



UNC
COLLEGE OF
ARTS & SCIENCES

THE UNIVERSITY
of NORTH CAROLINA
at CHAPEL HILL

DEPARTMENT OF SOCIOLOGY

CAMPUS BOX 3210
155 HAMILTON HALL
CHAPEL HILL, NC 27599-3210

T 919.962.1007
F 919.962.7568
<http://sociology.unc.edu>

Date: October 24, 2017

To: Nick Siedentop

From: Kenneth (Andy) Andrews, Professor and Chair

RE: Proposal for Health and Society Minor

Health and Society Minor

The mission of the Health and Society undergraduate minor is threefold: 1) to provide students with an opportunity to examine contemporary population health patterns and trends characterizing US society and societies around the world, as well as sociologically-based explanations for those population health patterns and trends; 2) to provide students with an understanding of the social construction of health and illness in modern societies; and 3) to provide students with a grounding in sociological concepts and theories so that they can apply them to the study of population health. To accomplish this mission, the curriculum for this minor brings together courses focused specifically on linkages between health and society, along with courses focused on sociological concepts and theories. Together, this set of courses will provide students with insights into the ways that societies define health and illness and how social contexts are so important in influencing population health patterns and trends.

The minor meets the substantial demand of students for courses related to health from a sociological perspective. Our upper level courses related to health (SOC 422 and 469) always fill when offered, and we have found increasing demand for SOC 101 among students who are planning to take the Medical College Admission Test (MCAT). Our first offering of SOC 172 (Introduction to Population Health in the United States) in fall of 2017 filled to the 300-student capacity very quickly and had a waitlist. In addition, the Health and Society minor leverages the Sociology Department's faculty strength in the population health area and offers students opportunities to take classes from leading scholars. Building the Health and Society minor is a central component of our Department's strategic plan.

The Health and Society minor does not conflict with any other minors in the College of Arts & Sciences. The closest is the Medical Anthropology minor, housed in the Department of Anthropology. That minor "addresses the biological, cultural, and political-economic dimensions of health, illness, and healing historically and at present." It seems to focus extensive attention on micro issues of health and illness (e.g., healing, suffering) and does not focus attention on the population level, as will the Health and Society minor. Indeed, an important mission of the Health and Society minor is to examine contemporary population health patterns and trends characterizing US society and societies around the world, as well as the explanations for those patterns and trends; this is a much more macro approach in comparison to the Medical

Anthropology minor. The Medical Anthropology minor seems to focus attention on medical care as well (even as suggested by the title), while the Health and Society minor is specifically designed to focus on the larger societal issues of social context that result in health disparities in the United States and in many countries around the world. Clearly, there is space for a minor such as Health and Society that gives extensive attention to the structural forces that are so important for patterns and trends of population health and health inequality in modern societies.

While it is difficult to project the size of a new minor, we expect it to grow to 100-200 students per year over the next five years. This is based on the strong demand for our new lower-level population health course (SOC1 172) and multiple sections of our upper level health courses each semester that fill to capacity on a regular basis (approximately 48 students each).

We will accommodate advising using existing resources – the Director of Undergraduate Studies and a graduate student that assists with communications and advising for Sociology. If the minor grows well beyond our initial expectations, we will revisit this plan and seek to develop a model along the lines of the Social and Economic Justice (SEJ) minor that we administer. For SEJ, a faculty member serves as the director of the program, and the department provides funds to a graduate student to coordinate communication, organize events, and assist with advising of SEJ minors.

Course Requirements for the Health & Society Minor

4 Required Courses:

SOCI 101:	Sociological Perspectives
SOCI 172:	Introduction to Population Health in U.S.
SOCI 422 Pending Approval:	Sociology of Mental Illness & Illness
SOCI 469:	Health and Society

Brief course descriptions and sample syllabi for these courses are attached to this proposal.

All of these courses will be offered on a regular basis as the Health and Society minor unfolds. More specifically:

* SOCI 101 is our core introductory course and is offered multiple times each semester. It provides an overview of core sociological concepts, theories, and areas of inquiry. In Fall 2017, we are offering 5 sections of SOCI 101. We anticipate offering SOCI 101 4-6 times each semester in the coming years. We also regularly offer SOCI 1-2 times each summer.

* SOCI 172 is a new course that we are first offering in fall of 2017. It explores nationwide population-based patterns and trends in US health and sociologically-based explanations for those patterns and trends. It has been designed as a large format course and will accommodate 300-400 students each time it is offered. In 2017-18 and in 2018-19, we will offer the course once each year. Again, though, it will accommodate a very large number of students. Looking ahead to 2019-20 and beyond, we will assess whether or not we need to offer the course once each semester instead of once each year.

* SOCI 422 is currently pending approval because we are modifying the name and description of the course to better distinguish it from SOCI 469. In its modified format, it will focus on the uniqueness of the sociological perspective in understanding mental health and illness. It will draw upon various theoretical perspectives to best understand patterns, trends, and definitions of mental health and illness in social context. It also focuses on how social factors influence definitions, perceptions, patterns and trends of mental health and illness. In recent years, we have been offering this course 2 times per year, each time with 48 students enrolled. We plan to offer the course at least twice per year in the coming years as well and will determine whether or not we need to offer it even more frequently as the Health and Society minor unfolds.

* SOCI 469 focuses on the examination of health and illness through a sociological lens. In particular, students learn how to use their *sociological imagination* to understand how health—a seemingly individual issue—is actually a public/social issue that reflects a larger social context. In recent years, we have also been offering this course 2 times per year, each time with 48 students enrolled. We plan to offer the course at least twice per year in the coming years as well and will determine whether or not we need to offer it even more frequently as the Health and Society minor unfolds.

1 Elective (Choose 1 from the Following):

SOCI 121:	Population Problems
SOCI 122:	Race and Ethnic Relations
SOCI 124:	Sex and Gender in Society
SOCI 130:	Family and Society
SOCI 133:	Sociology of Politics
SOCI 274:	Social and Economic Justice
SOCI 277:	Societies and Genomics
SOCI 410:	Formal Organizations and Bureaucracy
SOCI 411:	Social Movements & Collective Behavior
SOCI 412:	Social Stratification
SOCI 414:	The City and Urbanization
SOCI 415:	Economy and Society
SOCI 420:	Political Sociology
SOCI 424:	Law and Society
SOCI 431:	Aging
SOCI 433:	Immigration in Contemporary America
SOCI 444:	Race, Class, and Gender
SOCI 468:	United States Poverty and Public Policy

The inclusion of a broad set of sociology electives for this minor is with purpose. First, one of the three key missions of this minor, as described above, is to provide students with a grounding in sociological concepts and theories so that they can apply them to the study of population health. We are doing so through two mechanisms: 1) the requirement of an introductory sociology course; and 2) the requirement of an upper-division sociology elective. We think it is critical that students choosing this minor learn to *think sociologically* – that is, that students understand that individual behaviors, thoughts, values, and experiences (including health) are contextually based. In our highly individualistic society, thinking sociologically is very hard to do. In our view and in our experience as sociologists, it takes much experience and repetition to do so at a high level. As such, we firmly believe that requiring a second “non-health-related” sociology course is essential for this minor, as opposed to requiring another “health-related” course (there are dozens taught all over campus) from a different discipline. Second, the list of courses we include here are, in fact, health-related in a very real way in that they focus on the contexts that are so critical in shaping health patterns and trends in the United States and around the world. Many of them focus on key social institutions (e.g., Law, Politics, Economics, Bureaucracies, Family) that in many ways help to shape the health of individuals and societies. Others focus on key aspects of social inequality (e.g., Gender, Race/Ethnicity, Immigration, Social Stratification, Aging, Poverty) that also structure health inequalities in modern societies. Yet others focus on population change and distribution (e.g., Population Problems, Urbanization) which are critical to the distribution of health and health-related changes throughout the world. Finally, one of the courses focuses on Social Movements, which help lead to social change, including those changes related to health.

The short description for each of these elective courses is included in the relevant attachment.

Undergraduate Catalog Text

The minor in Health and Society provides students with an opportunity to examine contemporary health patterns and trends characterizing US society and societies around the world, as well as sociologically-based explanations for those patterns and trends. It also provides students with an understanding of the social construction of health and illness in modern societies. The minor brings together courses focused specifically on linkages between health and society, along with courses focused on social organization and social stratification, to provide students with insights into the ways that societies define health and illness and how social organization and stratification influence population health.

The Health and Society minor is fulfilled with 15 credit hours in sociology. Three core courses are required: SOCI 172, 422, and 469. Additionally, students must complete SOCI 101 and one elective sociology course from the following list:

SOCI 121; SOCI 122; SOCI 124; SOCI 130; SOCI 133; SOCI 274; SOCI 277; SOCI 410;
SOCI 411; SOCI 412; SOCI 414; SOCI 415; SOCI 420; SOCI 424; SOCI 431; SOCI 433;
SOCI 444; SOCI 468

Policies Related to the Health and Society Minor

We are aware that there are policies governing minors at UNC Chapel Hill. In our case, we will deal with those policies in the following ways:

- * The Department of Sociology will allow students who major in either Sociology or Management & Society to additionally minor in Health and Society. We have discussed this issue within the department and clearly think that some of our majors (both Sociology majors and Management & Society majors) would like the opportunity to minor in Health and Society, especially given the aging of populations around the world and the enormous role that health plays in the wellbeing and economic productivity of societies.
- * At least 9 of the 15 hours taken to satisfy the Health and Society minor must be counted exclusively in the minor and not double-counted in other majors or minors.
- * At least 9 of the 15 hours taken to satisfy the Health and Society minor must be completed at the University of North Carolina, Chapel Hill.
- * A minimum of 12 hours of C grades or better is required for this minor.
- * No more than one BE credit course may be used as part of this minor.
- * All courses taken in this minor at UNC Chapel Hill must be taken for a regular letter grade and may not be taken as Pass/Fail.



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OFFICE OF THE DEAN
205 SOUTH BUILDING
CAMPUS BOX 3100
CHAPEL HILL, NC 27599-3100

T 919.962.1165
F 919.962.2408
college.unc.edu

October 24, 2017

Mr. Nick Siedentop
Curriculum Director for Undergraduate Curricula
Office of Undergraduate Education
College of Arts and Sciences

Dear Nick,

I write to enthusiastically endorse the Department of Sociology's proposed minor, "Health and Society." It serves the college's goals in several ways. First, it offers a coherent program of study for undergraduates with an interest in the way social forces—racial identities, class relations, national status, and gender—harm or promote individual health. Second, the minor helps to forge a connection between undergraduates and Sociology faculty who have led internationally important research on adolescent health in particular. This program supports the college's priority to bridge research and teaching. Third, the minor offers a credential that can help students on a track for a career in health sciences.

This minor complements well the already established Minor in Medical Anthropology. Where that focuses on health outcomes of cultural practices, variation in healing traditions, and a critical exploration of biomedicine as a cultural system, Health and Society trains students in analysis of societal context and population-level dynamics. Indeed, the two minors together offer significant value to undergraduates on health and medicine tracks.

I am excited to see this go forward. Please let me know if you need anything else from me.

