COURSE DESCRIPTION

This course focuses on the sociological aspects of health and illness in society. As a student in this course, you have an opportunity to examine and discuss several unique contributions of medical sociology. These include:

1. Social construction of illness and medical knowledge;
2. Social epidemiology;
3. Study of the sick role and health and illness experience;
4. Study of medicine as a profession; and
5. Cross cultural comparisons of health care systems.

The course design assumes active learning and critical thinking. Class assignments serve as a guide to the subject matter of the discipline as well as a stimulus to individual growth. Rather than being a passive recipient of information provided by the instructor (me) or by textbooks, you (the student) will participate in formulating questions, generating hypotheses, gathering information, and assessing conclusions. In addition to the scholarly and scientific literature (which is important to us and we will read) you should learn a great deal from your own experience, from reports of various media, from the results of your own investigations, and from discussions with your classmates.

COURSE OBJECTIVES

Generally, the course hopes to foster students’ critical thinking skills. To this end, the course is designed to:

1. Provide students with material concerning different points of view on social-medical issues/conflicts.
2. Help students apply the sociological perspective and its relevance to vital issues in society.
3. Encourage the application of critical sociological thought to divergent points of view concerning these issues.
4. Develop students’ ability to identify data.
5. Distinguish between bias and reason.
6. Distinguish between fact and opinion.
8. Evaluate sources of information.
9. Recognize ethnocentrism and stereotypes.
10. Recognize deceptive arguments.

Upon completion of the course, students should be able to:
1. Analyze and discuss the health care system of the U.S.
2. Distinguish between prevalence and incidence of disease.
3. Describe the demographic and epidemiologic transitions.
4. Describe how culture can influence the definition of health and illness.
5. Discuss how one’s social position (such as class, race/ethnicity and gender) can influence one’s health and illness experience.
6. Identify and apply sociological concepts and theories to the institution of medicine in society.

COURSE REQUIREMENTS

Required Book:

In addition, materials will be handed out in class.

The course readings are listed below and are divided into sections. Read the articles with a critical eye, trying to understand and evaluate the author's thesis. I have given you a few questions to ponder for each assigned reading. You may read at a comfortable pace, but I expect you to have read the appropriate readings for a section by the time we begin discussing it in class. This will make the course a richer experience for all.

EVALUATION

There will be two major exams (mid-term and final, parts of which are “take home”), two fieldwork assignments (to be distributed later) and several in-class and homework assignments and in-class quizzes. The (take-home) exams require 1) appropriate application of concepts and data; 2) integration of course material into concise formulations; and 3) the delineation and representation of differing points of views and gaps in knowledge.

The fieldwork assignments should allow you to use your creativity and sociological imagination. Fieldwork requires making observations in the “field”/real life and writing a description and analysis of those observations. There are several options from which to select for each assignment. These options will be distributed in class and posted on Blackboard.

In terms of grading, keep this in mind. Clarity, completeness, creativity, and critical thinking each contribute to moving a grade from fair (C) to good (B) to excellent (A). Marginal work will be assigned a D grade. Unsatisfactory work will be returned to be redone. Incomplete work will be assigned an F grade. All work is evaluated based on the following criteria:

Excellent work. Demonstrates comprehensive command of the theories and principles from the course, exceptional ability to apply concepts, and superior ability to
creatively and appropriately organize and express ideas.

**Good work.** Demonstrates solid command of the theories and principles from the course, ability to apply concepts with only minor problems, and good organization and expression of ideas.

**Fair work.** Demonstrates acceptable command of the theories and principles from the course, basic ability to apply concepts, and limited ability to organize and express ideas.

**Unacceptable work.** Demonstrates lack of command of the subject matter, unable to appropriately and consistently apply concepts, and inconsistent use of format to organize ideas.

In summary:

1. Class participation (homework, reaction papers, quizzes, etc.) 25%
2. Mid-term “take home” exam 25%
3. Two field assignments 25%
4. Final “take home” exam 25%
   TOTAL 100%

Please note the following explanations:

**Class participation and preparation.** For each class session one of the assigned readings will be featured for discussion. During the semester, students randomly will be asked to give a synopsis of the reading and offer any comments about it. This synopsis will serve as the class introduction for our discussions. Respect for each other is expected during our class discussions. Occasionally, you will be asked to react in writing to the assigned article. In addition, the class will have occasional exercises and quizzes and homework.

**Take home exams.** The exam questions will be based on the readings and lecture materials. For the take home parts of the mid-term and final exams you may use your books and any other appropriate materials (properly cited using ASA protocol). Your work, however, must be your own. All responses must be typed, double-spaced and include a title page.

**Class Attendance.** Since this course is designed as a seminar course, your attendance is very important. Attendance records will be maintained and considered as part of your grade. If you do miss a class, it is the student’s responsibility to inquire about missed work.

**DROPPING A CLASS**

I hope no student needs to drop this course. Events sometimes occur, however, that make dropping a course necessary or wise. The University has set **November 15, 2013** as the last day to drop a course for the semester with an automatic grade of “W.”

