

Gender in/and/of Health Inequalities

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The relationship between gender and health inequalities is potentially complicated, raising questions for public health research and policy alike. Researchers whose main focus is on class inequalities often ignore gender or 'control' for it statistically, leaving unaddressed the possibility that it may have significant implications for health risks, health behaviour and the experience of health conditions. On the other hand, researchers who are most interested in gender tend to privilege that category and ignore race and class. Effectively, they operate as if all men were like one another, all women like one another, and all women different from all men. In public health policy and health promotion, gender tends to be equated with women, as if men were not also gendered, thus ignoring the possibility that masculinities (as well as femininities) play an important part in shaping health and health risk, and consequently should be considered in the formulation of interventions to improve public health.

In this paper, I use two population health case studies – obesity and smoking – to explore the interplay between gender and socioeconomic position. The cases show that, on its own, neither dimension of inequality affords a comprehensive picture of these significant threats to public health. Furthermore, historical change in the socioeconomic and gendered distribution of these health risks suggests that gender is best considered as a dynamic and layered forum of differentiation, rather than as a simple or stable dichotomy. A more nuanced approach to the analysis of gender and health has the potential to generate both more fruitful research and more effective health policy.