Sincerely,

Rudi Colloredo-Mansfeld, PhD
Senior Associate Dean for Social Science and Global Programs
Professor of Anthropology

Course Requirements for the Health and Society Minor

Course List

Required Courses

- SOCI 101. Sociological Perspectives. 3 Credits.**
- SOCI 172. Introduction to Population Health in the United States. 3 Credits.**
- SOCI 422. Sociology of Health and Mental Illness. 3 Credits**
- SOCI 469. Health and Society. 3 Credits.**

Other Courses

- SOCI 121. Population Problems. 3 Credits.**
- SOCI 122. Race and Ethnic Relations. 3 Credits.**
- SOCI 124. Sex and Gender in Society. 3 Credits.**
- SOCI 130. Family and Society. 3 Credits.**
- SOCI 133. Sociology of Politics. 3 Credits.**
- SOCI 274. Social and Economic Justice. 3 Credits.**
- SOCI 277. Societies and Genomics. 3 Credits.**
- SOCI 410. Formal Organizations and Bureaucracy. 3 Credits.**
- SOCI 411. Social Movements and Collective Behavior. 3 Credits.**
- SOCI 412. Social Stratification. 3 Credits.**
- SOCI 414. The City and Urbanization. 3 Credits.**
- SOCI 415. Economy and Society. 3 Credits.**
- SOCI 420. Political Sociology. 3 Credits.**
- SOCI 424. Law and Society. 3 Credits.**
- SOCI 431. Aging. 3 Credits.**
- SOCI 433. Immigration in Contemporary America. 3 Credits.**
- SOCI 444. Race, Class, and Gender. 3 Credits.**
- SOCI 468. United States Poverty and Public Policy. 3 Credits.**

Required Courses

SOCI 101. Sociological Perspectives. 3 Credits.

Introduction to sociology as a discipline that includes study of differences and equality, social structure and institutions, culture, social change, individuals and populations, and social psychology. Honors version available

Gen Ed: SS.

Grading status: Letter grade.

SOCI 172. Introduction to Population Health in the United States. 3 Credits.

This course aims to provide an introduction to the study of population health in the United States. Key goals include understanding the measurement and theoretical frameworks underlying the study of population health, understanding trends and disparities in U.S. population health, and

Course Requirements for the Health and Society Minor

understanding policy opinions to improve population health.

Gen Ed: SS, US.

Grading status: Letter grade.

SOCI 422. Sociology of Health and Mental Illness. 3 Credits

Course examines uniqueness of the sociological perspective in understanding mental health and illness. It draws upon various fields to explain mental illness in as broad a social context as possible. Attention focuses on how social factors influence definitions and perceptions of illness.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 469. Health and Society. 3 Credits.

The primary objective of the course is to explain how and why particular social arrangements affect the types and distribution of diseases, as well as the types of health promotion and disease prevention practices that societies promote.

Gen Ed: SS.

Grading status: Letter grade.

Other Courses

SOCI 121. Population Problems. 3 Credits.

Social and economic causes of population structure and change. Illustrations drawn from developing countries and the less developed regions and sections of the United States.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 122. Race and Ethnic Relations. 3 Credits.

Examination of domination and subordination in general and in specific institutional areas (e.g., economy, polity) along racial and ethnic lines. Causes of changes in the levels of inequality and stratification are also studied.

Gen Ed: SS, US.

Grading status: Letter grade.

SOCI 124. Sex and Gender in Society. 3 Credits.

Examination of the social differentiation between men and women. Attention to the extent, causes, and consequences of sexual inequality and to changes in sex roles and their impact on interpersonal relations.

Course Requirements for the Health and Society Minor

Gen Ed: SS.

Grading status: Letter grade

Same as: WGST 124.

SOCI 130. Family and Society. 3 Credits.

Comparative analysis of kinship systems and family relations. Courtship, marriage, and parent-child relations viewed within a life-cycle framework. Students may not receive credit for both SOCI 130 and SOCI 425.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 133. Sociology of Politics. 3 Credits.

Patterns of participation in political institutions, public policy, conflict within and between communities and other interest groups, the nature of citizenship in modern society, politics and social change.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 274. Social and Economic Justice. 3 Credits.

Covers theory and practice of social and economic justice, including analyses of racial, gender, sexual, class, national, and other forms of justice, the history of influential movements for justice, and strategies of contemporary struggles. Students may not receive credit for both SOCI 273 and SOCI 274.

Gen Ed: PH.

Grading status: Letter grade.

SOCI 277. Societies and Genomics. 3 Credits.

The course examines how human genomic information can be incorporated into social sciences. Topics include twin studies; an introduction to basic principles of molecular genetics; evolutionary psychology; sex, gender, and genomics; ethical issues in genetic studies; and epigenetics.

Grading status: Letter grade.

SOCI 410. Formal Organizations and Bureaucracy. 3 Credits.

Varieties of organizational forms, their structures and processes; creation, persistence, transformation, and demise; role of organizations in contemporary society.

Grading status: Letter grade

Same as: MNGT 410.

SOCI 411. Social Movements and Collective Behavior. 3 Credits.

Study of nonroutine collective actions such as demonstrations, strikes, riots, social movements, and revolutions, with an emphasis on recent and contemporary movements. Students may not receive credit for

Course Requirements for the Health and Society Minor

both SOCI 413 and SOCI 411.

Gen Ed: SS.

Grading status: Letter grade

Same as: PWAD 411.

SOCI 412. Social Stratification. 3 Credits.

Analysis of social structure and stratification in terms of class, status, prestige, and rank. Attention to social roles of elites, professionals, the middle class, and the working class and to comparative topics.

Grading status: Letter grade

Same as: MNGT 412.

SOCI 414. The City and Urbanization. 3 Credits.

The city as a social, spatial, and political-economic phenomenon in the modern world. Analysis of urban demographic trends, spatial characteristics and economic functions. Substantive topics include segregation, social turmoil, unemployment, fiscal problems, suburbanization, and urban public policy. Students may not receive credit for both SOCI 414 and SOCI 417.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 415. Economy and Society. 3 Credits.

Examination of the structure and operation of institutions where economy and society intersect and interact, such as education, industrial organizations, on-the-job training, labor markets, and professional associations. Emphasis on the contemporary United States, with selected comparisons with Western Europe and Japan.

Grading status: Letter grade

Same as: MNGT 415.

SOCI 420. Political Sociology. 3 Credits.

Analysis of the reciprocal influences of state and social organizations upon each other; the social bases of political authority and stability, of revolution and counterrevolution.

Grading status: Letter grade.

SOCI 424. Law and Society. 3 Credits.

A sociological analysis of comparative legal systems, the role of law in social change and in shaping social behavior. Topics may include the legal profession, property distribution, and the role of law in achieving racial and sexual justice.

Grading status: Letter grade.

Course Requirements for the Health and Society Minor

SOCI 431. Aging. 3 Credits.

The process of aging from birth to death, with a concentration on the later years of life, examined from a broad perspective. Topics include individual change over the life-course, the social context of aging, and the aging of American society.

Gen Ed: SS.

Grading status: Letter grade.

SOCI 433. Immigration in Contemporary America. 3 Credits.

This course introduces students to reasons why people migrate, how citizens respond to that migration, how the federal government regulates migration, and how local communities manage the settlement of newcomers. By the end of the course students should have a solid understanding of major debates in the study of immigration.

Grading status: Letter grade.

SOCI 444. Race, Class, and Gender. 3 Credits.

Conceptualizations of gender, race, and class and how, separately and in combination, they are interpreted by the wider society. Emphasis on how black and working-class women make sense of their experiences at work and within the family.

Grading status: Letter grade

Same as: WGST 444.

SOCI 468. United States Poverty and Public Policy. 3 Credits.

This course examines issues of poverty and social policy, single-mother families, the welfare debate, and homelessness.

Grading status: Letter grade.

DEPARTMENT OF SOCIOLOGY
UNIVERSITY OF NORTH CAROLINA, CHAPEL HILL
Fall, 2016

Introduction to Sociology

(SOCI 101)

Section 4, Version 1.3 Tuesday/Thursday 9:30–10:45 Greenlaw 101

Professor Andrew Perrin

TAs: Janelle Viera and Alanna Gillis

Office: Hamilton 151

Office hours: Prof. Perrin: Mondays, 9:30–11:00; Tuesdays, 1:30–3:00; or by appointment

Janelle Viera: Wednesdays, 9:30–11:00, 205 Hamilton

Alanna Gillis: Tuesdays, 11:00–12:30, 200 Hamilton

Phone: (919) 962-6876

E-mail: andrew_perrin@unc.edu • jviera@live.unc.edu • alannag@live.unc.edu
<http://perrin.socsci.unc.edu>

COURSE OVERVIEW

This course is designed to give you a dynamic introduction to the field of sociology, with special attention paid to issues, ideas, and facets of American culture and society. It focuses in part on sociological research and writing done at UNC to highlight the new knowledge produced by UNC sociologists. If you and we do our jobs correctly, you'll walk away with an appreciation of the ideas and methods of sociological inquiry, an understanding of how sociological knowledge is developed, and a sense of where the field is today.

This course has four broad goals:

1. To introduce sociology and its ideas

You should have a sense of the kinds of issues with which sociology grapples, the tools it brings, and the ideas upon which it is built.

2. To survey several fields of contemporary sociology

Where is sociology going today? What do sociologists do?

3. To encourage critical approaches to social claims

Claims about the nature of society are made daily in the press, popular and business books, and elsewhere. After this class, you should be able to evaluate these claims critically and think about how they might be tested sociologically.

4. To write well

Social science is, fundamentally, a written art. Writing well is integral to good sociology. Your writing will be evaluated for clarity of thought, language, structure, and grammar.

READINGS AND RESOURCES

Required Books

There are no required books for this class.

Supplementary Readings

All readings are available either on the web or on the course website. Those that are online are marked with the WWW symbol. Those available on the web are linked from the course website. The course website is available through <http://sakai.unc.edu>. Some materials may need to be accessed from an on-campus computer or via the library's proxy server.

Other Resources

You will need to sign up for PollAnywhere to participate in various class activities. Please follow the directions at http://help.unc.edu/CCM3_033949. Active polls for the class can be found at <http://pollev.com/andrewperrin>.

Have a dictionary close at hand to look up words you don't know. You can find an adequate one at <http://www.dictionary.com> if you prefer using an online version.

The UNC Writing Center (<http://www.unc.edu/depts/wcweb>) can help you with writing clearly and correctly.

There is an astonishing amount of information available on the World Wide Web. A significant proportion of that information—though by no means all—is true and relevant. By all means, use the Web to supplement your reading and knowledge, but use it critically and make sure you know the source of the information.

FORMAL REQUIREMENTS

The requirements of this course are as follows:

Reading You must complete all the course readings. *You are responsible for understanding the readings*—make use of your fellow students, your dictionary, the Internet, your TA, and your professor to make sure you understand the readings. Course time is to be used for substantive discussion and further exploration of the implications of course readings, *not* for grasping the basic contents.

Participation You must attend, and participate in, all class discussions and small group exercises. You are also responsible for the information contained in course lectures.

In-Class Assessments There will be several unscheduled in-class assessments (quizzes and similar).

Exams There will be two examinations: a midterm and a final. You must take the examinations at the date, time, and place assigned. The midterm examination is **October 18, 9:30–10:45, in 101 Greenlaw**. The final examination is **December 13, 8:00–11:00, in 101 Greenlaw**.

Topic Development Paper In this short (approximately 1,000 words) paper, you should decide what topic or question you plan to explore sociologically. The paper should explain the importance of the topic or question and why it makes for a good sociological exploration. You will address this topic or question in your final paper. **Due October 27 at 9:30 am.**

Final Paper The final paper is your opportunity to synthesize what you have learned during the class with outside interests and experiences. Your final paper must develop a sociological argument using appropriate sources. It is an academic paper and, as such, must be written in an appropriate style. There is no specific, set length; however, about 1,500-2,000 words is a good guideline. **Due November 22 at 9:30 am.**

Using your question or problem from the prior paper, do some combination of the below. You do *not* need to do all of these—any one, or any combination, is fine.

1. Examine and detail how at least two sociological concepts apply—or fail to apply—to it.
2. Review and evaluate sociological research and writing on it. For this project you must provide a broad introduction to the field of interest and a sense of the similarities, differences, and relationships among sociological approaches. *This is not simply an annotated bibliography.*

3. Design a sociological study to investigate it. You must provide a theoretical background, literature review, methodological specification, and expected results.

