Sociology 355, Sociology of Medicine (Spring 2017)

T/Th 9:30-10:50, University 101

Prof. Carol Heimer

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General Introduction

This course introduces some of the main topics of medical sociology: the social construction of health and illness; inequalities in the distribution of illness and health care; the globalization of health care; and the organization of health care work, the medical professions, and the health care system. Students will learn about variations in who gets sick and why, how the health professions evolved in the United States and how the health care "turf" has been divided among professions, whether and when patients and their families participate in medical decision making, why physicians have more authority and receive higher incomes in the U.S. than elsewhere, what doctors do when interns and residents make mistakes, what the relationship is between hospitals and other health care organizations and how that relationship has changed over time, how the American healthcare system compares to other healthcare systems, how expenditures on preventive medicine compare with expenditures on high-tech cutting-edge medicine, and why the U.S. invests so much in high-tech medicine.

Required Readings (purchase or library)

- (1) Abraham, Laurie Kaye. 1993. Mama Might Be Better Off Dead: The Failure of Health Care in Urban America. Chicago: University of Chicago Press.
- (2) Bosk, Charles L. 2003 (1979). Forgive and Remember: Managing Medical Failure. Chicago: University of Chicago Press. (Either edition is fine.)
- (3) Chambliss, Daniel F. 1996. *Beyond Caring: Hospitals, Nurses, and the Social Organization of Ethics*. Chicago: University of Chicago Press.
- (4) Starr, Paul. 2011. *Remedy and Reaction: The Peculiar American Struggle over Health Care Reform.* New Haven: Yale University Press.

Plus one of the following (purchase or library)

- (5) Fadiman, Anne. 1997. The Spirit Catches You and You Fall Down. New York: Farrar, Straus, and Giroux.
- (6) Epstein, Helen. 2008. The Invisible Cure: Why We Are Losing the Fight Against AIDS in Africa. Picador.
- (7) Kidder, Tracy. 2004. Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Would Cure the World. New York: Random House.
- (8) Ravage, Barbara. 2004. Burn Unit: Saving Lives After the Flames. Cambridge, MA: Da Capo Press.

Required Readings (Canvas) (check for additions or deletions as quarter unfolds)

Anspach, Renée. 1988. "Notes on the Sociology of Medical Discourse: The Language of Case Presentation." *Journal of Health and Social Behavior* 29:357-375.

Baker, Tom. 2005. "The Medical Malpractice Myth" (chapter 1). Pp. 1-21 in *The Medical Malpractice Myth*. Chicago: University of Chicago Press.

Baker, Tom. 2005. "An Epidemic of Medical Malpractice, Not Malpractice Lawsuits" (chapter 2). Pp. 22-44 in *The Medical Malpractice Myth*. Chicago: University of Chicago Press.

Brill, Steven. 2013. "Bitter Pill: Why Medical Bills Are Killing Us." Time, February 20, 2013.

Conrad, Peter. 1985. "The Meaning of Medications: Another Look at Compliance." *Social Science and Medicine* 20:29-37.

Conrad, Peter, and Valerie Leiter. 2004. "Medicalization, Markets and Consumers." *Journal of Health and Social Behavior* 45:158-176.

Crone, Robert K. 2008. "Flat Medicine: Exploring Trends in the Globalization of Health Care." *Academic Medicine* 83(2):117-121.

