

Co-productive health and social care policy and service development and the power of the 'narrative turn'




Tuesday, March 12, 2013: 12:00 PM - 07:30 PM, OAK, East Hall

Co-production means delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours. Against the backdrop of public service modernisation and democratic renewal through enhanced public participation and increasing health and social inequality, there has been a resurgence of interest in the co-production approaches in the delivery and planning of modernised public services. Proponents of co-production argue that these approaches can shift the balance of power, responsibility and resources from professionals more to individuals, by involving people in the delivery of their own services and by deliberative mechanisms which allow officials and citizens to articulate shared experiences and negotiate shared solutions (Pemberton and Mason 2008). With this comes the need to be attentive to the ways in which health and wellbeing can be eroded by societal inequality, as well as the negative impact of incidences of culturally inappropriate care.

The aim of this presentation is to explore the capacity of the creative arts and other forms of representation and evidence-making for bringing the everyday experiences of managing health, illness and well being in particular communities into new forms of co-productive health policy and service development. Within medical disciplines (as elsewhere) there has been a 'narrative turn', recognising the significance of the ways in which different groups (patients, medical professionals, the media) describe and report conditions of health and illness, ascribe meaning to these conditions, and experience them phenomenologically. Focusing on health and wellbeing narratives also constructs people as authorities over their own bodies and health, acknowledging that they possess forms of health- or illness-related knowledge that might challenge, compete with, or even contradict professional medical narratives. With regard to disadvantaged communities, a narrative approach to health problems is seen to be beneficial in that it gives space for marginalised voices to be heard.

Drawing on a number of key theoretical frameworks, and the narratives captured in recent studies exploring what dignity means to older people from racialised backgrounds, and their experiences and expectations of care, the poster presentation will (i) *spotlight* the lives of Caribbean elders (aged 70 and older), with a focus their narratives of individual and collective meaning-making in relation to their health-related, help seeking behaviours; (ii) *demonstrate* the viability of a visual and story methodologies in policy contexts where stakeholder communications are under-developed; and (iii) *spotlight how best to collect and share* research findings that will (i) have a lasting impact on policy and practice, (ii) 'give voice' to, and seek to make a positive impact on the lives of older people. Alongside the tradition poster presentation will be an interactive, linked set of audio clips of the stories from older people, and from professionals on the role and importance of stories in the development of culturally appropriate health and social care systems and policies. This work will be placed in the wider context of the research, policy and training programme developed by the Wales Ethnicity Research Collaboration (WERC), a national health and social disparities reduction network (<http://www.werconline.org.uk/>).

Handouts

-  [058a_A1_poster.pdf](#) (3.0 MB)
-  [058a_420x841_interactive_poster.pdf](#) (2.1 MB)
-  [voices of african caribbean and black welsh older people.pdf](#) (10.8 MB)
-  [022-WERC-A5-Leaflet_290312_c.pdf](#) (753.6 kB)

Presentation Information:

Program: Poster Presentations (Main Conference)

Primary Category: Policy

Subtopics: Health reform/health systems innovations, Social determinants of health, older people/ senior citizens

Region Addressed by Presentation: Europe

Organization: University

Website: www.werconline.org.uk

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Biographical Sketch: I am a sociologist and my research incorporates critical race theory, feminism, community development theory, and critical perspectives in health, social policy and practice. My abiding research interest is rooted in intersectionality, in particular, the interplay and impact of, gender, age and social class as experienced by racialised and minority ethnic population groups. More recently, I have begun to examine the ethics of researching 'race', and ethnicity, and to explore intersectionality as linked to poverty, social exclusion and location in Wales. A key aspect of my research has been to draw out the voices of people from racialised and minority ethnic population groups, to explore and map the responsiveness of public services, to spotlight issues of access, engagement and participation in a range of health and social care settings, and to explore and spotlight gaps between policy and practice. In the main, my research patch is Wales. Most of my research is qualitative, drawing on action research and participatory methodologies. My current research activity includes qualitative studies on the experiences and expectations of dignified care, drawing on the perspectives of Caribbean Elders in a localised context, and on the perspectives of older women across Wales. I am also working with colleagues on a secondary data analysis of the censuses on BME mental health in-patients (the Count Me In Census, 2006 – 2009), with a focus on the data collected in Wales. I am leading on a mapping of BME health research, with a focus on research conducted in Wales. For further information, visit: <http://staff.glam.ac.uk/users/675>