Grading

Your course grade will be calculated as follows:

Participation <i>(3% for attendance, 12% for active engagement)</i>	15%
In-Class Assessments	15%
Midterm Exam	15%
Final Exam	20%
Topic Development Paper	15%
Final Paper	20%

COURSE POLICIES

YOU ARE AN ADULT. As a student in this class, you are provided with a set of resources for learning the class's contents, and you are expected to fulfill a series of requirements designed to evaluate the depth and breadth of your knowledge of those contents. Your grade, therefore, is a reflection of your success in utilizing the resources you have at your disposal. There will be no in-class quizzes or writing assignments, and there will be no extra credit or make-up assignments.

YOU ARE RESPONSIBLE FOR THE INFORMATION IN THE READINGS AND GIVEN DURING LECTURES. If you do not understand something I say in a lecture, ask me during the lecture, during a later class, or privately via e-mail or office hours.

PARTICIPATION IN DISCUSSIONS AND CLASS ACTIVITIES IS MANDATORY. Some discussions will be full-class; others will be in small groups. Your participation will be useless—and graded as such—if you have not done the reading.

ASSIGNMENTS ARE DUE ON THE DATES LISTED. Make sure you give yourself sufficient time to finish assignments by their due dates. You will lose *roughly* one letter grade per day between the due date and the date the paper is received. You may make the calculation yourself as to whether your work will improve sufficiently in the extra time to make up for the grade reduction. In exceptional cases, I may grant an extension; you *must* discuss this with me in advance.

YOUR PARTICIPATION IN THIS COURSE IS COVERED BY THE UNC HONOR CODE (see <http://studentconduct.unc.edu/students>). I take academic dishonesty—including, but not limited to, plagiarism—very seriously. There will be no excuses or second chances; if you have plagiarized the *ideas* or *words* of someone else without giving credit, you will be referred to the Student Attorney General. If you have questions as to what constitutes academic dishonesty, check <http://www.unc.edu/depts/honor/plagiarism.html> or <http://www2.lib.unc.edu/instruct/plagiarism/> or consult a TA or me.

ADEQUATE COMPLETION OF THE REQUIREMENTS OF THE CLASS WILL EARN YOU A B-. Work whose quality clearly exceeds these requirements will earn a B, B+, A-, or A. Work whose quality is in one or more ways less than adequate will earn you a grade of C+ or below.

COURSE SCHEDULE

August 23 Introductory business

Reading: This syllabus, in full

August 25 Welcome to Sociology; Introduction to “Introduction to Sociology”

In-class Exercise: “This I Believe”

August 30 Thinking Causally. Peter S. Bearman and Hannah Brückner. “Promising the Future: Virginity Pledges and First Intercourse.” *American Journal of Sociology* 106:4 (2001). <http://www.jstor.org/stable/10.1086/320295>

September 1 Whole-Class Exercise

September 6 Lecture: Group, Culture, Society, Sociology

September 8 Discussion: Asking Sociological Questions

Reading:

Pods 1A and 1B Conley, Chapter 2 of *You May Ask Yourself: An Introduction to Thinking Like a Sociologist*, 2nd ed. (New York: Norton). [www](#)

Pods 2A and 2B Horace Miner, “Body Ritual Among the Nacirema.” *The American Anthropologist* 58:3 (June, 1956). [www](#)<http://www.msu.edu/~jdowell/miner.html>

Pods 3A and 3B Joe Bageant, “American Serfs: Inside the White Ghetto of the Working Poor.” Excerpt from *Deer Hunting with Jesus: Dispatches from America’s Class War*. <http://www.coldtype.net/Assets.07/Essays/0807.Joe.Book.pdf>

September 13 Full-Class Workshop

September 15 Lecture: US Culture and Politics Since 9/11

Reading: Kurzman, Charles. “Bin Laden and Other Thoroughly Modern Muslims.” *Contexts* Fall/Winter 2002. <http://ctx.sagepub.com/content/1/4/13.short>

September 20 Class Exercise: Inequality

September 22 Inequality in American Culture

September 27 Discussions: Religion and Culture

Pods 1A and 1B Pitt, Richard N. “‘Killing the Messenger’: Religious Black Gay Men’s Neutralization of Anti-Gay Religious Messages.” *Journal for the Scientific Study of Religion* 49:1 (March 2010), 56–72. <http://onlinelibrary.wiley.com/doi/10.1111/j.1468-5906.2009.01492.x/full>

Pods 2A and 2B Read, Jen’nan Ghazal, and John P. Bartkowski. “To Veil or Not To Veil? A Case Study of Identity Negotiation among Muslim Women in Austin, Texas.” *Gender & Society* 14:3 (2000), 395–417. <http://gas.sagepub.com/content/14/3/395.abstract>

Pods 3A and 3B Evans, Michael S. “Religion and Political Decision Making.” *Journal for the Scientific Study of Religion* 53:1 (2014), 145–163. <http://onlinelibrary.wiley.com/doi/10.1111/jssr.12088/full>

September 29 Lecture: Race and Racism

October 4 Class Cancelled: Rosh Hashanah Holiday

October 6 Discussions: Race and Ethnicity

Pods 1A and 1B Mora, G. Cristina. “Cross-Field Effects and Ethnic Classification: The Institutionalization of Hispanic Panethnicity, 1965 to 1990.” *American Sociological Review* 79:2 (2014), 183–210. <http://asr.sagepub.com/content/79/2/183.short>

Pods 2A and 2B Ifatunji, Mosi Adesina, and Catherine E. Harnois. "An Explanation for the Gender Gap in Perceptions of Discrimination among African Americans Considering the Role of Gender Bias in Measurement." *Sociology of Race & Ethnicity* 2:3 (2016), 263–288. <http://sre.sagepub.com/content/2/3/263>

Pods 3A and 3B Public Religion Research Institute. "Analysis: Race and Americans' Social Networks." <http://publicreligion.org/research/2014/08/analysis-social-network/>

October 11 Discussion/Review: What do we know by now?

October 13 Class Cancelled: University Day

October 18 Midterm Examination

October 20 Fall Break – no class

October 25 Lecture: Health and Health Care

October 27 Whole-class discussion: Social Construction

Topic Development Paper due before class

Reading for class: Armstrong, Elizabeth M. "Diagnosing a Moral Disorder: The Discovery and Evolution of Fetal Alcohol Syndrome." *Social Science & Medicine* 47:12 (December, 1998): 2025–2042. <http://www.sciencedirect.com/science/article/pii/S0277953698003086>

November 1 Discussions: Medicine and Society

Pods 1A and 1B King, Marissa D., Jennifer Jennings, and Jason M. Fletcher. "Medical Adaptation to Academic Pressure: Schooling, Stimulant Use, and Socioeconomic Status." *American Sociological Review* 79:6 (2014), 1039–1066. <http://asr.sagepub.com/content/79/6/1039.abstract>

Pods 2A and 2B Best, Rachel Kahn. "Disease Politics and Medical Research Funding: Three Ways Advocacy Shapes Policy." *American Sociological Review* 77:5 (October, 2012): 780–803. <http://asr.sagepub.com/content/77/5/780.abstract>

Pods 3A and 3B Throop, Elizabeth M., Asheley Cockrell Skinner, Andrew J. Perrin, Michael J. Steiner, Adebowale Odulana, and Eliana M. Perrin. "Pass the Popcorn: 'Obesogenic' behaviors and stigma in children's movies." *Obesity* 22:7 (July, 2014): 1694–1700. <http://onlinelibrary.wiley.com/doi/10.1002/oby.20652/abstract>

November 3 Research Design Exercise: Health and Health Care

November 8 Lecture: The Sociology of Politics

November 10 Discussion: Politics

Pods 1A and 1B Brown, Hana. 2013. Racialized Conflicts and Policy Spillover Effects: The Role of Race in the Contemporary U.S. Welfare State, *American Journal of Sociology* 119(2): 394–443.

Pods 2A and 2B Perrin, Andrew J. "Why You Voted." *Contexts* Fall, 2008. <http://contexts.org/articles/fall-2008/why-you-voted/>

Pods 3A and 3B Laurison, Daniel. "The Willingness to State an Opinion: Inequality, Don't Know Responses, and Political Participation." *Sociological Forum* 30:4 (December, 2015): 925–948. <http://onlinelibrary.wiley.com/doi/10.1111/socf.12202/abstract>

November 15 Lecture: Education and the University

November 17 Discussion: Education

Pods 1A and 1B Tyson, Karolyn, William Darity Jr., and Domini R. Castellino. "It's not 'a Black Thing': Understanding the Burden of Acting White and Other Dilemmas of High Achievement." *American Sociological Review* 70:4 (2005), 582–605 <http://asr.sagepub.com/content/70/4/582.short>

Pods 2A and 2B Domina, Thurston, Andrew M. Penner, and Emily K. Penner. “‘Membership Has its Privileges’: Status Incentives and Categorical Inequality in Education.” *Sociological Science* May 6, 2016. <https://www.sociologicalscience.com/articles-v3-13-264/>

Pods 3A and 3B Mann, Allison, and Thomas A. DiPrete. “The Consequences of the National Math and Science Performance Environment for Gender Differences in STEM Aspiration.” *Sociological Science* July 12, 2016. <https://www.sociologicalscience.com/articles-v3-25-568/>

November 22 Class Exercises: Fix K-12 Education
Final Paper Due before class

November 24 Thanksgiving – no class

November 29 Discussions: What’s Wrong With College?

Pods 1A and 1B Laura Hamilton and Elizabeth A. Armstrong. “The (Mis)education of Monica and Karen.” *Contexts* Fall, 2012. <https://contexts.org/articles/the-miseducation-of-monica-and-karen/>

Pods 2A and 2B Laura Hamilton. “The Partnership Between Colleges and Helicopter Parents.” *The Atlantic* May 13, 2016. <http://www.theatlantic.com/education/archive/2016/05/the-partnership-between-colleges-and-helicopter-parents/482595/>

Pods 3A and 3B

- Josipa Roksa and Richard Arum. “The State of Undergraduate Learning.” *Change Magazine* 43:2 (2011), 35–38. <http://www.tandfonline.com/doi/full/10.1080/00091383.2011.556992>
- George Leef. “Grades Just Keep on Inflating; Why Does It Matter?” John William Pope Center for Higher Education Policy, April 20, 2016. <http://www.popecenter.org/2016/04/grades-just-keep-on-inflating-why-does-it-matter/>

December 1 Taking Stock: What do we know by now?

December 6 Final lecture: “The Fundamental Unit of Human Behavior is. . .”

December 13, 8:00 am Final Examination

SOCIOLOGY 469.001: HEALTH AND SOCIETY

TTh 9:30 – 10:45

Hamilton Hall 100

Fall 2016

Instructor: Liana J. Richardson, PhD, MA, MPH
Office: 270 Hamilton Hall
E-Mail: liana_richardson@unc.edu
Office Hours: Tuesday and Wednesday 10:45 – 12:00 by sign-up only*

Teaching Asst: Katrina Branecky
Office: 273 Hamilton Hall
E-Mail: braneckl@live.unc.edu
Office Hours: Wednesday 12:00 – 2:00

* see page 3 (“*Office Hours*”) for sign-up instructions

Overview of the Course:

The overall goal of this course is to examine health and illness through a sociological lens. In particular, students will learn how to use their *sociological imagination* to understand how health—a seemingly individual issue—is actually a public/social issue that reflects a larger social context. To accomplish this objective, the course focuses on: (1) the social *distribution* of health and illness; (2) the social causes or *determinants* of variability in health and illness; (3) the *social psychological* dimensions of health and health behavior; (4) the organization and practice of *professional care provision*; and (5) the social and political context of *health policy* and *health-related social movements*. Among the questions we will consider are: What role do social factors play in determining who stays healthy and who does not, and who has a long life and who has a short one? How do social factors “get under the skin” and make us sick? To what extent do factors within and outside an individual’s control influence health and health care? What role does medicine play in producing health in our society? And what else (besides medicine) is needed to improve population health?

