



# OCR LEVEL 3 CAMBRIDGE TECHNICAL

**CERTIFICATE/DIPLOMA IN** 

# HEALTH AND SOCIAL CARE

SOCIOLOGICAL PERSPECTIVES FOR HEALTH AND SOCIAL CARE

M/601/2402

**LEVEL 3 UNIT 6** 

**GUIDED LEARNING HOURS: 30** 

**UNIT CREDIT VALUE: 5** 





## SOCIOLOGICAL PERSPECTIVES FOR HEALTH AND SOCIAL CARE

M/601/2402

#### **LEVEL 3 UNIT 6**

#### **AIM OF THE UNIT**

Sociology is a social science and is the study of human society and this unit is designed to allow learners to gain an understanding of some of the more common perspectives sociologists have applied to health and social care.

There are various perceptions of health and illness and sociologists provide us with the tools by which to examine these ideas. Is health a matter of personal choice or is it determined by factors outside our control; genes, economic status, access to information or health care? Is ill health a matter of opinion – 'I feel ill' - or does it have to be a recognised named disease to be classed as illness? This knowledge and understanding enables learners to provide the most appropriate care and support in the right place and in the right manner.

#### **PURPOSE OF THE UNIT**

This unit emphasises the importance of sociological perspectives in the context of health and social care.

Sociology can help learners understand the impact of social processes upon the health of individuals and social groupings. By studying how societies work it will help learners understand how social factors influence individuals' beliefs about health and why behaviour such as unhealthy lifestyle choices occurs.

Learners will initially develop an understanding of the key concepts and terminology used by sociologists before being introduced to the various sociological perspectives. Social institutions such as the family and social groupings such as gender impact on the health and well being of all learners and therefore provide a sound basis on which to begin the unit. Learners can consider their own attitudes towards health and ill health and explore with friends and family how the process of socialisation has impacted upon these ideas.

Each sociological perspective is considered in terms of the view sociologists take about the way society is structured and the impact this has upon the health and ill health of individuals and social groups within it. The interpretative

perspectives, for example consider the importance of the meaning of words and actions to the individuals using them. For example, the word 'health' means different things to different people and therefore will have an impact upon how they maintain their own health. Structuralist perspectives, on the other hand, take a wider approach and look at the dominance of some groups over others. Illness is often viewed as a result of the inequalities in social living conditions and therefore not the responsibility of the individual. Is it the job of the NHS to keep the working class well enough to work?

The different definitions and concepts of health and ill health are investigated in relation to the explanations they provide. Whilst the medical model focuses on the functioning of the individual and looks for the presence of disease within the body, the social model looks at how society affects our everyday health and ill health. These ideas help learners understand the views and attitudes of people who use services and provide an explanation for why some people adhere to health advice whilst others ignore it. A person who believes in the social model for example may make no attempt to stop smoking as they consider their poor housing conditions and stressful work life as much more relevant to their level of health.

Patterns and trends within different social groupings highlight the health inequalities within society and provide learners with an opportunity to consider the various sociological explanations for these inequalities. Why is there almost a five year gap in life expectancy of those born in different parts of the UK? Why do females generally live longer than males? Structural explanations may well look to poverty and living conditions as an explanation whilst cultural explanations may look to the different activities the social groups engage in, for example, working classes are more likely to drink and smoke. By exploring the ways that health and ill health are measured, learners are encouraged to evaluate the data and consider the validity and reliability of the patterns and trends discussed.

This unit will be useful to learners intending to work in an area of policy development or implementation within the health and social care sectors or those considering higher education. It links well with research-based units.

#### **ASSESSMENT AND GRADING CRITERIA**

Learning Outcome (LO)  The learner will:	Pass The assessment criteria are the pass requirements for this unit. The learner can:	Merit To achieve a merit the evidence must show that, in addition to the pass criteria, the learner is able to:	Distinction  To achieve a distinction the evidence must show that, in addition to the pass and merit criteria, the learner is able to:
Understand sociological     perspectives	P1 explain the principal sociological perspectives		
2 Understand sociological approaches to health and social care	P2 explain different sociological approaches to health and ill health	M1 compare the medical and the social models of health	
	P3 explain patterns and trends in health and illness among different social groupings	M2 compare sociological explanations for different patterns and trends	D1 evaluate the way patterns and trends in health and illness are measured

#### **TEACHING CONTENT**

#### 1 Understand sociological perspectives

#### **Key concepts**

- Social institutions: (e.g. family, school, workplace, health and care services)
- Social groupings: (e.g. gender, social class, ethnicity, age, locality)
- Attitudes, norms, customs, ideologies, Primary socialisation, Secondary socialisation.

