Understanding Health Inequalities 2nd ed.


Reviewed by Marilyn Wise, Centre for Primary Health Care and Equity, University of New South Wales

The fact that unfair, unjust, avoidable inequalities in the health of populations have persisted, despite decades of evidence of their existence, suggests that there is a continuing need for greater understanding of the inequalities – what they are, who is affected, why and where they occur, why they persist, and, ultimately, what actions are effective in reducing inequalities? Improved understanding of the problem and its determinants, causes and effects is a necessary (although not sufficient) precursor to improved intervention to reduce inequalities. Policy makers, managers/administrators, researchers and practitioners in many sectors require such understanding. Communities, too, would benefit.

This book sets out ‘to provide an accessible overview of mechanisms underlying the association between socio-economic position and health’ [p.1], and to describe ‘how other dimensions of inequality, like ethnicity, gender, and disability, intersect with socio-economic position in making a difference to people’s lives and to their health’ [p.2]. The book also describes the contributions of public policy to tackling health inequalities – making the point that policies must not only improve access to health determinants for the population as a whole; they must also address the unequal distribution of health determinants between socio-economic groups [p.199].

The main value of the book lies in the authors’ explanations of the multiple research designs and methods that were used to derive the results and conclusions presented in each of the chapters. Section One, for example, draws on multiple birth cohort studies beginning in 1946, on national data collected routinely since 1921, in addition to cross-sectional studies, a longitudinal study (of ageing), and epidemiological archaeology to describe patterns of inequalities associated with socio-economic position, geography and neighbourhoods. The ability to trace trends in health and health inequalities over long periods is enhanced greatly by the ability to link these with trends in other social, economic and environmental phenomena occurring over the same periods.

Section Two highlights gaps in understanding inequalities in health arising from a narrow focus of much research to date on differences in socio-economic position among ‘white men’. It points to the need for greater understanding of factors that, in addition to socio-economic position, contribute to health inequalities – family origin, religious identity, racism, gender and class being some of these. Each chapter in the section concludes with a commentary about the implications of this more nuanced understanding of the determinants of inequalities, and raises valuable questions for policy makers, in particular, about what is needed to understand and ‘cater for diverse populations’ in the formulation and implementation of public policy. As well, the section uses well-designed research to demonstrate the critical importance of going beyond the descriptions of broad patterns of inequalities in societies, beyond stereotypes, and beyond the values of policy makers, themselves, to ensure that public policy does, indeed, tackle inequalities.

Section Three then turns to the role of public policy in reducing inequalities in health or, conversely, in perpetuating or exacerbating such inequalities. Again, the chapters in this section reflect the book’s strength – its explanation of the use of a variety of theoretical approaches, research designs and methods to develop an evidence base upon which to build public policy responses that will be effective in reducing inequalities in health. The chapters describe the complex array of factors that influence the distribution of social phenomena, including health. The availability of trend data on health and other social and economic phenomena greatly enriches the evidence, and highlights the multiple sectors whose policies are critical. It also points to the challenges that this creates for those who are committed to social, economic and health equity.

There is much, therefore, to recommend the book to researchers, practitioners and policy makers seeking to expand their knowledge of the determinants of inequalities in health, and guidance in formulating policies, plans, programs and projects that will make a positive difference.

However, there are some weaknesses in the book for an Australian audience. The book uses research, data and examples that are exclusively taken from the UK and Europe. This was a deliberate decision on the part of the editor and the quality of the research and analysis presented affirm that decision. However, the historical, cultural and social/economic differences between Australia and the UK mean that some readers may find the book less than satisfying. This may be the case, particularly, in relation to the limited discussion of the role of racism and social (differentiated from socio-economic) status in creating or perpetuating inequalities in health. Many, though, will find it helpful both in understanding inequalities in a generic sense and in pointing to research gaps that remain to be filled in Australia too.

