

## Course description

Most researchers in the medical and health sciences focus on health and disease, either directly or indirectly. But what do these basic concepts mean and what do they entail? Arguing that there is hardly a single answer to these questions, this course explores a variety of theories and perspectives on health, disease, sickness, and suffering. Specifically, the course will critically examine the various ways in which human health and disease is understood and engaged with in medicine and health sciences. By applying perspectives from philosophy, history, sociology, and anthropology the course aims to make you able to view medical and health research in a broader perspective, to see your research questions in new light, and to add to your abilities to interpret and understand data.

The course will investigate concepts, theories, and models of health and disease. In particular it will scrutinize various perspectives, knowledge systems, classification systems, and metaphors. The course will also investigate health management and governance, and analyze the relationship between power, interests, and gender in health and disease.

The course will use a combination of lectures, group work, video, and reflection notes in order to engage the participants in active reflection over basic concepts in health-related research. It will actively use participants own research projects as examples.

## Learning outcome

### Knowledge

This course will give you knowledge about

- various conceptions, definitions and explanations of health and disease
- historical perspectives on health and disease
- power and knowledge related to health and disease
- issues of equity and justice related to health and disease
- critical perspectives on health governance
- gendered perspectives on health and disease
- minority perspectives on health and disease
- critical perspectives on diagnoses and diagnostic systems
- critical perspectives on evidence and clinical guidelines related to health and disease
- anthropological and sociological perspectives on the body, health, and sickness

### Skills

This course will give you skills to

- identify and apply a range of perspectives in reflection on basic concepts in health care and the life sciences (such as health and disease)
- consider own and others' research questions and research undertakings in the light of critical theories
- draw on critical perspectives when analysing and interpreting data

### General competence

This course will give you knowledge and skills that are helpful in

- exercising theoretical reflexivity
- reflecting on your own research and placing it in a wider landscape of science
- maintaining a critical attitude to established conceptions and paradigms in the life sciences and in health care

## Lecturers

Eli Feiring, associate professor at Department of Health Management and Health Economics, UiO  
Jeanette H. Magnus, senior advisor, Management Section, Faculty of Medicine, UiO  
Kåre Moen, associate Professor - Department of Community Medicine and Global Health, UiO  
Nina K. Vøllestad, professor and head of Institute of Health and Society, University of Oslo.  
Eivind Engebretsen, Vice-Dean of Postgraduate Studies & Professor, Faculty of Medicine, UiO  
Marianne Lea, Postdoctoral Fellow - Section for Pharmacology and Pharmaceutical Biosciences, UiO  
Vegard von Wachenfeldt MD, Department of Community Medicine and Global Health, Faculty of Medicine, UiO.  
Carl Tollef Solberg, researcher, Centre for medical ethics, HELSAM, UiO.  
Bjørn Hofmann, professor, Institute for the health sciences, NTNU Gjøvik and Centre for medical ethics, HELSAM, UiO.

## Continuous reflection

Each day you are asked to reflect on the relevance of the topics for your own research. You will make reflection notes which can become valuable entries for your exam (essay).

## Reading list

Each participant should put together an individual reading list of 350 pages where at least 200 pages stems from the core reading list of the course. The reading list has to be submitted by the end of the lectures.

## Teaching

The course entails a mix of lectures, discussions, group work, and presentation of reflection notes.

## Examination

Take-home course exam: write an essay that discusses a specific topic (e.g., from your own research) in the light of the perspectives discussed in the course. The essay should be between 7 and 10 pages and be submitted before September 18 at 16.00. Use Times New Roman font size 12, line spacing 1.5). The topic of the essay has to be approved of in advance and the content has to be within the scope and stated learning outcome of the course.

## Course committee

Associate Professor Randi Opheim, Department of Nursing Science, HELSAM  
Associate Professor Eli Feiring, Department of Health Management and Health Economics, HELSAM.  
Associate professor Kåre Moen, Department of Community Medicine and Global Health, HELSAM.  
Professor Bjørn Hofmann, NTNU Gjøvik and Centre for medical ethics, HELSAM.