#### **Sociological Perspectives**

- Interpretative perspectives (micro level): Symbolic interactionism; including 'labelling', Social constructionism
- Structuralist perspectives (macro level): Functionalism including the 'sick role', Marxism, Feminism.

## 2. Understand sociological approaches to health and social care

### Understand the different concepts of health and ill health

- Definitions of health: The World Health Organisation definition, the medical model, the social model
- Concepts of health: Personal responsibility for health, health as the absence of illness, the illness-wellness continuum
- Concepts of ill-health: Ill health as a disease, ill health as a disorder, ill health as a subjective feeling of illness.

## Understand sociological trends and patterns in health and ill health

- Measurements of health and ill-health: Disease incidence, disease prevalence, morbidity rates, mortality rates
- Evaluation of measurements of health and illness: the clinical iceberg, suitability of method, validity, reliability, bias, ethical issues
- Trends and patterns according to; gender, class, age, ethnicity and location
- Sociological explanations of trends and patterns: the artefact approach, the socio selection explanation, cultural explanations and structural explanations.

#### **DELIVERY GUIDANCE**

#### Foundation:

Learners will benefit from spending some time familiarising themselves with the key concepts and terminology used throughout the unit before being introduced to the perspectives themselves. Begin by asking learners which groups they feel they belong to and the impact these have had on their attitudes and beliefs. This can then be extended to discuss the process of socialisation, which can be highlighted through the use of videos such as Bandura's social learning theory. If this is not possible then the topic can be found in a number of textbooks mentioned below. Alternatively, inviting guest speakers such as educational psychologists to discuss the process of socialisation can be very beneficial to learners.

#### LO1

In order to familiarise learners with the sociological perspectives, small group work can be used to identify the underlying principles of one of the perspectives and findings can be presented to the rest of the group to enable the collection of notes on all the perspectives. Effective use of the Internet could be invaluable here. A handout with a summary will be very useful to the rest of the class. Following this, learners can debate the similarities and differences between each perspective and collate a set of notes that they can refer to when writing up their assignment tasks.

#### LO2

Learners could be encouraged to apply the perspective they have studied to health and ill-health and to be interactive in their presentations.

Learners can then progress to studying the definitions and models of health and ill health. A tutor-led session can introduce learners to the various models. This could include a compare and contrast session using case studies as an aid to understanding the models and their explanations of various scenarios. Primary research could then be undertaken to investigate the views of others; their definition/s of health, what is ill-health, what causes ill-health and who is responsible for keeping them healthy etc. Their findings could then be linked to the various models and ideas given by sociologists.

#### LO<sub>3</sub>

Investigating patterns and trends should be an active process for learners using sources such as the Office of National Statistics website. Small groups may be given a particular social group to investigate before presenting back to the rest of the group so that notes can be taken and an overview of patterns and trends gained. Learners should then be introduced to the four explanations and be asked to apply these to a few of the patterns or trends they have collected.

The application of sociological explanations to patterns and trends will be significantly easier for those learners who have access to practitioners in a wide variety of settings. This can be achieved by inviting guest speakers to come into the classroom and participating in a question and answer session. Learners should also be encouraged to visit a variety of settings and discuss the four explanations with practitioners and possibly service-users. Such visits will clearly need to be discussed with the tutor and work place before taking place. It is possible that practitioners are not familiar with the explanations and learners will need to feel confident in explaining them before asking the practitioner for their opinion. A short summary of the explanations will be useful for this activity. If it is not possible access practitioners, learners will benefit from further discussions and possibly further primary research of their own. For example, learners can ask friends for their opinions on the reasons for some of the patterns and trends they have discovered.

