SOCY 5545: Medical Sociology*

TTH 12-1:15pm; Gasson 207

Spring 2017

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1 Course Description

1.1 Overview

Welcome to Medical Sociology! In this course we begin with the idea that we cannot understand the topics of health and illness simply by looking at biological phenomena and medical knowledge, but instead, we must also consider a variety of social, political, economic, and cultural forces. Medical sociologists use sociological perspectives and methods to understand topics such as: social meanings of illness; patterns in the distribution of health and illness; the ways people seek help for and manage their illnesses; the ways doctors, nurses, and patients interact with each other; the cultural, organizational, and economic functioning of various healthcare institutions; and social movements surrounding health, including the ways some deviant behaviors are “medicalized” while others are not. Sample questions we will discuss include: Why is it that poorer people are more likely than wealthier people to have health problems and shorter life expectancies? Why is it the case that, when faced with very similar circumstances, some people seek medical attention while others do not? What happens when these people come in contact with the medical system? As a society, how do our labels for “medical problems” change over time so that medical jurisdiction over a problem can expand or recede?

Throughout the course, emphasis will be placed on understanding health topics and issues through the sociological imagination. As a critical perspective, sociology is uniquely positioned to question existing conditions and analyze the social, political, economic, historical, and cultural forces which shape, define, and change human behaviors and experiences including health and illness. Students who successfully complete the course will be well prepared to take the Medical Sociology field exam.

1.2 Objectives

SOCY5545 is designed to address a range of intellectual issues, using a variety of methodolo-
gies, and to engage students in particular ways. These are discussed below:

- To provide students with a broad overview of medical sociology.

*This syllabus was influenced by Karen Lutfey’s 2005 syllabus for Sociology of Health and Illness at the University of Minnesota.
• To increase students’ awareness of cultural diversity by examining how issues such as gender, race, ethnicity, socioeconomic status, age, and sexual orientation shape health and illness in contemporary U.S. society and around the world.

• To expose students to a variety of methodological approaches and tools. By looking at a variety of points of view we are able to assess the relative strengths and weaknesses of various methods of analysis.

• To foster students’ critical thinking and writing abilities in their analysis of societal issues, and in their articulations of these issues. Students are expected to consider policy implications of medical sociology and other areas of sociology.

• To provide each student with the opportunity to write and polish a paper which she/he would be proud to show potential employers as a writing sample.

1.3 Course Communication

Please do not hesitate to email me (wen.fan@bc.edu) whenever you have questions. I will do my best to answer any questions within 24-48 hours of receipt. Please recognize, however, that response times may be delayed at high-volume periods during the semester. If you have a question for me, do not wait until the last minute. If you do not receive a reply from me within 48 hours, this is probably because you don’t need me to answer your question (please read the syllabus and any other assignment documents I have given you before emailing). Lastly, if you have an in-depth question, please come to office hours or email me to set up a meeting. I will NOT send extensive or in-depth reply emails.

1.4 Texts and Materials

Required:
Academic papers on Course Reserves (https://arc.bc.edu/reserves//courses/SOCY5545/01).

Recommended:

Background Reading:
Most readings assume some background in sociology. Students who have not had an undergraduate course in introductory sociology should read a basic textbook before the spring semester. Examples of these are:

2 Course Policies

2.1 Academic Integrity

I have no tolerance for cheating in any form. Such will earn the student an automatic zero. Academic misconduct includes (but is not limited to): cheating on exams; using material from the internet without citing it; plagiarizing any part of work done by someone else; and
submitting substantially similar work for two courses without consent. It is your responsibility
to familiarize yourself with the university’s policy on academic integrity: http://www.bc.
.edu/schools/cas/polisci/integrity.html. If you have any questions, always consult with
me.

2.2 Withdrawals
If you decide to discontinue the course for any reason, please make an official withdrawal.
If you fail to officially withdraw from a class which you are no longer attending, you may
receive an F on your permanent transcript. I WILL NOT GIVE INCOMPLETEs.

2.3 Absences
You are expected to come to class prepared to discuss the readings. If you should be absent
for unavoidable reasons, you must check with me before I consider allowing any make-up
work.

2.4 Classroom Conduct
Treat everyone in the class with respect. The classroom is an open forum for the expression of
thoughtful ideas. As you share your ideas, be attentive to the feelings and (potential) histories
of others, especially people from cultures or social groups other than your own. We are all
responsible for keeping discrimination, harassment, and intimidation out of the classroom.
Behave with common courtesy. Please turn off cell phones or other electronic devices that
may disrupt class. If you know you need to leave class early, it is less distracting for me if
you let me know before class starts, and then choose a seat close to the exit. Other disruptive
behaviors in class include (but are not limited to): using your laptop for purposes other than
note taking (BTW, do you know that laptop users perform more poorly in class than those
taking notes by hand? See this Scientific American article), engaging in personal conversations,
arriving late, making rude and sarcastic comments. I will remove from the class those whose
behavior is disruptive to learning.

