

SOC 141: Medical Sociology (82232)
Department of Sociology
Tufts University
Fall 2018

Instructor: Prof. Anjuli N. Fahlberg
Email: Anjuli.Fahlberg@tufts.edu
Class Meeting: T/Th 10:30-11:45 p.m.
Class Location: Sophia-Gordon, Multi-Purpose Hall
Office Hours: M/W 1:30-2:30 p.m. 116 Eaton Hall

Course Description

Although we often think of health and illness as factors of biology, lifestyle or back luck, who gets sick and with what is closely tied to social, economic, and political circumstances, as are the forms of treatment available to them. In fact, what we consider a sickness or a pathology varies over time and across cultures, suggesting that many conditions we view as diseases are in fact objects of contestation—and variation. Our overall objective in this course will be to dive deeply into examinations of the social determinants of health and illness. Throughout the course, we will examine theoretical and empirical reflections on the relationship between the social world and the body, drawing on readings about the US and other countries. We will pay particular attention to how class, gender, sexuality, and race/ethnicity/nationality influence exposure to illness and treatment options.

Course Objectives

By the end of the course, students should be able to:

1. Understand and explain several conceptual approaches to the sociology of health and illness;
2. Discuss the multiple ways in which history, politics, economics, and various social factors like gender, race, ethnicity, socioeconomic status, and age create and shape health inequalities;
3. Identify key dimensions for evaluating a nation's health care system and compare and contrast the United States with at least one other nation based upon these dimensions;
4. Describe several ways in which cultural context and differences across countries shape experiences of health and illness;
5. Connect sociological theories and concepts to the lived experiences of patients and health care practitioners.

Required Texts

1. Sontag, Susan. 2001. *Illness as Metaphor and AIDS and its Metaphors*. 2001. New York: Picador Press. (Used \$1.61)
2. Abraham, Laurie. 1994. *Mama Might be Better Off Dead: The Failure of Healthcare in Urban America*. (Used \$2)
3. Kidder, Tracy. 2009. *Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Could Cure the World*. Random House. (Used \$0.50)

4. Fadiman, Anne. 1997. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. FSG Classics. (Used \$1.50)

Course Policies

Classroom etiquette

Students are expected to actively participate in class discussions by critically engaging with the material and with key concepts, themes, and stories. Questions or comments that challenge traditional assumptions or normative values are encouraged, though these should always be provided in a thoughtful and respectful manner.

Technology in the classroom

Studies consistently show that the use of technology is distracting and contributes to students' low performance. Therefore, you should refrain from using laptops in class. If your reading materials are on your computer or tablet, you may refer to these during class discussions. However, the use of Facebook, email, Amazon, or any other such sites are NOT permitted. I also reserve the right to look at screens or to ask you to put away your laptop if it appears to be distracting. Cell phones should be on silent at all times, and students should not check their phones during class.

Food

Remaining engaged in class—alert, attentive, and participative—will make the class more interesting and productive for all of us. Students are therefore welcome to bring food and drinks, as these can be helpful to remaining alert. However, please do not be late due to waiting in lines to purchase food.

Plagiarism & Academic Integrity

Tufts holds its students strictly accountable for adherence to academic integrity. The consequences for violations can be severe. It is critical that you understand the requirements of ethical behavior and academic work as described in Tufts' Academic Integrity handbook. If you ever have a question about the expectations concerning a particular assignment or project in this course, be sure to ask me for clarification. The Faculty of the School of Arts and Sciences and the School of Engineering are required to report suspected cases of academic integrity violations to the Dean of Student Affairs Office. If I suspect that you have cheated or plagiarized in this class, I must report the situation to the dean.

The general rule on plagiarism is that you should cite any fact that is not widely known and any idea that is not your own—which will be much of what you write! Keep track of what you are reading and where you are obtaining your information, and become comfortable with including the authors' last name(s) and dates of publication after each "borrowed" fact or idea. Citing what you have read not only prevents you from inadvertently committing plagiarism, but also demonstrates to your reader that your writing is well-researched.

As part of this course, I will utilize TurnItIn in the Canvas learning management system to help determine the originality of your work. TurnItIn is an automated system which instructors can use to quickly and easily compare each student's assignment with billions of websites, as well

as an enormous database of student papers that grows with each submission. When papers are submitted to TurnItIn, the service will retain a copy of the submitted work in the TurnItIn database for the sole purpose of detecting plagiarism in future submitted works. Students retain copyright on their original course work.

