

“Health Inequalities”

One-day Workshop and Launch Event

Risk, Policy and Law Strand Medical Humanities Sheffield

Friday, 13 June 2014

**Jessop West Building, University of Sheffield
Room G.03 (ground floor)**

Co-organisers:

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This workshop will form the launch meeting of the Risk, Policy and Law (RPL) research strand of Medical Humanities Sheffield. The workshop will focus on 'Health Inequalities', which is the strand's theme over the coming academic session. It will focus on the health risks associated with the shift from industrial to postindustrial society, and it will aim to situate Sheffield as a case study against a broader backdrop of developments in the UK and across the globe. It will explore both inequalities of a geographic nature as well as those affecting different population groups. Finally, it will consider the economic and ethical problem of efficiency vs. equity in health. To attend, please contact the organisers by Friday, 6 June 2014.

9.15 Introduction

9.30 Panel I

Chair: Julia Moses

**Arthur McIvor (Scottish Oral History Centre, University of Strathclyde),
'Deindustrialisation, health inequalities and male identities: British coal mining communities since 1950'**

Understanding health inequalities and risks associated with deindustrialisation involves getting beyond the statistical body counts to explore work-health cultures and what it meant to be in and to lose meaningful manual work. For men, this was bound up with class and masculine identities. This paper aims to open up a conversation amongst workshop participants around the impact of deindustrialisation on health. It centres on the health experience of male workers in coal mining communities and draws upon a range of sources and evidence – including some oral history interview fieldwork. I argue that health was bound up with both the loss and the quality of work (rationalisation; intensification; insecurity) as well as the legacy of the past where workers had been exposed to dangerous and unhealthy work environments and the disabled were marginalised.

Kate Reed (Sociological Studies, Sheffield), 'Biological or social inequality? Reproductive genetics and new forms of capital'

A number of authors have outlined the potentially transformative nature of the new genetics for social relations. For example, some have argued that the emphasis on individual 'choice' inherent in the application of many of these technologies has the potential to transform individual biology (Rose 2001). This suggests that people can to a degree choose their own genetic futures, potentially subverting and reinterpreting our existing social hierarchies. Others however paint a far bleaker picture, suggesting genetic technologies not only reinforce existing inequality but actually create new forms of inequality based on *genetic* capital (Webster 2007). This paper draws on qualitative research focusing on gender and reproductive genetics in order to explore the relationships between inequality and genetic screening. The paper asks: do these technologies have the potential to undermine existing forms of social stratification and in so doing foster new forms of social order based on dialogic democracy (Giddens 1990, 1991, 1992), or do they merely replace existing forms of social inequality with biological ones? Is the notion of 'choice' - so central to debates on genetics - really transformative or does it provide rationales for governments to cease to address inequality through policy? The paper concludes by outlining a third, more complex and dialectic approach, in which the new genetics simultaneously transforms and reinforces inequality.

11.15 Tea/Coffee Break

11.45 Panel II

Chair: Matthias Benzer

Rod Lawson and David Fishwick (Medicine, Sheffield), 'A Survey of Variation of Local and Regional Health Indicators'

There are an increasing number of clear national guidelines for the diagnosis and management of respiratory disease, and the expectation is that the work of the NHS should be clearly guided by these. Nevertheless, despite the uniformity of recommended processes, local data suggest processed and outcomes continue to vary greatly. This is likely to result partly from poor adoption of guidelines themselves, but also demonstrates the importance of additional demographic, societal and personal determinants of health and healthcare utilisation. This talk provides an overview of current data, focusing on COPD and asthma as important indicator conditions.

Aki Tsuchiya (Economics & ScHARR, Sheffield), 'How to balance maximising population health and reducing health inequalities'

The NHS aims (a) to maximise population health, and (b) to reduce health inequalities. It may be possible to achieve one of these without compromising the other - but this is not likely. And where the two aims conflict, they would need to be traded off against each other. The talk will use basic concepts from microeconomics to analyse the trade off, and present the findings from a body of research where members of the public were interviewed to quantify the trade-offs that they would support for policy purposes.

1.30 Lunch

2.30 Parallel sessions: future directions for RPL [NB: G.03 and Jessop West Hub 01]

3.30 Closing Discussion