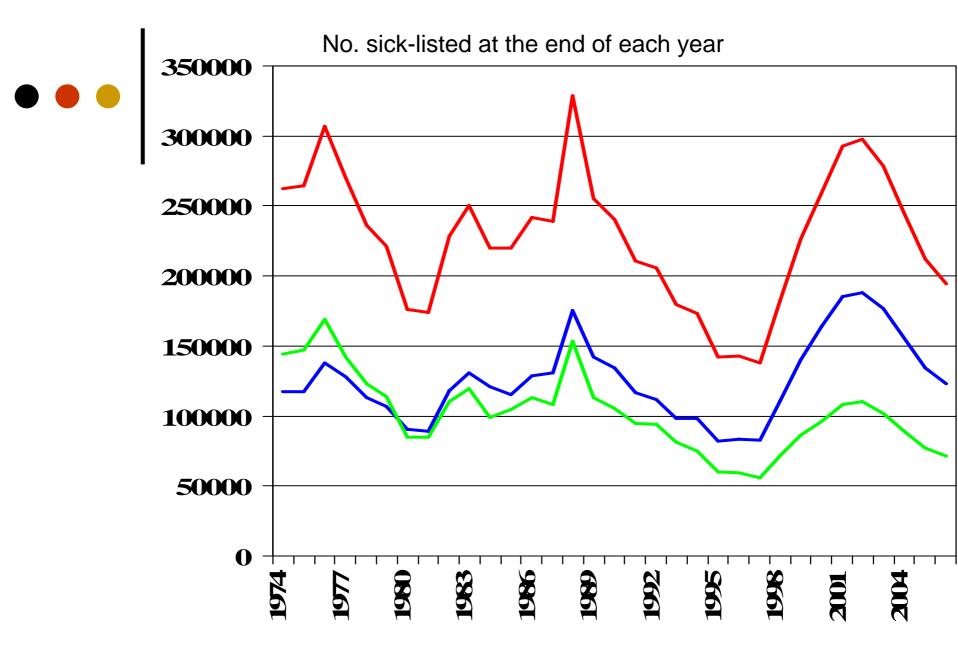
Theories and methods in research on Gender aspects in sickness absence

Gunnel Hensing and co workers in GendiQ



- o Anne Hammarström, Umeå, Sweden
- o P-O Östergren, Lund, Sweden
- o Petra Verdonk, Maastricht, The Netherlands
- o Arne Mastekaasa, Oslo, Norway
- Carin Staland Nyman, Gothenburg, Sweden
- The Pre-Conference Participants

- Sex differences
 - More women than men are sick-listed



Sex differences

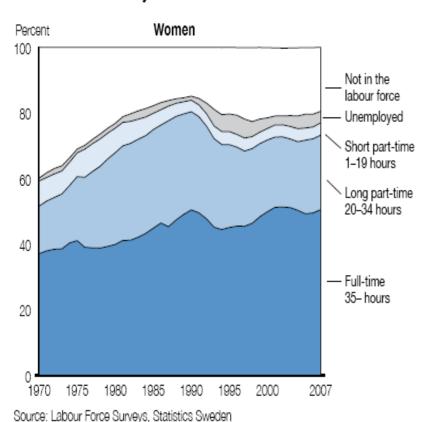
- More women than men are sick-listed
 - Women have higher risk for long sick-leave spells and disability pension with back and neck problems
 - Women have higher incidence of sickness absence with psychiatric disorders
 - Inconcistent findings regarding length of absence
 - Variation over diagnostic groups (injuries), countries (population at risk) and age groups
 - Inoncistency regarding length of absence

Gothenburg, Sweden

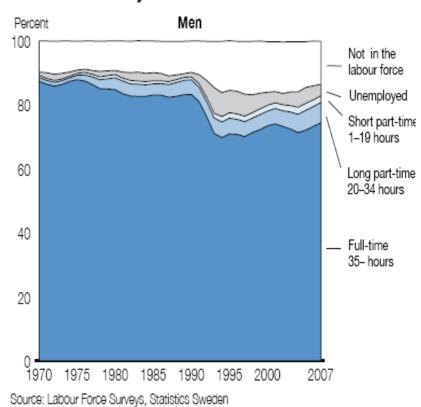
• Other determinants, influence he Sahlgrenska Academy at University of

- Sex differences
 - More women than men are sick-listed
 - The divisions of the labour markets
 - Labour force participation
 - Proportion and degree