2.5 Disability Statement
Boston College is committed to providing reasonable accommodations and integrated access
for students with disabilities to all available academic, social, and recreational programs and
activities. Appropriate support and referral services are provided by the Disability Services
Office, which serves students with hearing, visual, mobility, medical, and psychiatric disabili-
ties. If you are a student with a documented disability seeking reasonable accommodations in
this course, please contact Kathy Duggan, (617) 552-8093, dugganka@bc.edu, at the Connors
Family Learning Center regarding learning disabilities and ADHD, or Paulette Durrett, (617)
552-3470, paulette.durrett@bc.edu, in the Disability Services Office regarding all other types
of disabilities, including temporary disabilities. Advance notice and appropriate documenta-
tion are required for accommodations. If you are unsure whether or not Disability Services
are appropriate for your needs, please make an appointment with Disability Services for a
consultation.

3 Assessments and Grades
Your grade in this course will be determined by your performance on the following criteria.
Please note that I do NOT give extra credit assignments.
3.1 Readings and Participation

Each class several leading articles or chapters dealing with a particular topic are read and discussed in class. I will give an introductory lecture to place the readings in a broader context. Students should come prepared to analyze the day’s readings with respect to both substance and method and must participate actively in the discussion.

Assigned readings fall into two groups: (1) "core" readings, which are to be read by all students, and (2) "precis" readings, each of which is to be read by discussion leaders who will prepare and distribute a precis of the reading prior to each class. The exact rate of assignments will depend upon the course enrollment.

A precis is a summary that contains the essential details about theory, method, and findings. It is NOT a critique (save that for class discussion). For a 20-30 page article, a 1 page summary usually suffices. Precis should be uploaded to the class dropbox folder by 11am of the day prior to each class meeting—that is, by 11am Monday or Wednesday morning. All members of the class are responsible for reading each precis and being prepared to raise and answer questions about each precis as well as the core readings.

Each week a team of 2 students will serve as discussion leaders. The responsibilities of the team include: (1) to write the precis for the week; (2) to prepare a brief oral introduction of the readings for the purposes of initiating the class discussion; and (3) to prepare a set of questions that will guide class discussion. For the most part it is not the responsibility of the team to lecture to the class. Rather, the team’s responsibility is to keep the discussion going and to make sure that the key aspects of the readings are covered. Conversely, students who are not discussion leaders in a given week have the same responsibility as the leaders to read and be prepared to discuss the week’s core readings.

Given that student participation is vital to the learning experience, part of your final grade will be based on class participation. You earn participation points by attending class, writing precis, actively participating in group activities, and making thoughtful contributions to class discussions. Students with excessive, unexplained absences (i.e., more than 3 classes missed) risk losing their participation grade altogether, as do students who routinely show up late and/or unprepared for class. Readings and participation are worth 40 points (precis/discussion leader 15 points, in-class discussion 15 points, attendance/participation 10 points).

3.2 Paper

You are expected to produce one 20-30 page (excluding references) double-spaced papers (12 font, Times New Roman, 1 inch margins). This paper is designed to offer you the opportunity to demonstrate your mastery of a particular area in medical sociology and exploration of current issues in that area. You will choose an area of interest (most likely from the course areas of interest) for your paper. The goal will be to move your own interests and work forward in ways that articulate with the subject matter we are addressing. This can involve providing either a broad overview or investigating a specific substantive topic. For example, a literature review of a particular health-related construct, theory, or issue; policy development around health-related institutional arrangements; current states of health inequalities; the culture differences around health risks and behaviors, etc. A process of peer reviewing will be used to improve your papers and facilitate the paper-writing process. Students will comment on other students’ paper drafts. Timely participation in this process is expected and will be graded.

Specifically, you will write two versions of the paper and review one other paper. The first draft of your paper should be 8-10 pages long; the final draft of your paper should be 20-30 pages long.

- Rough draft: The rough draft of the paper is due on March 14th. Bring two copies of the
rough draft of your paper to class. You will turn one copy in to me, and you will turn one copy in to a "peer reviewer" in the class. The rough draft will be worth 10 points.

• Peer review draft: You will review one other paper and provide constructive comments and critiques. This review will be worth 10 points, and will be due one week after the rough draft (March 23rd).

