Postgraduate Congratulations!

Medical Sociology Online would like to celebrate the award of Masters Degrees and PhDs in subjects in and relating to medical sociology. This is important not only in celebrating individual’s achievements, but also incorporating their work into the body of knowledge of medical sociology.

If you would like to include details of your own recent award in the next edition of MSO please go to: http://www.britsoc.co.uk/publications/MSOnline.htm

Ruth Bridgens

Congratulations to Ruth Bridgens who was awarded her PhD in July 2006 for her thesis entitled, ‘Silenced voices: narratives of polio and postpolio syndrome.’ Her PhD was funded through an ESRC award at Cardiff University.

Abstract

The polio epidemics of the 1940s and 1950s are largely forgotten now, but thousands of people in the UK and millions worldwide who had polio are now reporting new deterioration. This is referred to as postpolio syndrome (PPS), about which the medical profession is often sceptical or ignorant. The thesis explores the experiences of long-term disability after childhood illness and recent contested symptoms in people who had polio as children or young adults. The study consisted of an initial survey of 170 people who had polio, concerning their polio history and recent PPS symptoms, followed by in-depth biographical interviews of 31 people who had varied severity of polio at different ages. Most of the people interviewed had recovered well after a lengthy rehabilitation and sometimes later surgery.

The principal themes of the narratives encompass independence, forgetting polio, working hard, resisting discrimination, and achieving as much or more than other people. Within this dominant narrative are smaller stories of vulnerability and not being listened to as children; a key theme being the general lack of understanding, and especially the lack of acknowledgement by the medical profession in relation to subjective symptoms such as fatigue and pain. Using analytical frameworks from medical sociology, medical anthropology, and disability studies, the thesis demonstrates the complex and paradoxical nature of narratives about long-term disability. These are narratives in which people live in a liminal world, both physically and socially, and attempt to find a balance between normality and difference.

Related publications


Written work in progress

Bridgens R. Triumph or tragedy: narratives of disability and liminality, submitted to Sociology of Health and Illness

Silence and untold stories: narratives of childhood disability
(a more close-up view of childhood disability focusing on family relationships and the silence about illness and disability)

Autobiography, polio and paralysis: men's stories?
(an exploration of gender and disability through polio autobiographies and research interviews)

The patient's disease: illness, disease and the doctor-patient relationship
(this article will examine conflicts between the doctor and patient's disease stories when the disease does not fit easily into medical paradigms, and the collusion of medical and social scientists in psychologising disease with language such as 'biopsychosocial' or the 'mindful body')

Also in progress is an autoethnographic book loosely derived from the PhD.

Related conference presentations

2006 (4-6 September) 3rd mid-term conference of the ESA Research Network 'Qualitative Methods'. Autoethnography and narrative: survival and 'being lucky'

2006 (29 June-1 July) Communication, medicine and ethics conference, University of Cardiff. Autoethnography and the doctor-patient relationship: bladder pain and 'bladder' pain

2005 (27-29 June) SPA Annual Conference -- Well-being and social justice, University of Bath. "No triumph, no tragedy": childhood illness, stigma and blame

2005 (5 April) Narrative, memory and knowledge, University of Huddersfield
The broken doll: looking for memories and making sense of memories

2004 (16-18 September) BSA medical sociology group conference, York
Sanguinity or bitterness? Narratives of polio and postpolio syndrome

2004 (3-5 June) Communication, medicine and ethics conference, University of Linkoping, Sweden. Doctors and the invisible: "This leg looks perfectly powerful."
2004 (3 April) Narrative, memory and everyday life, University of Huddersfield
Walking and work: narratives of polio and postpolio syndrome

Silenced voices: understanding postpolio syndrome through illness narratives

Lindsey Dawson
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Congratulations to Lindsey Dawson who recently received her PhD from the University of Liverpool for her thesis entitled, ‘A study of the factors which affect decisions to undergo palliative chemotherapy in patients with advanced Non small Cell Lung Cancer.’

Her PhD on patients with advanced cancer and palliative care / treatment decision making was funded by a North West NHS Research and Development Training Fellowship Grant and was awarded in 2006.

The following papers (working titles) are being prepared for publication drawing from the findings and discussion of the thesis.