Required Readings:

1. Cockerham, William C. 2016. *Medical Sociology, 13th Ed.* New York, NY: Routledge.
2. One of the following books:
 - Abraham, Laurie K. 1994. *Mama Might Be Better Off Dead.* University of Chicago Press.
 - Farmer, Paul 2001. *Infections and Inequalities: The Modern Plagues.* University of California Press.
 - Klinenberg, Eric. 2003. *Heat Wave: A Social Autopsy of Disaster in Chicago.* University of Chicago Press.
3. Additional Required Readings (as well as some Optional readings) are available through the Web or Sakai.

Course Requirements:

- 1. In-Class Activities, Attendance, and Participation – 20% of grade**
In-class activities and/or discussion questions will be assigned/distributed regularly to increase student engagement with the course material, facilitate discussion, and assess understanding. Attendance and participation in activities or discussions will be monitored by the Instructor and TA. Students may be asked to submit written responses to the activities or discussion questions for a grade. They may also be asked to grade each other's participation during group activities.
- 2. Homework Assignments (due 9/8, 9/15, 10/4, 10/13) – 20% of grade**
On four (4) separate occasions, students will be expected to complete a homework assignment that demonstrates completion, understanding, and application of the readings. Students must upload their completed assignments to Sakai by 9:30 a.m. on the due dates, and bring hard copies to class. Further instructions for each homework assignment will be posted on Sakai one week prior to its due date.
- 3. In-Class Exams (on 9/27 and 11/8) – 20% of grade**
Two (2) in-class exams, comprised of true/false, multiple choice, and short answer questions that assess students' grasp of key ideas, concepts, and facts from lectures, readings, videos, and other course materials, will be administered during the semester.
- 4. Book Review (thematic outline due 11/1; final paper due 12/6) – 20% of grade**
Students will be required to submit a review of the Abraham, Farmer, OR Klinenberg book that demonstrates completion and understanding, as well as the ability to apply information from other course readings to the book. The review also will provide the opportunity for students to express their reactions to or questions about the book vis-à-vis the course and current events. The review should be no more than twelve (12) typed, double-spaced pages, with no less than 11 pt. font and 1" margins.

A month before the review due date, students must submit an outline that identifies, explains, and provides examples of two key themes covered in both the book *and* other course readings. Although the outline constitutes only 10% of the overall book review grade, it provides students with an early opportunity to receive constructive feedback/guidance that can help improve their final paper.

Both the book review and the outline must be uploaded to Sakai by 9:30 a.m. on their due dates. Additional instructions for both assignments will be posted on Sakai well in advance of these due dates. However, students are encouraged to choose a book during the 1st week of class and begin reading it as soon as possible (ideally, no later than 9/29). Students also must set their own periodic deadlines for completing the selected book (ideally, by 10/27). Please note that is *impossible* to do well on the book review if you do not also complete all other course readings.
- 5. Final Exam (on 12/13 at 8 a.m.) – 20% of grade**
A final exam in the same format as the in-class exams, but covering key ideas, concepts, and facts in lectures, readings, videos, and other course materials from the entire semester, will be administered at the university-designated time.

Grading:

Grades for each course requirement will be based on its total number of points possible, and weighted according to the percentages listed above. Final course grades will be based on the following intervals:

A: 94-100	B+: 87-89	B-: 80-83	C: 74-76	D+: 67-69	F: <64
A-: 90-93	B: 84-86	C+: 77-79	C-: 70-73	D: 64-66	

Other Rules and Guidelines:

Attendance and Timeliness: Class attendance is expected. Unless you have a circumstance that will result in an extended absence from class (e.g., multiple consecutive class sessions), please do not send any excuses or explanations for your absences to the Instructor or TA. Timely arrival to class is also expected. Repeated late arrivals, or arrivals more than 5 minutes after class begins, will not be tolerated.**

Preparing for Class: For every hour we spend in class, you should set aside 2 – 3 hours for careful reading of the texts, preparing for the class, and reviewing your notes. Complete all assigned readings for a given class session *before* the class so that you may participate in class discussions and group activities.

In-Class Discussions and Activities: You are expected to respect others' opinions, allow others a chance to speak, and NEVER devalue or belittle the opinions and experiences of others. Disagreement with the Instructor, your classmates, or the course materials must be expressed respectfully and with some support for your argument(s). Blatant disrespect (during class or in written assignments) will not be tolerated.**

Using Electronics in Class: No electronics (tablets/iPads, laptops, tape recorders) may be used in class without permission from the Instructor. Cell phones must be turned OFF (not 'vibrate') during class.**

Communicating Outside of Class: You should direct all questions about course logistics (e.g., schedule, readings, assignments, grades) to the TA. Questions or comments about course content can be directed to either the Instructor or the TA.

Emails: Emails should include "SOCI 469" in the subject line, and will be answered by either the TA or the Instructor within 24 hours.

Office Hours: TA office hours are by drop-in, i.e., first come, first served. Instructor office hours are by sign-up. A link to the sign-up sheet will be available on Sakai. Students wishing to come to the Instructor's office hours should sign-up no later than 8:30 a.m. the same day. If your schedule does not permit you to attend either the TA's or Instructor's office hours, or if you are interested in discussing something other than course content (e.g., graduate school or career planning), you may request an appointment at another time. Availability for appointments is limited, however.

Assignments and Exams: All assignments must be submitted by the beginning of class on their due dates, and exams must be taken on the designated dates. Assignment extensions and make-up exams will only be permitted in the case of a documented emergency or documented travel for a UNC-Chapel Hill sports team. In these cases, students should notify the Instructor as soon as possible (ideally before the exam/due date) and provide documentation from a university official (e.g., letter from Dean or Athletic Director).

Writing/Studying Assistance: This course is reading- and writing-intensive. Students are encouraged to seek assistance from the *Learning Center* and/or *Writing Center* in Phillips Annex, as needed. The *Learning Center* provides academic counseling, reading programs, supplemental instruction, and peer tutoring. The *Writing Center* provides individual consultation, writing groups, a resource library, and a grammar hotline.

Plagiarism and Cheating: The UNC Honor Code (<http://instrument.unc.edu>) applies at all times. Scholastic misconduct, including cheating and plagiarism, will not be tolerated and will be dealt with according to University policy.

** The Instructor will attempt to address any violations of this rule during class. Depending on the effectiveness of the attempt and/or the nature of the violation, the Instructor also reserves the right to dismiss students who violate this rule from the class session in which the violation occurs.

Course Outline and Schedule

I. INTRODUCTION TO THE SOCIOLOGY OF HEALTH AND ILLNESS

August 23 Course Overview and Introduction

Callero, Peter L. 2013. *The Myth of Individualism: How Social Forces Shape Our Lives*. Lanham, MD: Rowman & Littlefield Publishers, Inc. – **only** pp. 1 – 10, 26 – 34, and 179 – 182
Cockerham, Chapter 1 (*Medical Sociology*), **only** pp. 3 – 9

August 25 Defining Health and its Determinants

Cockerham, Chapter 1 (*Medical Sociology*) and Chapter 2 (*Epidemiology*), **only** pp. 10, 29-31
Starfield, Barbara. 2001. “Basic Concepts in Population Health and Health Care.” *Journal of Epidemiology and Community Health* 55: 452-454
Carter-Pokras, Olivia and Claudia Baquet. 2002. “What is a Health Disparity?” *Public Health Reports* 117: 426-434.

August 30 Models/Theories of Disease Causation

Cockerham, Chapter 1 (*Medical Sociology*), **only** pp.11-15
Tesh, Sylvia N. 1988. “Twentieth Century Debates”. Pp. 33-57 in *Hidden Arguments: Political Ideology and Disease Prevention Policy*. New Brunswick: Rutgers University Press.
Tesh, Sylvia N. 1988. “A Multicausal Solution?” Pp. 58-82 in *Hidden Arguments: Political Ideology and Disease Prevention Policy*. New Brunswick: Rutgers University Press – **only** pp. 58 – 70

II. THE SOCIAL DETERMINANTS OF HEALTH AND ILLNESS

September 1 Fundamental Causes of Disease and Health Inequality

Tesh, Sylvia N. 1988. “A Multicausal Solution?” Pp. 58-82 in *Hidden Arguments: Political Ideology and Disease Prevention Policy*. New Brunswick: Rutgers University Press – **only** pp. 70 - 82
Link, Bruce G. and Jo Phelan. 1995. “Social Conditions as Fundamental Causes of Disease.” *Journal of Health and Social Behavior* Extra Issue: 80-94.

September 6 Social Class and Health

Cockerham, Chapter 3 (*The Social Demography of Health: Social Class*) – **skip** pp. 67-68
Elo, Irma T. 2009. “Social Class Differentials in Health and Mortality: Patterns and Explanations in Comparative Perspective.” *Annual Review of Sociology* 35 – **only** pp. 553-561

September 8 Race/Racism and Health

Homework Assignment #1 due

Cockerham, Chapter 4 (*The Social Demography of Health: Gender, Age, & Race*) – **only** pp. 94-104
Williams, David R. and Michelle Sternthal. 2010. “Understanding Racial-ethnic Disparities in Health: Sociological Contributions.” *Journal of Health and Social Behavior* 51: S15-S27.
Lauderdale, D. 2006. “Birth Outcomes for Arabic-Named Women in California Before and After September 11.” *Demography* 43: 186-201.

September 13 Immigration, Nativity, and Health

- Gould, Jeffrey B., Ashima Madan, Cheng Qin, and Gilberto Chavez. 2003. "Perinatal Outcomes in Two Dissimilar Immigrant Populations in the United States: A Dual Epidemiologic Paradox." *Pediatrics* 111: e676-682.
- Viruell-Fuentes, Edna A. 2007. "Beyond Acculturation: Immigration, Discrimination, and Health Research Among Mexicans in the United States." *Social Science & Medicine* 65: 1524-1535.
- Henry-Sanchez, Brenda L. and Arline T. Geronimus 2013. "Racial/Ethnic Disparities in Infant Mortality among U.S. Latinos: A Test of the Segmented Racialization Hypothesis." *DuBois Review* 10(1): 205- 231.

Optional:

(follow up and extension of the Gould et al. 2003 reading)

- Madan, Palaniappan, Urizar, Wang, Fortmann, and Gould. 2006. "Sociocultural Factors that Affect Pregnancy Outcomes in Two Dissimilar Immigrant Groups in the United States." *Journal of Pediatrics* 148: 341-346.

September 15 Gender, Patriarchy, and Health

Homework Assignment #2 due

- Cockerham, Chapter 4 (*The Social Demography of Health: Gender, Age, and Race*) – **only** pp. 79-90
- Wingood, Gina M. and Ralph J. DiClemente. 2000. "Application of the Theory of Gender and Power to Examine HIV-related Exposures, Risk Factors, and Effective Interventions for Women." *Health Education and Behavior* 27: 539-565.
- Courtenay, Will H. 2000. "Constructions of Masculinity and their Influence on Men's Well-Being: a Theory of Gender and Health." *Social Science & Medicine* 50: 1385-1401.

September 20 Intersectionality and Health

- Bowleg, Lisa. 2012. "The Problem with the Phrase *Women and Minorities*: Intersectionality—An Important Theoretical Framework for Public Health." *American Journal of Public Health* 102: 1267-1273.
- Richardson, Liana J. and Tyson H. Brown. 2016. "(En)Gendering Racial Disparities in Health Trajectories: A Life Course and Intersectional Analysis." *SSM - Population Health* 2: 425-435.

September 22 Place and Health

- Cockerham, **only** pp. 67-68
- Macintyre, Sally and Anne Ellaway. 2003. "Neighborhoods and Health: An Overview." Pp. 20-44 in *Neighborhoods and Health*, edited by I. Kawachi and L.F. Berkman. Oxford: Oxford University Press.
- Leung, ManChui and David T. Takeuchi. 2011. "Race, Place, and Health. Pp. 73-88 in *Communities, Neighborhoods, and Health: Expanding the Boundaries of Place*, edited by L.M. Burton. London: Springer.