**ACADEMIC ETIQUETTE AND HONESTY**

Academic etiquette is required in universities to insure an atmosphere conducive
to learning. Universities expect students to demonstrate a high level of maturity, self-direction and acceptable social behavior in and out of the classroom. In any class, an individual can feel anonymous and his/her behavior may seem irrelevant. As a result, an individual may feel that his/her talking with a neighbor, using a cell phone, leaving early or arriving late will not matter. Such actions, however, are distracting for both other students and the instructor. My job is to provide the best learning environment possible. If a student’s behavior interferes with others’ learning in the classroom, the student may be asked to leave the classroom.

As discussed in the college catalog, students are expected to demonstrate academic honesty. All forms of cheating, forgery, or plagiarism (presentation of the work of another as one’s own) are grounds for disciplinary action.

ACADEMIC ADVISING
The College of Arts and Humanities requires that students meet with an Academic Advisor as soon as they are ready to declare a major. The Academic Advisor will set up a degree plan, which must be signed by the student, a faculty mentor, and the department chair. The College's Academic Advising Center is located in Driftwood 203E, and can be reached at 825-3466.

ADA
The Americans with Disabilities Act (ADA) requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you believe you have a disability requiring an accommodation, please contact the Disability Services Office at (361) 825-5816 or visit the office in Driftwood 101.

GRADE APPEAL PROCESS
As stated in University Rule 13.02.99.C2, Student Grade Appeals, a student who believes that he or she has not been held to appropriate academic standards as outlined in the class syllabus, equitable evaluation procedures, or appropriate grading, may appeal the final grade given in the course. The burden of proof is upon the student to demonstrate the appropriateness of the appeal. A student with a complaint about a grade is encouraged to first discuss the matter with the instructor. For complete details, including the responsibilities of the parties involved in the process and the number of days allowed for completing the steps in the process, see University Rule 13.02.99.C2, Student Grade Appeals, and University Procedure 13.02.99.C2.01, Student Grade Appeal Procedures. These documents are accessible through the University Rules Web site at http://www.tamucc.edu/provost/university_rules/index.html. For assistance and/or guidance in the grade appeal process, students may contact the Office of Student Affairs.
<table>
<thead>
<tr>
<th>DATE</th>
<th>CLASS TOPIC AND READINGS</th>
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<tbody>
<tr>
<td>9/3</td>
<td>INTRODUCTIONS</td>
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<tr>
<td>9/10+9/12</td>
<td>THE SOCIAL PRODUCTION OF DISEASE AND ILLNESS</td>
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<td><strong>C pp. 1-6 General Introduction</strong></td>
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<tr>
<td></td>
<td>Distinguish between the sociology of medicine and the sociology in medicine.</td>
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<td>How is medicine related to the structure of society?</td>
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<td>How have social changes resulted in changes in the nature of health problems?</td>
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<td>What factors make social science important for people in the health field?</td>
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<td><strong>C pp. 7-9 The Social Nature of Disease</strong></td>
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<td><strong>C pp. 10-23 McKinlay, Medical Measures and the Decline of Mortality.</strong></td>
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<td>What do you think of this explanation for the decline of mortality in the U.S.?</td>
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<td>What does it imply for health care spending priorities in the country and in less developed countries?</td>
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<td><strong>ASSIGNMENT I INSTRUCTIONS GIVEN IN CLASS</strong></td>
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<td>9/17+9/19</td>
<td>Fox pp. 1-17 (class handout; sick role section for later date)</td>
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<td>What is the connection between culture and disease processes?</td>
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<td><strong>C pp. 24-23 Who Gets Sick?</strong></td>
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<td><strong>C pp. 28-34  Syme and Berkman, Social Class, Susceptibility and Sickness</strong></td>
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<td>How do we eliminate the gap (mortality, morbidity, life expectancy) between the rich and the poor? Of the methods that you propose, which are the most likely to occur in the present political climate?</td>
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<td><strong>C pp. 34-45 Williams and Sternthal, Understanding Racial-ethnic Disparities in Health: Sociological Contributions</strong></td>
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<td>How can one account for the racial and ethnic disparities?</td>
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<td>How can one attempt to address this situation?</td>
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<td>9/24-9/26</td>
<td>C pp. 38-55 Waldron, Gender Differences in Mortality: Causes and Variation in Different Societies</td>
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<td>Which of the factor(s) do you think best explains the sex differences in mortality? Why?</td>
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<td><strong>C pp. 93-101 House, Landis and Umberson. Social Relationships and Health</strong></td>
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<td>Are social relationships important for health? Illustrate.</td>
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<td><strong>C pp. 117-122 Wilkinson and Pickett, Greater Equality: The Hidden</strong></td>
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Key to Better Health and Higher Scores
Do risks for mortality and morbidity vary by race and ethnicity? How can these risks be reduced? Do the researchers present convincing evidence for their conclusions?

**ASSIGNMENT I DUE on 9/26**

10/1+10/3 EPIDEMIOLOGICAL FOUNDATIONS

(Class handout) Rockett, Population and Health booklet
How does one discover the etiology of disease?
What is the epidemiological approach?
How do we define incidence and prevalence?
What are the advantages of retrospective and prospective studies?

