**Sociology 4629**

**Health Disparities in a Social Context**

Autumn 2023

When: TBD

Where: TBD

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**Course Description**

Why is life expectancy rapidly decreasing in the U.S. while everywhere else in the developed world, it is increasing? How does mass incarceration contribute to racial disparities in health? Why are immigrants to the U.S. healthy when they arrive but face increased risks of disease and death the longer they stay here? Does exposure to racial discrimination really cause women to give birth to preterm babies? Are adolescents who take virginity pledges more or less likely to acquire a sexually transmitted infection? Is living in a gentrifying neighborhood good or bad for one’s health? These are some of the intriguing questions we will tackle in this class during the course of the semester.

Health has long been a topic of interest for sociologists. Indeed, sociological perspectives have greatly informed, and increasingly continue to inform, efforts to understand and improve health in the United States and around the globe. This course is designed to serve as an introduction to the broad area of study termed “population health” while placing special emphasis on the exploration of health inequalities in the United States.

The overarching objective of this course is to explore the ways in which social, economic, and political processes operating on a macro or structural level influence the mental and physical health status of groups of individuals. Since other Sociology courses, namely Sociology 3630, focus on the social organization of the medical care system, related topics will not be examined in-depth here.

Sociology 4629 is designed as a research and creative inquiry course. In addition to a short(er) paper assignment and two in-class exams, you will be required to complete an indepth assignment investigating the role of neighborhood environments in producing health disparities within the city of Columbus. As part of this assignment, you will (1) visit a low- and middle-income neighborhood within Columbus to assess via direct observation how the built environment differentially contributes to the health of residents who live there; (2) conduct background research of existing data sources to learn more about the demographics, histories, and population health outcomes in these two neighborhoods; (3) synthesize and critically assess your reactions and findings using class readings to provide additional theoretical context and a deeper understanding of how the neighborhood environment shapes population health disparities; and (4) present these findings in the format of an individual or group paper.

**Course Learning Objectives**

By the end of this course and in connection with other theme courses, students should successfully be able to:

*General Theme Learning Objectives*

Goal 1: Analyze social inequality and health at a more advanced and in-depth level than foundation courses. To meet this first goal, students will…

* Read original research papers from the burgeoning, interdisciplinary social determinants of health (SDOH) literature.
* Learn to identify key take-home messages from these articles as well as how to use qualitative and quantitative empirical findings to support these conclusions.
* Complete two written paper assignments that require them to critically assess and integrate ideas presented in the SDOH literature as well as class discussions.
* Complete a research project through which they will examine the possible effects of the built environment, broadly defined, on health disparities within the city of Columbus.
* Think through how topics covered in class concerning the causes and consequences of health disparities in the U.S. might be used to better inform medical interventions or public policies.

Goal 2: Integrate approaches to the study of social inequality and health by making connections across disciplines and between out-of-classroom experiences and academic knowledge. To meet this second goal, students will…

* Read a diverse, transdisciplinary set of research articles that will introduce them to the field of population health, with a particular focus on health disparities in the U.S.
* Engage in interactive class discussion that frequently ask them to consider how different groups of professionals (e.g., researchers, health care practitioners, policy makers) would differentially approach the same SDOH issue.
* Complete a research project on neighborhoods and health that is specifically designed to help students draw connections between concepts introduced in class and direct observations made with their own eyes concerning the impact of the built environment on health disparities in two distinct Columbus communities.

*Health and Wellbeing Learning Objectives*

Goal: Explore and analyze perspectives on the social determinants of mental and physical health and wellbeing within the context of the United States. To meet this goal students will…

* Read original research papers from the rapidly growing, interdisciplinary health disparities literature.
* Learn to identify and critically assess core theories and concepts that explain how mental and physical health status is unequally distributed across race, class, gender, sexual identity, and immigrant status.
* Gain a deeper understanding of how researchers use both qualitative and quantitative methodologies to study the causes and consequences of health disparities in the U.S.
* Carry out a research project on neighborhoods and health that requires them to make connections between course content and direct observations across two divergent communities in the city of Columbus.
* Consider how lessons learned from class discussions and readings can be used to improve medical encounters, public health interventions, and public policies designed to address the social determinants of health disparities.