Women aged 20–64 by activity status and hours normally worked 1970–2007



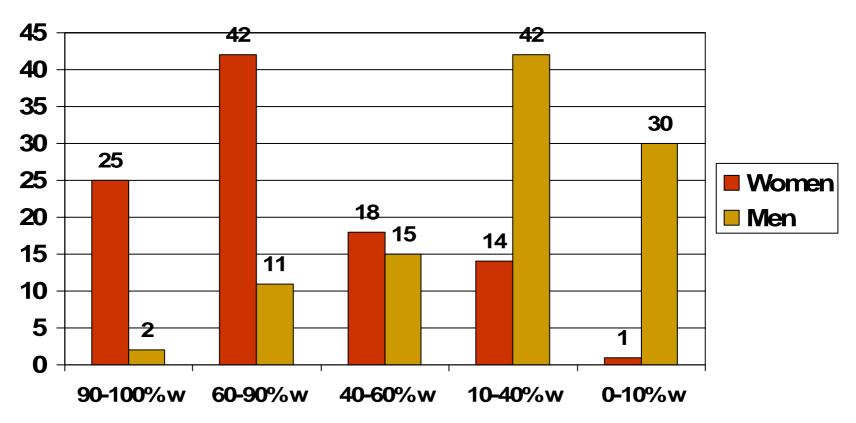
Men aged 20–64 by activity status and hours normally worked 1970–2007



Women 25-44 87%, 45-64 78% el Hensing, Social Medic Men 25-44 94%, 45-64 84% 2-02 Sahlgrenska Academy at University of Gothenburg, Sweden

- Sex differences
 - More women than men are sick-listed
 - The divisions of the labour markets
 - Labour force participation
 - The horizontal segregation
 - Health, Care, Education, Cleaning
 - Construction, Engineering, Bureacracy, Craftsmen

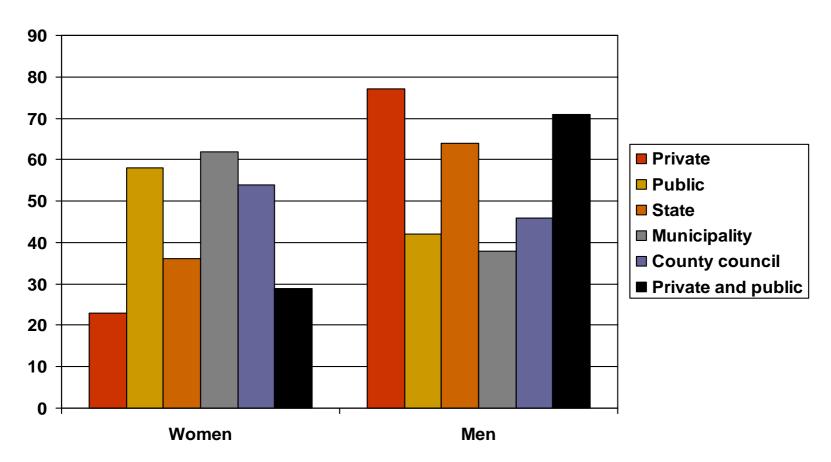
The divided labour market, 2007 (%)



Total: 2 038 000 women and 2 260 000 men

- Sex differences
 - More women than men are sick-listed
 - The divisions of the labour markets
 - Labour force participation: paid work
 - The horizontal segregation
 - The vertical segregation
 - "Men at the top"