September 27 IN-CLASS EXAM 1

Bring scantron and a #2 pencil!

III. HOW DO SOCIAL FACTORS GET UNDER THE SKIN AND WHAT CAN WE DO ABOUT IT?

BOOK REVIEW TIP

*Read the book for your book review during this section of the class.
Spreading it out over the next 6 weeks will make life easier!*

September 29 Health Behavior and Lifestyles

Cockerham, Chapter 6 (*Health Behavior and Lifestyles*)

MacLean, Kelly. 2013. "Surviving Whole Foods." *The Huffington Post*. (Available online).

Tierney, John. 2013. "The Rational Choices of Crack Addicts." *The New York Times*. (Available online).

October 4 Doctor-Patient Interaction

Homework Assignment #3 due

Cockerham, Chapter 9 (*Doctor-Patient Interaction*), **skip** pp. 234-239

Moskowitz, Gordon B., Jeff Stone, Amanda Childs. 2012. "Implicit Stereotyping and Medical Decisions: Unconscious Stereotype Activation in Practitioners' Thoughts about African Americans." *American Journal of Public Health* 102(5): 996-1001.

Schulman, Kevin A., Jesse A. Berlin, William Harless, Jon F. Kerner, Shyrl Sistrunk, et al. 1999. "The Effect of Race and Sex on Doctor Recommendations for Cardiac Catheterization." *New England Journal of Medicine* 340: 618-626.

October 6 The Stress Process (Stress-Buffer Hypothesis)

Cockerham, Chapter 5 (*Social Stress and Health*), **only** pp. 122-135

Thoits, Peggy A. 2010. "Stress and Health: Major Findings and Policy Implications." *Journal of Health and Social Behavior* 51 – **only** pp. S41-S47.

House, James S., Karl R. Landis, Debra Umberson. 1988. "Social Relationships and Health." *Science* 241(4865): 540-545.

October 11 The Life Course Perspective

Richardson, Liana J., Jon M. Hussey, and Kelly L. Strutz. 2012. "A Life Course Perspective on Maternal and Child Health." Pp. 65-85 in *Maternal and Child Health: Programs, Problems, and Policy in Public Health, 3rd edition*, edited by J.B. Kotch. Burlington, MA: Jones & Bartlett.

Geronimus, Arline T. 1992. "The Weathering Hypothesis and the Health of African-American Women and Infants: Evidence and Speculations." *Ethnicity and Disease* 2(2): 207-221.

October 13 Public Policy Options

Homework Assignment #4 due

Jones, Camara P., Clara Y. Jones, Geraldine S. Perry, Gillian Barclay, Camille Arnel Jones. 2009.

"Addressing the Social Determinants of Children's Health: A Cliff Analogy." *Journal of Health Care for the Poor and Underserved* 20: 1-12.

Raphael, Dennis. 2007. "Public Policies and the Problematic USA Population Health Profile." *Health Policy* 84: 101-111.

Re-read Link and Phelan 1995: pp. 89-90 *and* Starfield 2001 (if necessary)

October 18 U.S. Health Care and the Road to Reform

Cockerham, Chapter 15 (*Health Care Reform & Social Policy in the United States*)

Weiss, Gregory L. and Lynne E. Lonnquist. 2012. "The Health Care System in the United States." Pp. 317-351 in *The Sociology of Health, Healing, and Illness*, 7th ed. Upper Saddle River: Prentice Hall.

October 20 FALL BREAK – NO CLASS

No assigned readings...but you've got only two more weeks until your thematic outline for the book review is due. So why not finish the book over Fall Break?? ☺

October 25 Crash Course on the ACA

Kaiser Family Foundation. 2011. "Health Reform Hits Main Street." (**Watch** the 9 minute video here: kff.org/health-reform/video/health-reform-hits-main-street/)

Kaiser Family Foundation. 2013. "The YouToons Get Ready for Obamacare." (**Watch** the 7 minute video here: kff.org/health-reform-video-youtoons-obamacare-video/)

Additional Readings TBD

October 27 Cross-National Comparison of Health Care Systems

Cockerham, Chapter 16 (*Global Health Care*) – **only** Table 16-5 and corresponding text

Weiss, Gregory L. and Lynne E. Lonnquist. 2012. "Comparative Health Care Systems." Pp. 405-42 in *The Sociology of Health, Healing, and Illness*, 7th ed. Upper Saddle River, NJ: Prentice Hall – **only** pp. 405-411.

Ruggie, Mary. 2011. "Learning from Other Countries: Comparing Experiences and Drawing Lessons for the United States." Pp. 85-99 in *Handbook of the Sociology of Health, Illness, and Healing: A Blueprint for the 21st Century*, edited by B.A. Pescosolido, J.K. Martin, J.D. McLeod, and A. Rogers. London: Springer.

November 1 Social Policy as Health Policy?

Thematic Outline for Book Review due

Author Unknown. *Unnatural Causes Policy Guide*. Available online at:

http://www.unnaturalcauses.org/assets/uploads/file/UC_PolicyGuide.pdf

Additional Readings TBD

November 3 Politics in Health Promotion and Disease Prevention

Oliver, Thomas R. 2006. "The Politics of Public Health Policy." *Annual Review of Public Health* 27: 195-233.

Mayes, Rick and Thomas R. Oliver. 2012. "Chronic Disease and the Shifting Focus of Public Health: Is Prevention Still a Political Lightweight?" *Journal of Health Politics, Policy, and Law* 37(2): 181-200.

Re-read Callero 2013: pp. 26-32

November 8 IN-CLASS EXAM 2

Bring scantron and a #2 pencil!

Please also exercise your right to **VOTE** today!

IV. OTHER KEY AND EMERGING TOPICS IN THE SOCIOLOGY OF HEALTH & ILLNESS

*** BOOK REVIEW TIP***

*Write your book review during this section of the class.
Spreading it out over the next 4 weeks will make life easier!*

November 10 Illness Behavior & Experience

Cockerham, Chapter 7 (*Illness Behavior*) and Chapter 8 (*Sick Role*) — **skip** pp. 197-199 and 205-211

November 15 Medicalization

Olafsdottir, Sigrun. 2013. "Social Construction and Health." Pp. 41-59 in *Medical Sociology on the Move: New Directions in Theory*, edited by W.C. Cockerham. London: Springer.

Cockerham, Chapter 8 (*Sick Role*) — **only** pp. 197-200

Barker, Kristin. 2012. "Electronic Support Groups, Patient-Consumers, and Medicalization: The Case of Contested Illness." *Journal of Health and Social Behavior* 49(1): 20-36.

Re-read Courtenay 2000: middle of p. 1396 – middle of p. 1397

November 17 Identity, Labeling, and Stigma

Cockerham, Chapter 8 (*Sick Role*) — **only** pp. 205-211

Herek, Gregory M. 2005. "AIDS and Stigma." Pp. 121-129 in *The Sociology of Health & Illness: Critical Perspectives*, 7th edition, edited by P. Conrad. New York: Worth Publishers.

Re-read Olafsdottir 2013: middle of p. 43 – top of p. 44

November 22 Health Social Movements

Brown, Phil, Stephen Zavestoski, Rachel Morello-Frosch, Sabrina McCormick, Brian Mayer, et al. 2012. "Embodied Health Movements: Uncharted Territory in Social Movement Research. Pp. 600-615 in *The Sociology of Health & Illness: Critical Perspectives*. 9th ed., edited by P. Conrad and V. Leiter. New York: Worth Publishers.

Karzakis, Katrina. 2008. "The Intersex Body in the World." In: *Fixing Sex: Intersex, Medical Authority, and Lived Experience*. Durham: Duke University Press., pp. 238-263.

Fenton, Andrew and Tim Krahn. 2007. "Autism, Neurodiversity, and Equality Beyond the 'Normal'." *Journal of Ethics in Mental Health*, 2(2), 1-6.

November 24 THANKSGIVING – NO CLASS

No assigned readings... *but you've got a week and a half until your book review is due. So you may want to try to find just a little time to work on it during Thanksgiving Break, if possible.* ☺

November 29 Epigenetics (and the New Eugenics?)

Cockerham, **only** pp. 237-239 and 136

Shostak, Sara and Jeremy Freese. 2010. "Gene-Environment Interaction and Medical Sociology". Pp. 418-431 in *Handbook of Medical Sociology*, 6th edition, edited by C.E. Bird, P. Conrad, A.M. Fremont, and S. Timmermans. Nashville: Vanderbilt University Press.

Phelan, Jo C., Bruce G. Link, and Naumi M. Feldman. 2013. "The Genomic Revolution and Beliefs about Essential Racial Differences". *American Sociological Review* 78(2): 167-91.

December 1 TBD

Readings TBD

December 6 Summary/Review and Book Review Discussion

Book Review due

No assigned readings

FINAL EXAM: December 13, 2016 at 8:00 a.m.

**Introduction to Population Health in the United States
(SOCI 172)
Fall Semester, 2017
T-TH 2:00-3:15
Carroll 111**

Instructor Information

Dr. Robert A. Hummer
Howard W Odum Distinguished Professor of Sociology
Email: rhummer@email.unc.edu
Office: Hamilton Hall 158
Office Hours: Thursday 4:00pm-6:00pm

TA Information

Each student is assigned to one TA, by student's last name. For office hours and for all questions regarding attendance, course materials, and exam make-ups, please reach out to your assigned TA:

Alyssa Browne (last names A-G)
alyssarb@live.unc.edu
Office: Hamilton Hall 273
Office Hours: Tuesday 11:15am-12:15pm; Thursday 12:30pm-1:30pm

Alyssa Peavey (last names H-P)
apeavey@live.unc.edu
Office: Hamilton Hall 162
Office Hours: Tuesday 11:45am-1:45pm

Minne Chen (last names Q-Z)
mchen16@live.unc.edu
Office: Hamilton Hall 273
Office Hours: Tuesday & Thursday 12:45pm-1:45pm

Course Description and Goals

The US Health Context

In 2011 and 2013, respectively, the National Research Council assembled teams of top health and social scientists and produced companion reports on the health of the United States in comparison with other high-income countries like Canada, Sweden, Spain, Japan, Australia, and others. The 2011 volume focused on mortality patterns for those aged 50 and above, while the 2013 report concentrated on an array of health and mortality indicators for those aged 0 through 50.¹ Both reports showed that the U.S. fared among the worst overall on most of the indicators in comparison with the other high-income countries. The overall health and mortality indicators for American women were particularly poor in comparison with women in the other countries, but U.S. men also fared poorly across most indicators. These prominent reports, along with related research articles on the topic, demonstrated that the United States is not only not near the world's best on a wide range of health indicators, but that our collective health profile is close to the bottom among wealthy countries. Ironically, both volumes pointed out that the U.S. spends far more on health care per person than any of the other comparison countries, suggesting that the poorer overall health conditions in the U.S. is probably not due to the receipt of less health care in the United States.

Other prominent studies over the past decade have documented troubling trends in the health profile of population subgroups in the United States. Indeed, a series of studies over the past 10 years have demonstrated widening gaps in both adult health levels and mortality rates when comparing low educated adults with highly educated adults.² Low-educated U.S. women appear to be faring particularly poor; one study found that women with less than 12 years of schooling have an overall lower life expectancy than they did 40 years ago.³ Concern also exists regarding racial/ethnic subgroups of the U.S. population. For example, African Americans continue to live nearly four fewer years than whites, on average, which equates with up to 83,000 African American lives lost prematurely *each year*.⁴ That's an American tragedy. And while Latinos currently have longer life

¹ National Research Council. 2011. Explaining Divergent Levels of Longevity in High-Income Countries. Panel on Understanding Divergent Trends in Longevity in High-Income Countries, Eileen M. Crimmins, Samuel H. Preston, and Barney Cohen, Eds. Committee on Population, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.; National Research Council and Institute of Medicine. 2013. U.S. Health in International Perspective: Shorter Lives, Poorer Health. Panel on Understanding Cross-National Health Differences Among High-Income Countries, Steven H. Woolf and Laudan Aron, Eds. Committee on Population, Division of Behavioral and Social Sciences and Education, and Board on Population Health and Public Health Practice, Institute of Medicine. Washington, DC: The National Academies Press.