The book’s other weakness lies in its use of the term ‘inequalities’ rather than ‘inequity’ to describe the central construct in the book. In the introduction, the author writes that: ‘people in poor health are not randomly distributed
across the population. Instead they tend to be concentrated among those with fewer of the resources which enable people to live economically secure and prosperous lives. But she goes on to point out that some governments and researchers are unwilling to acknowledge the injustice and unfairness of this — and prefer to speak in terms of inequalities as ‘differences’ or ‘disparities’ (implying that they are natural and unavoidable — or not amenable to public policy responses). She also notes that some ‘commentators’ wish ‘to convey a moral judgement about the social patterning’ [p.4], and that ‘health inequalities are defined as health inequities by those who believe (emphasis added) that everyone should have the opportunity to achieve the standards of health enjoyed by those in the most advantaged circumstances’ [p.4]. The unacknowledged implication of using the term ‘inequalities’ instead of ‘inequities’ or ‘inequity’ is that it is unfortunate rather than unjust that there are socially determined differences in socio-economic positions in societies.

In addition to its other strengths, the book provides sophisticated descriptions of inequalities across and within populations in the UK in particular, and offers insights that are transferable to other populations and countries. It is noteworthy for the multiple disciplines that have contributed both to the research and to the book. It is also noteworthy in pointing to the need for a full spectrum of policy initiatives to tackle inequalities, including tax and welfare policies, for example. This is an important contribution to public health, because it asserts the right of the health sector to contribute to public policy across the spectrum — and avoids the mistake of confining proposed policy responses to health-specific policy. The book is well presented and very well written. Public health researchers, policy makers and practitioners will find it interesting and useful.

Research Methods in Health – foundations for evidence-based practice

Edited by Pranee Liamputtong. Published by Oxford University Press, Sydney. 2010; 515 pages incl index.
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Reviewed by Alexandra McManus, Curtin Health Innovation Research Institute and Centre of Excellence for Science Seafood & Health (CESSH), Curtin University, Western Australia

Research Methods in Health edited by Pranee Liamputtong is a substantial book divided into six main parts: 1) methods and principles; 2) qualitative approaches and principles; 3) quantitative approaches and principles; 4) evidence-based practice and systematic reviews; 5) mixed methodology and collaborative practices; and 6) making sense of data and presentation. The text provides a concise yet comprehensive guide to choosing the most appropriate research method to glean the evidence required. It also outlines simple ways that data can be presented so that it makes sense to both researchers and practitioners. One of the major strengths of this text is the well defined uses of qualitative and quantitative research methods both individually, and in combination.

The book begins with a brief contents section (2 pages) followed by an expanded contents section (15 pages). This is an excellent way to introduce the 26 chapters contained within this book, then allows the reader to seek more details in the expanded format as required. The next section ‘About this book’ is written as a ‘how to use’ guide introducing the authors and content of each chapter. The authors of each chapter have followed a tried and true format beginning with an introduction, then questions to consider, practical examples to demonstrate use, then finally a chapter summary and tutorial exercises. The layout of tables is well considered and those illustrating the steps required for qualitative data analysis are particularly helpful. Throughout the text, words are highlighted and their definitions listed in the margins of the pages in which they appear. This can be both helpful and distracting depending upon the number per page.

There are several minor limitations of this book. The layout can be distracting with different sized fonts, indents for definitions and the DOING RESEARCH examples sometimes hindering the flow of text. There is also some repetition across chapters, however, this is necessary for those readers who only choose to read particular chapters rather than the entire text.

The main body of the book is well written and challenges the reader to consider the impact of how data are collected and the strength of evidence that can be provided. I particularly enjoyed the section on making sense of data and presentation (Part IV). At last, one text has combined the interpretation of both qualitative and quantitative data with clear examples from practice to illustrate. It will also assist practitioners to interpret statistical methods commonly used in journals and reports and to better understand what statistical significance means.

