

Geography of Health Research Group Sponsored sessions for 2010 Annual Conference

Convenor(s)	Title	Joint with...	No. of sessions
Ms Natalie Beale, Dr Chris Dunn & Dr Keith Halfacree	Healthy Countrysides?: exploring geographies of rural health	Rural Geography	1 (1/2)
Dr Nicola Shelton, Dr Laia Bécares, Ellen Flint and Wayne Medford	Healthy Places	n/a	2
Louise Holt, Jennifer Lea and Hannah MacPherson	Geographies of (dis)ability, (ill) health, emotion and affect	n/a	2
Matej Blazek	'Geographers helping' – Undertaking fieldwork through a participatory role in the 'helping' professions	Participatory Geographies	1(1/2)
Sarah Deedat and Charlotte Kenten	Body to Body: geographies of donation and transplantation	n/a	1
Katie Oven, Chris Dunn, Sarah Curtis and Jeff Blackford	Climate Change Adaptation and Human Health	Climate Change	1(1/2)
Daniel Lewis, Catherine Jones	The Spatial Dimensions of Health	Quantitative Geography	1(1/2)

Healthy Countrysides?: Exploring Geographies of Rural Health

Session abstract

Despite numerous academic critiques, representations of idyllic rurality still present the countryside as an almost inherently healthy place. These representations have been shown to obscure problems such as rural deprivation and inequalities, and this critique can be extended to issues of health and well-being. The aim of this session is, therefore, to provide a platform for exploring critically a range of contemporary issues and debates relating to rural dimensions of health and well-being. By drawing on the diversity of research relating to both geographies of health and rurality, it seeks to offer new insights into issues of health, well-being, inequality and inequity, both within the rural and between rural and urban areas.

Papers are welcomed which address the following overlapping themes and issues relating to health and well-being in rural areas:

- Health issues and inequalities in rural areas
- Cultural discourses which conflate rurality with a 'healthy' life and marginalise rural 'others', such as older people or those with disabilities or mental health problems
- Health-related interactions with the countryside: urban dwellers' leisure practices, therapeutic landscapes, children and young people's encounters with the countryside, etc.

- The supposed health-enhancing characteristics of open space, wildlife, nature, woods, etc.
- Rural policy and its implications with regard to both health services or health and well-being more generally.

How historical geographies of rural areas have impacted upon the contemporary situation with regard to health and well-being.

Key words

Rurality, Health and well-being, Inequalities, Therapeutic landscapes, Rural policy

Deadline for submitting abstracts is Monday 1st February 2010

Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Natalie Beale (n.h.beale@durham.ac.uk), Christine Dunn (c.e.dunn@durham.ac.uk) and Keith Halfacree (k.h.halfacree@swansea.ac.uk).

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Healthy places

Session abstract

In 1859 William Farr identified a group of Healthy districts in England. These were places which had a Crude Death Rate of less than 17.5 per 1000 in 1849-53. The identification of such places was in sharp contrast to the places usually identified in other Victorian analyses as those with poorest health. Though the role of geography in determining health is undeniable and has been given more prominence with the expansion of techniques such as multilevel models, it is often with the purpose of identifying factors that have a negative effect on health. Policy is also often delivered to those areas identified as at risk (e.g. SureStart, Spearhead PCT status). Identifying healthy places or characteristics of places that have a beneficial effect on health has been less common

The aim of this session is to bring together researchers from a variety of disciplinary practices and theoretical positions who are ‘finding’ healthy places in their research. We welcome papers that address these themes from any area of scholarship from quantitative, qualitative, participatory and mixed method geographical research, and contributions which draw out how researchers can critique and inform policy debates in health geographies.

Key Words: Healthy places; neighbourhood effects; context; Health Geographies; resilience.

Deadline for submitting abstracts is Monday 1st February 2010

Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Dr Nicola Shelton n.shelton@ucl.ac.uk , Dr Laia Bécares l.becares@ucl.ac.uk , Ellen Flint ellen.flint@ucl.ac.uk and Wayne Medford w.o.medford@durham.ac.uk

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Geographies of (dis)ability, (ill) health, emotion and affect

Session abstract

This session aims to explicitly connect work on the geographies of (dis)ability, ill health and wellbeing with research on emotion and /or affect. Over recent years, the interest that human geographers have shown in the emotional and (broadly conceived) affective realms has increased substantially, making an impact in most areas of the discipline. From the emotional responses that shape and arise from embodied relationships with particular spatial settings, to the ‘logics’ of affect

that shape configurations of economic, social and cultural life, the emotional and affective realms are increasingly being called upon as legitimate ways of knowing the world.

