

HSPS Part IIB, SOC 13: Health, Medicine and Society

Acting Course Organiser:

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Lecturers:

Stuart Hogarth
Marcin Smietana
Robert Pralat
Sarah Franklin
Luke Hawksbee

Aims and Objectives

- To provide knowledge and understanding of medicine, health and illness in contemporary societies.
- To develop an understanding of the philosophical and conceptual issues surrounding notions of disease, sickness, and health.
- To provide knowledge and understanding of selected health systems and technologies, their development, regulation, and use in contemporary societies.
- To develop intellectual skills in the analysis of health issues in contemporary societies.
- To develop oral and written communication skills through seminar presentations and essay writing.
- To enhance IT skills through the use of Internet data and word-processing.

Brief Description of the Paper

This paper provides students with a critical survey of principal themes and debates in contemporary medical sociology. It explores the major social causes of health and illness in modern societies with special reference to such factors as social class, gender, ethnicity, and age; provides students with a sociological grasp of the issues and problems associated with chronic illness; investigates a variety of key topics in the sociology of mental health; and, finally, develops a sociological analysis of the major organisational, professional, and technological components of medical institutions and medical practice in contemporary society. The paper also explores new methods of health care delivery with an eye to understanding their roles in either fostering or minimising social inequalities pertaining to health and illness. In addition to these substantive topics, the paper also examines cutting edge theoretical approaches to the study of health and illness in society, including: social constructionism, feminist theory, the sociology of the body, the sociology of science, and phenomenology. In short, the paper explores a wide range of both substantive and theoretical issues pertaining to the nature and distribution of health and illness in modern societies.

Mode of Teaching

The paper is taught through a combination of lectures and supervisions. Students will be expected to produce a **minimum of 4 essays** instead of being required to write 6 essays. While still holding the stipulated 6 supervisions, individual supervisors can decide to use some supervision sessions to read and discuss an article, ask students to present on a topic, or find other ways to address the topic in ways that are stimulating and provide a learning experience for students

Mode of Assessment

One 3-hour examination paper from which candidates are asked to answer three questions

Background Reading List

- Albrecht, G. et al., eds. 2000. *The Handbook of Social Studies in Health & Medicine*. London: Sage
- Bird, C. E., P. Conrad, A.M. Freemont, S. Timmermans, eds. 2010. *Handbook of Medical Sociology*, sixth edition. Nashville: Vanderbilt University Press
- Blaxter, M. 2010. *Health, 2nd edition*. Cambridge: Polity.
- Briggs, Laura. 2017. *How All Politics Became Reproductive Politics: From Welfare Reform to Foreclosure to Trump*.
- Duster, Troy. *Backdoor to Eugenics*. 2nd ed. New York ; London: Routledge, 2003. Web.
- Farmer, P. 2003. *Pathologies of Power: Health, Human Rights, and the New War on the Poor*. London: University of California Press
- Harrison, M. 2004. *Disease and the Modern World: 1500 to the Present Day*. Cambridge: Polity
- Peterson, A., and Bunton, R., eds. 1997. *Foucault, Health, and Medicine*. London: Routledge
- Porter, R. 2003. *Blood and Guts: A Short History of Medicine*, London: Penguin
- Samson, C., ed. 1999. *Health Studies: A critical and cross cultural reader*. Oxford: Blackwell
- Scambler, G. ed. 2008. *Sociology as applied to Medicine, sixth edition*. Edinburgh: Saunders Co.
- Starr, P. 1982. *The Social Transformation of American Medicine*. New York: Basic Books
- Turner, B.S. 1995. *Medical Power and Social Knowledge, second edition*. London: Sage
- Turner, B.S. 1996. *The Body ad Society, second edition*. London: Sage
- Turner, B.S. 2004. *The New Medical Sociology*. New York: Norton.