- Farmer, Paul. 1996. "Social Inequalities and Emerging Infectious Diseases." *Emerging Infectious Diseases* 2(4):259-269.
- Fidler, David P. 2001. "The Globalization of Public Health: The First 100 Years of International Health Diplomacy." *Bulletin of the World Health Organization* 79(9):842-849
- Heimer, Carol A. 2007. "Old Inequalities, New Disease: HIV/AIDS in Sub-Saharan Africa." *Annual Review of Sociology* 33:551-577.
- Heimer, Carol A., and Lisa R. Staffen. 1998. "Life in Two Neonatal Intensive Care Units" (chapter 2). Pp. 37-76 in *For the Sake of the Children: The Social Organization of Responsibility in the Hospital and the Home*. Chicago: University of Chicago Press.
- Heimer, Carol A., and Lisa R. Staffen. 1998. "The Social Control of Parenting in the NICU" (chapter 5). Pp. 178-225 in For the Sake of the Children: The Social Organization of Responsibility in the Hospital and the Home. Chicago: University of Chicago Press.
- Heimer, Carol A., and Lisa R. Staffen. 1998. "Novice Managers of Expert Labor: Parents as Agents of Social Control in the NICU" (chapter 6). Pp. 226-278 in *For the Sake of the Children: The Social Organization of Responsibility in the Hospital and the Home*. Chicago: University of Chicago Press.
- Lutfey Spencer, Karen, and Matthew Grace. 2016. "Social Foundations of Health Care Inequality and Treatment Bias." *Annual Review of Sociology* 42:101-120.
- McKinlay, John B., and Lisa D. Marceau. 2002. "The End of the Golden Age of Doctoring." *International Journal of Health Services* 32:379-416.
- McKinlay, John, and Lisa Marceau. 2008. "When There Is No Doctor: Reasons for the Disappearance of Primary Care Physicians During the Early 21st Century." *Social Science and Medicine* 67:1481-1491.
- McKinlay, John B., and Sonja M. McKinlay. 1977. "The Questionable Contribution of Medical Measures to the Decline of Mortality in the United States." *Milbank Memorial Fund Quarterly. Health and Society* 55:405-428.
- Saguy, Abigail C., and Kjerstin Gruys. 2010. "Morality and Health: News Media Constructions of Overweight and Eating Disorders." *Social Problems* 57:231-250.
- Starr, Paul. 1982. "Introduction: The Social Origins of Professional Sovereignty." Pp. 3-29 in *The Social Transformation of American Medicine: The Rise of A Sovereign Profession and the Making of a Vast Industry*. New York: Basic Books.
- Starr, Paul. 1982. The Social Transformation of American Medicine: The Rise of A Sovereign Profession and the Making of a Vast Industry. New York: Basic Books. Précis from 2004 retrospective on the book in the Journal of Health Politics, Policy and Law (vol. 29, #4-5).
- Timmermans, Stefan. 1998. "Social Death as Self-Fulfilling Prophecy: David Sudnow's *Passing On Revisited*." *The Sociological Quarterly* 39:453-472.
- Timmermans, Stefan. 2008. "Oh Look, There Is a Doctor After All: About the Resilience of Professional Medicine: A Commentary on McKinlay and Marceau's 'When There Is No Doctor." *Social Science and Medicine* 67:1492-1496.
- Wendland, Claire L. 2012. "Moral Maps and Medical Imaginaries: Clinical Tourism at Malawi's College of Medicine." *American Anthropologist* 114: 108-122.
- WHO. 2001. "Globalization and Health Viewed from Three Parts of the World." *Bulletin of the World Health Organization* 79(9):889-893. (this is actually 3 separate pieces with separate authors)
- WHO. 2010. "Medicines: Essential Medicines." Fact Sheet #325. Revised June 2010. (available on WHO website)
- WHO. 2010. "Migration of Health Workers." Fact Sheet #301. Updated July 2010. (available on WHO website) WHO. 2012. "The Right to Health." Fact Sheet #323. November 2012. (available on WHO website)
- Williams, David R. 2012. "Miles to Go before We Sleep: Racial Inequities in Health." *Journal of Health and Social Behavior* 53:279-295.
- Winnick, Terri A. 2005. "From Quackery to 'Complentary' Medicine: The American Medical Profession Confronts Alternative Therapies." *Social Problems* 52:38-61.

Assignments and Evaluation

Class sessions will combine lectures and discussions. Because a discussion format encourages students to read more actively in preparation, discussion is strongly encouraged. Students are expected to come to class regularly, to have done the readings before class, and to contribute to class discussion. The course material is intended to be cumulative; you will need to draw on earlier readings for subsequent discussions and written assignments.

Grades will be based primarily on written materials (but see below on attendance and participation). Written assignments include two papers of about 8-10 pages each (35%); and a final essay exam (30%). Descriptions of each paper assignment will be supplied a week before the paper is due; exam questions will posted on Canvas at the beginning of the reading period.

The assumption is that you will attend class and contribute to the discussion. You should not enroll in this class if you do not plan to attend. Attendance and participation will affect grades in two ways. First, if you miss class repeatedly or do not contribute to discussion, I reserve the right to lower your grade by up to 10%. Second, at each class you will be given the opportunity to hand in one typed sheet of notes on that day's reading assignment. These notes will be kept in your portfolio and given to you for use during the in-class final essay exam. Although you can surely do the exam without notes, you will probably find it advantageous to have key points from the readings available during the final.

Class Schedule

March 28 (Tu): Introduction to class: what we know and think we know about health care. Reading: get started on Abraham.

I. The distribution of illness and healthcare and the social construction of illness

March 30 (Th): Introduction to how healthcare looks to poor and uninsured people. Reading: Abraham (Read entire book; it's a popular book, so should be fast reading. Pay particular attention to material on how Medicare and Medicaid work).

April 4 (Tu): Social factors and the etiology of illness. The likelihood of getting sick is unevenly distributed across social groups. We will examine some of the social factors (e.g., physical working conditions, stress at work, investments in sanitation) that increase the likelihood that some will be sick and others healthy. Readings: Heimer on HIV/AIDS (Canvas); McKinlay & McKinlay on medical measures & decline of mortality (Canvas); Lutfey Spencer and Grace on social foundations of inequality in healthcare (Canvas); Williams on race, ethnicity, and health (Canvas). Start reading *either* Epstein, Fadiman, Kidder, or Ravage. (Choose one, but choose carefully because you will be drawing on the book in your written assignments throughout the quarter. Read whole book – these are all popular books, not scholarly tomes, so should be relatively fast reading.)