## Course leader

Professor Bjørn Hofmann, Institute for the health sciences, NTNU Gjøvik and Centre for medical ethics, HELSAM, UiO.

## Place

The course will be held in [Runde Auditorium R-105 at Domus Medica tilbygg, Sognsvannsveien 9.](#)

## Link:

<https://www.uio.no/studier/emner/medisin/med/MF9185/index.html>

## Course plan (preliminary)

	Monday 23.08.2021	Tuesday 24.08.2021	Wednesday 25.08.2021	Thursday 26.08.2021	Friday 27.08.2021
Main Topic	Concepts of health and disease	Perspectives on health and disease	Perspectives on health and disease (broad)	Power and knowledge in health and disease	Equity and justice in health and disease
09.00 – 09.45	Introduction		Presentation and discussion of reflection notes		
10.00 – 10.45	What is health and what is disease? <i>Bjørn Hofmann</i>	Perspectives on disease: Disease, Illness, Sickness. <i>Bjørn Hofmann</i>	Gender-related disease and gendered perspectives on health and disease. <i>Bjørn Hofmann</i>	Knowledge and power in handling health and disease <i>Eivind Engebretsen</i>	Health, disease, dysfunction, disability in law and in clinical practice. <i>Vegard von Wachenfeldt</i>
11.00 – 11.45	Concepts at work: the power of health and disease <i>Bjørn Hofmann</i>	Experiencing illness and well-being <i>Bjørn Hofmann</i>	The transition from disease to health: de-diagnosing. <i>Marianne Lea</i>	Critical perspectives on diagnoses and diagnostic systems. <i>Bjørn Hofmann</i>	Responsibility for health and disease: personal, professional, or public? <i>Eli Feiring</i>
11.45 – 12.30	Lunch				
12.30 – 13.15	How to define health and disease? Concepts, definitions, and theories <i>Bjørn Hofmann</i>	Valuing health and disease (ethics). <i>Bjørn Hofmann</i>	Biological, biomedical, and clinical perspectives on health and disease. <i>Nina K. Vøllestad</i>	Enhancing health and expanding disease: The dynamics of health and disease. <i>Bjørn Hofmann</i>	Measuring Health and Disease in a global and local perspective. <i>Jeanette Magnus</i>
13.30 – 14.15	What is the relationship between health and disease? <i>Bjørn Hofmann</i>	Severity as a moral qualifier of disease. <i>Carl Tollef Solberg</i>	Experiencing health and disease: anthropological perspectives. <i>Kåre Moen</i>	The practical making of health and disease: the role of technology. <i>Bjørn Hofmann</i>	Disease, prestige, stigma, priority, and typicality <i>Bjørn Hofmann</i>
14.30 – 15.15	Group work on the concepts of health and disease	Group work on the various perspectives of health and disease	Group work on the various perspectives of health and disease	Group work on the power of knowledge about health and disease	Health and disease: critical perspectives, now and in the future <i>Bjørn Hofmann</i>
15.30 – 16.00	Summary of group work	Summary of the day	Summary of the day	Summary of the day	Information about exam

## Literature

Based on the literature list below, course participants will set up their own reading lists for their participation in this course, choosing 400 pages from the following literature.

Album, Dag, Lars EF Johannessen, and Erik B. Rasmussen. "Stability and change in disease prestige: A comparative analysis of three surveys spanning a quarter of a century." *Social Science & Medicine* (2017).

Aronowitz R. Framing disease: an underappreciated mechanism for the social patterning of health. *Social science & medicine*. 2008;67(1):1-9.

Aronowitz R. *Making Sense of Illness: Science, Society, and Disease*. New York: Cambridge University Press, 1998.