**Course Materials**

Required readings are listed below and are divided into four sub-sections: Social Distribution of Health and Illness, Dominant Yet Inadequate Explanations for Health Disparities, Contextual Factors That Influence Health Disparities, and How Social Factors Become Embodied or “Get under the Skin”. They will be made available to you via Carmen. Articles can typically be accessed through the OSU library website via online search engines. I would recommend Google Scholar and ISI Web of Science. These are two of the best interdisciplinary search engines out there for scholarly works.

In addition to selected articles and book chapters available online, you will be required to purchase the following text:

Fadiman, Anne. 1997. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. New York, NY: Farrar, Straus & Giroux.

I suggest obtaining this book from amazon.com or Barnes & Noble. The paperback edition costs approximately $10.00.

**Format**

While I may rely on lectures to convey course material, this class will frequently be conducted using a discussion-based format that relies upon active student participation. Consequently, it is incumbent upon all students to contribute to each class meeting. This includes completing assigned readings ***prior*** to class and arriving prepared to offer thoughts and raise questions as well as participate in all class discussions and debates. Doing so will make the course a richer experience for all. Should you wish to explore a topic further, feel free to ask me for suggestions regarding additional source material.

**Attendance and Participation**

This course covers a lot of material, which we will navigate together. To support the collective learning process in this class, your attendance in both lecture and discussion section is required. You are also expected to bring readings, along with your notes on the readings, to class.

I will allow students three unexcused absences before reducing your class participation grade. Each additional unexcused absence after the third one will lower your class participation grade by three percentage points. What constitutes an excused absence is at the discretion of the instructor. I consider the following to be some examples of excused absences: an unavoidable family emergency, a transportation failure, a severe illness or the exacerbation of symptoms of a chronic illness, a medical appointment, or a positive Covid test or recent exposure. You will need to provide some sort of documentation for these absences to be excused.

I expect that you will be supportive of each other’s learning in class. Examples include arriving on time, not leaving early, listening when others speak, not monopolizing discussion time, and not having side discussions. Please turn cell phones off.

**Requirements**

1. Class participation will be assessed not simply by attendance, but by the degree to which you engage the subject matter in each class meeting. You must come to class prepared. This means that you should have read the assigned readings ***before*** class.

2. You will be required to complete two writing assignments. The first assignment will be a short, critical assessment of how a current health issue is being covered in the popular press. It should be 6 pages in length and will draw heavily on readings from the first half of the course. You will need to find three examples of news coverage of an issue of your choosing – one from a left leaning outlet, one from a right leaning outlet, and one from a centrist news source. You will compare and contrast the coverage of this particular health issue by drawing on course readings to explain why a singular event or condition is being explained differently to a diverse set of audiences.

The second assignment will address how neighborhood factors and the built environment influence health inequalities. This is an indepth, group assignment that will engage you in multiple steps of the research process including a neighborhood visit to collect primary, observational data, gathering of information from secondary sources, a written paper, and a poster presentation. You will be assigned two specific neighborhoods within the city of Columbus. In order to complete this assignment, you will travel to your assigned neighborhoods and critically assess through careful observation how residents interact with their social environment and the ways in which these neighborhood characteristics are likely to impact their health. You will augment this knowledge by identifying additional information about these neighborhoods from existing sources (e.g. census data, school “report cards,” documentaries, etc.). You will combine information from your direct observations and these secondary sources with readings from class to write your research paper and create a poster. You will be required to present this poster to the rest of the class on the last day. You will be assigned to teams of 4-5 students to complete this indepth research assignment.

I will provide time in class to workshop these papers in small groups with fellow students. This process will enable you to receive constructive feedback on both the structure and the content of these assignments before receiving a final grade. I will provide suggestion for how to conduct productive small group discussions concerning the writing process.

4. There will be two in-class exams. The midterm will be held approximately halfway through the semester and will assess your comprehension of topics covered since the beginning of the course. The final exam will be administered during finals week after the official end of classes and will be cumulative. Both exams will be comprised of short answer as well as essay questions. Each student is expected to work independently and will not be allowed to turn in similar answers. Both the midterm and final will require critical thought, precise writing, and explanation of evidence to support your arguments.