Lecture timetable

Michaelmas

1	8 Oct	What is the sociology of health and illness?	Stuart Hogarth
2	15 Oct	The body and society: Michel Foucault	Stuart Hogarth
3	22 Oct	Public health, medical systems and the state	Stuart Hogarth
4	29 Oct	Health and inequality	Kathryn Hesketh
5	5 Nov	Healthcare interactions and the doctor-patient relationship	Robert Pralat
6	12 Nov	Medicalisation	Stuart Hogarth
7	19 Nov	Biomedicalisation and pharmaceuticalisation	Stuart Hogarth
8	26 Nov	Stratifications of reproductive health: racialisation	Marcin Smietana

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9	21 Jan	Redefining fertility	Marcin Smietana
10	28 Jan	The problem of health technology	Stuart Hogarth
11	4 Feb	The sociology and social history of the medical profession	Stuart Hogarth
12	11 Feb	The social organisation of medical research	Stuart Hogarth
13	18 Feb	HIV/AIDS and the sociology of sexual health	Robert Pralat
14	25 Feb	Political economy of pandemics	Luke Hawksbee
15	4 Mar	Race, reproduction and eugenics	Sarah Franklin
16	11 Mar	Eugenics and geneticisation	Sarah Franklin

Michaelmas Term

Lecture 1: What is the Sociology of Health and Illness?

The fundamental aim of the sociology of health and illness is to analyse the social causes and character of health, illness, and the social institutions established for their management. In this lecture we will first critically consider Western concepts of health and illness. We will dwell for a time on the antecedents and consequences of the biomedical paradigm's ascendancy. We also consider the differences between a sociology in medicine and a sociology of medicine.

Core Reading

Blaxter, M. (2010). Ch.1 How is health defined? In *Health* (Polity Press).

Cantor, D (2003). Ch.23 The diseased body. In Cooter, R and Pickstone, J (eds) *Companion to Medicine in the Twentieth Century* (Routledge).

Turner, B.S. (2000). The history of changing concepts of health and illness: outline of a general model of illness categories. In *The Handbook of Social Studies in Health & Medicine*. Edited by Albrecht, G. et al. London: Sage, pp. 9-23 E-book

Additional Reading

Bird, C. E., P. Conrad, A.M. Freemont, S. Timmermans, eds. 2010. *Handbook of Medical Sociology, sixth edition*. Nashville: Vanderbilt University Press E-book

Turner, B. S. (1995). Ch.1 *Medical Power and Social Knowledge, second edition*. (Sage)

Blaxter, M. (2010). The causes of disease: women talking. *Social science & medicine*, 17(2), 59-69.

Prior, L., Evans, M. R., & Prout, H. (2011). Talking about colds and flu: the lay diagnosis of two common illnesses among older British people. *Social Science & Medicine*, 73(6), 922-928.

Gadamer, H-G. 1996. *The Enigma of Health*. Cambridge: Polity

King, L. S.. 1982. *Medical Thinking: An Historical Preface*. Princeton, NJ: Princeton University Press (chs 3-8).

Samson, C, ed. 1999. *Health Studies*. Oxford: Blackwell (part two).

Siegrist, J. (2000). "The social causation of health and illness" in *The Handbook of Social Studies in Health & Medicine*. Edited by Albrecht, G. et al.. London: Sage, pp. 100-115. E-book

Turner, B.S. 2004. *The New Medical Sociology*. New York: Norton

Essay Topics

1. Critically evaluate the relationships between impairment, illness and disease.
2. What is the 'biomedical model'?

Lecture 2: The Body and Society: Michel Foucault

In this lecture we consider the general contribution of Michel Foucault to the sociology of health and illness, and the importance of the sociology of the body. The lecture develops a critical understanding of the idea of social construction in the analysis of disease entities. While Foucault's concept of governmentality is particularly useful, the lecture defends the contribution of phenomenology to understanding disease experiences and processes.

Core reading

Foucault, M. 1967. Ch.2 The great confinement. *Madness and Civilization*. London: Tavistock. (E-book)

Foucault, M. 1980. "The politics of health in the eighteenth century." in *Foucault Reader*. Edited by P. Rabinow. Pantheon Books, pp.273-90.

Petersen, A. 2012. "Foucault, Health and Healthcare." in *Contemporary Theorists for Medical Sociology*. edited by G. Scambler. New York: Routledge, pp. 1-19

