternative for this study was achieved since FGD reconcile the experience of men and women on the same issue. This has been called principle of complementarity which underlines the failure to exhaust human reality with a single perspective, viewpoint, focus, perspective or approach, i.e.: with a single attempt to capture it [1].

#### Gender Relations and Women's Health

The term gender relations was conceptualized as an element socially constructed and therefore changeable, not come from biology or necessarily harmonious, in contrast, may be of opposition and conflict <sup>[2]</sup>. Also, in this conceptualization there are four interrelated elements in the gender concept one of them: Institutions and social organizations of gender relations that is referred to system of kinship, family, segregated labor market gender, educational institutions and politics <sup>[3]</sup>. Both aspects

emphasize the agreements gestated in the social order to organize the behavior of people in private or in public sphere, from this perspective it is possible to ensure that in every society and historical moment are constructed ideas, thoughts, values, rules and beliefs that profile the action of the human being who compose it.

This logic explanation is how throughout the time for men and women were legitimate functions or roles according to their biological condition. From this fact, it recognizes the difference in gender relations that propagate from the biological to the social level. Another element of great importance for understanding gender relations is power. Others authors include the existence of a framework in which behaviors of oppression operating in the social structures and the structures of human thought, where the strong position is occupied by the male [4-6]. Furthermore, in these approaches the presence of power in gender relations and symbolic violence unleashed systematic injured and marginalized women in their individuality, their free time and their relationships with others. This symbolic violence which we refer in this paper is as imperceptible in daily life that causes no immediate injury but is low self-esteem and well-being. Everyday male chauvinism, these forms of behavior are all within the limits of so called normality and are not particularly outstanding, still they do insidious and continuous harm to women's autonomy, dignity and even their psychic equilibrium [7].

Hidden violence everyday has implications for women's health including: increased vulnerability to the disease because it decreases the value and leads to less care, mental health problems (mental suffering, anxiety, depression, suicide, posttraumatic stress disorder, alcohol, tranquilizers and other drugs), physical health problems (headaches, back pain, abdominal pain, dyspepsia, pelvic pain, etc.). These physical problems are fairly nonspecific, difficult to view, chronic, with little or no response to standard treatments [8]. The same author argues that the problems of sexual and reproductive health are sexually transmitted diseases and pregnancy complications.

#### **METHODOLOGICAL APPROACHES**

This study was a gender-sensitive research, approached from the qualitative mode as among researchers intended to illustrate the usefulness of the nursing discipline FGD technique in the study of factors that influence gender relations. In this sense, the meanings that gave the participants to dimension: gender roles, social relationships, reproductive process/production, distribution of power and autonomy, provided a framework for explaining the existence of an order that creates and reproduces asymmetries between men and women in the community studied.

Focus group discussion is a form of qualitative research method in which the interviewer (also called the moderator) asks research participants specific questions about a topic or an issue in a group discussion. Focus groups, unlike individual interviews, provide the added dimension of the interactions among members. In conducting the focus group, the emphasis should be placed on the interaction among group members [9].

The selection of participants was intentional, and the decision sample was oriented by the call to participate freely, also chosed to represent both sexes in the same number of sampling units, a total of 10 subjects (05 women and 05 men), all community members Tazajal, Parish Naguanagua, Carabobo State, Venezuela. The previous exchange with the community members and the data collection was conducted during March 2011. A positive factor was the existing affinities between the participants,

mostly active people committed to community work. This allowed an atmosphere of confidence between researchers and participants, an interaction filled with: honesty, respect, fluency, confidence and full freedom to express opinions.

A similar research described they responded honestly, straight from the heart, sometimes contesting my viewpoint, at other times agreeing, but willing to engage in candid discussion <sup>[10]</sup>. We believe it is outstanding to describe some elements that determined the type of generated discourse <sup>[11]</sup> previous to the study: on several occasions it was necessary to go to the community, where community leaders were contacted and the intention of our work was explained to them, the mediators – community leaders— initiated the invitation to their neighborhood. There was a vain meeting attempt and the difficulty expressed by the participants was the time of the notification. Anyway, in that moment it was decided to carry out the meeting at night-time as it was suggested by the community leaders.