1) “We all need hope but what hopes do we need”
2) “The perception of choice and the management of uncertainties”
3) “When one size does not fit all”
4) “The naming of cancer and selling of chemotherapy”

Current and future work

Lindsey will be working as a post-doctoral researcher with Dr E Marshall (Clatterbridge Centre for Oncology) and Professor E Perkins (Health and Community Care Research Unit, University of Liverpool) as a post-doctoral researcher. She will be exploring the impact of palliative treatment regimes upon the family / carers; and patient and professional experiences of early hospital discharge versus inpatient care for the management of low risk febrile neutropenia in cancer patients.
Congratulations to Lydia Lewis who was recently awarded her PhD from the University of Aberdeen for her thesis, ‘User Involvement in Mental Health Services: A Feminist Critical Discursive Analysis’.

The study aimed to explore the outcomes of user involvement in mental health services for the participation of women and men service users and for service development, and determine implications for policy and practice.

The research was carried out in the north-east of Scotland and conducted from a feminist and critical discourse analytic perspective. Its focus was on how (gendered) power relations operate in and through language within the field of user involvement in mental health services. A multi-method research design was employed that included analysis of national and local government mental health policy documents, participant observation at meetings of three mental health service user/community groups, and in-depth interviews with service users, providers and practitioners who took part in local user involvement activities.

A number of effects of policy discourses surrounding user involvement were found. The discourses served to homogenise and pathologise users of mental health services, whilst eclipsing socio-political factors associated with distress and experiences of service usage, including those of gender and social class. They also served to create disorders of discourse – misunderstandings and conflict – between users and service providers/practitioners in the study field. A variety of ways in which user involvement operated as a case of power over discourse, for example through the regulation of the nature of the debate within policy forums, were identified. Power was also found to operate in and through discourses and discursive practices in the field setting. This included through the dominant discourse of ‘mental illness’ and the ways in which this worked to undermine users’ authority and credibility. In the face of these processes, users engaged in discursive struggle to (re)claim power and authority in their interactions with mental health services. Gender was found to be a silent, yet omnipresent, dimension of power in the field setting.

The thesis concludes that the discourse order of mental health services in the region had been reconfigured as a result of user involvement, but without significant changes to the social organisation and power relations of these. Consequently whilst there was evidence of the transformatory potential of user involvement, this was presently discursively and structurally constrained. The main social effect of user involvement was therefore to reinscribe and reproduce existing hegemonies within mental health services, albeit whilst destabilising these to some degree by opening space for a ‘user presence’ and for contention of existing ideologies and service arrangements by users.

Recommendations for mental health policy and practice include the need to shift services further towards a social model of mental distress, and to revalue lay and experiential knowledge. A rearticulation of user involvement policies to give greater recognition and support to autonomous organisations and to enhance engagement with issues of power and social inequality is also recommended. Implications for political practice and organising in the mental health field include the need: for autonomous organisations; to build symbolic and
social capital; to engage in consciousness-raising; and to buy into the current social and political climate.

Lydia now holds an ESRC/MRC Post-Doctoral Fellowship in which she is further exploring aspects of her PhD topic until September 2008.

Related publications

Articles


Reports


Related conference presentations


Forthcoming conference presentation

‘The Women’s Movement, The User/Survivor Movement and the Politics of Mental Health (Services)’. Oral presentation to be delivered to the *Second International Conference on Interdisciplinary Social Sciences*, University of Granada, Spain, 10-13th July 2007.
Marisa G Lincoln

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Congratulations to Marisa Lincoln who was recently awarded a PhD from City University, London for her thesis titled, ‘The impact of economic rationalism and new public management on health and welfare provision: accounting for the gap between social health care policy and practice in two Scottish maternity care units.’ Marisa currently works for City University on the BSc in Health Science programme.

Abstract

The administration of welfare in Britain and beyond, in the last thirty years, has seen a series of changes culminating in the new public management (NPM) approach in the delivery of public services. Current literature suggests that traditional collectivist values underlying state welfarism are at risk under the precepts of NPM and economic rationalism (Hood 1991; Clarke and Newman 1997; Hunter 2002). Since rigid economic calculation is not always possible or rational on a social, psychological, or medical scale, social policy prescriptions have to bend to its calculative pulse.

The study took place in Scotland where two highly contrasting maternity units were investigated. In-depth interviews were carried out with a sample of 43 health practitioners and key financial management personnel.