**Grading**

Class Participation 10%

Health Issue in the News Assignment 15%

Neighborhoods & Health Assignment 35%

Midterm Exam 20%

Final Exam 20%

I will be using the standard OSU grading scale for this class, which is as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A Range | B Range | C Range | D Range | Failing Grade |
| A 93-100 | B+ 87-89.99 | C+ 77-79.99 | D+ 67-69.99 | E < 60 |
| A- 90-92.99 | B 83-86.99 | C 73-76.99 | D 60-66.99 |  |
|  | B- 80-82.99 | C- 70-72.99 |  |  |

**Prerequisites**

A social science research methods course, graduate standing, or instructor approval.

**Core Competencies for the BSPH**

Sociology 4629 also fulfills requirements for the undergraduate major in Public Health/Sociology. If you are a student working toward your BSPH in this specialization, you can review the BSPH core and specialization competencies addressed by this course at the following link:

<http://cph.osu.edu/sites/default/files/students/docs/Program-and-Course-Competencies.pdf>

Please note, a listing of BSPH core and specialization competencies can be found here:

[https://cph.osu.edu/students/competencies](https://email.osu.edu/owa/redir.aspx?C=v3SynKdvK3qr3Ef_v7lA73PVbN-hlFbvY4Uay3LAk8uYcfHjaTbUCA..&URL=https%3a%2f%2fcph.osu.edu%2fstudents%2fcompetencies)

**Additional Notes**

*Covid-19 Pandemic*: Please keep me informed of any health, care-giving or other issues that arise related to the pandemic. I will work flexibly with individual students to identify reasonable accommodations. I will also be alert to issues affecting the entire class that may require adjustments. Students who need to miss class or who are not able to participate due to illness (COVID-19 or other illnesses), exposure to COVID-19, care for family members exposed to COVID-19, or for other reasons should contact me as soon as possible to arrange for accommodation. Students in special situations or those requiring specific, long-term or other accommodation should seek support from appropriate university offices including but not limited to: [Student Advocacy](https://advocacy.osu.edu/), [Student Life Disability Services](https://slds.osu.edu/) and the [Office of Institutional Equity](https://equity.osu.edu/).

*Extra Credit:* I will not be providing opportunities to receive extra credit. There are no exceptions.

*Electronics policy*: Cell phones should be stowed away and switched to silent mode during class time. Texting is, of course, a violation of this policy. Empirical evidence from rigorous studies indicates that student learning among those who take notes by hand is significantly better than among those who take notes on a computer. I allow the use of laptops and tablets in class, but based on this empirical data, I recommend taking notes the old-fashioned way with a notebook and pen or pencil.

*Copyright Disclaimer*: The materials used in connection with this course may be subject to copyright protection and are only for the use of students officially enrolled in the course for the educational purposes associated with the course. Copyright law must be considered before copying, retaining, or disseminating materials outside of the course. Professor Cynthia Colen owns the copyright to the syllabus, exams, handouts, study aides, online lectures, in-class lectures, and other materials distributed or demonstrated in this course. They are provided solely for the educational use of students enrolled in this course. You are not permitted to copy or re-distribute them for purposes unapproved by the instructor; in particular, you are not permitted to publicly post or otherwise redistribute course materials, course recordings, or your lecture notes. Unauthorized use of course materials may be considered academic misconduct in addition to a violation of copyright law.

*Religious Holidays:* Please contact me regarding any conflict between religious observance dates and course examinations or assignments.

*Disability Statement*: The University strives to make all learning experiences as accessible as possible. If you anticipate or experience academic barriers based on your disability (including mental health, chronic or temporary medical conditions), please let me know immediately so that we can privately discuss options. You are also welcome to register with Student Life Disability Services to establish reasonable accommodations. After registration, make arrangements with me as soon as possible to discuss your accommodations so that they may be implemented in a timely fashion. SLDS contact information: slds@osu.edu; 614-292-3307; slds.osu.edu; 098 Baker Hall, 113 W. 12th Avenue.