Sources

We now suffer from an over-abundance of information, and it is easy to get overwhelmed by these sources and not know how to find them or which ones are credible. We will discuss this in greater detail in class, but students should be thoughtful about the credibility of each source. As a general rule, these sources are valid: books, scholarly articles, news articles by a mainstream newspaper, and reports issued by the government or major NGOs. You can find many of these on scholar.google.com. Invalid sources include: Wikipedia, blogs, and websites not affiliated with a credible organization.

Diversity and Accessibility

The diversity of students' experiences, perspectives, and abilities is essential to an informed and holistic classroom learning environment. Students with unique learning needs or who require special accommodations should speak to me at the beginning of the semester so provisions can be made accordingly. Please also contact the Student Accessibility Services office at Accessibility@tufts.edu or 617-627-4539 to make an appointment with an SAS representative to determine appropriate accommodations. Please be aware that, per Tufts University guidelines, accommodations cannot be enacted retroactively, making timeliness a critical aspect for their provision.

Communication

Please email me or stop me after class for any questions or concerns or to talk further about the course material. I will be happy to provide you additional ideas and resources relevant to your areas of interest. While out-of-class communication with me is not required to get a good grade, students who actively email or talk to their instructors are much more likely to understand the assignments, gain greater insights into the topics, and perform well.

I will make every effort to respond to email within 24 hours on weekdays and 48 hours on weekends and holidays. Feel free to email again if I have not responded within that time frame (and you need a response right away), as sometimes things fall through the cracks.

Office Hours

I hold regular office hours and all students are encouraged to attend. If you have classes during those times, come speak to or email me and we can find another time.

While it is not necessary to visit all professors all the time, getting into the habit of talking to your professors outside the classroom is very important and will, in the long run, contribute to your relationships with faculty, your own thinking and reflection, and your overall success as a student. Good reasons to come to office hours include: (a) there was something about the class you didn't understand or have additional thoughts you'd like to discuss; (b) you would like to talk about your class project and brainstorm ideas; (c) you are having personal challenges and are afraid they might impact your participation in the class; or (d) you would like to discuss any other academic/research/work issues that fall within my areas of study or experience.

Assignments

Attendance and participation	10%
Discussion facilitation	20%
Literature review	20%
Social media analysis	20%
Interview reflection	20%
Final reflection paper	10%
Total	100%

Late Policy

All written assignments should be uploaded to Canvas BY MIDNIGHT on the due date. **Late assignments will be docked 5% for each day late.**

- Exceptions may be allowed for major issues (severe illness, family emergencies, etc), but only if you get permission at least 24 hours before the deadline.
- Exceptions will NOT be granted for minor illnesses, travel, events, games, etc.
- Please speak to me ASAP if you have ongoing issues (i.e. chronic mental or physical health conditions) so we can put a plan in place BEFORE project deadlines.

Attendance and Participation (10%)

Discussion is critical to our best learning—and “un”learning. You are therefore expected to attend every class and to come prepared. You will be graded on (a) arriving on time, (b) not missing more than two classes, (c) paying attention during class and participating (aim for at least two comments per class), (d) making contributions that demonstrate you’ve done the readings and reflected on them, and (e) completing short class assignments. Please email me before class if you will be absent.

Discussion Facilitation (2 x 10% each = 20%)

Over the course of the semester, each student will facilitate discussion of the readings on two occasions (in partnership with another student, if class size allows). Discussion leaders will (a) provide a brief overview of the readings; (b) assemble a list of open-ended questions that connect the day’s readings to each other and to other course readings/discussions (5-8 questions) and (c) lead the group in discussing these questions for 30 minutes. I will assist in leading discussion when necessary, though you will be graded on your ability to sustain a strong intellectual group conversation. Questions should be submitted online before the start of class and emailed to me at least 30 minutes before the start of class if you’d like me to print them for you.

Class Project Description

In lieu of a research paper, each student will conduct their own primary data collection on a medical condition. The overarching goal of the project is for students to get a sense of the lived experiences of illness. While we often study an illness as a biological force, the people who have these (or treat them) are embedded in all sorts of social, political, and economic realities that affect their actual experiences of the biological condition. Throughout the project, you

should consider the effects of things like socioeconomic status, accessibility of transportation, relationships with medical providers, challenges with health insurance, the roles of family and friends, an individual's race, gender, age, etc on a person's experience with a medical condition.