Managers in different sectors, 2006

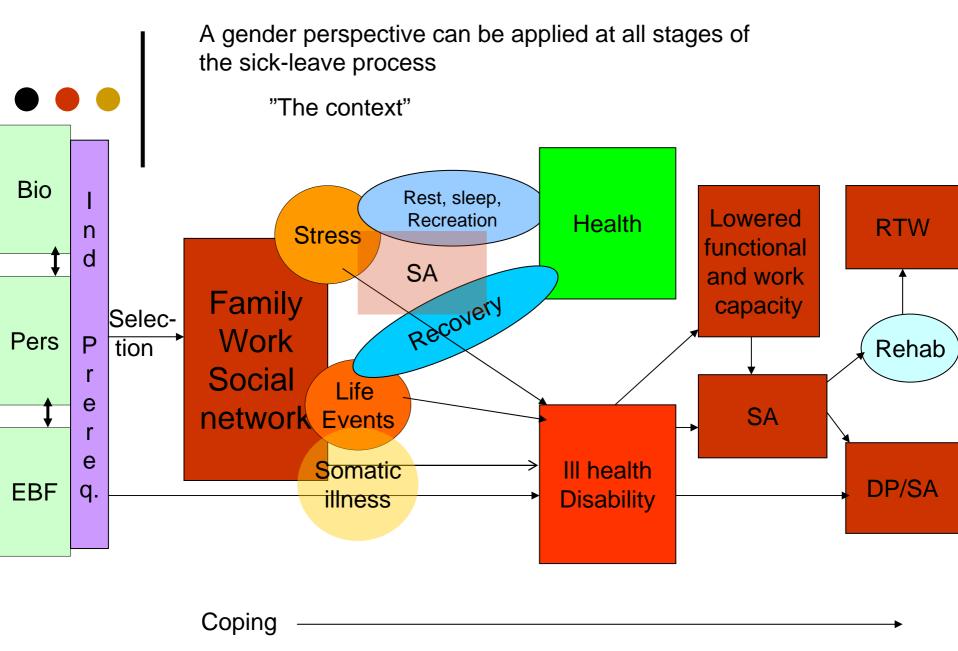


o Sex differences

- More women than men are sick-listed
- The divisions of the labour markets
 - Labour force participation: paid work
 - The horizontal segregation
 - The vertical segregation
 - Unpaid work
 - Time spent
 - Level of responsibility
 - Type of unpaid work performed

- Sex differences
 - More women than men are sick-listed
 - The divisions of the labour markets
- o Gender constructions and gender relations
 - Sickness absence is involved in "doing gender"

- Sex differences
 - More women than men are sick-listed
 - The divisions of the labour markets
- o Gender constructions and gender relations
 - Sickness absence is involved in "doing gender"
- o Men as the norm (andronormativity)?
 - diagnostics, treatment, communication, rehabilitation and prevention

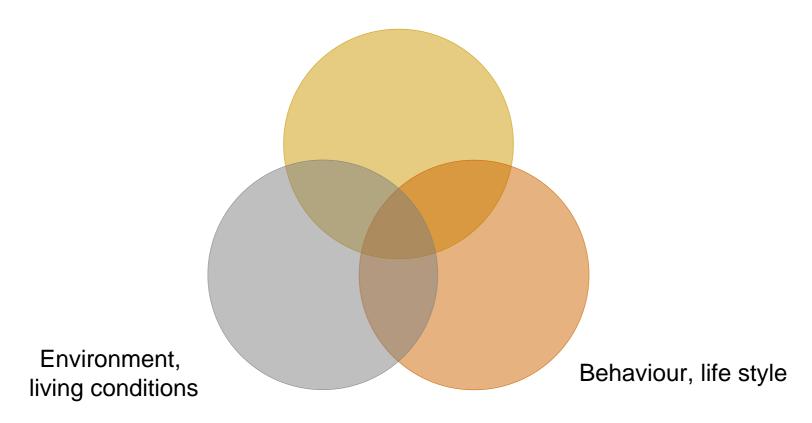




- Gender theories and their application in sickness absence research
- Paid work (and combining)
- Unpaid work (and combining)
- Stress in young women
- o The overall aim:
 - To understand more and discuss possible ways to move our research area forward

A comprehensive view of health

Biologic constitution



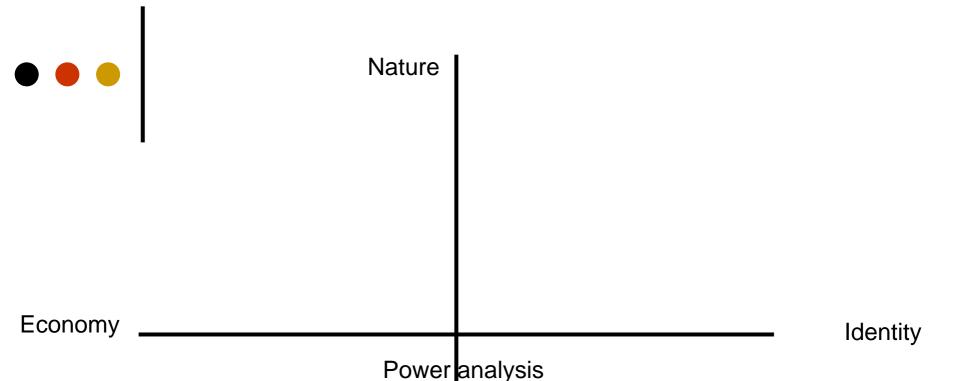
Gender theories and models
relevant for research on sickness absence and return to work