² See, for example: Liu, Hui, and Robert A. Hummer. 2008. "Are Educational Differences in U.S. Self-Rated Health Increasing?: An Examination by Gender and Race." Social Science and Medicine 67: 1898-1906.; Lynch, Scott M. 2003. "Cohort and Life-Course Patterns in the Relationship between Education and Health: A Hierarchical Approach." Demography 40(2): 309-331.; Masters, Ryan K., Robert A. Hummer, and Daniel A. Powers. 2012. "Educational Differences in U.S. Adult Mortality: A Cohort Perspective." American Sociological Review 77(4): 548-572.; Montez, Jennifer K., Robert A. Hummer, Mark D. Hayward, Hyeyoung Woo, and Richard G. Rogers. 2011. "Trends in the Educational Gradient of U.S. Adult Mortality from 1986 through 2006 by Race, Gender, and Age Group." Research on Aging 33(2): 145-171..

³ Olshansky, S. Jay, Toni Antonucci, Lisa Berkman, Robert H. Binstock, Axel Boersch-Supan, John T. Cacioppo, Bruce A. Carnes, Laura L. Carstensen, Linda P. Fried, Dana P. Goldman, James Jackson, Martin Kohli, John Rother, Yuhui Zheng, and John Rowe. 2012. "Differences in Life Expectancy Due To Race and Educational Differences Are Widening, and Many May Not Catch Up." Health Affairs 31(8): 1803-1813.

⁴ Kochanek, Kenneth D., Elizabeth Arias, and Robert N. Anderson. 2015. "Leading Causes of Death Contributing to Decrease in Life Expectancy Gap Between Black and White Populations: United States, 1999-2013." NCHS Data Brief 218: 1-8. Hyattsville, MD: National Center for Health Statistics.; Satcher David, George E. Fryer, Jr, Jessica

expectancies than either African Americans or whites, the rate of Latino old age disabilities is the highest in the country.⁵ This means that many Latinos, while living long lives on average, face a great deal of suffering in their older years. Finally, high quality studies over the past decade have documented enormous geographic differences in America's health profile, with some counties and states appearing to fare much closer to the health profiles of other high-income countries, while other counties and states appear to be falling further and further behind with regard to their overall levels of health and mortality.⁶

What is Population Health?

Thus, for reasons that are troubling and for others that are worth celebrating, this course delves into the description and explanation of health and longevity patterns and trends in the United States. I refer to the description and explanation of such patterns and trends as "population health," a term formally defined below. The course endeavors to paint a clear, contemporary portrait of U.S. population health patterns by digging into patterns for the country as a whole, as well as for some of the different population subgroups in the country, particularly defined by geography of residence, socioeconomic status, gender, race/ethnicity, and immigrant status. Throughout this portrayal, we will also discuss some key trends in population health across time, depending on how far back valid data allow us to go, and how some U.S. population health indicators stack up against other wealthy countries. There is much to be learned through these temporal and spatial comparisons. This course also aims to shed light on some of the reasons why we see such patterns and trends in U.S. data. Indeed, there has been a tremendous amount of research published in this area over the last couple of decades, and sociologists, demographers, geographers, anthropologists, epidemiologists, economists, social workers, nurses, biologists, and medical doctors have all contributed to the scientific community's understanding of U.S. population health patterns and trends.

*Thus, population health is defined as the documentation of patterns and trends in health within specifically defined geographic places; the explanation of such health patterns and trends in those specific places using a multi-level set of determinants; and the translation of population health research findings into action to improve the health of those specific populations.*⁷ This definition includes four very important components. First, a core purpose of population health research is the *documentation* of patterns of health at one point in time and the documentation of trends in health across time in specific geographic places. Accurate description necessarily comes before explanation. And accurate description of population health patterns and trends relies on high quality data sets that are representative of the specific geographic place under study. Second, the field of population health searches for its explanations across a multi-level set of factors, ranging from the social, economic, environmental, and policy contexts characterizing the place under study to the behavioral and biological factors of individuals who live in that place. Notably, though, population

McCann, Adewale Troutman, Steven H. Woolf, and George Rust. 2005. "What If We Were Equal? A Comparison of the Black-White Mortality Gap in 1960 and 2000." *Health Affairs* 24(2): 459-464.

⁵ Hayward, Mark D., Robert A. Hummer, Chi-Tsun Chiu, Cesar Gonzalez-Gonzalez, and Rebeca Wong. 2014. "Does the Hispanic Paradox in U.S. Adult Mortality Extend to Disability?" *Population Research and Policy Review* 33: 81-96.

⁶ Fenelon, Andrew. 2012. "Geographic Divergence in Mortality in the United States." *Population and Development Review* 39(4): 611-634.

⁷ Adler, Nancy, Christine Bachrach, Dorothy Daley, and Michelle Frisco. 2013. "Building the Science for a Population Health Movement." Discussion Paper, Institute of Medicine, Washington, DC. <https://nam.edu/wp-content/uploads/2015/06/BPH-BuildingTheScience.pdf>; Kindig, David, and Greg Stoddart. 2003. "What Is Population Health?" *American Journal of Public Health* 93(3): 380-383.

health science pays particularly intense attention to inequalities in resources (e.g., education, employment, income, power, social connections) within this multi-level framework because theory and research suggest that individual behaviors, the use of health care, and even our biological systems are strongly affected by such resources.⁸ Third, population health scientists are collectively interested in using their research findings to make a difference in improving population health. As discussed above, such an orientation goes far beyond the traditional focus of health policy on health care. Instead, population health scientists are intensely interested in translating between research findings and policy/programmatic action. Finally, this definition of population health relies on a geographic-specific orientation. This is an important definitional feature because researchers and policymakers must clearly understand the *specific geographic area* that is being studied to develop appropriate policies and programs to improve health in that place. In the case of this course, the specific geographic area of focus is the United States of America. Such geographic specificity distinguishes this definition of population health from one that is often used in the medical community, where “population health” often refers to the group of patients that a particular hospital or provider is responsible for.⁹ While perhaps useful in the health care arena, this definition of population health is overly narrow in focusing on providers and patients, with little or no applicability beyond that provider’s influence. In contrast, by focusing on a specific geographic area, our definition of population health encompasses the complete set of people and the full range of factors that are influencing that specific population’s health.

⁸ See, e.g., Link, Bruce G., and Jo C. Phelan. 1995. “Social Conditions as Fundamental Causes of Disease.” Journal of Health and Social Behavior 35(extra issue): 80-94.; Phelan, Jo C, Bruce G. Link, and Parisa Tehranifar. 2010. “Social Conditions as Fundamental Causes of Health Inequalities: Theory, Evidence, and Policy Implications.” Journal of Health and Social Behavior 51(extra issue): S28-S40.

⁹ Adler et al. 2013.

A Social Demographic Perspective of Population Health

The study of population health is inherently interdisciplinary. That is, it brings together researchers and students from a very wide range of academic disciplines who, together, document new patterns and trends of health, discover new explanations for such patterns and trends, and inform policies and programs to improve population health. As such, this course draws on work from a range of disciplines and on studies from interdisciplinary research teams. Nonetheless, this course brings a specific *social demographic perspective* to the study of population health that draws upon key strengths of sociology and demography.

Sociologically, the course draws on the discipline's core focus on social stratification. A simple but catchy definition of social stratification is the study of "who gets what and why?"¹⁰ In our case, the "who" refers both to people in the country as a whole and its population subgroups, as well as individuals in specific geographic areas; the "what" refers to good health and long lives; and the why refers to the explanations for disparities in health and longevity, both between the US and other high income nations and, within the US, between population subgroups and geographic areas. But more formally and importantly, social stratification refers to the *systems of inequality* that operate within and across societies to create differences in access to and acquisition of valued resources that influence health, including those like education, occupation, income, housing, and a safe environment.¹¹ Thus, a social stratification perspective on racial/ethnic inequalities in health focuses on the ways that institutionalized discrimination (e.g., in schools, workplaces, financial institutions, the criminal justice system, and the health care system) works to influence health and longevity disparities by influencing racial and ethnic differences in access to key health-related resources.¹² And a social stratification perspective on gender disparities in health emphasizes the ways that gender discrimination and gendered opportunities and constraints influence the health and longevity of women and men by, again, differentiating women's and men's access to health-relevant resources.¹³ The centrality of social stratification to this course's approach to population health does not dismiss the importance of genetic endowments, psychological traits, individual decision-making regarding health behavior, and individually-tailored medical care in contributing to the health of individuals. Those are all critical factors for understanding individual-level health. But health-related decision making and the use and quality of health care are themselves constrained by social resources, and psychological traits and genetic endowments interact with the social environment to affect health. Thus, the assessment of population health in the United States and disparities therein necessarily must give central priority to the level and distribution of social resources, both across countries and within the US, that influence the overall health of the country and its constituent subgroups and geographic locales.

¹⁰ See, e.g., Kerbo, Harold R. 2011. Social Stratification and Inequality: Class Conflict in Historical Comparative, and Global Perspective, Eighth Edition. Boston: McGraw-Hill.

¹¹ See Grusky, David B., and Katherine R. Weisshaar. 2014. "Introduction." Chapter 1 (pp. 1-17) in Social Stratification: Class, Race, and Gender in Sociological Perspective, Fourth Edition, edited by David B. Grusky. Boulder, CO: Westview Press.; Kerbo 2011.

¹² Phelan, Jo C., and Bruce G. Link. 2015. "Is Racism a Fundamental Cause of Inequalities in Health?" Annual Review of Sociology 41:311-330.; Williams, David R., and Michelle Sternthal. 2010. "Understanding Racial-ethnic Disparities in Health: Sociological Contributions." Journal of Health and Social Behavior 51(extra issue): S15-S27.

¹³ Bird, Chloe E., and Patricia P. Rieker. 2008. Gender and Health: The Effects of Constrained Choices and Social Policies. Cambridge, UK: Cambridge University Press.; Read, Jen'nan G., and Bridget K. Gorman. (2010). Gender and Health Inequality. Annual Review of Sociology 36: 371-386.

One of the fundamental strengths of demography as a field of study is its emphasis on population representativeness; that is, the data and methods that demographers utilize result in descriptions (e.g., rates) and relationships (e.g., correlations) that are true in the overall population and among its subgroups.¹⁴ Population representativeness is accomplished either through the collection and use of complete data for every person in an entire population or through the careful collection and use of samples from the general population who represent the population as a whole. Such population-based health data contrast with health data from convenience samples, hospitals, clinics, or other non-representative samples. Studies based on non-representative data cannot make scientific claims about the population health of the country as a whole or its major subgroups because the individuals included in such data sets may differ in very important ways from all individuals in that population. Because the focus of this course is population health in the United States, we will draw on published findings from population-based data sets that allow us to best make accurate statements about patterns and trends of health for the US as a whole and for its largest population subgroups and geographic locales.

In short, the demographic approach to population health provides a formidable set of tools to describe population health patterns and trends in the United States and to make cross-national comparisons. The use of population representative data sets and associated statistical tools facilitates such accurate description. The sociological approach to population health, in turn, provides a powerful lens for explaining population health patterns and trends in the United States, albeit not to the exclusion of other potentially useful explanatory perspectives. In particular, a social stratification approach to population health focuses on how critical health-related resources are distributed and, in turn, how the distribution of such resources informs patterns and trends of population health. Together, then, key features of sociology and demography combine to comprise the social-demographic perspective to population health. This approach is useful not only for describing and explaining health patterns and trends but also for informing health policy at the population level because it is based on representative data and focuses on policy-amenable health-related social resources.¹⁵

Goals of the Course

The overall aim of this course is to provide students with an introduction to the study of population health in the United States from a social demographic perspective. The course focuses most centrally on accomplishing four goals as expressed in the following questions. First, how is population health conceptualized and measured? This portion of the course provides the methodological and conceptual foundations for what comes later in the course. Second, how can we understand population health in the United States through temporal and spatial perspectives? In this portion of the course, we will dig into historical trends in U.S. population health (to the extent that data allow) and to the geographic contexts that help to shape U.S. population health. Third, to what extent, and why, is US population health stratified across key subgroups, particularly those defined by socioeconomic status, race/ethnicity, immigrant status, and gender? The stratification of population health, otherwise known as the study of population health disparities, is a huge and

¹⁴ Duncan, Greg J. 2008. "When to Promote, and When to Avoid, a Population Perspective." Demography 45(4): 763-784.