All neighbors that agreed to take part in the FGD attended the second meeting call. Before starting the discussion, the participants were informed about the aims of the study, the confidential and voluntary nature as well as the significance of participation, the liberty to leave at any time during the meeting and the signing of consent, satisfying in this way the ethical aspects specified by the Bioethics and Biosecurity Code of the Bolivarian Republic of Venezuela (2002) [12].

The ten participants (05 women and 05 men) were all members belonging to El Rincón community, municipality of Naguanagua, Carabobo State, Venezuela. To develop the discussion, we designed some orienting questions that managed to introduce us to the topic of interest. Then, we went into issues linked to gender relations that were peculiar to the experience of the group and unknown to us as researchers. In this sense, focus group discussion is essentially a way of listening to people and learning from them [13]. In relation to our intervention as researchers there was a moderator that interacted with the group and the two not-participating observers which were taking note of body language, feelings and emotions. Weighing up our vision and the one of the participating group was very useful during the reflective process which involves analyzing information.

Regarding the scenario where the discussion took place, the community leaders chose a covered room into a small park that is located in the community, the scheduled time for the meeting allowed privacy, we arranged us in a circle and each participant asked to speak using any name in order to keep their identity hidden. The meeting was led by one of the researchers that acted as chairperson and an observer and it lasted one hour and seven minutes (01:07:00). The statements were registered and then transcribed, for arrangement and systematization of the information was used Atlas ti 6.2 computer software version Demo, providing in this way the building of categories, the presentation of their relations in a structural network and subsequent theorization. The analytical process was inductive, integrating the gender analysis, approaches related to gender roles and power relations. In this sense, the gender analysis examines the differences and disparities in the roles that men and women play, the power imbalances in their relations, their needs, constraints and opportunities and the impact of these differences on their lives [14]. The application of the technique FGD presented in this study a limiting it was related to questions' discussion. While we take care of group selection, sometimes it was noted that group's attention was focused on different issues we intended to address at that time.

#### **RESULTS AND ANALYSIS**

After analyzing each of the contributions given by FGD participants, we proceeded to form the categories of analysis which were conceptualized according to the reality expressed by the participants.

Stereotype of women in a patriarchal culture {1-2}

This category points to the idea of one of the participants where some features come up that are entrusted to women according to the socially established.

1:27 (53:53) "Definitely women are stronger... they have a child in their wombs for nine months, they wake up every early morning when the children get sick, they are aware of everything at home, with the children, with school, if they have to work on the streets... All in all, one has toothache and is dying but women have the ability to care and to endure that because it is already part of them". (Man)

It was observed that unconsciously and with the intent to praise and appreciate the activities that women carry out within households, the participant strengthened an expectation in which is underlined the image of women directing housework, according to patriarchal mandates women are beings that devote themselves caring for other people without restrictions, being often exposed to be overburden given the supposed inability of male to get involved in caring for other people.

However, in our region -Latin America and the Caribbean- this profile where women are presented as cornerstones of the household, having some well-defined limits that are especially related to decision-making and money handling. In women's life exists the presence of a continuous, indiscriminate time that appears separated from the economic, it is a time linked to maternal practice and to domestic experience. It is a time that passes like a treadmill where a task follows another without a clean cut or an achievement that is perpetuated [15].

Women's role: care and education of children {6-2}

In this category were showed a series of social considerations that make the woman responsible for the positive or negative what happened on behalf of the care and upbringing of children. They are then referred to the stories:

- 1:1 (3:3) "Women sometimes start violence with children, because they are in the house in charge of children" (Male)
- 1:2 (3:3) "They threaten children, knowing that they can not defend themselves as an adult... That kind of violence is always exercised by the woman who is supposed to be at home "(Male)
- 1:4 (6:6) "The woman is who educates the children, the woman is the policewoman at home, the woman is practically the whole day at home" (Male)
- 1:7 (9:9) "This happens because our country is sexist and they leave everything to the women, but in part they have the reason because the woman is almost all the time at home with the children ..." (Woman)

1:8 (9:9) "Woman see when the children wake up, she helps them to go to school, she feeds them at lunchtime, she sends them to take a rest and then she helps them to do the homework or she sends them to music school. So, the burden is practically on women shoulders..." (Woman)

1:14 (30:30) "Women load full responsibility because it gives the woman as the centerpiece at home..." (Woman)

The speech reveals a cultural order exempting the man from the shared duty. This characteristic quite naturally accepted by men and women in this study, puts us in front to a form of violence which is not perceived by the group, but limiting the participation of women in public life. The difference in gender inequality within a masculine hierarchy as a valuable and public and feminine as undervalued or less important and domestic, so men and women learn to be individuals, which limits the integration and future action both in space for which have not been socialized [16].