*Title IX*: Title IX makes it clear that violence and harassment based on sex and gender are Civil Rights offenses subject to the same kinds of accountability and the same kinds of support applied to offenses against other protected categories (e.g., race). If you or someone you know has been sexually harassed or assaulted, you may find the appropriate resources at <http://titleix.osu.edu> or by contacting the Ohio State Title IX Coordinator at [titleix@osu.edu](mailto:titleix@osu.edu)

*Academic Integrity*: It is the responsibility of the Committee on Academic Misconduct to investigate or establish procedures for the investigation of all reported cases of student academic misconduct. The term “academic misconduct” includes all forms of student academic misconduct wherever committed; illustrated by, but not limited to, cases of plagiarism and dishonest practices in connection with examinations. Instructors shall report all instances of alleged academic misconduct to the committee (Faculty Rule 3335-5-487). For additional information, see the Code of Student Conduct <http://studentlife.osu.edu/csc/>.

*Mental Health Resources*: As a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance or reduce a student’s ability to participate in daily activities. The Ohio State University offers services to assist you with addressing these and other concerns you may be experiencing. If you or someone you know are suffering from any of the aforementioned conditions, you can learn more about the broad range of confidential mental health services available on campus via the Office of Student Life’s Counseling and Consultation Service (CCS) by visiting [ccs.osu.edu](http://ccs.osu.edu/) or calling 614- 292-5766. CCS is located on the 4th Floor of the Younkin Success Center and 10th Floor of Lincoln Tower. You can reach an on call counselor when CCS is closed at 614-292-5766 and 24 hour emergency help is also available through the 24/7 National Suicide Prevention Hotline at 1-800-273- TALK or at [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org/)

**List of Required Readings**

Part I: The Unequal Distribution of Health and Illness

**January 8th**

Introduction to the Course

**January 10th**

Social Construction of Health & Illness

Conrad, P. and Barker, K.K., 2010. The social construction of illness: Key insights and policy implications. *Journal of health and social behavior*, *51*(1\_suppl), pp. S67-S79.

Johnson, S., 2006. *The ghost map: The story of London's most terrifying epidemic--and how it changed science, cities, and the modern world*. Penguin. Pp 1-22.

**January 15th**

Socioeconomic Disparities in Health

Backlund E, PD Sorlie, NJ Johnson. 1996. The shape of the relationship between income and mortality in the United States: evidence from the National Longitudinal Mortality Study. *Annals of Epidemiology* 6:12-20.

Kawachi, I., Adler, N.E., and Dow, W.H., 2010. Money, schooling, and health: Mechanisms and causal evidence. *Annals of the New York Academy of Sciences*, *1186*(1), pp.56-68.

**January 17th**

Absolute vs. Relative SES

Marmot, M. 2004. *The Status Syndrome: How Social Standing Affects Our Health and Longevity*. New York, NY: Henry Holt. Pp 13-36; 82-103.

Phelan, J.C., Link, B.G. and Tehranifar, P., 2010. Social conditions as fundamental causes of health inequalities: theory, evidence, and policy implications. *Journal of health and social behavior*, *51*(1\_suppl), pp. S28-S40.

**January 22nd**

Racial Disparities in Health

Murray, C. J., Kulkarni, S. C., Michaud, C., Tomijima, N., Bulzacchelli, M. T., Iandiorio, T. J., & Ezzati, M. 2006. Eight Americas: investigating mortality disparities across races, counties, and race-counties in the United States. *PLoS Medicine*, *3*(9), e260.

**January 24th**

Discrimination and Health

Bor, J., Venkataramani, A.S., Williams, D.R. and Tsai, A.C., 2018. Police killings and their spillover effects on the mental health of black Americans: a population-based, quasi-experimental study. *The Lancet*, *392*(10144), pp.302-310.

Novak, N.L., Geronimus, A.T. and Martinez-Cardoso, A.M., 2017. Change in birth outcomes among infants born to Latina mothers after a major immigration raid. *International journal of epidemiology*, *46*(3), pp.839-849.

**January 29th**

The Hispanic Health “Paradox”

Markides, K.S. and Rote, S., 2015. Immigrant health paradox. *Emerging trends in the social and behavioral sciences: An interdisciplinary, searchable, and linkable resource*, pp.1-15.

