

**Discussion Questions**  
**Disease, Disability, & Immortality: Hope & Hype Module**  
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### Health

1. What is health and why is it valued? Reflect on the *Lancet* Editorial "[What is Health: The Ability to Adapt](#)"?
2. All humans at some point in their lives, experience disability, either through injury or age-associated degeneration. How then can society promote health?
3. What is the connection in people's minds between some level of health and some level of social functioning – in school, family, work, politics, and civic life?

### Disability & Diversity

4. How should people who are not "healthy" or "normal" by some definitions think about themselves, and how should society think about their situation? Do the answers vary depending upon the characteristics of the health condition in question: physical, mental, emotional, and sensory? congenital or acquired? early-onset or late-onset? static or progressive? visible or invisible? ultimately fatal or not?
5. Is what we call a disability inevitably a disadvantage, a "handicap", or a problem, or does its impact upon a person's life depend upon non-medical facets of the society in which they are living?
6. Where does our knowledge of disability come from?
7. What information might we need to understand how people live with disabilities?
8. Do people attribute problems to their physical and behavioral characteristics, to the social environment, or to the interaction of body and environment?
9. How does disability intersect with other identities such as age, gender, and socioeconomic class?
10. Does the stage in life at which someone acquires an impairment (early in childhood or adolescence versus later) contribute to the difference in how people make sense of disability?
11. If everyone experiences disability at some point in their lives either through injury, infection, or age-related degeneration, can we view the range of abilities as a range of natural variation in the human population?
12. Does it make any sense to think of characteristics like spinal cord injury, diabetes, schizophrenia, Parkinson's disease, or cystic fibrosis with the same attitude we take toward variations in ethnicity, religion, height, gender, sexual orientation, or age? How do we as a society link disability with other forms of diversity/social justice, and is this appropriate?

### Healthcare & Policy

13. What is the difference between the medical and social approaches to health and how does this influence financial investments, social policies, and health policies?
14. How does the social model of health in the US differ from that of the UK?
15. Are the laws designed to provide adequate healthcare and social support to those living with disability adequate?
16. As technology and society changes, do these laws need to be updated or revisited?

17. Are there some conditions that could be prevented or supported by environmental, product, and lifestyle changes?
18. If a country is interested in promoting health, what actions could it or should it take to change conditions that cause harm to people's health? Why does society appear to be more interested in some therapies, such as stem cell research or genetic alteration, than in making safer products?
19. How do we avoid dangerous dichotomies that position approaches to public health as "either/or" regarding the social and medical approaches, cure and care, and hype and hope?

### **Stem Cell Research & Its Applications**

20. Are stem cell derived therapies more appropriate for some forms of disability than others? Why?
21. In terms of their biological potential, how do embryonic stem cells (ESCs) and adult stem cells compare?
22. In terms of their therapeutic potential, how do ESCs and ASCs compare? How do procurement, isolation, amplification, and administration play a role in these potentials?
23. In an age of remarkable scientific innovation, how can society provide hope for those seeking treatments and refrain from hype using the biomedical approach to health?
24. How can stem cell research move forward without neglecting efforts to provide care using a social model of health for those currently living with disease and disability?
25. As life expectancy continues to lengthen, how will stem cell research play a role in quality of life?
26. Is it appropriate for individuals to use stem cell transplant therapy to enhance their abilities, or lengthen their careers, as in the case of models, athletes, and those serving in the military?
27. Whose responsibility is it, to monitor the efficacy and safety of stem cells that can regenerate in a human body, especially if the donor and recipient are the same person? Is this a personal choice where individuals should exercise autonomy? What kind of information should be provided to inform their decision? How is this information gathered, shared, validated?