Additional reading

- Corbin, A. 1986. *The Foul and the Fragrant*. Cambridge, MA: Harvard University Press
- Foucault, M. 1973. *The Birth of the Clinic*. London: Tavistock. (E-book)
- Foucault, M. 1981. *The History of Sexuality, Volume One: An Introduction*. Harmondsworth: Penguin (Part five). E-book
- Laqueur, T. 1990. *Making Sex: Body and Gender from the Greeks to Freud*. (Harvard University Press. E-book)
- Mol, A. 2002. *The Body Multiple: Ontology in Medical Practice*. (Duke University Press) E-book
- O'Neill, J. (1986). The disciplinary society: from Weber to Foucault. *British Journal of Sociology*, 42-60.
- Petersen, A., and Bunton, R. eds. 1997. *Foucault, Health, and Medicine*. (Routledge) (Foreword and Part one).
- Turner, B. S. 1992. Ch.6 *Regulating Bodies: Essays in medical sociology*. (Routledge) (see also chs. 3,5 and 7)
- Turner, B. S. 1996. Ch.8 *The Body and Society*. (Sage).
- Turner, B.S., ed. 2012. *Routledge Handbook of Body Studies*. London: Rutledge
- Samson, C., ed. 1999. *Health Studies*. Oxford: Blackwell (Part one).
- Weinberg, D. 2005. Ch.2 *Of Others Inside: Insanity, Addiction, and Belonging in America*. Philadelphia: Temple University Press pp19-52 E-book

Essay Topics

1. Critically evaluate Foucault's contribution to the sociology of health and illness.
2. Critically evaluate the contribution of phenomenology to the sociology of health and illness.

Lecture 3: Public Health, Medical Systems, and the State

In this lecture we will look at the contributions made by comparative research into the medical systems in place in different societies. We will also consider various ways in which societies have attended to public health, health promotion, and to the care of vulnerable and/or disabled citizens. Particular attention will be given to the role of states as providers and promoters of health maintenance and health care.

Core reading

- Beckfield, J., S. Olafsdottir and B. Sosnaud. 2013. "Healthcare Systems in Comparative Perspective: Classification, Convergence, Institutions, Inequalities, and Five Missed Turns." *Annual Review of Sociology*. Vol. 39: 127-146
- Lupton, D. 1995. Ch.1 Governing the masses. *The Imperative of Health: Public Health and the Regulated Body*. London: Sage e-book
- *Mechanic, D., and D.A. Rochefort. 1997. "Comparative Medical Systems." *Annual Review of Sociology*. 22: 239-70

Additional reading

- Annandale, E. 1998. *The Sociology of Health & Medicine: A Critical Introduction*. Cambridge: Polity, Part III, pp. 195-280
- Bakalar, J.B., and L. Grinspoon. 1984. *Drug Control in a Free State*. Cambridge: Cambridge University Press
- Cockerham, W. C. ed. (2009). *The New Blackwell Companion to Medical Sociology*. (Blackwell).
- Harrison, M. (2006). Disease, diplomacy and international commerce: The origins of international sanitary regulation in the nineteenth century. *Journal of Global History*, 1(2), 197-217.

doi:10.1017/S1740022806000131

Harrison M. (2013). Scurvy on sea and land: political economy and natural history, c. 1780-c. 1850. *Journal for maritime research*, 15(1), 7–25. <https://doi.org/10.1080/21533369.2013.783167>

Harrison, M. 2004. *Disease and the Modern World: 1500 to the Present Day*. (Polity)

Hendrick, H. (2003). Child labour, medical capital and the school medical service, 1880-1918. In *In the name of the child: health and welfare, 1880-1940* (pp. 45-71). Spon press.

Porter, D. (1999). Ch11 classic welfare state *Health, Civilization, and the State: A History of Public Health from Ancient to Modern Times*. London: Rutledge E-book

Starr, P.. (1982). *The Social Transformation of American Medicine*. New York: Basic Books

Turner, B. S. (1995). *Medical Power and Social Knowledge, second edition*. London: Sage, Parts III and IV, pp. 129-239.

Worboys, M. (2003) Ch.5 Colonial Medicine. In Cooter, R and Pickstone, J (eds) *Companion to Medicine in the Twentieth Century* (Routledge).

Essay Topics

1. Critically assess the interests states have in the promotion of health and prevention of disease.
2. Critically evaluate the contribution of comparative research to the understanding of medical systems.

Lecture 4: Health and Inequality

In this lecture, we will explore how social forces shape the distributions of health and illness across a variety of social categories including: nationality, class, income, gender, age, race & ethnicity. Research in this area draws upon those categories (amongst others) in an effort to learn who gets sick, who remains healthy, and why. The lecture will also draw upon epidemiological principles, which are used as one tool in medical sociological research, to shed light on how trends emerge. It will also touch on some of the social structural mechanisms that lead to differing health outcomes.