¹⁵ See House 2015 and Schoeni et al. 2008 for excellent examples (House, James S. 2015. Beyond Obamacare: Life, Death, and Social Policy. NY: Russell Sage Foundation.; Schoeni, Robert F., James S. House, George A. Kaplan, and Harold Pollack, editors. 2008. Making Americans Healthier: Social and Economic Policy as Health Policy. New York: Russell Sage Foundation.)

rapidly evolving portion of this area of study. Finally, to what extent, and how, might population health in the United States be amenable to change through effective public policy? The intent of this portion of the course is to move beyond a traditional focus on healthcare policy as the classic tool through which policymakers try to improve health. Beyond healthcare policy and its controversies, are there alternative options that policymakers should consider in efforts to improve overall US population health and reduce or eliminate disparities across subgroups of the population?

Grading

	<u>Points</u>	<u>Dates</u>
1) Out-of-class writing assignments. There will be 5 of these, each worth 10 points.	50	8/29, 9/12, 9/26, 10/24, & 11/28
2) Class attendance	50	All
3) 1 st exam	100	September 14
4) 2 nd exam.....	100	October 12
5) 3 rd exam.....	100	November 16
6) 4 th exam (both new material and cumulative).....	100	December 9 (Noon)

The 5 writing assignments will be reaction papers (i.e., 2-3 double-spaced pages apiece) where students will be expected to provide perspective on readings, lectures, class discussion, and/or other class materials. The instructor will provide prompts for these papers. These papers serve multiple purposes. Most important, they facilitate students' regular engagement with the class materials. This is an important part of the active learning process and the papers will be evaluated based on evidence that students are actively engaging with the class materials. Second, the papers provide students with the opportunity to begin to formulate their own informed opinions regarding population health in the United States. Importantly, such opinions will not be based on what students heard from their parents while they grew up or what students may have heard or seen in the popular media; rather, these opinions will be based on what the best science in the area is finding and how such science is interpreted. Finally, the papers will provide the instructor and the teaching assistants with a gauge of how well students are absorbing and evaluating the class material. A hard copy of each paper will be due at the beginning of class.

Class attendance will be assessed daily by your teaching assistant through Poll Everywhere. Each of the 25 non-exam class periods (after the first day) will count as 2 points apiece.

The exams will cover material that is in the readings and material that is presented and discussed in-class (e.g., discussion, lectures, videos, etc.). The exams will consist of multiple choice questions. PLEASE NOTE THAT MAKE-UP EXAMS WILL ONLY BE GIVEN WITH PHYSICIAN DOCUMENTATION OF ILLNESS, A RELIGIOUS HOLIDAY, OR FOR A UNC-SPONSORED EVENT. PLEASE SEE OR WRITE YOUR TA TO RESCHEDULE THESE.

Your final course grade will be based on a 500-point grading scale. The specific scale is as follows:

- 465-500 = A
- 450-464 = A-
- 435-449 = B+
- 415-434 = B
- 400-414 = B-
- 385-399 = C+
- 365-384 = C
- 350-364 = C-
- 335-349 = D+
- 300-334 = D
- <300 = F

******* There are no extra credit opportunities in this class!!! *******

Daily Course Structure

We only meet a total of 30 times, 4 of which will be dedicated to exams. Consequently, we only have 26 meetings with content, one of which is today. Moreover, each course period is just 75 minutes. All told then, we only have 32.5 hours of course time dedicated to content. And there is *so much to learn* in this area of study. Thus, we must make the most of each meeting. **As such, students are expected to arrive to class on time, to be prepared to engage with the materials assigned for that day, and to stay for the entire class period.**

Generally, each class period will open with an introduction by the instructor to set the stage for day. This includes using the “Poll Everywhere” app (available to students for free on iOS and Android devices) to respond to a multiple-choice question related to that day’s reading. Participation in this exercise reflects students’ class attendance, as well as their understanding of class materials. *[Note: if you are unable to download and use the app, please inform your TA as soon as possible.]* Following this exercise, there may be a slide or two showing some data that reflects that day’s reading, a short video clip relevant to the day’s reading, or a description of a scientific or policy debate that is ongoing on the topic for the day. This portion of each class period is meant to be a short introduction (i.e., 10 or so minutes) to the topic of the day to get things started. Next, a major portion of each day’s class will involve the instructor engaging the students in a discussion of some of the key points in the day’s assigned readings. This will include hashing out the main questions and key points/findings of each reading, understanding the data and methods (if any) used in each reading, discussing the research questions/debates that the readings may raise, and thinking through the policy implications that each reading may or may not have.

Course Policies

Note on Academic Integrity and Honesty/Dishonesty:

The Honor Code of the University of North Carolina at Chapel Hill ...

<https://studentconduct.unc.edu/> ... covers issues such as integrity, lying, cheating, and other acts of academic dishonesty. All students must be familiar with, and abide by, the Honor Code. Violations of the Honor Code will be taken very seriously.

Note on Accommodations for Religious Holidays:

Please notify your assigned TA of a pending absence at least 14 days prior to the date of observance of a religious holiday. If you must miss a class or an examination to observe a religious holiday, you will be given an opportunity to complete missed work within a reasonable time after the absence.

Note on Accommodations for Students with Disabilities:

Any student in the course who has a disability that may prevent him or her from fully demonstrating his or her abilities should contact Disability Services as soon as possible to discuss accommodations. Please write or see your TA for any assistance with this.

Note on Use of Electronic Equipment and Newspapers in Class:

To promote the most effective and least distracting learning environment in this class, all electronic equipment – including laptops, cell phones, cameras, I-Pads, I-Pods, and any others – **must be silenced and stored** throughout each period, except when participating in a “Poll Everywhere” classroom exercise at the beginning of class or during class. All newspapers and magazines must also be stored throughout each class period. A TA or myself will politely ask you to put away such material the first time; if such use continues, you will be asked to leave the classroom.

Note on Attendance, Tardiness, and Leaving Early:

Regular attendance in class is very strongly encouraged. To promote the most effective and least distracting learning and teaching environment in this class, students are very strongly encouraged to come to class on time. Each class will begin with a “Poll Everywhere” class exercise, where students will be asked a question related to the assigned reading materials. Students who are not present to participate in the poll will be marked as absent. Second, because of the size of the class, walking out or early departures will not be tolerated; simply put, such behavior is disruptive to the instructor and to other students. TA’s will closely monitor any walking out or early departures and will mark students absent if they do so.

Note on Class Preparation:

The course is designed such that students should plan on spending 3-4 hours preparing for each class (6-8 hours per week), depending on your pace of reading/writing and study habits. Students who fall behind on reading will do significantly worse, on average, than students who keep up with the reading. The reading load is do-able and most (all!) of it is interesting. I cannot emphasize to you enough to keep up with it on a day-to-day basis.

Note on Email Communication:

Students must use a greeting (e.g., Dear Dr. Hummer or Dear Alyssa), complete sentences, and a closing/signature (e.g., Thank you. Sincerely, Jane Doe) when writing an email to the instructor or their TA. The instructor and TAs will not respond to an email if not professionally written.

Course Schedule and Readings

<u>Date</u>	<u>Topic</u>	<u>Reading(s) for Class</u>
August 22 (T)	Syllabus	
August 24 (TH)	Intro to Population Health	Kindig and Stoddart: 380-383 Visit website of IAPHS Hummer-Hamilton: Chapter 1
August 29 (T)*	Measuring Population Health	Harris: 1-22 Visit website of Add Health
August 31 (TH)	Measuring Population Health	Etches et al.: 29-55
September 5 (T)	Measuring Population Health	National Center for Health Statistics: 1-476 (Focus reading on pp. 10-37)
September 7 (TH)	Trends in Population Health	Hummer-Hamilton: Chapter 2
September 12 (T)*	Trends in Population Health	Case-Deaton: 15078-15083
September 14 (TH)	Exam #1	
September 19 (T)	Geographic Patterns	Hummer-Hamilton: Chapter 3 Avendano-Kawachi: 307-325
September 21 (TH)	Geographic Patterns	Montez et al.: 561-571 Dwyer-Lindgren et al.: 1003-1011
September 26 (T)*	Geographic Patterns	Diez Roux-Mair: 125-145

September 28 (TH)	Socioeconomic Disparities	Hummer-Hamilton: Chapter 4 Hummer & Hernandez: 1-18
October 3 (T)	Socioeconomic Disparities	Phelan et al.: S28-S40 Link et al.: 17-25
October 5 (TH)	Socioeconomic Disparities	Pampel et al.: 349-370 Lawrence: 1-16
October 10 (T)	Socioeconomic Disparities	Chetty et al.: 1750-1766
October 12 (TH)	Exam #2	
October 17 (T)	Introducing Race Disparities	Hummer-Hamilton Chapter 5
October 19 (TH)	No Class: Fall Break!	
October 24 (T)*	Racial/Ethnic Disparities	Phelan-Link: 311-330
October 26 (TH)	Racial/Ethnic Disparities	Hummer et al: 1-30
October 31 (T)	Racial/Ethnic Disparities	Markides-Eschbach: 227-240 Hayward et al.: 81-96
November 2 (TH)	Immigrant Health	Hummer et al.: 654-661 Hummer-Hayward: 20-29
November 7 (T)	Immigrant Health	Hamilton et al.: 783-818

November 9 (TH)	Gender & Health	Hummer-Hamilton: Chapter 6
November 14 (T)	Gender Disparities	Read and Gorman: 371-386 Crimmins et al.: 81-91
November 16 (TH)	Exam #3	
November 21 (T)	Population Health Policy	Hummer-Hamilton Chapter 7 Quadagno 25-44
November 23 (TH)	No Class: Thanksgiving Day	
November 28 (T)*	Population Health Policy	House 1-15
November 30 (TH)	Population Health Policy	House 16-88
December 5 (T)	Population Health Policy	House 89-158
December 9 (S)	Final Exam (Noon)	

*** = Writing Assignment Due That Day!!!**

REQUIRED MATERIALS AND READING LIST

Poll Everywhere App (required):

<https://www.polleverywhere.com/mobile>

Books: availability listed below.

House, James S. 2015. Beyond Obamacare: Life, Death, and Social Policy. NY: Russell Sage Foundation.

** Available for purchase on multiple websites, including Amazon, Barnes & Noble, etc.

National Center for Health Statistics. 2017. Health, United States, 2016: With Chartbook on Long-Term Trends in Health. Hyattsville, MD: National Center for Health Statistics.

** Available free to download.

Articles and Chapters: available on Sakai.

Avendano Mauricio, and Ichiro Kawachi. 2014. "Why do Americans have shorter life expectancy and worse health than do people in other high-income countries?" Annual Review of Public Health 35: 307-25.

Case, Anne, and Angus Deaton. 2015. "Rising Morbidity and Mortality in Midlife among White Non-Hispanic Americans in the 21st Century." Proceedings of the National Academy of Sciences 112(49): 15078-15083.

Chetty, Raj, Michael Stepner, Sarah Abraham, Shelby Lin, Benjamin Scuderi, Nicholas Turner, Augustin Bergeron, and David Cutler. 2016. "The Association Between Income and Life Expectancy in the United States, 2001-2014." JAMA 315(16): 1750-1766.