April 6 (Th): The social construction of health and illness. Sickness is not morally neutral. For instance, we sometimes think that when people become ill it is because they "deserve" to either because of some moral failing (such as drug abuse) or because they have not taken care of themselves (e.g., paying attention to nutrition or going to the doctor when something goes wrong). It is not always clear whether an "illness" is physiologically based and whether we should be defining it as a medical problem or as a social control problem. The moral overtones of illness may also tend to make healthcare providers insensitive to the social and psychological experience of illness. Reading: Saguy & Gruys on obesity (Canvas); Conrad on meaning of medications (Canvas); Conrad & Leiter on medicalization (Canvas). Continue reading Epstein, Fadiman, Kidder, or Ravage.

II. Patient perspectives on healthcare and interactions between patients and caregivers

April 11 (Tu): Variations in experiences with the medical world. How patients and their families and friends experience the medical world depends on what kind of medical problems they have, their cultural understandings of the relationship between health and illness, the resources available to them, and the way healthcare is organized in their society. This session will be organized around four popular books that will function as "data" for our class. Reading: complete Epstein, Fadiman, Kidder, or Ravage.

April 13 (Th), April 18 (Tu), April 20 (Th): Relations between patients and health care workers; the participation of patients and families in decisions about healthcare. We (and healthcare providers) are of two minds about patient and family participation in medical decision making. On the one hand, we believe that patients have a right to make or participate in decisions that affect their lives and health; on the other hand we recognize that physicians have expertise that patients lack. In this section we will discuss the give and take between healthcare workers and patients' families as each group tries to exert some control over the other. We will also other issues in how heath care workers relate to patients, such as how and why healthcare providers transform patients into technical problems and statistical patterns, what happens when patients (or their families) do not conform to the expectations of medical workers and fail to do their part of the work, and how medical workers insulate

themselves from fear and attachment. Readings: Heimer and Staffen (3 chapters on Canvas); Anspach (Canvas); Timmermans 1998 (Canvas).

III. Health care professions

April 25 (Tu): Medical authority. Physicians are not high-status professionals in all societies, and medical knowledge has not always carried as much weight as it currently does in the U.S. What accounts for variations in the authority of physicians and of medical knowledge? What role have medical education and the state played in supporting medical authority? How have physicians used their authority to resist others' attempts to control or regulate their activities? Readings: Starr, *The Social Transformation of American Medicine*, Introduction (Canvas); précis of book from journal retrospective (Canvas); Winnick (Canvas).

April 27 (Th): Recent changes in the medical profession, continuing struggles over turf with nearby professions. Although they are a relatively small proportion of the healthcare workforce, physicians dominate the medical world. In some cases physicians have become dominant by actively suppressing other professions. Readings: McKinlay & Marceau, two articles (Canvas); Timmermans 2008 (Canvas).

May 2 (Tu) and May 4 (Th): Professional socialization and professional self-regulation. Continuing the discussion of the previous week, we focus on the process by which physicians acquire the book learning and skills to practice medicine and on the central question of how physicians deal with error. A key claim of professions is that they should have the right to regulate themselves, partly because others are not competent to perform such regulatory functions; here we examine the adequacy of professional social control. Reading: Bosk, chapters 1-6; Baker, *The Medical Malpractice Myth*, chapters 1 & 2 (Canvas).

May 9 (Tu): Working conditions of ancillary professions. The work of other healthcare professionals is strongly shaped by the joint influences of powerful physicians and hospital bureaucracies. Reading: Chambliss (whole book; it's short).

IV. Other healthcare systems and the economics of healthcare

May 11 (Th), May 16 (Tu), May 18 (Th): The healthcare systems of many nations are currently described as being in crisis. Much of this crisis concerns the escalating costs of healthcare. In an attempt to control costs, reformers begin to consider different models of healthcare and to speculate about whether healthcare might be delivered more cheaply and more effectively in clinics rather than in hospitals, by ancillary professionals rather than by physicians, and by alternative financing systems. But how reforms unfold also depends a great deal on the starting point. Readings: Starr, *Remedy and Reaction* (Intro, pp. 1-24; 1st sections of chapter 1-5, pp. 27-29, 51-52, 79-83, 103-104, 129-131; all of chapters 6-9, pp. 161-281); Brill (*Time* article on health care bills) (Canvas)

May 23 (Tu) and May 25 (Th): The globalization of health care and what that really means. Readings: Crone, Farmer, Fidler, Wendland, WHO (4 short items) (Canvas)

Regular office hours during reading week. No office hours during exam week.

June 1 (Th), 9:30-10:50: review session

June 8 (Th), 12-2: final exam

Due Dates for Writing Assignments and Exams

Monday, April 17: 1st paper assignment posted on Canvas

Monday, April 24, 12PM: 1st paper (8-10 pp.) due — electronic copy on Canvas and emailed to <u>c-heimer@northwestern.edu</u>. No paper copy required.

Monday, May 8: 2nd paper assignment posted on Canvas

Monday, May 15, 12PM: 2nd paper (8-10 pp.) due — electronic copy on Canvas and emailed to <u>c-heimer@northwestern.edu</u>. No paper copy required.

Tuesday, May 30: Possible exam questions posted on Canvas

Thursday, June 8, 12-2PM: Final exam