Boorse C. A Second Rebuttal on Health. *Journal of Medicine and Philosophy* 2014; 39:683-724.

Boorse C. On the Distinction Between Disease and Illness. *Philosophy and Public Affairs* 1975;5: 49-68.

Carel H. Can I Be Ill and Happy? *Philosophia*, 2007; 35: 95–110

Clouser KD, Culver CM, Gert B. Malady. In: Almeder RF, Humber JM (eds). *What is a disease?* Totowa, NJ: Humana Press, 1997: 173-217. (Følgende kan være lettere å få tak i: Clouser, K. D., Culver, C. M., & Gert, B. (1981). *Malady: a new treatment of disease*. *Hastings Cent Rep*, 11(3), 29-37.)

Conrad, Peter, and Kristin K. Barker. "The social construction of illness key insights and policy implications." *Journal of health and social behavior* 51.1 suppl (2010): S67-S79.

Csordas, Thomas J. "Embodiment as a Paradigm for Anthropology." *Ethos* 18.1 (1990): 5-47.

D'Amico R. Is disease a natural kind? *Journal of Medicine and Philosophy* 1995; 20: 551-69.

Doust J, Vandvik PO, Qaseem A, Mustafa RA, Horvath AR, Frances A, et al. Guidance for Modifying the Definition of Diseases: A Checklist. *JAMA Internal Medicine*. 2017;177(7):1020-5.

Feiring E. Lifestyle, responsibility and justice. *Journal of Medical Ethics* 2008;34:33-36.  
<http://dx.doi.org/10.1136/jme.2006.019067>

Fulford KW. 'What is (mental) disease?': an open letter to Christopher Boorse. *Journal of Medical Ethics* 2001;27:80–85.

Gabbay J, Le May A. Evidence based guidelines or collectively constructed "mindlines?" Ethnographic study of knowledge management in primary care. *BMJ* 2004 Oct 30;329(7473):1013.

Greenhalgh, Trisha. Evidence-based medicine: A movement in crises? *BMJ*, 2014;348(3725)

Grue, Jan. Discourse analysis and disability: Some topics and issues. *Discourse & Society* 2011;22 (5):532-546.

Haldar, Marit; Engebretsen, Eivind & Album, Dag (2015). Legitimizing the illegitimate: How doctors manage their knowledge of the prestige of diseases. *Health*. ISSN 1363-4593. . doi: 10.1177/1363459315596798

Hesslow G. Do we need a concept of disease. *Theor Med* 1993; 14, 1-14.

Hofmann B. Complexity of the concept of disease as shown through rival theoretical frameworks. *Theoretical Medicine and Bioethics* 2001; 22(3): 211-37.

Hofmann B. Disease. In: ten Have H, ed. *Encyclopedia of Global Bioethics*: Springer International Publishing; 2015:1-8

Hofmann B. *Hva er sykdom?* Oslo: Gyldendal Akademisk, 2014. (229 sider)

Hofmann B. Medicalization and overdiagnosis: different but alike. *Medicine, health care, and philosophy*. 2016;19:253-264.

Hofmann B. Simplified models of the relationship between health and disease. *Theoretical Medicine and Bioethics* 2005; 26(5): 355 - 377.