References

Annandale, E.. 1998. *The Sociology of Health & Medicine, a critical introduction*. Cambridge: Polity Press, Part II, pp. 89-192

Annandale, E., and Hunt, K., eds. 2000. *Gender Inequalities in Health*. Buckingham: Open University Press

Carod-Artal FJ. Social determinants of mental health. *Glob Ment Heal Prev Promot*. 2017;33–46.

Devakumar D, Shannon G, Bhopal SS, Abubakar I. Racism and discrimination in COVID-19 responses. *Lancet*. 2020;395(10231):1194.

Egede LE. Race, ethnicity, culture, and disparities in health care. *J Gen Intern Med*. 2006;21(6):667–669.

Graham H, White PCL. Social determinants and lifestyles: integrating environmental and public health perspectives. *Public Health*. 2016;141:270–278.

Harrison, M. 2004. *Disease and the Modern World: 1500 to the Present Day*. Cambridge: Polity

Kawachi, I. and Kennedy, P. 2002. *The Health of Nations. Why inequality is harmful to your health*. New York: the New Press

Lorber, J. and Moore, L.J. 2002. *Gender and the Social Construction of Illness*. Lanham: Rowman & Littlefield (Altamira Press)

Inquiry on Health Equity for the North. Due North: Executive summary report of the Inquiry on Health Equity for the North. 2014.

Marmot, M. 2007. "Achieving health equity: from root causes to fair outcomes." *Lancet* 370(9593): 1153-63.

Marmot, M. G. and R. G. Wilkinson 1999. *Social determinants of health*. Oxford ; New York, Oxford University Press.

Marmot M. Health Equity in England. 2020.

Navarro, V. 2002. *The Political Economy of Social Inequalities: Consequences for Health and Quality of Life*. New York: Baywood Publishing Company Ltd.

*Scambler, G. 2012. "Health Inequalities." *Sociology of Health & Illness*. Vol. 34 No. 1, pp. 130–146

Smith GD, Chaturvedi N, Harding S, Nazroo J, Williams R. Ethnic inequalities in health: A review of UK epidemiological evidence. *Crit Public Health*. 2000;10(4):375–408.

Turner, B. S. 1995. *Medical Power and Social Knowledge, second edition*. London: Sage (chs 5,9,10).

Wilkinson, R.G.. 1996. *Unhealthy Societies: The Afflictions of Inequality*. London: Routledge.

The Marmot Review Team. *Fair Society, Healthy Lives. The Marmot Review.*; 2011

Essay Topics

1. Health inequalities are an inevitable part of society. Discuss
2. Critically evaluate the impact of the 2011 Marmot Review
3. How can ethnic disparities in health outcomes be explained?
4. Compare and contrast the individual biomedical model and the social determinants of health framework. Illustrate your answer using at least two social categories.

Lecture 5: . Healthcare interactions and the doctor-patient relationship

Patients were once expected to place themselves at the disposal of their healthcare providers and deviations from compliance were looked upon as pathological. These days, we increasingly hear calls for patient-centred medicine, informed consent and the codification of patients' rights. In this lecture, we will consider these issues, paying particular attention to whether clinical practice is moving from a model of technical intervention to a model of collaborative care of the self. We will explore what kinds of social factors determine the form and content of healthcare interactions and medical encounters, examining the dynamics in the relationship between patients and clinicians.

Core Reading

Corrigan, Oonagh. 2003. "Empty ethics: The problem with informed consent." *Sociology of Health & Illness* 25(7): 768-792. <https://doi.org/10.1046/j.1467-9566.2003.00369.x>

Timmermans, Stefan, et al. 2018. "Does patient-centered care change genital surgery decisions? The strategic use of clinical uncertainty in disorders of sex development clinics." *Journal of Health and Social Behavior* 59(4): 520-535. <https://doi.org/10.1177%2F0022146518802460>

Additional Reading

Delvecchio-Good, M.J., and B. Good. 2000. "Clinical narratives and the study of contemporary doctor-patient relationships." In G. Albrecht et al. (eds), *The Handbook of Social Studies in Health & Medicine* (pp. 243-258). London: SAGE.