Overall, it is a very comprehensive text that those of us teaching research methods or working in research have been waiting for a long time. Not only are readers provided with a wonderful selection of ways to collect both qualitative and quantitative data, they are also provided with some direction on how to interpret and present the findings of their research. I would recommend this book to anyone who is involved in
data collection as it reminds us of the many valid and reliable research methods available to researchers to inform evidence-based practice.

Youth health and welfare: the cultural politics of education and wellbeing


Reviewed by Louise Rowling, University of Sydney, New South Wales

The audience for this text is broad; teachers, health workers, youth workers and parents. Readers may be misled by the title Youth Health and Welfare as the dominant phrase used is not welfare, but youth health and wellbeing. Welfare does not appear in the index nor in the contents page, whereas a whole chapter is devoted to wellbeing. The subtitle The Cultural Politics of Education and Wellbeing more accurately reflects the contents. Wyn adopts a critical perspective in order to develop new ways of thinking about young people's lives. The text does not present a medical, individual behaviour, personal responsibility perspective, but rather youth from a sociological backdrop of social, economic and political change with young people placed as the referent point in this bigger picture.

Sociological concepts such as ‘risk society’, individualisation of health, and ‘consumer identities’ provide a valuable divergent position to a public health perspective of individual’s free choice and responsibility. Understanding these concepts offers health promoters a theoretical base for a ‘social determinants’ approach to their work. Youth is conceptualised as a culturally constructed phase that is socially and historically specific, a social process and a product of social conditions and processes.

There are eight chapters: Youth and social change; Young people and health issues in 21st century; Young people’s health and wellbeing: Official responses; Constructing youth; Health markets and identities; Being young and well; and Challenges for health and education. Additionally, there is a Glossary and 20 figures describing, analysing and synthesising approaches. Each chapter finishes with a box with about five Key Concepts and Questions for further exploration. These all contribute to making the text accessible to the reader.

The chapter exploring current understandings about the life phase labelled ‘youth’ documents an examination of assumptions underlying policies and institutional processes. The content of this will be instructive for many public health professionals. Wyn argues that in a time of rapid social change, it is easy for policies and programs to be out of step with the reality of young people’s lives. In particular, young people are positioned as ‘a problem’, experiencing different types of transitions, and a group who can be slotted into particular categories of vulnerability and risk. This is informative reading that would help public health policy makers and practitioners to reflect on their work and its currency for the lives of young people. This call for reflection about the forces that shape current professionals’ views about young people, their needs and identities, is echoed in other chapters about young people as consumers, their digital world and the market economy.

A critical analysis of the health professionals preoccupation with a biomedical orientation is approached through a discussion on disease prevention and risk factors, linked to an exploration of social exclusion and marginalisation of young people. There are details in this discussion that are valuable for professionals not only those who work with young people who are on the edge of socialising institutions, but also for workers and policy makers whose conceptualisations and practices are on the edge of socialising institutions, but also for workers and policy makers whose conceptualisations and practices in relation to young people can contribute to exclusion. The outcome of this, Wyn argues is that social, structural and contextual factors (that underpin social determinants of health) are ignored.

One of the sub themes of the text, wellbeing and young people draws on the longitudinal study – the Life Patterns project in Australia as well as international research. These studies reiterate the dominance of the theme of self management of health and wellbeing, but they also identify how young people put energy into choice and finding a balance. However, the point is validly made that there is a dearth of research and writing in this field particularly in relation to specific groups such as young people in rural areas and indigenous youth. This is identified as one of the challenges in the field. Other challenges include providing conditions for the empowerment of young people; developing greater clarity about the social processes that impact on young people’s wellbeing; the impact on the utilisation of normative models in policy making, of the growing diversity in Australian society; and models for how adults could engage with young people’s agendas.

This text is a highly accessible exploration of young Australian’s lives. It is logically structured and cogently argued, challenging readers to reflect on the assumptions about young people and their lives, that underpin their work.