- Hofmann B. Suffering: Harm to bodies, minds, and persons. Handbook of the Philosophy of Medicine. Berlin: Springer; 2015.
- Hofmann B. Looking for trouble? Diagnostics expanding disease and producing patients. Journal of evaluation in clinical practice. 2018;24(5):978-82.
- Hofmann B. Expanding disease and undermining the ethos of medicine. Eur J Epidemiol. 2019;34(7):613-9.
- Khushf G. Expanding the horizon of reflection on health and disease. Journal of Medicine and Philosophy 1995; 20: 461-473.
- Kingma, E. Naturalism about Health and Disease: Adding Nuance for Progress. Journal of Medicine & Philosophy 2014; 39.6: 590-608.
- Leslie, Charles. "Medical pluralism in world perspective." Social Science & Medicine. Part B: Medical Anthropology 14.4 (1980): 191-195.
- Lie, Anne Helene Kveim (2012). Sykehistorienes eksempelbruk, I: Ellen Marie Krefting; Anne Eriksen & Anne Birgitte Rønning (red.), Eksemplets makt. Kjønns, representasjon og autoritet fra antikken til i dag. Spartacus. ISBN 9788230400890. Kapittel VIII. s 203 – 229
- Lock, Margaret, and Patricia Kaufert. "Menopause, local biologies, and cultures of aging." American Journal of Human Biology 13.4 (2001): 494-504.
- Marinker, M. Why make people patients? J Med Ethics 1975; 1(2), 81-84.
- Moynihan R. Medicalization. A new deal on disease definition. Bmj. 2011;342:d2548.
- Mol, Annemarie. "The logic of care." Health and the problem of Patient Choice (2008).
- Mol, Annemarie. The body multiple: Ontology in medical practice. Duke University Press, 2002.
- Nickel B, Barratt A, Copp T, Moynihan R, McCaffery K. Words do matter: a systematic review on how different terminology for the same condition influences management preferences. BMJ open. 2017;7(7):e014129.
- Nord E. Disability weights in the Global Burden of Disease 2010: unclear meaning and overstatement of international agreement. Health Policy, 2013; 111(1), 99-104.
- Nordby H. The analytic-synthetic distinction and conceptual analysis of basic health concepts. Medicine Health Care and Philosophy 2006; 9: 169–180.
- Nordenfelt L. The concepts of health and illness revisited. Med Health Care Philos. 2007;10(1):5-10.
- Rabinow, Paul. Artificiality and enlightenment: from sociobiology to biosociality. Blackwell Publishing Ltd, 2005.
- Rose, N. 'Normality and pathology in a biomedical age' *SOCIOLOGICAL REVIEW*, 2009; 57, SUPPL. 2: 66 - 83.
- Räikkä J. The social concept of disease. Theoretical Medicine 1996;17(4): 353-61. (8 sider)
- Risør, Mette Bech. "Illness explanations among patients with medically unexplained symptoms: different idioms for different contexts." Health 2009; 13.5: 505-521.
- Scheper-Hughes, Nancy, and Margaret M. Lock. "The mindful body: A prolegomenon to future work in medical anthropology." Medical anthropology quarterly 1987; 1.1: 6-41.
- Smith R. In search of "non-disease". BMJ 2002;324;883-5.
- Solbrække, K. N., Sjøiland, H., Lode, K. Gripsrud, B. H. Our Genes, Our Selves: Hereditary breast cancer and biological citizenship in Norway. Medicine, Health Care and Philosophy. 2017; 20(1) 89-103.
- Sontag S. Illness as Metaphor. New York: Farrar. Straus and Giroux, 1978. (35 sider)
- Tucker, Ian. "Towards the multiple body." Theory & Psychology 16.3 (2006): 433-440.
- Tveråmo A et al. En integrert forståelse av subjektive lidelser i klinisk praksis. Tidsskr Nor Legeforen nr. 22, 2014; 134: 2174 – 6

Undeland M, Malterud K. The fibromyalgia diagnosis - hardly helpful for the patients? *Scandinavian Journal of Primary Health Care*, 2007; 25: 250-255.

Wakefield JC. The Concept of Mental Disorder. *American Psychologist*, 1992; 47: 373–388.

Worall J, Worall J. Defining disease: much ado about nothing?' *Analecta Husserliana* 2001; 72, 33-55.

### **Additional reading:**

Aronowitz RA. *Making Sense of Illness: Science, Society, and Disease*. Cambridge University Press, Cambridge, U.K. and New York, 1998

Conrad P, Barker KK. The Social Construction of Illness: Key Insights and Policy Implications. *Journal of Health and Social Behavior*. 2010;51(1 suppl):S67-S79.