- -A model of gender dynamics
- -Basic concepts
- -Possible applications

• • Gender theories

- Several
- Different disciplines
- Different basic assumption





Materialst view

- -How a society is organised around production influence how individuals behave, think, and make decisions
- -Women and men are classified by biological sex which influence opportunities and social organisation

Social construction

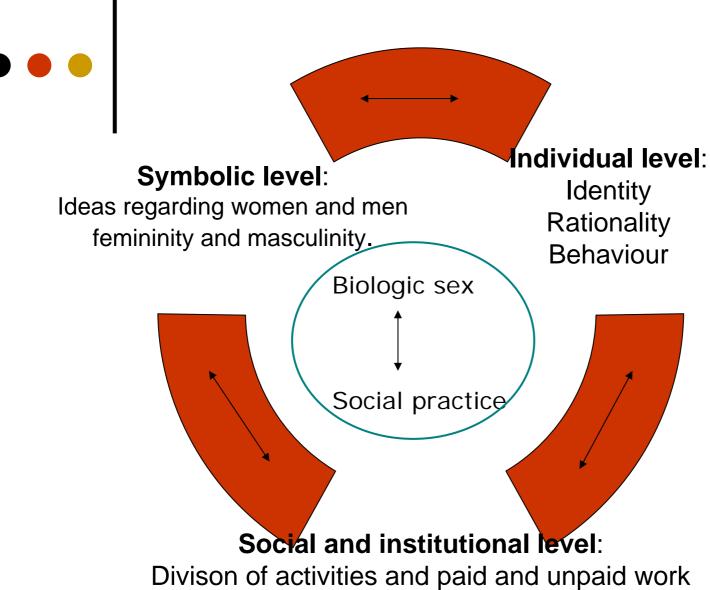
- -Important parts of society are socially constructed; products of human interaction and common actions
- -Gender is a social construction

Culture

• • Is this a woman or a man?



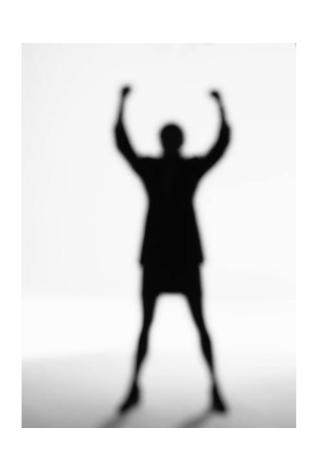
Relevant or irrelevant question?



Divison of activities and paid and unpaid work Institutional policy and practice

> Gunnel Hensing, Social Medicine, The Sahlgrenska Academy at University of Gothenburg, Sweden

Gender, difference and bodies



- o "...gender.... understood as the cultural difference of women from men, based on the biological division between male and female."
 - Connell, 2002, p 8



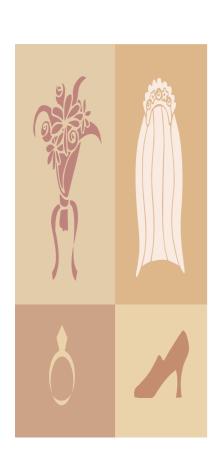
- The images might be dichotomous but reality is not
- Gender can only be seen where there is difference
- Differences among men and among women are hidden
- Processes behind personal characteristics are ignored

• • Gender relations

- "Gender is, above all, a matter of the social relations within which individuals and groups act."
 - Connell, 2002, p 9