Viruell-Fuentes, E.A., Miranda, P.Y. and Abdulrahim, S., 2012. More than culture: structural racism, intersectionality theory, and immigrant health. *Social science & medicine*, *75*(12), pp.2099-2106.

**January 31st**

Declining Life Expectancy among Working Class Whites

Case, A., & Deaton, A. 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.

Quinones, S., 2015. *Dreamland: The true tale of America's opiate epidemic*. Bloomsbury Publishing USA. Pp 1-51.

**February 5th**

Gender and Health

Read, J.N.G. and Gorman, B.K., 2010. Gender and health inequality. *Annual Review of Sociology*, *36*, pp.371-386.

Kindig, D. A., & Cheng, E. R. (2013). Even as mortality fell in most US counties, female mortality nonetheless rose in 42.8 percent of counties from 1992 to 2006. *Health Affairs*, *32*(3), 451-458.

**February 7th**

Gender and Health

Bird, C. E., & Rieker, P. P. 2008. *Gender and health: The effects of constrained choices and social policies*. Cambridge University Press. Pp 16-45.

Courtenay, WH. 2000. Constructions of masculinity and their influence on men’s wellbeing: A theory of gender & health. *Social Science and Medicine* 50:1385-1401.

Film: *The Business of Being Born* by Ricki Lake and Abby Epstein

**February 12th**

Gender and Health

Panel Discussion with Midwives

Part II: Dominant (And Inadequate) Explanations for Health Disparities

**February 14th**

Health Behaviors

Lutfey, K., & Freese, J. (2005). Toward Some Fundamentals of Fundamental Causality: Socioeconomic Status and Health in the Routine Clinic Visit for Diabetes1. *American Journal of Sociology*, *110*(5), 1326-1372.

Pampel, F.C., Krueger, P.M., and Denney, J.T., 2010. Socioeconomic disparities in health behaviors. *Annual review of sociology*, *36*, pp.349-370.

**February 19th**

Health Behaviors

Krueger PM & VW Chang. 2008. Being poor and coping with stress: health behaviors and the risk of death. *American Journal of Public Health* 98:889-896.

Lantz, P.M., Golberstein, E., House, J.S. and Morenoff, J., 2010. Socioeconomic and behavioral risk factors for mortality in a national 19-year prospective study of US adults. *Social science & medicine*, *70*(10), pp.1558-1566.

**February 21st**

Access to Health Care in a Changing Landscape

Bradley, E. and Taylor, L., 2013. *The American health care paradox: Why spending more is getting us less*. Public Affairs. Pp 49-79.

Sommers, B.D., Gawande, A.A. and Baicker, K., 2017. Health Insurance Coverage and Health-What the Recent Evidence Tells Us. *The New England journal of medicine*, *377*(6), p.586.

Sudano JJ and DW Baker. 2006. Explaining US racial/ethnic disparities in health declines and mortality in late middle age: the roles of socioeconomic status, health behaviors, and health insurance. *Social Science and Medicine* 62:909-922.

**February 26th**

Access to Health Care – Big Pharma & Drug Development

Angell, Marcia. 2005. *The Truth About the Drug Companies: How They Deceive Us and What To Do About It*. New York, NY: Random House. Pp. 3-36; 74-93.

**February 28th**

Midterm Exam

Part III: Contextual Factors That Shape the Unequal Distribution of Health

**March 4th**

Medicalization

Conrad, P., 2013. Medicalization: Changing contours, characteristics, and contexts. In *Medical sociology on the move* (pp. 195-214). Springer, Dordrecht.

Frances, A., 2013. Saving normal: An insider’s look at what caused the epidemic of mental illness and how to cure it. *New York, NY: William Morrow*. Pp. 3-34.

**March 6th**

Stigma

Hatzenbuehler, M.L., Rutherford, C., McKetta, S., Prins, S.J. and Keyes, K.M., 2020. Structural stigma and all-cause mortality among sexual minorities: Differences by sexual behavior? *Social Science & Medicine*, *244*, p.112.