# Women's Recreation {1-1}

In this matter we make mention of the lack of recreation or entertainment of some women of this community, according to a participant that states:

1:21 (35:35) "I've seen how women of my community spend the weekend or the time that she's with her husband... and it results that the husband or the man is there... but there's only the shape, the body because in soul, this man isn't at home. I've seen when the wife told him: I'd like to go to the Aquarium, or I'd like to go to the park, or I'd like that you go with me and the children to my family and the husband answers: I'm tired. There are many cases like this one". (Woman)

A conduct is shown where the male isolates or distances himself taking up the time with activities that are only of his interest. As a result, in men's life some practices that are important for full development of conjugal and family life are of secondary importance. It had been described as greed for recognition and availability are multiple maneuvers of lack of recognition towards women as a person and towards their needs, values, contributions and rights. They lead to hunger for affection. Besides they cause overvaluation of the little the male provides -since anything scarce should become expensive- [17]. These behaviors are not visible forms of violence, such as physical violence, but constant exposition to this mistreatment from a clinical point of view is a risk to women's physical and mental health; leading female victims to emotional fallout that is going to undermine their self-esteem, self-care and causing changes in immune, reproductive and endocrine systems as well as in the person's psyche, among others.

Stereotype of men in a patriarchal culture {3-5}

There is a clear contradiction between the stereotype carried out by men and women in a patriarchal culture. A series of experiences have been documented, that even if it is true, they are neither generalized nor definitive they have been taken into account to describe the specific reality of this human group and the expectation of being male in our society.

1:17 (32:32) "All women are like that... They always think that one is with another woman, whilst reality is that one is going out with friends to play ball, soccer, to relax... because it's untrue that one is with other women all the time..." (Man)

1:5 (6:6) "I told my husband: We're in this situation because of you, living with my mother. If you were man enough we wouldn't live in one room... we'd have our own place..." (Woman)

1:26 (43:43)"I see that it's demanded too much of a man... thus, like don't cry... we think sometimes because we're men we haven't the right to have feelings, we aren't allowed to cry, we aren't allowed to be sad". (Man)

The elements raised during the discussion obtain a nature in which risk to physical and mental health in both males and females is identified. In a report carried out by the Economic Commission for Latin America and the Caribbean, 2005 was made known that the notion of masculinity in the Caribbean is on the side of men as it valorizes hyperactive virility and male sexual prowess such as womanizing, maintaining a sexual relationship with an outside woman while married, or fathering children with different women [18].

The way in which males were taught to deal with their sexuality makes them vulnerable to be susceptible to sexually transmitted infections amongst the most serious HIV/AIDS. In addition, that freedom of male to practice his sexuality faces a number of sexual and reproductive rights that are violated in women, among them: the decision to negotiate safer sex with her partner, the decision to separate faced with unfaithfulness, as well as the requirement of responsibility regarding the sexual behaviors of the partner. Other elements that become evident during the debate are the male's obligation to be successful as head of household and the repression of his emotions. In fact, in our region going against these behaviors of traditional gender model may result that the males are described as less of a man. This socialization of masculinity focused on roughness, virility, omnipotence and lack of sensibility constitutes a risk factor to male's physical and mental health. Within the psycho-social factors of vulnerability in the traditional gender model inside the men is the risk boost as demonstration of strength [19].

Men's role: child care and education {5-2}

In the current unit of analysis is described a gender socialization where an ideal is built that revolves around the male. Following the accounts:

- 1:3 (3:3) "The man is who yells at children..." (Man)
- 1:5 (6:6) "The man is who sets an example at home..." (Man)
- 1:9 (10:10) "Children see the man as the strong part of the family and always hide behind mother's skirt and say for example: "Don't tell father that I did this" or want to ask permission to do something and say to mother: "Go and talk to father" This happens because the part of respect has the man..." (Man)
- 1:11 (11:11) "I remember my father when I asked him permission to go out to a party, he used to say: "Ask your mother, she's the responsible..." (Woman)

