

Exploring Inequality - Dr Eva Orsmond – Ireland’s Health Divide – RTÉ Player – 2017

Link: <https://www.rte.ie/player/movie/ireland-s-health-divide-s1-e1/76851239975>

Pause the video where required to help complete the relevant information.

1. (0:05 – very start!) According to Dr Orsmond, “Ireland is one of the wealthiest countries in the world, but beneath the surface lies a startling _____. It is your social position that will determine the quality of your life and how _____.”
2. (0:20) Children born in poverty will die, on average, of how many years earlier than children born into affluence? _____
3. (2:10) According to Professor Fionnuala McAuliffe, “The environment in the _____ is crucial for lifelong health.”
4. (3:30) What kinds of poor eating habits can trigger ‘**gestational diabetes**’?

5. (3:55) What is the rate of overweight and **obesity** among pregnant women in Ireland?

6. How would you describe the **responses of the mothers** when they find that they have been diagnosed with gestational diabetes? _____

7. (6:25) How much more likely are women on low incomes to be **smokers**? _____
8. (6:38) What are the **effects** of smoking during pregnancy? (Tick the appropriate boxes)
 - a. It increased risk of pre-term birth
 - b. Increased the risk of inter-uterine growth restriction
 - c. Increased risk of looking really cool
 - d. Increased risk of sudden cot death
9. (8:30) What is the name of the **LONGITUDINAL** study in Trinity College, Dublin that explores the health and development of 20,000 Irish children?

10. Professor Richard Layte, Department of Sociology, TCD, points out that “**Breastfeeding** leads to better cognitive development”. How might mothers and children from lower social and economic positions be disproportionately impacted by this?

11. (9:50) Children with a poor diet before the age of 3 will be shorter and heavier. Prof Layte says that “Their environment becomes _____ from an early age.”
12. (10:40) Dr Trutz Haase, a social and economic consultant, has mapped deprivation in Ireland.
 - a. Name some of the **areas in Dublin** associated with unemployment and deprivation:

 - b. Name some of the **counties** that would be more associated with **rural deprivation**:

13. (11:40) What, according to Dr Haase, is the **most deprived** part of Ireland?

14. (12:05) Dr Haase thinks education is the most important factor that impacts deprivation. What percentage of people in the area he discusses goes to university, compared with the national average? National Average %: _____ Moyross %: _____
15. (12:40) What is the difference in **life expectancy** in a poor area like this, compared with averages? _____

16. (14:00) What attitude towards the eating habits of poorer Irish people does Dr Orsmond display in this section? _____

17. (16:40) How does Ciara Kane (the manager of a local community centre) answer the question “*Why is it so difficult to feed these children a healthy diet?*” _____

18. (18:40) What kind of **budget** does Janette Quinn (aged 43), have to feed her seven children? _____
19. (21:00) What is the **most important factor** for Janette in deciding which specific products to buy? _____
20. (21:30-23:15) How would you describe Janette’s background? (economic/educational/social) _____

21. (23:15) How has Dr Orsmond’s attitude to women like Janette changed? (Compare this with your response to question 16) _____

22. (24:25) **WILL POWER** – Explain the concept of “Cognitive Load”. How does this impact what we think of as ‘will power’? _____

23. (26:00-28:20) How do the attitudes of the parents in **Glasthule** in South Dublin differ from those of parents in the deprived areas? How do you view these attitudes from a personal perspective? _____

24. (Pause the video at 29:31) Examine the data provided about **Body Mass Index (BMI)**. How has this changed for Irish men and women since 1976? _____

25. (29:50) How does Dr Sinead Murphy of Temple Street Children’s Hospital describe our Childhood **obesity problem**? _____

26. (30:10) Childhood obesity is a **complex** problem. What factors does Dr Murphy identify? _____

27. (32:00) What, according to Dr Layte, contributes to an “**obesogenic**” environment?

28. (32:20) How do the locations of “Iceland” supermarkets correlate with the poorer socio-economic areas in Dublin? (Check back with the information in Question 12 here!)

29. (33:56) Clondalkin has _____ take-aways located close to three secondary schools. This could increase obesity rates by up to _____%.

30. (34:15) “**No Fry Zone**”. How has this group tried to limit the problem of fast food near schools?

31. (35:35) According to Dr Robert O’Connor, Head of Research at the Irish Cancer Society, what types of cancers are more prevalent in poorer areas?

- a. Cervical cancer rates are _____ .
- b. Lung cancer rates are _____% higher.
- c. Cancer of the stomach _____% higher.
- d. Death from Cancer increases _____ in poorer areas.

32. (36:15) Castleknock ‘vs’ Mulhuddart – you are up to _____ times more likely to die of cancer if you live in Mulhuddart compared with Castleknock - both areas are geographically close, but have much different access to E_____, E_____, and H_____.

33. (42:30) Does Dr David Gibney a GP in Ballymun think that **GP resources** are stretched out more thinly in Ballymun? What **quantitative data** does he provide to prove his point?

34. (43:05) Thinking about **TRENDS**. Does Dr Gibney think that health inequality is getting better or worse?