Reich, J.A., 2018. "We are fierce, independent thinkers and intelligent": Social capital and stigma management among mothers who refuse vaccines. *Social science & medicine*.

**March 11th and 13th**

Spring Break – No Class

**March 18th**

Medicalization, Stigma, and Cultural Competancy

Fadiman, Anne. 1997. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. New York, NY: Farrar, Straus &Giroux.

**March 20th**

Social Support and Health

Thoits, P.A., 2011. Mechanisms linking social ties and support to physical and mental health. *Journal of health and social behavior*, *52*(2), pp.145-161.

Yang, Y.C., Schorpp, K. and Harris, K.M., 2014. Social support, social strain and inflammation: Evidence from a national longitudinal study of US adults. *Social Science & Medicine*, *107*, pp.124-135.

**March 25th**

Social Networks and Health

Bruckner, H and P Bearman. 2005. After the promise: the STD consequences of adolescent virginity pledges. *Journal of Adolescent Health* 36:271-278.

Christakis, NA and JH Fowler. 2007. The spread of obesity in a large social network over 32 years. *New England Journal of Medicine* 357:370-379.

**March 27th**

The Importance of Place

Klinenberg E. 2002. *Heat Wave: A Social Autopsy of Disaster in Chicago*. Chicago, IL: University of Chicago Press. Pp. 37-78.

LaVeist T, K Pollack, R Thorpe, R Fesahazion & D Gaskin. 2011. Place, not race: disparities dissipate in southwest Baltimore when blacks and whites live under similar conditions. *Health Affairs* 30:1880-1887.

**April 1st**

Environmental Degradation, Place, and Health

Hanna-Attisha, Mona. 2018. *What the Eyes Don’t See: A Story of Crisis, Resistance, and Hope in an American City*. One World. Pp. 16-32.

Winter, A.S. and Sampson, R.J., 2017. From lead exposure in early childhood to adolescent health: A Chicago birth cohort. *American journal of public health*, *107*(9), pp.1496-1501.

**April 3rd**

Health Consequences of Gentrification

Fullilove, MT. 2004. *Root Shock: How Tearing Up City Neighborhoods Hurts America and What We Can Do About It.* New York, NY: Random House. Pp. 3-20; 52-100.

Huynh, M. and Maroko, A.R., 2014. Gentrification and preterm birth in New York City, 2008–2010. *Journal of Urban Health*, *91*(1), pp.211-220.

Film: *Flag Wars* by Linda Goode Bryant & Laura Poitras

Part IV: How Do Social Factors “Get Under the Skin”?

**April 8th**

The Stress Process

Lantz PM, JS House, RP Mero & DR Williams. 2005. Stress, life events, and socioeconomic disparities in health: results from the Americans' Changing Lives Study. *Journal of Health & Social Behavior* 46:274-288.

Pearlin LI. 1999. The stress process revisited: reflections on concepts and their interrelationships. In Carol S. Aneshensel and Jo C. Phelan (Eds.), *Handbook of the* *Sociology of Mental Health*. Pp. 395-415. New York, NY: Kluwer Academic/Plenum Publishers.

**April 10th**

Allostatic Load

McEwen, BS. 1998. Protective and damaging effects of stress mediators. *New England Journal of Medicine* 338:171-179.

Sapolsky RM. 2004. *Why Zebras Don’t Get Ulcers*. 3rd Edition. New York, NY: Henry Holt & Company. Pp. 1-19; 353-383.

**April 15th**

The Weathering Hypothesis

Geronimus AT, M Hicken, D Keene, & J Bound. 2006. “Weathering” and age patterns of allostatic load scores among Blacks and Whites in the United States. *American* *Journal of Public Health* 96:826-833.

Geronimus, A.T., Pearson, J.A., Linnenbringer, E., Schulz, A.J., Reyes, A.G., Epel, E.S., Lin, J. and Blackburn, E.H., 2015. Race-ethnicity, poverty, urban stressors, and telomere length in a Detroit community-based sample. *Journal of health and social behavior*, 56(2), pp.199-224.

**April 17th**

Review for Final Exam

***Note: Final exam is scheduled for Wednesday, April 22nd from 10:00am until 11:45am.***