• Final draft: You will revise your paper and turn in a final draft on May 2nd. The final paper will be worth 30 points. To receive full credit, attach a copy of the peer review to your final paper. You may provide additional comments explaining why you did or did not choose to incorporate your comments from me and/or your peer reviewer.

Clearly indicate the date and your name on the first page of your paper. For late papers, a penalty of 10% will be applied for each day that the paper is late.

Suggestions for the paper:

• Pick a topic in which you are really interested.

• To find a topic, go to the library and browse through recent issues of journals such as: Journal of Health and Social Behavior, Social Science & Medicine, Demography, Sociology of Health & Illness, etc.

• If the topic is big, focus on a very small part of it. I can help you narrow it down.

• The deadlines are for your benefit, not mine. The more opportunities you have to get input on your paper and to revise it, the better it will be.

3.3 Book Review

Read a book (of your choice or from the recommended list below) on a topic related to this course. Write a brief (1 page, single-space) review, incorporating concepts and theories discussed in class and found in the readings for this course. Note this is not a book report where you tell me what the book said and whether or not you liked it. This is a critique of the book in which you briefly summarize the contents then criticize parts of the book. Each student will give a brief (5-8 minutes) oral review of the book in class. Book review is worth 10 points.


Yes, there are a lot of assignments. I want you to get your money’s worth out of undergraduate/graduate school! If you keep up, you’ll do fine. However, that doesn’t mean you’ll like it. If you don’t like this style of teaching and the amount of required work, you’ll be happier if you take a different course.

3.4 Grading

Letter grade assignment: Out of a possible 100 points,

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<th>Score Range</th>
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<td>92.50+</td>
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<tr>
<td>A-</td>
<td>89.50-92.49</td>
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<td>B+</td>
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4 Important Dates to Remember

<table>
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<tr>
<th>Date Due</th>
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<tbody>
<tr>
<td>3/14</td>
<td>Paper (rough draft)</td>
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<tr>
<td>3/23</td>
<td>Paper (peer review draft)</td>
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<tr>
<td>5/2</td>
<td>Paper (final draft)</td>
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5 Readings

The following schedule is tentative.
SECTION 1
In this section of the course, we begin by providing a broad overview of the field of medical sociology, including its historical origins, theoretical approaches and methodological traditions.

Week 1
January 17 Welcome and Course Overview
- Lecture: introduction; course logistics; requirements; expectations
- Readings: syllabus

January 19 Introduction to Medical Sociology
- Lecture: overview of the scope of medical sociology; health differentials over time and across populations; why social characteristics matter for health; relations with other disciplines (demography, epidemiology)
- Readings:
  - Chapters 1 and 2 in MS.

Week 2
January 24 Key Theories (I)
- Lecture: paradigm shift; Durkheim’s suicide research; social conditions as fundamental causes of disease
- Core Readings:
- Precis Readings:
January 26 Key Theories (II)

- **Lecture**: stress process theory; health lifestyle theory

- **Core Readings**:
  - Chapter 5 in MS (“Stress” and “Social Factors and Stress”, pp. 122-129).

- **Precis Readings**:

Week 3

January 31 Key Theories (III)

- **Lecture**: life course theory; age patterns in morbidity and mortality

- **Core Readings**:
  - Chapter 4 in MS (“Age”, pp. 91-94).

- **Precis Readings**:

February 2 Methodological Considerations

- **Lecture**: correlation vs. causation; ecological fallacy; research ethics (role of race in medical experimentation)

- **Core Readings**: 


**• Precis Readings:**


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**SECTION 2**

In this section, we turn to problems that are of central concern to medical sociologists. We examine various types of inequalities (e.g., by race, gender and socioeconomic status) in health exposures, health behavior, and health care utilization, and consider some theoretical explanations.

**Week 4**

**February 7 Social Inequalities in Health: Class**

- **Lecture**: class differences in morbidity and mortality; fundamental cause theory; self control; social comparison

- **Core Readings**:

  - Chapter 3 in MS.
  


- **Precis Readings**:


February 9 Social Inequalities in Health: Gender

- **Lecture**: gender differences in morbidity and mortality; hegemonic masculinity; sexual minority

- **Core Readings**:
  - Chapter 4 in MS (pp. 79-91).

- **Precis Readings**:

Week 5

February 14 Social Inequalities in Health: Race

- **Lecture**: racial differences in morbidity and mortality

- **Core Readings**:
  - Chapters 4 in MS (pp. 94-106).

