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MISSING CONNECTIONS: MEDICAL SOCIOLOGY AND FEMINISM

We need only to cast our minds back to the 1970s to recall a strong and sympathetic relationship between feminism and medical sociology. Thirty years on, their connections are tangential at best. Education, political representation, the family, identity, and the body figure highly in the growing number of feminist accounts of gender and social change, but health and illness fail to get more than a passing mention, if that. Although gender is firmly established within medical sociology, as it has slipped into the mainstream of the discipline it has lost its theoretical anchor within feminism. Only by re-connecting medical sociology and feminism can we find the theoretical wherewithal to understand the impact of gender-related social change in western societies upon women's (and men's) health. As both 'biological sex' and 'social gender' become less fixed and more fluid, the traditional distinctions between female and male experience are breaking down and being reconfigured in new and more complex ways. This is not to say that we have begun to experience gender as free choice, it has a systematic and strong guiding hand from patriarchal capitalism which profits from the new markets of an increasingly diversified 'gender economy'.

The changes that result are not simply the product of men and women becoming 'more equal' or 'more similar' as often advanced by the media, but a new biological embedding of social experience and new complex gender identities which reach deeply into the body's interior and alter its traditional 'gendered' health profile. For feminists, health is an as yet untapped resource to explore the ways in which the lives and women and men are entangled in a social economy which seems to offer endless (liberatory) possibilities, but actually positions them in complex and contradictory ways. For medical sociologists, a materialist feminist interpretation of social change provides the necessary and currently missing lens through which to interpret emerging complex patterns of similarity and difference between women's and men's health.