• • • Gender can be defined as

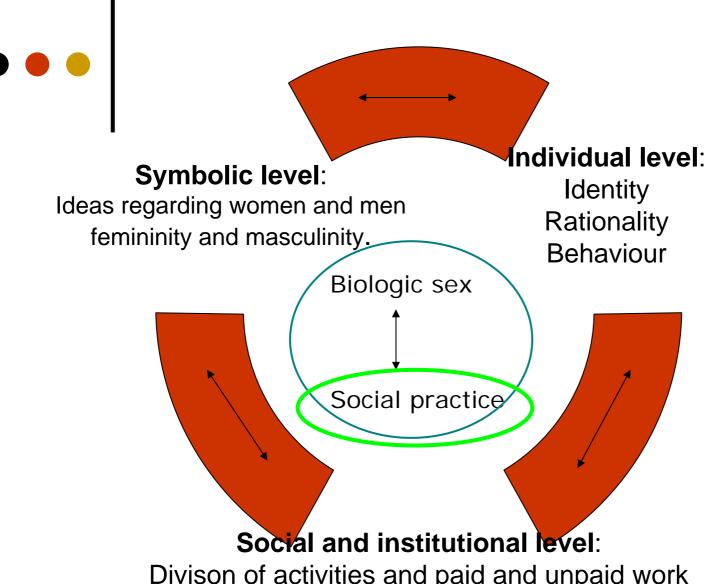


- o "...the ways in which the "reproductive arena", which includes "bodily structures and processes of human reproduction", Organizes practice at all levels of social organization from identities, to symbolic rituals, to large-scale institutions."
 - Connell, 1995, p71 and Schippers, 2007, p86

The body is the classifying principle

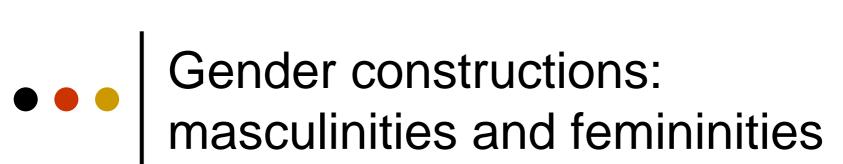






Divison of activities and paid and unpaid work Institutional policy and practice

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- Psychological
 - Gender identity
 - A set of rather stable characteristics
 - Attached to the individual
 - Normative

- Sociological
 - Gender as discourses and practices
 - Changing
 - Attached to culture
 - Power analysis

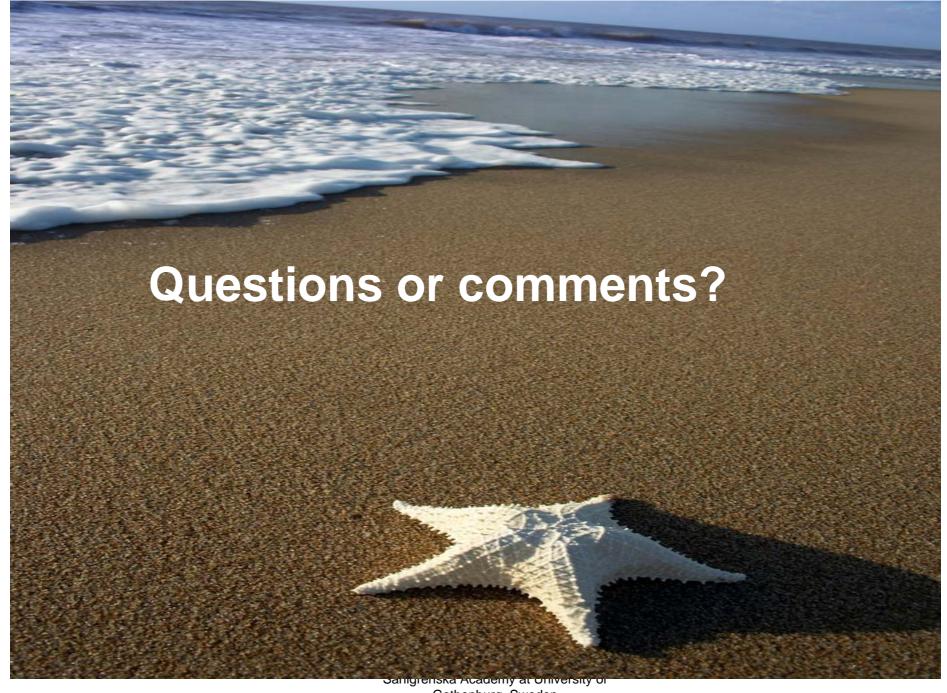


Masculinity (and femininity) have three components (Schippers, 2007)

- A social location
 - women and men can move in and out of this location through practice
- o A set of practices and characteristics
 - understood to be masculine
 - Interpretation, Symbolic level
- Widespread cultural and social effects
 - differs by embodiement



- o Gender is a relation at the individual, social/institutional and symbolic levels
- Social practice of women and men reproduce or change gender
- Masculinities and femininities are social locations that can be entered and left by women and men
- The embodiment of social practice is not indifferent



Gothenburg, Sweden

Is there a gender order?

- o Order as in
 - System or structure
 - Patterns or coherence
 - Order of precedence or hierarchy

Yes

The normal state of things



Hegemonic masculinity

- Based in feminist theory
 - patriarchy
- Critique of sex role concepts and theories
 - Separate behavior and norm
 - Avoid homogenizing and essentialism
 - Account for power
- Take the social nature and changes of masculinity into account



Hegemonic masculinity...