Crimmins, Eileen M., J.K. Kim, and Aida Sole-Auro. 2010. "Gender Differences in Health: Results from SHARE, ELSA, and HRS." European Journal of Public Health 21(1): 81-91.

Diez Roux, Ana V., and Christina Mair. 2010. "Neighborhoods and Health." Annals of the New York Academy of Sciences 1186: 125-145.

Etches, Vera, John Frank, Erica Di Ruggiero, and Doug Manuel. 2006. "Measuring Population Health: A Review of Indicators." Annual Review of Public Health 27: 29-55.

Hamilton, Erin R., Jodi B. Cardoso, Robert A. Hummer, and Yolanda C. Padilla. 2011. "Assimilation and Emerging Health Disparities among New Generations of U.S. Children." Demographic Research 25(25): 783-818.

Harris, Kathleen Mullan. 2010. "An Integrated Approach to Health." Demography 47(1): 1-22.

Hayward, Mark D., Robert A. Hummer, Chi-Tsun Chiu, Cesar Gonzalez-Gonzalez, and Rebeca Wong. 2014. "Does the Hispanic Paradox in U.S. Adult Mortality Extend to Disability?" Population Research and Policy Review 33: 81-96.

Hummer, Robert A., and Erin R. Hamilton. 2017. Population Health in the United States. Draft chapters 1-7 for book under contract to the University of California Press.

Hummer, R.A. and Hayward M.D. (2015). Hispanic older adult health and longevity in the United States: Current patterns and concerns for the future. Daedalus 144(2): 20-30.

Hummer, Robert A., and Elaine M. Hernandez. 2013. "The Effect of Educational Attainment on Adult Mortality in the United States." Population Bulletin 68(1): 1-18. Washington, DC: Population Reference Bureau.

Hummer, Robert A., Jennifer E. Melvin, and Monica He. 2015. "Immigration, Health, and Mortality." Pp. 654-661 in: James D. Wright (editor-in-chief), International Encyclopedia of Social and Behavioral Sciences, 2nd Edition, Volume 11. Oxford: Elsevier Press.

Hummer, Robert A., et al. 2017. "Leveling the Playing Field? Race/Ethnicity and US Infant Mortality among Low Risk Women." Paper in review.

Kindig, David, and Greg Stoddart. 2003. "What Is Population Health?" American Journal of Public Health 93(3): 380-383.

Lawrence, Elizabeth M. 2017. "Why Do College Graduates Behave More Healthfully Than Those Who Are Less Educated?" Journal of Health and Social Behavior DOI: 10.1177/0022146517715671: 1-16.

Markides, Kyriakos S., and Karl Eschbach. 2011. "Hispanic Paradox in Adult Mortality in the United States." Chapter 11 (pp. 227-240) in International Handbook of Adult Mortality, edited by R.G. Rogers and E.M. Crimmins. Springer Publishers.

Montez, Jennifer Karas, Anna Zajacova, and Mark D. Hayward. 2016. "Explaining Inequalities in Women's Mortality between U.S. States." SSM - Population Health 2: 561-571.

Phelan, Jo C., and Bruce G. Link. 2015. "Is Racism a Fundamental Cause of Inequalities in Health?" Annual Review of Sociology 41: 311-330.

Phelan, Jo C., Bruce G. Link, and Parisa Tehranifar. 2010. "Social Conditions as Fundamental Causes of Health Inequalities: Theory, Evidence, and Policy Implications." Journal of Health and Social Behavior 51(extra issue): S28-S41.

Quadagno, Jill. 2004. "Why the US Has No National Health Insurance: Stakeholder Mobilization Against the Welfare State, 1945-1996." Journal of Health and Social Behavior 45(extra): 25-44.

Read, Jen'nan. G., and Bridget K. Gorman. 2010. "Gender and Health Inequality." Annual Review of Sociology 36: 371-386.

Sociology of Health & Mental Illness

SOCI 422.003

T-TH 2:00-3:15, Phillips 206

Spring Semester, 2016

Instructor Information

Dr. Robert A. Hummer

Howard W Odum Distinguished Professor of Sociology

Office: Hamilton 158

Office Hours: T-TH 4:00-5:00; by appointment

Email: rhummer@email.unc.edu

TA Information

Mr. Sam Fishman*

Graduate Student, Department of Sociology

Office: Hamilton 210

Office Hours: T 12:45-1:45

Email: samfish@live.unc.edu

*** Please contact Sam for all attendance, administrative, and grading matters for this course.**

Course Description and Objectives

The overall goal of this course is to provide students with an introduction to the study of health from a sociological perspective. The course focuses most centrally on understanding the social contexts that are so important for the health of individuals and populations. The course will focus on both physical and mental health patterns and trends. A substantial portion of the course will be geared toward understanding how social contexts operate to produce health disparities across subgroups of the U.S. population, particularly those defined by race/ethnicity, nativity, gender, and socioeconomic status.

The course objectives are:

- 1) To better understand how the social contexts within which individuals live influences health at both the individual and population levels. This objective will be assessed through student performance on in-class activities and on the exams throughout the semester.**
- 2) To read and critically assess several recent key books and articles which focus on the social contexts that influence health. This objective will also be assessed through student performance on in-class activities and the exams throughout the semester.**

Grading

There are five 100-point portions of your grade for this class.

The five portions of your grade and the dates of each are as follows:

	<u>Points</u>	<u>Dates</u>
1) Various in-class writing assignments/activities (There will be 6 of these, each worth 20 points; if you miss one, you can still accumulate 100 points. If you do all 6, you can possibly accumulate 120 points. THERE ARE <u>NO</u> MAKE-UPS OR SUBSTITUTES FOR THESE).	100	VARIOUS
2) 1 st exam	100	
3) 2 nd exam.....	100	
4) 3 rd exam.....	100	
5) Final exam.....	100	

The exams will cover material that is in the readings and material that is presented in-class (e.g., lectures, videos, etc.). The exams will mainly consist of short answer and essay questions. **MAKE-UP EXAMS CAN ONLY BE GIVEN WITH PHYSICIAN DOCUMENTATION OF ILLNESS, A RELIGIOUS HOLIDAY, OR FOR A UNC-SPONSORED EVENT. PLEASE SEE OR WRITE SAM ON THIS POINT.**

Overall, then, your final course grade will be based on a 500-point grading scale. The specific scale is as follows:

465-500 = A
450-464 = A-
435-449 = B+
415-434 = B
400-414 = B-
385-399 = C+
365-384 = C
350-364 = C-
335-349 = D+
315-334 = D
300-314 = D-
<300 = F

There are no extra credit opportunities in this class.

Course Policies

Note on Academic Honesty/Dishonesty:

The Honor Code of the University of North Carolina at Chapel Hill covers issues such as cheating and other acts of academic dishonesty. All students must be familiar with, and abide by, the Honor Code.

Note on Accommodations for Religious Holidays:

Please notify the TA of your pending absence at least 14 days prior to the date of observance of a religious holiday. If you must miss a class or an examination in order to observe a religious holiday, you will be given an opportunity to complete the missed work within a reasonable time after the absence.

Note on Accommodations for Students with Disabilities:

Any student in the course who has a disability that may prevent him or her from fully demonstrating his or her abilities should contact Disability Services as soon as possible to discuss accommodations.

Note on Use of Electronic Equipment and Newspapers in Class:

To promote the most effective and least distracting learning and teaching environment in this class, all electronic equipment – including laptops, cell phones, cameras, I-Pads, I-Pods, and any others – must be silenced and stored throughout each class period. All newspapers and magazines must also be stored throughout each class period. The TA or myself will politely ask you to put away such material on a here or there basis; if such use continues, you will be asked to leave the class.

Note on Attendance, Tardiness, and Leaving Early:

Regular attendance in class is very strongly encouraged. This is reflected in the grading policy outlined above; we will have regular in-class writing, discussion, or other activities that, together, account for 20% of your grade. To promote the most effective and least distracting learning and teaching environment in this class, students are very strongly encouraged to come to class on time. If you must be late, please enter quietly and do not disturb the other students or instructor. Early departures will not be tolerated; simply put, early departures are disruptive to the instructor and to other students. If you must leave class early, please mention this to the TA before the class begins and sit near the door that day.

Note on Class Preparation

The course is designed such that students should spend 2-4 hours preparing for each class (4-8 hours per week), depending on your pace of reading and study habits. Students who fall behind on reading will do significantly worse, on average, than students who keep up with the reading. The reading load is do-able and most (all!) of it is interesting. I cannot emphasize to you enough to keep up with it on a day-to-day basis.

Course Schedule

<u>Date</u>	<u>Topic</u>	<u>Reading for Class</u>
January 12 (T)	Syllabus; Introduction	
January 14 (TH)	Theoretical Foundations	Link-Phelan article
January 19 (T)	Theoretical Foundations	Phelan-Link article
January 21 (TH)	Heat Wave	Kleinenberg 1-36
January 26 (T)	Heat Wave	Klinenberg 37-78
January 28 (TH)	Heat Wave	Klinenberg 79-128
February 2 (T)	Heat Wave	Klinenberg 129-184
February 4 (TH)	Heat Wave	Klinenberg 185-224
February 9 (T)	Heat Wave	Klinenberg 225-242
February 11 (TH)	Exam #1	
February 16 (T)	Intro to Immigrant Health	Hummer et al. article
February 18 (TH)	Fresh Fruit	Holmes 1-29
February 23 (T)	Fresh Fruit	Holmes 30-87
February 25 (TH)	Fresh Fruit	Holmes 88-110
March 1 (T)	Fresh Fruit	Holmes 111-154
March 3 (TH)	Fresh Fruit	Holmes 155-198
March 8 (T)	SECOND EXAM!!!	
March 10 (TH)	Social Cause of Distress	M&R 1-20
March 15 (T)	SPRING BREAK!!!	
March 17 (TH)	SPRING BREAK!!!	
March 22 (T)	Social Causes of Distress	M&R 21-71

March 24 (TH)	Social Causes of Distress	M&R 75-156
March 29 (T)	Social Causes of Distress	M&R 157-249
March 31 (TH)	Catch up on reading; study day	
April 5 (T)	Social Causes of Distress	M&R 250-277
April 7 (TH)	THIRD EXAM!!!	
April 12 (T)	Beyond Obamacare	House 1-15
April 14 (TH)	Beyond Obamacare	House 16-47
April 19 (T)	Beyond Obamacare	House 48-86
April 21 (TH)	Beyond Obamacare	House 87-128
April 26 (T)	Beyond Obamacare	House 129-158
Date to be determined	FINAL EXAM!!!	

REQUIRED READING

Books: available at Student Stores.

Holmes, Seth. 2013. Fresh Fruit, Broken Bodies: Migrant Farmworkers in the United States. Berkeley, CA: University of California Press.

House, James S. 2015. Beyond Obamacare: Life, Death, and Social Policy. NY: Russell Sage Foundation.

Klinenberg, Eric. 2002. Heat Wave: A Social Autopsy of Disaster in Chicago. Chicago: University of Chicago Press.

Mirowsky, John, and Catherine E. Ross. 2003. Social Causes of Psychological Distress, Second Edition. Hawthorne, NY: Aldine De Gruyter.

Articles: available on Sakai.

Hummer, Robert A., Jennifer E. Melvin, and Monica He. 2015. "Immigration, Health, and Mortality." Pp. 654-661 in: James D. Wright (editor-in-chief), International Encyclopedia of Social and Behavioral Sciences, 2nd Edition, Volume 11. Oxford: Elsevier Press.

Link, Bruce G., and J. Phelan. 1995. "Social Conditions as Fundamental Causes of Disease." Journal of Health and Social Behavior 35 (extra issue): 80-94.

Phelan, Jo C., and Bruce G. Link. 2015. "Is Racism a Fundamental Cause of Inequalities in Health?" Annual Review of Sociology 41: 311-330.