It was critical geographies of disability and chronic illness (e.g. Dyck 1999, Moss 1999, Chouinard 1999) that proved one of the most willing to 'admit emotions into [the] production of geographical knowledges' (Davidson et al 2005, 4). Despite that starting point there has been limited sustained dialogue. As such, this session calls for papers that explicitly take this dialogue forward by investigating aspects of the multidimensional and varied relationships that exist between (dis)ability, health and wellbeing and emotion/affect.

We invite abstracts that explore the geographies of emotion and affect in relation to a wide range of mind-body differences – which might include physical impairments, mental health, intellectual disability, emotional, social and behavioural differences – working with a broad conception of disability and impairment (see Chouinard et al 2010, in press). We encourage the submission of papers that work with a range of theoretical positions stemming from human geography and the wider social sciences.

Contributions might explore, but not be restricted to:

- Emotions and experiences of impairment and disablement.
- Body/mind-environment relationships and emotions/affect.
- Emotions/affects and exclusionary processes.
- Social relationships and disability.
- Ableist geographies of emotion and affect / the disabling effect of normalizing logics of affect and emotional conduct and communication.
- Historical/contemporary geographies of the role of emotions/affect in the construction of impairment.
- The role of emotions in renewing the social model of disability.
- Emotion/affect and disability activism.
- The emotional geographies of doing disability research.

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Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Louise Holt l.holt@reading.ac.uk, Jennifer Lea j.j.lea@reading.ac.uk, Hannah MacPherson hm139@brighton.ac.uk

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'Geographers helping' – Undertaking fieldwork through a participatory role in the 'helping' professions

Session abstract

Along with the growing interest in participatory action research, geographical fieldwork often implicates initially professional researchers to be involved in the field through acting in a "double-role" of researcher/participant. This session focuses on experiences from geographical fieldwork where the involvement of the researcher has been established through her/his direct participation in the field of 'helping' or caring professions. 'Helping professions' is a label for professions addressing problems of physical, psychological, social, intellectual, emotional or spiritual well-being, health and comfort, through direct contact work with people, including nursing, counselling and psychotherapy, social, outreach and community work, social care, education, tutoring and pedagogy, life coaching, juridical and social consultancy, or religious ministry.

Papers are especially invited that focus on research conducted *through* direct involvement of researchers in a professional or voluntary role in any of the helping or caring professions, i.e. where the 'double-role' of researcher/qualified participant emerged as a key aspect of the fieldwork. Themes can include, but are certainly not restricted to:

- The range of themes explored by participatory research in the helping or caring professions (health care, comfort, education, community inclusion etc.)
- Professional requirements and training for participatory research in a helping profession role
- Ethical puzzles of the double role and different ethical frameworks of research/helping professions
- Supervision in helping or caring professions as a feature of the research
- Similarities and contrasts of aims and motivations in research and professional praxis
- Epistemological and/or practical coincidence or dissonance between roles of researcher and practitioner
- Specificity of particular social groups (such as children, older people, people with ill-health, people in different cultures) and of the practical work with them for the research experience

Papers concerning a diverse range of professions and social groups, but also geographical and cultural (i.e. non-Western) contexts are welcome.

Key words: helping and caring professions, geographical fieldwork, participatory action research, double role, positional ethics

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Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Matej Blazek m.blazek@dundee.ac.uk

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Body to Body: geographies of donation and transplantation

Session abstract

The harvesting of organs and body tissue for transplantation is a relatively new practice. Medical advances have increased the ability to prolong life through the reuse of body parts including organs, cornea, skin and tissue. With over 8000 people in the UK alone needing an organ transplant (NHS Blood and Transplant) now is an opportune moment to reflect on geographical contributions to this issue. Recent media campaigns have emphasised the need to increase the numbers of people on the organ donor register as well as live donations of bone marrow and blood.

This session aims to draw together those working around the issues of the donating (or paying for) and receiving organs, corneas, tissue, skin and bone(marrow) and blood. In so doing it hopes to consider the ways that geographies of health, medicine and the body can combine and contribute to furthering this area of academic research.