35. (44:00) Briefly outline the **economic argument** for tackling health inequality.

36. (45:00) What does the programme run in St John’s school’s “**Incredible Years**” resemble the Cherry Orchard Community Project seen in Joe Duffy’s “Classroom Divide”?

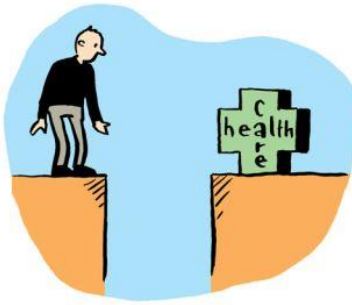
37. (47:00) “I now understand that tackling health inequality is more complex than lecturing people about the _____ or their _____. It’s about understanding why people make those choices.”

38. (49:45) What analogy does Prof Layte makes about falling off the cliff? Is it **effective/persuasive**?

Data-Based Question: Social Justice Ireland “Press Release”

Healthcare Inequalities Persist and Undermine Treatment & Care

Issued 6 December, 2021. (Adapted for exam purposes) <https://www.socialjustice.ie/article/healthcare-inequalities-persist-and-undermine-treatment-and-care>



While our health system, and its workers, have been placed under tremendous pressure due to the COVID-19 pandemic since March 2020, one of the most obvious concerns about the Irish Healthcare system is to do with access. Ireland’s complex two-tier healthcare system means that private patients have speedier access to both diagnostics and treatment, while those in the public system can spend lengthy periods waiting for a first appointment with a specialist and for treatment.

Social Justice Ireland's Policy Briefing, 'Healthcare in Ireland', concludes that even though Ireland spends more per capita on health than the EU average, the number of beds per 1,000 population is considerably less than the EU average. Furthermore, a mental health crisis is likely to be a prevailing legacy from Covid-19, not just because of the immediate stress, but also because the impact of the illness on those who contract it and their wider circle.

Main Findings:

- **Ireland remains the only western European country without universal coverage for primary care.**
- Covid-19 has worsened many healthcare issues. Data from the National Treatment Purchase Fund shows there were 178,064 people **waiting for 18 months or more** for outpatient’s treatment in March 2021. This equates to **almost 3/10 of the 628,756 people awaiting treatment** that month.
- **Ireland’s health system ranked 22nd out of 35 countries in 2018, but on the issue of accessibility, Ireland ranked worst.**
- 2,112 children and young people were awaiting supports from the Child and Adolescent Mental Health Service (CAMHS). Of these **one in ten were waiting for treatment for 12 months or more**
- **Before the onset of COVID-19 the Irish public hospital system was already operating under pressure** from high population growth and ageing, and because of system cuts to bed capacity in the preceding decade. VI

Policy Priorities for Consideration:

- Ensure that announced **budgetary allocations are valid, realistic and transparent** and that they take existing commitments into account.
- Complete the **roll-out of the Community Health Networks** across the country and thus increase the availability and quality of Primary Care and Social Care services.
- **Ensure medical card-coverage for all people who are vulnerable.**
- Act effectively to **end the current hospital waiting list** crisis.
- Create a **statutory entitlement to Home Care Services**. This will require increased funding, but will save the State money long-term, as home support allows people to remain living in their own homes, rather than entering residential nursing care.
- Properly **resource and develop mental health services**, giving greater attention to suicide.
- Work towards **full universal healthcare for all.**
- Enhance the process of **planning and investment** so that the healthcare system can cope with the increase and diversity in population and the ageing of the population projected for the next few decades.



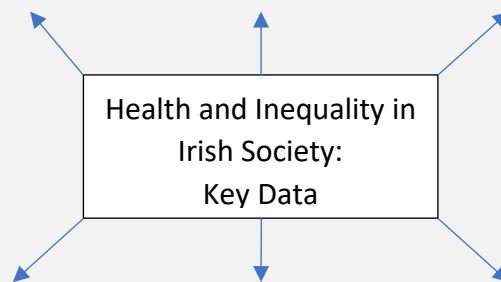
Conclusion: Ireland must decide what services are required, how these should be funded and prioritized (geographically and in other respects). Obtaining value for money is essential, but efficiencies must be delivered without compromising the quality of the service and without disproportionately disadvantaging poorer people. As well as a debate on the overall budget for healthcare, there should be **transparency** on the allocation to each of the services. Reform will require investment before savings can be made.

What **legitimate criticisms** could you make about the documentary? (Remember ‘critical evaluation’!!!)

Synthesis (combination of components or elements to form a connected whole)

Re-examine the information presented in both The Health Divide documentary and the Social Justice Ireland DBQ above. Identify the top 5-6 pieces of qualitative and/or quantitative data that you think will serve as the strongest evidence for an essay title that asks you “**Critically evaluate the view that in a capitalist society, social class is an important way of categorising who has, and who has not, got power.**” (You might also think about the ‘gender’ component here? Is healthcare in Ireland “gendered”

Key Data:



Your Research: A possible solution? Research and examine the cross-party proposal known as SláinteCare. Critically evaluate this plan (including the strengths & weaknesses of its implementation).