**QUIZ OVER ROCKETT BOOKLET 10/1**

How does this study helps us understand Alzheimer's?
What type of epidemiological study is this?

10/8-10/10 SICK ROLE BEHAVIOR

(Class handout) FOX, pp. 17-33 The Social and Cultural Significance of Health and Illness
What do you think of the sick role concept?

ILLNESS BEHAVIOR

C pp.123-126, The Social and Cultural Meanings of Illness
C pp. 127-144, Saguy and Gruys, Morality and Health: News Media Coverage of Overweight and Eating Disorders.
C pp. 177-179, The Experience of Illness
C pp. 209-212, Frank, The Remission Society
What new concepts and theoretical frameworks do these articles introduce? What is illness behavior? How does each article illustrate the concept of illness behavior?

NOTE: MID-TERM TAKE HOME EXAM QUESTIONS WILL BE ISSUED.

10/15 PART I OF MIDTERM GIVEN DURING CLASS

10/17 PART II (“take home” part) OF MID-TERM EXAM DUE IN CLASS
10/22+10/24 THE SOCIAL ORGANIZATION OF MEDICAL CARE

C pp. 213-215, The Rise and Fall of the Dominance of Medicine
In your opinion, who should control health care? Why?
C pp. 216-221, Conrad and Schneider, Professionalization, Monopoly, and the Structure of Medical Practice
How has the medical profession managed to control medicine?
C pp. 222-233, Wertz and Wertz, Notes on the Decline of Midwives and the Rise of Medical Obstetricians
What is your reaction to this article? Does it give you any insight into the phenomena of racism, classism, and sexism? The author suggests that stereotypes and ethnocentrism played a role in the decline of midwives. Be able to explain.

**FIELD ASSIGNMENT 2 GIVEN**

10/29+10/31 C pp. 234+259, McKinlay and Marceau, The End of the Golden Age of Doctoring
What is happening to the ways doctors practice?
C pp. 260-269, Light, Countervailing Power: The Changing Character of the Medical Profession in America
To what power is Light referring? Who do you think will win in this power struggle? Who will lose?
C pp. 270-271, Other Providers In and Out of Medicine
C pp. 272-281, Reverby, A Caring Dilemma: Womanhood and Nursing in Historical Perspective
Who is caring? Who can do it?
CC pp. 282-298, Winnick, From Quackery to “Complementary” Medicine: The American Medical Profession Confronts Alternative Therapies
What is “complementary” medicine? How does the American Medical Profession confront alternative therapies? What is the current relationship between the medical profession and alternative therapies?

11/5+11/7 C pp. 355-356, Health Care Reform
C pp. 367-372, Callahan, Rationing Medical Progress: The Way to Affordable Health Care
C pp. 373-379, Light, Historical and Comparative Reflections on the U.S. National Health Insurance Reforms
What are some of the health care battles identified in these articles? Who do you think makes the most compelling arguments for health care reform? Why?

C pp. 380-382, Medicine in Practice
C pp. 383-393, Mishler, The Struggle Between the Voice of Medicine and the Voice of the Lifeworld
Who Controls the medical interview?
What is the “Struggle” identified by the author?
C pp.409-424, Timmermans, “Social Death as Self-fulfilling Prophecy”
What is the author’s main point? Does he provide convincing evidence for his conclusions?

11/12-11/14 CONTEMPORARY CRITICAL DEBATES

C pp. 479-481, The Relevance of Risk
What methods did the authors’ use? What were their main conclusions? Does obesity vary by social factors of the individual? Does obesity vary by geographical location?
What’s the author’s main point?
***ASSIGNMENT 2 DUE ON 11/12

C pp. 495-496, The Medicalization of American Society
To what does “medicalization” refer? Can you give some examples?
C pp. 432-441, Zola, Medicine as an Institution of Social Control
Do you agree or disagree with Zola’s position?

11/19+11/21+11/26 TOWARD ALTERNATIVES IN HEALTH CARE

C pp.539-542, Comparative Health Policies
C pp. 543-557, Light, Comparative Models of Health Care Systems
C pp. 489-501, Gabe, Continuity and Change in the British National Health Service
Is health care a right or a privilege?
How do Canada and Great Britain view health care?
What do you think of their systems?
Would such programs work in the U.S.? Why or why not?

11/28 NO CLASS-THANKSGIVING HOLIDAY - Gobble! Gobble!

12/3-12/4 TOWARD ALTERNATIVES IN HEALTH CARE

C pp. 580-582, Prevention Movements, and Social Change
C pp. 583-595, McKinlay, A Case for Refocusing Upstream: The Political Economy of Illness
According to McKinlay, what efforts would be most effective for improving health in the U.S.?
What is an embodied health movement? What is a “politcized collective illness identity”? What is the intersection of health inequalities and environmental justice?

12/10 NO CLASS - WORK ON FINAL EXAM

12/17 TAKE HOME FINAL DUE IN BH 338 BY 2:00 PM
LATE FINALS WILL NOT BE ACCEPTED