1:12 (11:11) "The same was at my place, my father used to say: I don't give permission because if something is going to happen to you on the streets I won't take that responsibility that's of your mother's concern, may she decide." (Woman)

From the testimonies is shown information about male's passivity and his lack of involvement in family life. It is reaffirmed the stereotype of the firm, disciplined male indifferent to everyday domestic life, as the owner of the reason and the soft, indulgent female mediator and in charge of the routine of children's life. The traditional society has attributed to mothers the responsibility of education and has freed males of participation and upbringing and attributing them only the role of discipline and control. However, in front of male children mothers have no authority in the acquisition process of male identity. Male children and young man look at fathers and other men since they are their models to learn how to be a man [20].

Male's Recreation {2-1}

Opposing views were presented where one of the participants challenged the social practices of some males.

1:19 (32:32) "The reality is that one is going out with friends to play ball or soccer, to relax...." (Man)

1:20 (35:35) "But that's the point, there are men only thinking about themselves and that affects women and children, an example, the man who says:"I'm going alone with my friends to play." Other men buy movies or rent them and sit down to watch them alone during the entire weekend and forget about the people who live next to them, the wife and the children..." (Woman)

Devaluation of family recreation {2-1}

In the accounts is observed how one of the participants justifies the male's isolation for the activity that he carries out on the streets, during his working time.

1:22 (37:37) "Those are the community women's quarrels with men because they do not share at home and less outside of it... so men yell at women: For goodness sake, don't you understand? Don't you live with me? I'm at home to rest." (Woman)

1:23 (36:36) "The problem is that men always are tired because it's to him to work on the streets and that's the truth." (Man)

We think discourses are based on the little importance that is provided to partner or family group activities. It is a need for women working at home and men working outside to find time for partner and children, which improves mental, physical, emotional and spiritual dimensions of all household members. As it has been observed the presented elements specifically in the categories *Women's Recreation {1-1}, Male's Recreation {2-1} and Devaluation of family recreation {2-1} are part of violence that admits normalized ways of controlling and abuse, carried out almost constantly by males in order to keep their distance from intimacy and household. The above discussed is called by the same author as Covert everyday male chauvinism and one of its manifestations is the invasive inclusion of third party: it is a maneuver that consists in occupying constantly the linked spaces with friends, TV, meetings or activities, with what intimacy spaces are limited to a minimum or may cease to exist<sup>[17]</sup>.* 

### Women's stand {5-1}

This category refers to the way in which women are relegated to a level that is centered on the men's life. In this group of people it becomes evident that the man is being the owner of decision, who is prominent in public life and nowadays, in many of our communities there are women that continue to give up their life projects for still remaining the support helping men to come up.

1:13 (11:11) "My father said: Ask your mother and I asked him: Why if you're the head of the household?..." (Woman)

1:15 (32:32) "Nearly always they say that behind each man there is a great woman. That is true, women always are the figure at home and who help men to get ahead in life..." (Man)

1:16 (32:32) "Men always want to study, to work and to improve for getting a good wife that helps one to come up in life..." (Man)

1:24 (43:43) "My husband used to come with the story: I came home, got the girl off to sleep, your mother asked me if I wanted to eat something so that she's going to heat it up... Why does this happen? If you're the wife of the house... How long are going to University?" (Woman)

1:25 (43:43) "I took all my books and throw them at him and told him: Okay! I withdraw from studying at the university." (Woman)

Devaluation of being female {3-1}

This category shows some points of the rejection of female and lack of importance for its way to think and feel. On the other hand, one of the participants speaks about respect as a value that children have to practice mainly towards the father; the respect towards the mother is reserved only for the moment when the father fails in his role.

1:6 (6:6) "A mother stressed by a broken fingernail, or because thinking that her husband is with another woman, dissipates often anger with the children..." (Man)

1:18 (32:32) "There are men influenced by women and obey them and when one says: let's go play softball or bowls they answer: I can't because the "Cuaima" (referring to his wife) is waiting at home!" (Man)

Explanatory: As "Cuaima" is commonly named a poisonous snake of the genus Crotalus in Venezuela.

1:10 (10:10)"The respect part is for man. Of course, if he gains this position. If the man doesn't gain this respect so the woman fills this place ¡This place has to be gained!" (Man)

Observations: Male and female participants agree with this statement.