The project centers around an interview you will conduct with someone who is either (a) suffering with a chronic or major mental or physical medical condition; OR (b) provides medical care to patients with a particular condition; OR (c) is an organizer/activist on a particular medical issue. You may select someone you know or you may reach out to someone at a relevant medical facility or organization. Once you have secured your interviewee, the other project components should be designed to address the major condition (or related conditions) with which they are dealing. By collecting primary and secondary data, you will be able to connect sociological concepts from the class to the historical, political, and social specificities of the condition and relate all of these to the lived human experience of illness and care. The project is divided into the following components:

1. Project Topic and Interview Subject (ungraded, due 9/16)

Please upload a one-paragraph description of your interview subject and the condition you plan to focus on for your class project. The purpose of this is to get you moving along in your project and to give me a chance to read and comment on your ideas for your project.

2. Literature Review (20%; 5-7 double-spaced pages; due 9/30)

Each student will select a topic within the field of medical sociology. You should select this topic based in part of your interests and in part on the person you would like to interview (more below). The literature review should be 5-6 pages in length (double-spaced) and should cite 8-10 *academic journal articles and books*, as well as relevant news sources. It should be divided into approximately three (3) themes that emerge from your articles. Please make sure your review comments on sociological issues, such as how experiences of this condition vary by race, class, gender, age, geography, culture, etc.

3. Social media analysis (20%; 5-7 double-spaced pages; due 10/21)

For this assignment, students should select 1-3 social media platforms (reddit, blog discussions, chat rooms, etc) where individuals suffering with the condition you've decided to focus on go to seek information and support. Plan to follow the platform for about 2-3 hours a week for two weeks, and take notes on the main themes you've noticed. Copy especially interesting quotes. For your write-up, please include the following:

- a) An introduction of the "condition" and why studying it is important.
- b) A description of the platforms you've observed and why you selected them.
- c) Three themes that emerged from your observations, each described in a separate section. This could include: what benefits people gain from participation; what types of issues get discussed regularly; common disagreements between participants; etc.
- d) A conclusion that summarizes the main points, what you have learned, what new questions you have, and what types of policy changes would help people with this condition.

4. Interview reflection (20%; 6-8 double-spaced pages; due 11/25)

In order to submit an interview reflection, you must first conduct an interview with your participant. The interview should run for 45-60 minutes, and it is highly encouraged that you

record it, provided you have consent from your interviewee. The goal of this project is to get first-hand insight into the lived, human experiences of a condition and how it interacts with other factors that we might overlook through a purely medical lens. Your reflection should include the following:

- a) An introduction, in which you explain who you have chosen to interview and why.
- b) How you determined which questions to ask, and whether the interview played out as you had anticipated. If not, what happened?
- c) A summary of this person's experience with this condition. Please include at least two block quotes from the interview, as well as a discussion of them.
- d) Three sociological themes that stood out from the interview, each discussed in their own separate section. Each theme should be supported by at least one block quote.
- e) A conclusion in which you offer an analysis of the main take-aways and suggestions for social or public policy changes.

5. Final reflection paper (10%; 6-8 double-spaced pages; due 12/14)

The purpose of the Final Reflection Paper is for you to bring together everything you have learned from the Literature Review, the Social Media Analyses, and the Interview Reflection. It should include the following:

- a) An introduction of the main "condition," including relevant statistics, issues, debates, and effects on society. Your introduction should also offer a summary of what you have learned from your various research projects and how it informs policy debates.
- b) Three themes that highlight what you have learned. Each should be its own separate section and should draw on data from your various research projects. Please also note how these compare and contrast to what you read in the articles and books.
- c) A set of 3-5 policy recommendations. In other words, what do society, specific institutions, or the government need to do differently in order to truly support people with this condition?
- d) A strong conclusion about how this project helped you think more deeply about the issue, how it has shaped the way you think of the condition, and how it helps you better understand illness and health from a sociological perspective.

Course Readings

Readings might change throughout the semester. Please check Canvas for announcements on changes.