- **Precis Readings**:

February 16 Social Inequalities in Health: Nativity

- Lecture: Hispanic paradox; assimilation; selection

- Core Readings:

- Precis Readings:

SECTION 3

In this section we delve into how people experience illness, seek help while they are sick, and engage in preventive behaviors. The ways doctors, nurses, and patients interact with each other will also be investigated.

Week 6

February 21 Illness Experience (I)

- Lecture: biographical disruption; narrative re-construction; role of social characteristics in decision-making and health experiences

- Core Readings:

- Precis Readings:
February 23 Illness Experience (II) and Help-seeking Behaviors

- **Lecture**: Illness management; self-care; the effect of socioeconomic status on people’s choices about going to a doctor

- **Readings**:
  - Chapter 7 in MS.

- **Precis Readings**:

Week 7

February 28 Patient-Provider Interaction

- **Lecture**: minority’s experiences in medical setting; providers’ assessments of patient compliance; barriers to following medical recommendations

- **Core Readings**:
  - Chapter 9 in MS.

- **Precis Readings:**

**SECTION 4**

In this brief section, we examine three important social contexts—work, family, and neighborhood—to understand how individuals are embedded within their larger social context and how that affects individual health.

**March 2 Work, Family and Health**

- **Lecture:** job loss; job strain; demands and control; endogeneity; flexibility; the stress of higher status

- **Core Readings:**

- **Precis Readings:**

**Week 8: No Class. Happy Spring Break!**
Week 9

March 14 Neighborhood and Social Support

- **Lecture**: selection vs. structuration; social support; neighborhood effect

- **Core Readings**:

- **Precis Readings**:

- **Due**: Paper drafts due.

SECTION 5

In this section we explore the institutional evolution of the current U.S. health care system and identify differences with other health care systems.

March 16 American Healthcare Industry (I)

- **Lecture**: types of healthcare service; the "Golden Age" of medicine; the managed care revolution; history of modern hospitals and ambulatory care

- **Core Readings**:
  - Chapter 14 in MS.

- **Precis Readings**:
Week 10

March 21 American Healthcare Industry (II)

- **Lecture**: rates of uninsured in the U.S. and their implications; policy options

- **Core Readings**:

- **Due**: Peer review comments on drafts due, in class. Be prepared to explain/elaborate upon your comments in small groups.

March 23 Healthcare Providers: Physicians

- **Lecture**: history of medical profession; changing characteristics of medical providers; physician socialization; physician authority; medical education

- **Core Readings**:
  - Chapters 10 and 11 in MS.

- **Precis Readings**:

Week 11

March 28 Healthcare Providers: Nurses, Physician Assistants, and Pharmacists

- **Lecture**: emergence of new medical professions; nursing shortages; gender and informal caretaking; long-term care for elderly

- **Core Readings**:
  - Chapter 12 in MS.
Week 12

April 4 Alternative Medicine and Culture

- **Lecture:** healthcare outside of formal medical arenas; why some groups are more likely to engage in alternative medicine

- **Core Readings:**
  - Chapter 13 in MS.

SECTION 6

Building on the concepts introduced in the previous sections, we now scrutinize the medicalization of mental health and deviant behavior in the United States.

April 6 Social Control and Deviance

- **Lecture:** stigma; labeling theory; discrimination

- **Core Readings:**
  - Chapter 8 in MS.

- **Precis Readings:**
Week 13

April 11 Medicalization of Deviance (I)

- **Lecture**: definitions of illness and patients’ social identities; historical changes in what counts as illness; social problems and the management of deviance

- **Core Readings**:

- **Precis Readings**:

April 13 Easter Weekend. No Class.

Week 14

April 18 Medicalization of Deviance (II)

- **Lecture**: contested illness; biomedicalization; control over women under medical model

- **Core Readings**:

SECTION 7

Finally, we deal with stability and change in the health arena.
April 20 Social Movement and Health

- **Lecture**: how health epidemics take shape and garner attention

- **Core Readings**:

- **Precis Readings**:

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Week 15

April 25 Health Policy and Reforms

- **Lecture**: importance of inequality and poverty for health policy; role of healthcare in domestic politics; summary of the course

- **Core Readings**:
  - Chapter 15 in MS.

April 27: No Class. Wen is attending PAA (Population Association of America) annual meeting.

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Week 16: Student Presentations

May 2: Student Presentations

- **Due**: Final paper due. Also, you must hand in the copy of your paper draft which is marked with the comments of your peer reviewer. The copy should be clearly identified with the name of the peer reviewer, as the peer reviewer will be graded on the quality of his/her comments.
May 4: Student Presentations