A tutor-led session on the skills of evaluation will be necessary with the inclusion of exemplars and worksheets to enable learners to practice these skills before applying them to their own work. Learners will need to feel confident with the concepts of reliability, validity and bias etc before attempting to apply these issues to the data they gathered previously. The clinical iceberg model can be used to demonstrate how the data may be invalid due to the amount of unreported illnesses that do not appear in the statistics.

## SUGGESTED ASSESSMENT SCENARIOS AND TASK PLUS GUIDANCE ON ASSESSING THE SUGGESTED TASKS

The learning outcomes can be met through three assignments:

**P1** - The evidence for assignment 1 can be in essay format which describes the perspectives as well as explaining how they view health and ill-health. A simple description will not meet the requirements of P1.

**P2** and **M1** – The evidence for assignment 2 can be presented in a booklet format that explains each of the approaches in detail. The booklet could be aimed at people who are likely to visit a new health centre. Primary research can be used to help explain the approaches and relate theory to people's views. A simple description of the approaches will not meet the requirements of P2. The material should also include similarities and differences between the medical and social model in order to meet the requirements of M1.

**P3, M2** and **D1** – Assignment 3 could be a report covering three areas:-

Firstly patterns and trends researched by the learner should be presented and explained in order to meet the requirements of P3. The sociological explanations should then be outlined and compared to each other. This comparison should focus on patterns and trends chosen by the learner in order to meet the requirements of M2. Learners need to include an evaluation of the measurement of patterns and trends in order to meet the requirements of D1.

Criteria	Assignment title	Scenario	Assessment
P1 Soc	Sociological perspectives.	Your college have been asked by the local health service to investigate the need for a new health centre within the	Essay.  Booklet.
		college.  You have been asked to research the patterns and trends within your local area and to apply these to the different views of health and ill-health.	
P2, M1	Sociological approaches – the concepts of health and ill health.		
P3, M2, D1	Sociological approaches – patterns and trends in health and ill health.		Report.

While the unit may have been delivered through discussion and group work and the subsequent acquisition of notes and summaries, it is important that the learner is able to collate their notes and evolve them into a more holistic representation of their understanding. Understanding is key to this unit and any assessment scenario should draw this out and exemplify it. Presentation of notes and summaries from delivery exercises are unlikely to exemplify understanding adequately in this case.

#### **RESOURCES**

#### **Textbooks**

Michie, V., Morris, C., Baker, L. and Collier, F. (2011) *Level 3 Health and Social Care Diploma*; Hodder Education; ISBN 9781444120677

Nettleton, S., (2006) *The Sociology of Health and Illness; 2nd Edition*; Polity Press; ISBN: 9780745628288

Scott, J., (2006) *Sociology: the key concepts*; Routledge; ISBN: 9780415344067

Seamons, S., (2007) Applied Health and Social Care: Health and Social Care: A2 Student Book; OCR; OUP Oxford; ISBN 9781850082484

Senior, M., and Viveash, B., (1997) *Health and Illness (Skills-based Sociology)*; Palgrave Macmillan; 9780333662496

Sheaff, M., (2005) Sociology and Health Care: An Introduction for Nurses, Midwives and Allied Health Professionals; Open University Press; 9780335213887

Stretch, B., and Whitehouse, M. (2007) *Health and Social Care, book 1*; Heinemann, ISBN: 9780435499150

Taylor, S., and Field, D (2007) *Sociology of Health and Health Care; 4th Edition*; Wiley-Blackwell; 9781405151726

Waugh, C., Robinson, H., Thompson, V., and Swann, F., (2008) *OCR AS Sociology Student Book (OCR A Level Sociology)*; Heinemann, ISBN: 9780435467388

#### **Journals**

Sociology of Health and Illness Sociology Review

#### Websites

www.britsoc.co.uk The British Sociological Associationwww.dh.gov.uk Department of Healthwww.statistics.gov.uk Office for National Statistics

#### **DVDs**

Theory and methods – www.onlineclassroom.tv

Making sense of sociological theory – www.onlineclassroom.tv

Families and households – www.onlineclassroom.tv

Michelle Stanworth – Gender and Schooling – www.onlineclassroom.tv

Researching health – www.onlineclassroom.tv



#### **CONTACT US**

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