The comparison of the two sites highlights how organisational size, structure and the midwifery system in place can impinge on the viability and implementation of social health policies such as those recommended in the Cumberledge Report (1993). Whilst constrained budgetary procedures have hampered the full expression of service user choice and continuity of care, largely due to inadequate staffing or practitioner skills, the dictates of new public management have had a more turbulent impact on the larger than on the smaller unit.

Service user choice is not only inhibited by economic rationalism but also by internal institutional agendas. The obstetricalisation of childbirth, for example, conditions demand and, therefore, affects choice for the service user. The gap between social health policy and

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practice is widening as mergers take precedence over the retention of smaller, relatively low-tech maternity care units.

The thesis concludes that a comprehensive approach towards health and health care, where service user choice and continuity of care are recognised, and which considers the social context in which economic action takes place would lead to improved health and welfare outcomes overall.

Related publications


Written work in progress


Lincoln M.G. (2006) Priorities in the provision of health care: social health care and the professions

Sachlav Stoler-Liss

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Congratulations to Sachlav Stoler-Liss who was awarded her PhD in May 2006 from Ben Gurion University of the Negev, Israel. Her thesis titled, ‘Health promotion and health education in multi-cultural societies: The case of Israeli mass immigration (1949-1956) (Hebrew), was funded by The Israel National Institute for Health Policy and Health Services Research.

Related publication


Related conference presentations

Stoler-Liss, S., Shvarts, S. and Bursztein, V. “Fighting ignorance and undeveloped habits”: Doctor’s and nurses’ conceptions regarding immigrants during mass immigration to Israel, 1949-1956. September 2002 – 38th International Congress on the History of Medicine, Istanbul. (English)

Stoler-Liss, S. “One foot on the steering wheel – the other on the window” – Israeli nurses and road delivery in the 1950s. October 2002, Birthing and Bureaucracy: The history of childbirth and midwifery, Sheffield. (English)

Stoler-Liss, S. and Shvarts, S. “Easier than extracting a tooth”: Doctors, abortions and the Israeli nation-building process. Health between the private and the public-shifting approaches, 6th annual conference of EAHMH (European Association for the History of Medicine, Oslo, September 2003. (English)

Stoler-Liss, S. and Shvarts, S. “The medical reasons, as you all know, are highly subjective” – Abortions, doctors, and the Israeli nation building process. 5th European Social Science History Conference, Berlin, March 2004. (English)

Stoler-Liss, S. and Shvarts, S. “I do respect”: Public health nurses, cultural differences and the mass immigration to Israel during the 1950s. 11th Qualitative health research conference, Utrecht, May 2005. (English)

Stoler-Liss, S. and Shvarts, S. “Does mother work for Tnuva dairy?”: Breastfeeding, national
ideology, public health nurses and the mass immigration to Israel during the 1950s. 6th European Social Science History Conference, Amsterdam, March 2006. (English)

Forthcoming conference presentations

“Ignorance is the Immigrants’ worst enemy”: Social interpretation of the medical absorption of immigrants to Israel during the 1950s. Submitted to the American Sociological Association, New York for presentation in August 2007.

Future research directions

Sociology of health; health and immigration; gender and health; sociology of the body; health and communication.
Anne Townsend

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Congratulations to Anne Townsend who was awarded a PhD for her thesis, ‘Multiple morbidity and moral identity in mid-life: accounts of chronic illness and the place of the GP consultation in overall management strategies.’ Funded by the MRC, Anne’s PhD was completed at the University of Glasgow and awarded in December 2005. Anne is currently a Post-Doctoral Fellow in the Centre for Applied Ethics at the University of British Columbia, Vancouver where she is building on her PhD findings, and interviewing people with a recent diagnosis of rheumatoid arthritis (RA). She is interested in the moral dimension of living with RA, and its ethical implications. This is a collaborative study with members of the Canadian Arthritis Network and Anne is keen to make international comparisons. Anne is also involved in a Knowledge Translation Study in Canada.

Related publications


Written work in progress

‘Exploring consulting behaviours’
‘Accounts of the GP consultation’

Related conference presentations


**Forthcoming conference presentations**

‘Exploring consulting behaviours’ Paper in progress for the *Annual Society for Social Medicine conference*, 2007

‘Accounts of the GP consultation’
Paper in progress for the Annual Medical Sociology conference 2007