Eriksen TE, Kerry R, Mumford S, et al. At the borders of medical reasoning: aetiological and ontological challenges of medically unexplained symptoms. *Philosophy, ethics, and humanities in medicine* : PEHM 2013;8:11

Fabrega H, Jr. How psychiatric conditions were made. *Psychiatry*. 2007;70(2):130-153.

Greene J. *Prescribing by numbers. Drugs and the definition of disease*. Baltimore: Johns Hopkins University Press, 2006.

Hofmann, Bjørn. "How to Draw the Line Between Health and Disease? Start with Suffering." *Health Care Analysis* 2021; 29: 127–143.

Horwitz AV. *Creating Mental Illness*, Chicago: University of Chicago Press, 2002.

Horwitz, A. V. and J.C. Wakefield. *The Loss of Sadness*, New York: Oxford University Press, 2007.

Kahn J. *Race in a bottle: The story of BiDiI and racialized medicine in a post-genomic age*: Columbia University Press, 2013.

Katz, S. *Disiplining old age. The formation og gerontological knowledge*. University Press of Virginia, 1996.

Kingma, E. 2007. What is it to be healthy? *Analysis* 67:128–33.

Lindstrøm J A. Why Attention-Deficit/Hyperactivity Disorder Is Not a True Medical Syndrome. *Ethical Human Psychology and Psychiatry*.14; 2012.1; 61-73.

Lock M. *The Alzheimer conundrum: Entanglements of dementia and aging*. Princeton University Press, 2013.

Lupton D. *The imperative of health: Public health and the regulated body*. Vol 90: Taylor & Francis; 1995.

Magelssen, M., Nortvedt, P., & Solbakk, J. H. (2016). Rationing at the bedside: Immoral or unavoidable? *Clinical Ethics*, 11(4), 112-121. doi:10.1177/1477750916657664

Martin CM, Peterson C. The social construction of chronicity--a key to understanding chronic care transformations. *Journal of evaluation in clinical practice*. 2009;15(3):578-585.

Moynihan R. Medicalization. A new deal on disease definition. *Bmj* 2011;342:d2548

Mukherjee S. *The emperor of all maladies. A biography of cancer*. New York: Scribner, 2011.

Mukherjee S. *The gene: An intimate history*: Simon and Schuster, 2016.

Napier AD, Ancarno C, Butler B, et al. Culture and health. *The Lancet*. 2014;384(9954):1607-1639.

Nordenfelt, L. *On the Nature of Health: An Action-Theoretic Perspective*, 2nd edition, Dordrecht: Kluwer, 1995.

Rasmussen EB. Balancing medical accuracy and diagnostic consequences: diagnosing medically unexplained symptoms in primary care. *Sociology of health & illness* 2017 doi: 10.1111/1467-9566.12581

Reznek, L. *The Nature of Disease*, New York: Routledge, 1987.

Shilling C. Culture, the 'sick role' and the consumption of health. *British Journal of Sociology* 2002; 53: 621–638

Shim JK. *Heart-sick: The politics of risk, inequality, and heart disease*: NYU Press 2014.

Thagard. P. *How Scientists Explain Disease*, Princeton: Princeton University Press, 1999.

Tikkinen KA, Leinonen JS, Guyatt GH, et al. What is a disease? Perspectives of the public, health professionals and legislators. *BMJ Open* 2012;2(6).

Toombs SK. The Temporality of Illness: Four Levels of Experience. *Theor Med* 11, no. 3 (1990): 227-41.

Vogt H, Hofmann B, Getz L. The new holism: P4 systems medicine and the medicalization of health and life itself. *Med Health Care Philos.* 2016;19(2):307-23.

Wyller, V. B. (2014). *Give to the Doctor What Is Due to the Doctor!: Why "Fair Rationing at the Bedside" Is Impossible*: Oxford University Press.