

Inequitable, not invisible

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Abstract

Reviews the book, *Eliminating Inequities for Women With Disabilities: An Agenda for Health and Wellness* edited by Shari E. Miles-Cohen and Caroline Signore (see record 2016-04266-000). Miles-Cohen and Signore have edited an excellent resource that manages to capture the current status of women with disabilities and health care, including health provision, social economic, and cultural inequities that impact independent living and well-being. The authors of the individual chapters have developed reasoned, researched, and well-documented positions on their areas, and the book itself does a very good job of tying the different chapters together. Health care professionals and students in multiple disciplines, including medicine, psychology, disability studies, political science, physical and occupational therapy, social work, and many others, will find this book to be an excellent resource. It provides a snapshot of the detailed numbers defining the population and also the personal description of what well-being might look like. In addition, it offers concrete policy and other actions that can actually move the various fields (and society) forward in providing a more integrated, equitable care system for women with disabilities. (PsycINFO Database Record (c) 2017 APA, all rights reserved)

Full Text

General Content

Eliminating Inequities for Women With Disabilities: An Agenda for Health and Wellness is an ambitious volume that covers a wide range of important and timely issues for the discussed population. In 296 pages, the editors, Miles-Cohen and Signore, manage to bring together 13 chapters of substantive, research-based material on significant health and policy issues for a series of subpopulations that have in the past gotten limited to no attention. Without being too simplistic, under the general sections of Big Picture, Delivery of Care, Specific Populations, and Recommendations, the general focus of the book is on the challenges of quality health care provision in a very broad sense to include general medical, mental health, parenting, sexual health, and partner violence. The varied subpopulations include military veterans, youth, aging, women of color, and transgender, to name a few. The authors of individual chapters are scholars and researchers in their defined areas, actively engaged in current

studies. These three aspects, the health issues, the subpopulations, and the author/editor expertise, contribute to make this volume a successful and worthwhile set of ideas.

Inequities and Disability

The editors start the text with a detailed, well-documented chapter by Margaret A Nosek that lays out the numbers that describe the nature, significance, and scope of issues that relate to women with disabilities. Inequities are detailed in access to care, attitudes, social issues, and other numerous interactive complex variables. After parsing out some of the detailed and discouraging statistics concerning types of disability, demographics, and social issues/opportunities, Nosek brings us back to the conclusion that what makes equitable health care provision challenging is the inability in real-life situations to separate these multiple factors out in most individual cases. At this point, Nosek turns to the issue of empowerment and the previous literature, especially by Dr. Beatrice Wright (Dunn & Elliott, 2005), and the need for a focus on the person and not the person's condition. In particular, as she describes the need to regard the individual as an integrated whole living in context, she refers to Wright (1960) and the beginning of person-centered language and thought that began the shift from labels to environmental and social context and resilience, ending with what Novak argues is a necessary reduction in focus on symptom reduction and an increased focus on positive well-being. In a health care system that at the best of times is primarily focused on the former for all populations, this shift in emphasis becomes even more of an event for those facing inequalities in the system to begin with.

Subpopulations

The six chapters of *Eliminating Inequities for Women With Disabilities* that focus on specific populations of women with disabilities are some of the richest and most interesting portions of the book to read. From women of color to transgender to aging to military veterans, the authors of the selected chapters break down the health care, behavioral health care, and other medical needs, sources of inequity, issues related to well-being, and needs for continued and future research and action steps.

In addition to expected parameters of health, the editors expand the boundaries with a chapter on parenting with a disability. Following a discussion on barriers to sexual and reproductive health, along

with reproductive technology and adoption issues, there is a section on parenting with a disability that describes inequities and barriers for care as experienced by deaf mothers, mothers with mental health care needs, mothers with intellectual disabilities, and mothers with physical and sensory disabilities. In describing the disability culture and parenting, the chapter authors, Erin E. Andrews and Kara Ayers, summarize the issues quite nicely by reminding readers that independent living is not based entirely on being able to do everything alone but about exerting control and having as much autonomy as possible in all of life's roles, including parenting, and that this can be reflected in many ways, including adaptations, unconventional approaches, and assistance from others. Accomplishing this may require and integrated and cross-disciplinary care support.

Solutions to Inequity

Many books and many authors do an excellent job of pointing out problems and even making grand conclusions about what should be. In this particular volume, the editors also include a chapter that has a practical agenda (in that the suggestions are apparently "doable") with current systems and resources. Miles-Cohen and Signore break down the agenda into professional and public education, research and methodology, health care access and delivery, and health services policy. Each of these agenda sections has at least 15 or more concrete suggested actions that would facilitate moving toward a more equitable care system. Some certainly require more effort, time, and money than others, but in most cases, reallocation or equitable distribution would go a long way to creating the desired outcomes.

Summary

Miles-Cohen and Signore have edited an excellent resource that manages to capture the current status of women with disabilities and health care, including health provision, social economic, and cultural inequities that impact independent living and well-being. The authors of the individual chapters have developed reasoned, researched, and well-documented positions on their areas, and the book itself does a very good job of tying the different chapters together. Health care professionals and students in multiple disciplines, including medicine, psychology, disability studies, political science, physical and occupational therapy, social work, and many others, will find this book to be an excellent resource. It provides a snapshot of the detailed numbers defining the population and also the personal description of what well-being might look like. In addition, it offers concrete policy and other actions that can

actually move the various fields (and society) forward in providing a more integrated, equitable care system for women with disabilities.

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Details

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