- o "...was understood as the pattern of practice (i.e. things done, not just a set of role expectations or an identity) that allowed men's dominance over women to continue"
 - Connell and Messerschmidt, 2005, p832

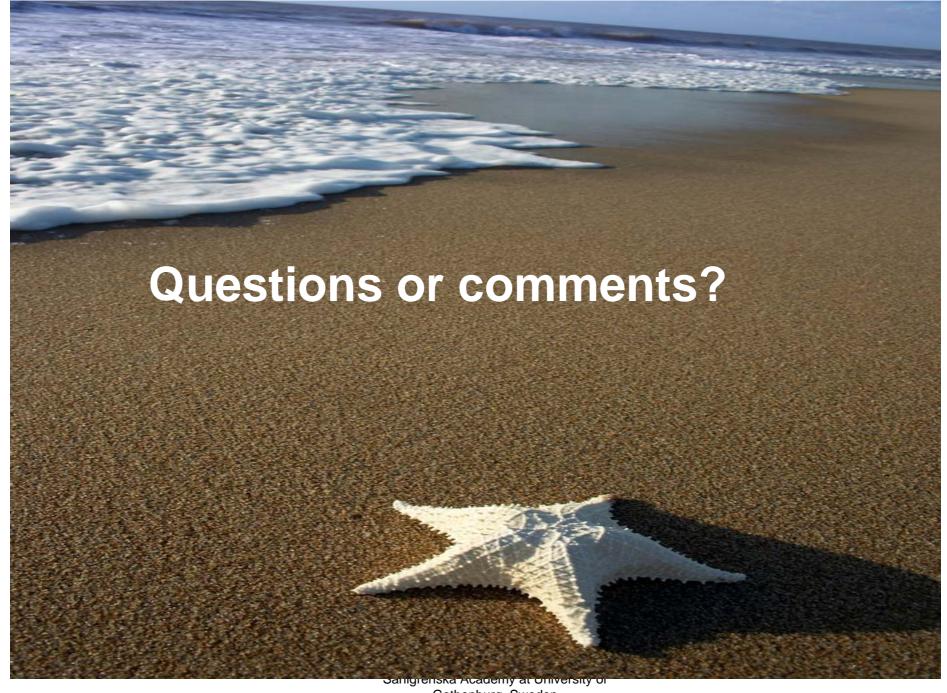
• • Hegemony

- o Leadership
- o Power
- o Consent through cultural values
- o Status quo
- o The power relations are seen as "natural"

- "Hegemonic ideologies preserve, legitimate and naturalise the interests of the powerful – marginalising and subordinating the claims of other groups. Hegemony is not automatic, however, but involves contest and constant struggle."
 - Wetherell M, Edley N, Feminism and Psychology, 1999,p 337

• • In summary

- o Gender theories focus on
 - Human relations and interaction
 - The importance of labour and how it is organised
 - The construction of masculinities and femininities
 - The distribution of power over women and men, and over identities
 - Embodiment

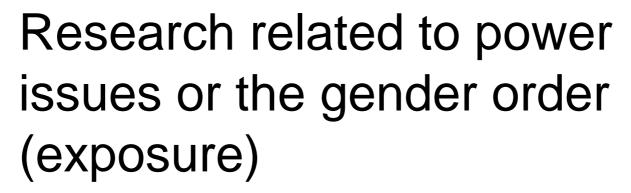


Gothenburg, Sweden

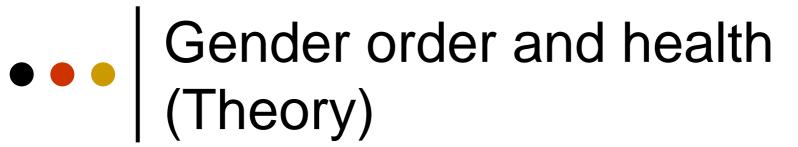
• • Sickness absence research

o Gender

- relation
 - divisions, negotiations
- social location
 - constructions
- system or order
 - subordination
- women and men
 - distribution



- Women's overall subordination compared to men
 - Access to health care and rehabilitation
 - Quality of care and money spent
 - Relationships, violence
 - Influence at home and at work
 - Ethnicity and Intersectionality
 - Not all women are white, middle class