Date	Readings and Assignments
Week 1	Welcome to Medical Sociology!
9/04	Introduction
9/06	<p>Thinking sociologically about medicine</p> <p>Mills, C. Wright. 1956. "The Promise of Sociology." in: <i>The Sociological Imagination</i></p> <p>Harari, Yuval Noah. 2017. <i>Homo Deus: A Brief History of Tomorrow</i>. Harvill Secker. Chp 1.</p>
Week 2	Health and illness, past and present
9/11	<p>A history of medicine in the U.S.</p> <p>Wright, Eric R. and Brea L. Perry. "Medical Sociology and Health Services Research: Past Accomplishments and Future Policy Challenges." <i>Journal of Health and Social Behavior, Volume 51(S), pages S107-S119.</i></p> <p>Ordoover, Nancy. 2003. <i>American Eugenics: Race, Queer Anatomy, and the Science of Nationalism</i>. U of Minnesota Press. Chp 1: "ImagiNation."</p>
9/13	<p>Sociological Theories of Medicine</p> <p>Bradby, Hannah. 2008. <i>Medical Sociology: An Introduction</i>. SAGE. Chp 3: "Defining health, defining disease."</p> <p>Allende, Salvador. 2006. "Chile's Medical-Social Reality – 1939 (Excerpts)." <i>Social Medicine</i> 1:5.</p> <p>Kleinman, Arthur. 1988. "The Vulnerability of Pain and the Pain of Vulnerability" in <i>The Illness Narratives</i>.</p>
9/16	Project Topic and Interview Subject Due
Week 3	The social construction of illness
9/18	Sontag, Susan. 2001. <i>Illness as Metaphor and AIDS and its Metaphors</i> . 2001. New York: Picador Press. 1-49.

	Conrad, Peter and Kristin K. Barker. 2010. "The Social Construction of Illness: Key Insights and Policy Implications." <i>Journal of Health and Social Behavior</i> , Volume 51(S), pages S67-S79.
9/20	Sontag, Susan. 2001. <i>Illness as Metaphor and AIDS and its Metaphors</i> . 2001. New York: Picador Press. 50-104. Link, Bruce G. and Jo C. Phelan. 2001. "Conceptualizing Stigma." <i>Annual Review of Sociology</i> 27:363-385.
Week 4	"Invisible" illnesses
9/25	Sontag, Susan. 2001. <i>Illness as Metaphor and AIDS and its Metaphors</i> . 2001. New York: Picador Press. 104-183.
9/27	Dumit, Joseph. 2006. "Illnesses You Have to Fight to Get: Facts as Forces in Uncertain, Emergent Illnesses." <i>Social Science & Medicine</i> 62(3):577-90. Blum, Linda M. 2015. <i>Raising Generation Rx: Mothering Kids with Invisible Disabilities in an Age of Inequality</i> . NYU Press. Chp 2: "Welcome to your Child's Brain."
9/30	Literature Review Due
Week 5	Inequalities in experiences of health and illness
10/02	Abraham, Laurie. 1994. <i>Mama Might be Better Off Dead: The Failure of Healthcare in Urban America</i> . Chps 1-3, 1-44. Braveman, Paula A., Catherine Cubbin, Susan Egerter, David R. Williams, and Elsie Pamuk. 2010. "Socioeconomic Disparities in Health in the United States: What the Patterns Tell Us." <i>American Journal of Public Health</i> 100(S1):S186-96. In class: <i>Unnatural Causes: Is Inequality Making Us Sick?</i> PBS Documentary, 2008.
10/04	Abraham, Laurie. 1994. <i>Mama Might be Better Off Dead: The Failure of Healthcare in Urban America</i> . Chps 4, 7, 8. Williams, David R. and Pamela Braboy Jackson. 2005. "Social Sources of Racial Disparities in Health." <i>Health Affairs</i> 24(2):325-34.
Week 6	Access to Healthcare
10/09	No class, Monday schedule

