

NHMRC Stakeholder submission on “Preventive Health Care” and “Strengthening Australia’s Social and Economic Fabric”

We congratulate the NHMRC for their commitment to initiatives in the above areas which have been nominated as priority goals under the Government’s National Research Priorities. Members of our Centre have contributed to submissions by the Australian Health Inequities Program and the Victorian Public Health Research and Education Council and we are very supportive of the issues raised in these submissions.

The Key Centre for Women's Health in Society, since its foundation in 1988, has been at the forefront of thinking, researching, teaching and disseminating information about women's health. The social and economic determinants of health are one of four of the Centre’s core research themes, with a number of staff and students working directly on such issues. What distinguishes the Key Centre’s contribution from others in the field is a focus on the importance of gender. We take sex to be based on the biological characteristics of sexual reproduction and gender as a series of culture-bound roles and practices that influence social relations. ¹

In public health most research separates the effects for men and women (sex) but often fails to take into account the ways in which gender shapes health differences. International research has demonstrated that social and economic determinants act differently for men and women and that these differences may, at least partly, be explained by differences in the social roles and experiences that men and women have in their day-to-day lives. ²⁻⁷ For example, work roles and parental responsibilities may be more burdensome for women than for men. Living in areas of disadvantage or poor neighbourhood safety may have different effects for men and women. If gender is not taken into account then important effects may be missed due to the mixing of gender effects; this will limit our understanding of the pathways that link social and economic determinants to individual health.

While researchers in the United Kingdom and the United States have engaged the concept of gender in their research on the social and economic determinants of health, this has not hitherto been the case in Australia. We strongly urge the NHMRC to place gender at the centre of its thinking about this research program. We argue that all researchers should be urged to consider the importance of gender in their funding submissions.

If gender is to be a key focus of this research program it may be necessary for new methods or instruments to be developed. For example, current methods of measuring individual socio-economic position may be more sensitive for men than for women. For this work to be conducted we encourage the NHMRC to consider funding mechanisms that support methodological innovation as outlined in the VPHREC and AHIP submissions.

Finally, as emphasised in the other submissions, we are disappointed to see that the goals ‘preventative health care’ and ‘social and economic fabric’ were combined. The former is

orientated towards individual health and the later at broader structural issues. It is important that the work conducted under this initiative is able to address the macro social and economic factors that affect health and does not become only about the provision of health care services to disadvantaged groups.

Thank you for the opportunity to comment on this research program. We look forward to hearing further from you about future developments.

References

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