We encourage abstracts from post-graduate students; post doctoral and early career researchers as well as established researchers on issues relating, but not limited, to:

- Debates around the live and deceased donation of organs, tissue, corneas, skin, bone(marrow)

- Transplantation
- Xenotransplantation
- Organ trafficking and transplant tourism
- Public understandings of organ donation registration, organ donation and transplants and the role of the media
- Notions organ donation as the giving of a gift, altruism and sacrifice
- Emotional geographies surrounding organ donation and receiving an organ
- Political, ethical and legal perspectives towards the giving and receiving of body parts in the context of organ donation registration, organ donation and transplants
- Reflections on the ethical and methodological aspects of conducting research on this aspect of the corporeal
- Spatial variations in organ donor registration, inclusions or exclusions on whose organs are used
- Inequalities of access to transplants or associated medication
- Understandings of the body pre and post donation and pre and post transplant
- Comparative approaches to health care policies, increasing organ donation, registration or carrying a donor card across geographical scales

Keywords: organ donation, transplants, geographies of the body, health geographies

Deadline for submitting abstracts is Monday 1st February 2010

Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Sarah Deedat sarah.deedat@kcl.ac.uk and Charlotte Kenten charlotte.kenten@kcl.ac.uk

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Climate Change Adaptation and Human Health

Session abstract

The functioning of health and social care systems and infrastructure supporting them is likely to be influenced by climate change, especially by increasing frequency and severity of weather-related hazards such as floods, heat-waves and storms. The recent floods in Huntly, Aberdeenshire and Cockermonth, Cumbria are cases in point. Here, extensive damage to infrastructure including roads and bridges, healthcare facilities, and the evacuation of care homes, reminds us that countries in the Global North are far from immune to extreme climatic events. Such events have been shown to have significant repercussions for the health and well-being of vulnerable groups, notably older people, who comprise a growing proportion of the total population. We therefore face a major challenge concerning how to adapt infrastructures, essential for health and social systems, to the impacts of a changing climate.

This session aims to draw together those working around issues of vulnerability assessment, climate change adaptation and human health and well-being.

We encourage abstracts on themes relating, but not limited, to:

- Impacts of extreme weather events on health service needs
- Impacts of climate change on healthcare infrastructure
- Vulnerability/capacity assessment
- Climate change adaptation
- Emergency preparedness

Keywords: Climate change, extreme weather events, healthcare infrastructure, risk management, climate change adaptation

Deadline for submitting abstracts is Monday 1st February 2010

Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Katie Oven k.j.oven@dur.ac.uk, Chris Dunn c.e.dunn@dur.ac.uk, Sarah Curtis s.e.curtis@dur.ac.uk and Jeff Blackford Jeff.Blackford@manchester.ac.uk

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The Spatial Dimensions of Health

Session abstract

There is little doubt that geography and health are linked. Whether geography is considered in terms of the 'geographies' of individuals; communities and neighbourhoods; services and resources; or diseases- the linkage persists. In light of this, Gatrell and Elliot (2009) state 'the subject of "health" is a rich source of material that bears study by the geographer' (p.3). The importance of such study is highlighted by the steadfast presence of spatial disparities in health and healthcare nationally.

The intention of this session is to bring together research on the spatial dimensions of health, for the purpose of highlighting ongoing and nascent challenges within the diverse spectrum of health and health geography.

The session organisers invite proposals for papers that present empirical contributions within the spatial dimensions of health, ideally with focus on the UK. We welcome proposals that explore:

- The spatial dimensions of health inequalities and health behaviours
- Place, community and neighbourhood health and healthcare
- Spatial methods for developing health statistics
- Web 2.0 and health mapping

Reference

Gatrell, A. C. and Elliot, S. J. (2009) "Geographies of Health: An Introduction", 2nd Edition, Wiley-Blackwell, Chichester

Keywords: Health, behaviour, inequality, quantitative, space.

Deadline for submitting abstracts is Monday 1st February 2010

Please send abstracts up to a maximum of 250 words and proposed titles (clearly stating name, institution, and contact details) to Daniel Lewis (d.lewis@ucl.ac.uk) and/or Catherine Jones (kate-emma.jones@ucl.ac.uk)