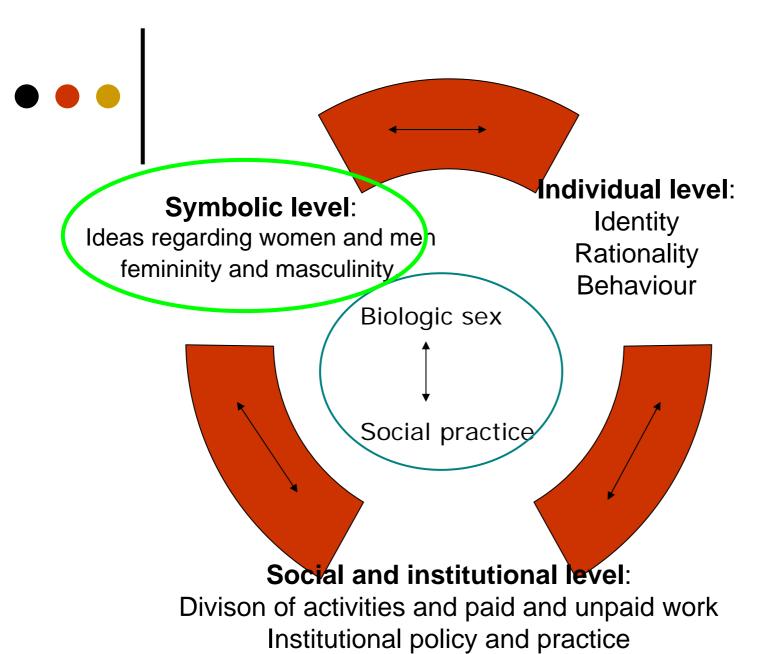
- o Women's general subordination
 - Poverty
 - Responsibility for children
 - Responsibility for household work
 - Character of and wages in female dominated occupations
 - Violence against women

• • • Research on differences

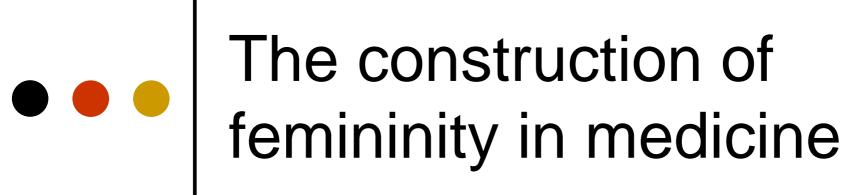
- o Do we ask the right questions?
 - Aim
 - How do hegemonic masculinity influence health and sickness absence in men and women working in the health care?
 - The design
 - Do we take selection processes into account?
 - The methods
 - Questionnaire/register methods promote simplistic perspectives
 - The interpretation
 - Men and women as complementary and dichotomous categories?

Another perspective

 The social construction of gender (masculinities and femininities) in the sickness absence and return to work processes



Gunnel Hensing, Social Medicine, The Sahlgrenska Academy at University of Gothenburg, Sweden









The hysteric woman.....

• • • Women and medicine

- Charcot
 - Hysteric women on stage



• • • Women and medicine

- Charcot
 - Hysteric women on stage
- Freud
 - Neurotic women on the couch



Women and medicine

Charcot

 Hysteric women on stage

o Freud

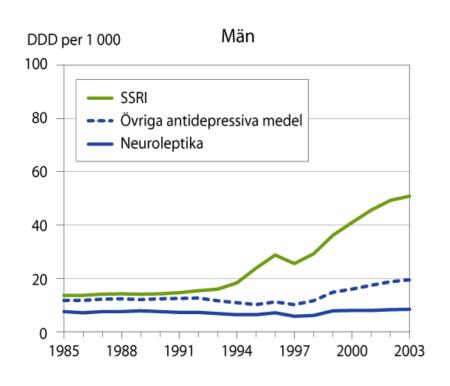
 Neurotic women on the couch

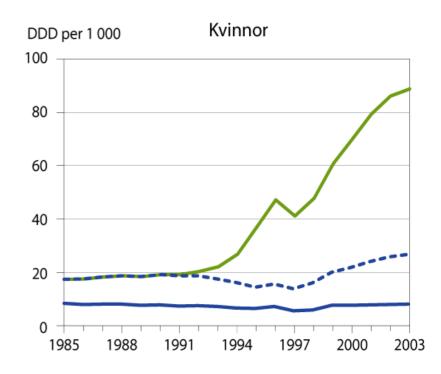
Prozac

 Depressive women at the counter









Källa: Läkemedelsregistret, EpC, Socialstyrelsen.