The categories and nodes previously described were arranged in a structural network to give meaning to the interpretation of the phenomenon being studied. (See figure 1).

Figure 1 Patriarchal culture Stereotype of men in a patriarchal culture {3-5} Stereotype of women in a patriarchal culture {1-2} CONTRADICTS Is associate with Is associate with Women's role: care and education of children (6-2) Men's role: child care and education {5-2} Women's Recreation {1-1} Male's Recreation {2-1} Is part of 1 Devaluation of family recreation {2-1} Women's stand {5-1} Is part of Devaluation of being female {3-1}

The figure shows the interconnections of categories or nodes being easier to visualize that the *cultural order* is the *factor influencing considerably in gender relations*. Encouragement and dynamics generated in FGD promoted the expression of the different points of view in the group being studied and it was in this exchange where were expressed the values of the traditional gender model that are shared and practiced by female and male, prevailing obviously a male's hierarchy over female in the group being studied. Lack of cooperation by male in child rising and household tasks is another of the behaviors that go against the welfare of all family group members since this kind of behaviors turn into an obstacle to promoting healthy lifestyles. Gender relations based on the traditional gender model represent a risk to physical and mental health of the group being studied since the demonstration of manhood in male gender puts him at risk, individuality and promiscuity. In female gender submissiveness may trigger low self esteem, blaming and mental suffering.

During the expressions were subtle ways of mistreatment or micro-violence evident that have been imposed and naturalized by patriarchal mandates. One of them is the devaluation of family recreation by the male being evident an inappropriate use of leisure time in male participants. Specifically in health promotion *active leisure time* involves enjoyment of culture, nature, physical activity, recreation or interaction with other people in a stimulating environment. In the group being studied this aspect is an exclusive activity of the male since according to the accounts the male is who has complete freedom to decide in what to spend his time. In the case of women and children of the community *active leisure time* is no activity in their life. Patterns were observed that reproduce in the family context a misunderstood mutual support by the

family members since there is a pronounced sexual division of work that exploits women's ability to care but excludes men of that activity being implied that male's ability is only the skill to provide housekeeping money.

Another aspect raised was the giving up of personal life project by women to fulfill the requirements of female's traditional role. In relation to this point gender socialization was notorious where women's existence is mainly based on pleasing and being a support in family life for male's development and success.

# Focus Group Discussion in the Study of Gender Relations

In this section we will discuss aspects concerning the use of the technique. In qualitative researches containing a gender perspective it is crucial to observe the interaction of people to uncover probable asymmetries between genders which used to be notable or not mainly depending on culture of each society. It was possible to comprehend those asymmetries, imperceptible to the participants and in many occasions also to the community nursing personnel. In this regard via FGD was the expression of shared views evident but also there were disagreements on some occasions during the discussion generating some tension between the participants and sometimes deviations from the topic under discussion. These derived from moderator expertise and tact to focus the group participants on the theme under discussion without losing their motivation. One of the requirements when implementing FGD is the presence of an observer, in our case the person in charge to make observations was part of the team of researcher and carried out the written descriptions about the emotions and dynamic of the conversations which turned out to be decisive in the process of giving meaning of the data. It is the process that enables the researcher to describe existing situations using the five senses, providing a written photograph of the situation under study [21]. The obtaining of a record of observations, the transcription process of accounts and the subsequent discussion with the colleagues on the experience, constituted a strengthening of the analysis since there were exposed some notions that only can be observed when a debate occurs between several researchers.

#### CONCLUSIONS AND RECOMMENDATIONS

FGD turned out to be extremely beneficial to us as researchers the allowed to understand the group's discourse and social behavior facing gender relations.

We consider that FGD is a quick and economic way to develop gender-based researches. During the exercise of community nursing it is recommended to continue the studies that encourage dialogue and exchange with community members in order to find out their realities and the carried out task is enriched.

In primary prevention further actions are required that promote the creation of spaces for reflections and bringing into question the values, beliefs and mandates that perpetuate the practice of traditional gender model maintaining an inclusive vision to incorporate both genders into educational activity.

# **Authors' contributions**

The first author was responsible for the study origin and methods, data collection, transcription of focus groups, analysis of dates, and preliminary manuscript. Research

collaborators were responsible for register, transcription observations in the process of data collection and critical revisions of the manuscript. All authors read and approved this article.

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