10/11	Abraham, Laurie. 1994. <i>Mama Might be Better Off Dead: The Failure of Healthcare in Urban America</i> . 10, 12, 14, Epilogue.
Week 7	Healthcare in the US and Beyond
10/16	Reid, T. R. 2010. <i>The Healing of America: A Global Quest for Better, Cheaper, and Fairer Health Care</i> . New York: Penguin Books. Prologue & Chps 1-3, (1-45). Department for Professional Employees. 2016. <i>The U.S. Healthcare System: An International Perspective</i> .
10/18	Class project: Comparing health care systems
10/21	Social Media Analyses Due
Week 8	Gender and Health
10/23	Snow, R. C. 2008. "Sex, Gender, and Vulnerability." <i>Global Public Health</i> 3(sup1):58–74. Inhorn, Marcia C. 2006. "Defining Women's Health: A Dozen Messages from More than 150 Ethnographies." <i>Medical Anthropology Quarterly</i> 20(3):345–78.
10/25	Intersectional approaches to reproductive health disparities Guest speaker: Dr. Madina Agénor
Week 9	Illness and care from a global perspective
10/30	Kidder, Tracy. 2009. <i>Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Could Cure the World</i> . Random House. Part I: 1-44. Maio, Fernando De. 2014. <i>Global Health Inequities: A Sociological Perspective</i> . Macmillan International Higher Education. Chp 2: "Understanding Global Health."
11/1	Kidder, Tracy. 2009. <i>Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Could Cure the World</i> . Random House. Part II: 45-122. Farmer, Paul. 2004. "An Anthropology of Structural Violence." <i>Current Anthropology</i> 45(3):305–25.
Week 10	NGOs and International Medical Providers
11/6	Kidder, Tracy. 2009. <i>Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Could Cure the World</i> . Random House. Part III: 123-178.

	Zanotti, Laura. 2010. "Cacophonies of Aid, Failed State Building and NGOs in Haiti: Setting the Stage for Disaster, Envisioning the Future." <i>Third World Quarterly</i> 31(5):755–71.
11/8	Kidder, Tracy. 2009. <i>Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Could Cure the World</i> . Random House. Part V: 239-298. Zola, Irving Kenneth. 1973. "Pathways to the Doctor—From Person to Patient." <i>Social Science and Medicine, Volume 7, pages 677-689, also reprinted in</i> Phil Brown, ed. (1996) <i>Perspectives in Medical Sociology</i> . Waveland Press, Inc.
Week 11	Providers and the Culture Gap
11/13	Fadiman, Anne. <i>The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures</i> . FSG Classics. Chps 1-5, 1-59. Ackerknecht, Erwin H. and Lisa Haushofer. 2016. <i>A Short History of Medicine</i> . JHU Press. Preface: Why Medical History? (xix-xxiii)
11/15	Fadiman, Anne. <i>The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures</i> . FSG Classics. Chps 6-9, 60-118. Brawley, Otis Webb, M.D. (with Paul Goldberg). <i>How We Do Harm: A Doctor Breaks Ranks About Being Sick in America</i> .
11/18	Interview Reflections, Soft Deadline
Week 12	The Lives of Patients
11/20	Fadiman, Anne. <i>The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures</i> . FSG Classics. 119-224.
11/22	Thanksgiving Break
11/25	Interview Reflections, Hard Deadline
Week 13	Current Issues
11/27	On death and dying Fadiman, Anne. <i>The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures</i> . FSG Classics. 250-288.

	Gawande, Atul. 2014. <i>Being Mortal: Medicine and What Matters in the End</i> . Picador.
11/29	<p>The opioid crisis</p> <p>Hampton, Ryan. 2018. <i>American Fix: Inside the Opioid Addiction Crisis - and How to End It</i>. St. Martin's Press. Intro, Ch 1, 5, 6.</p> <p>Winnefeld, James. 2017. "No Family is Safe from this Epidemic." <i>The Atlantic</i>, November 29.</p>
Week 14	Support and policy movements in health care
12/4	<p>Brown, Phil and Stephen Zavestoski. 2004. "Social Movements in Health: An Introduction." <i>Sociology of Health & Illness</i> 26(6):679–94.</p> <p>Pitts, Victoria. 2004. "Illness and Internet Empowerment: Writing and Reading Breast Cancer in Cyberspace." <i>Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine</i> 8(1):1636–1636.</p> <p>Beck, Julie. 2017. "The Elegant Way Online Social Networks 'Heal' After a Death." <i>The Atlantic</i>, April 26.</p>
12/6	<p>Maio, Fernando De. 2014. <i>Global Health Inequities: A Sociological Perspective</i>. Macmillan International Higher Education. Chp 7: "Reducing Health Inequities."</p> <p>Castillo, Jacqueline, Lydia Nicholas, Rachel Nye, and Halima Khan. 2017. <i>We Change the World: What Can We Learn from Global Social Movements for Health?</i> Nesta.</p>
12/14	Final Reflections DUE