• • • | Women and medicine

- Charcot
 - Hysteric women on stage
- Freud
 - Neurotic women on the couch
- Prozac
 - Depressed women at the counter
- Sickness absence
 - Worn-out women with a sick note



The hysteric woman.....

Medicine

- -Biological explanations
 - -Hormones
 - -Mental diseases
 - -......
- -Care and cure
 - -She has the problem
 - -She needs help
- -Victimization processes
 - -Identity as patient
 - -Passive and out of control



Feminist critique

- -Social explanations
 - -Living conditions
 - -Over commitment
- -Take action
 - -Change the "exposure"
- -Be responsible
 - -Avoid vicitimization
 - -Support active processes

Andronormativity

o "....signifies a state of affairs where male values are regarded as normal to the extent that female values disappear or need to be blatantly highlighted in order to be recognized."



Challenges to andronormativity in medicine

- -Studies on difference between women and men
 - +Questions neutrality, objectivity and fairness of medicine
 - Dichotomous view on gender, sociobiological explanations
- -Studies identifying women's subordination and denied access to health care +Identify inequalities
 - -Risk to provide images of women as victims
- -Studies on the cultural construction of medicine and medical practice
 - +Move the perspective to the system, institution and discourse
 - -Narrow cultural explanations not taking power, politics and economy into account

Hölge-Hazelton B, Malterud K, Scand J of Public Health, 2009, p4

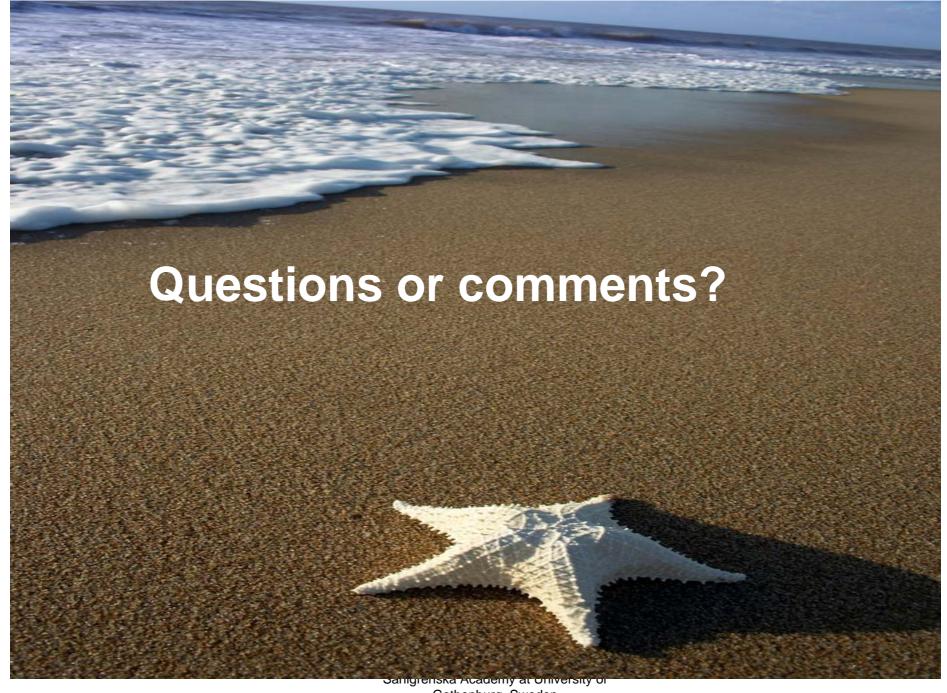
2009-12-02



- The everyday accumulation of disadvantage
 - Women and men of the same height?
 - Communication analyses time used?
 - "The 30% rule"
 - Women and men presenting the same symptoms?
 - Valian V, "Why so slow?", 1998, Cambridge, MA: M.I.T. Press

• • In summary

- Research on differences is still needed
 - Identify inequalities and differences in exposure
- New questions need to be put and developed
 - The role of hegemonic masculinity for health in women and men
- The role andronormativity in medicine plays in SAP and RTW
- Femininity needs to be better defined
- The role femininities play in SAP and RTW



Gothenburg, Sweden



- GROUPDISCUSSIONS
- Sex differences in sickness absence
 - what else do we need to know to move explanations further

• • • GROUP DISCUSSIONS

- o How can gender theories contribute?
 - To your own research area
 - To interventions to reduce sex differences in sickness absence