Henwood, Flis, et al. 2003. "'Ignorance is bliss sometimes': Constraints on the emergence of the 'informed patient' in the changing landscapes of health information." *Sociology of Health & Illness* 25(6): 589-607. <https://doi.org/10.1111/1467-9566.00360>

Lupton, Deborah. 1997. "Consumerism, reflexivity and the medical encounter." *Social Science & Medicine* 45(3): 373-381. [https://doi.org/10.1016/S0277-9536\(96\)00353-X](https://doi.org/10.1016/S0277-9536(96)00353-X)

McCoy, Liza. 2005. "HIV-positive patients and the doctor-patient relationship: Perspectives from the margins." *Qualitative Health Research* 15(6): 791-806. <https://doi.org/10.1177/1049732305276752>

McKevitt, Christopher, and Myfanwy Morgan. 1997. "Anomalous patients: The experiences of doctors with an illness." *Sociology of Health & Illness* 19(5):644–667. <https://doi.org/10.1111/j.1467-9566.1997.tb00424.x>

Pilnick, Alison, and Robert Dingwall. 2011. "On the remarkable persistence of asymmetry in doctor/patient interaction: A critical review." *Social Science & Medicine* 72(8): 1374-1382. <https://doi.org/10.1016/j.socscimed.2011.02.033>

Pols, Jeannette. 2003. "Enforcing patient rights or improving care? The interference of two modes of doing good in mental health care." *Sociology of Health & Illness* 25(4): 320-347. <https://doi.org/10.1111/1467-9566.00349>

Prior, Lindsay. 2003. "Belief, knowledge and expertise: The emergence of the lay expert in medical sociology." *Sociology of Health & Illness* 25(3): 41-57. <https://doi.org/10.1111/1467-9566.00339>

Shim, Janet K. 2010. "Cultural health capital: A theoretical approach to understanding health care interactions and the dynamics of unequal treatment." *Journal of Health and Social Behavior* 51(1): 1-15.

Supervision Essay Questions

1. Why are doctors increasingly receptive to the empowerment of patients?
2. Why have patients become more proactive in taking care of their health?

Lecture 6: Medicalisation

The term "medicalization" applies to the process(es) through which aspects of life that had previously been regarded as beyond the scope of medical jurisdiction come to be widely viewed as proper topics of medical concern. In this lecture we consider various dimensions of medicalisation, paying particular attention to whether the dynamics of medicalisation are now changing in systematic ways. We also consider cases of "demedicalisation," or the withdrawal of medical involvement from aspects of life that had hitherto been thought to properly fall within the proper jurisdiction of medicine.

Core reading

Busfield, J. (2017). The concept of medicalisation reassessed. *Sociology of Health & Illness*. 39(5): 759–774

Fox, R.C. (1977). The medicalization and demedicalization of American society. *Daedalus*, pp.9-22.

Rose, N. (2007). Beyond medicalisation. *Lancet*, 369, 700-702.

Zola, I.K. (1972). Medicine as an institution of social control. *The sociological review*, 20(4), pp.487-504.

Additional reading

Aronowitz, R.A.. 2001. "When Do Symptoms Become a Disease?" *Annals of Internal Medicine*. 134:803-808

Conrad, P., and J.W. Schneider. 1992. *Deviance and Medicalization: from Badness to Sickness*. Philadelphia: Temple University Press

Conrad, P.. 2007. *The Medicalization of Society: On the Transformation of Human Conditions into Treatable Disorders*. Baltimore, MD: Johns Hopkins University Press

Conrad, P.. 1992. "Medicalization and Social Control." *Annual Review of Sociology*. 18:209-32

Conrad, P. 2013. Medicalization: Changing Contours, Characteristics, and Contexts. In *Medical Sociology on the Move*. Edited by W.C. Cockerham. London: Springer, pp. 195-214

Conrad, P.. 2005. The shifting engines of medicalization. *Journal of Health and Social Behavior*. 46:3-14

Kirk, S.A., and H. Kutchins. 1992. *The Selling of DSM: The Rhetoric of Science in Psychiatry*. New York: Aldine De Gruyter.

Nye, R. (2003). The evolution of the concept of medicalization in the twentieth century. *Journal of the History of the Behavioral Sciences*, 39(2), 115-129.

Rosenberg, C.E.. 2002. "The Tyranny of Diagnosis: Specific Entities and Individual Experience." *The Millbank Quarterly*, 80 (2): 237-260

Rosenberg, C.E. 1992. *Explaining Epidemics and Other Studies in the History of Medicine*. Cambridge: Cambridge University Press.

Rosenfeld, D., and C. Faircloth, eds.. 2005. *Medicalized Masculinities*. Philadelphia: Temple University Press

Weinberg, D. 2005. *Of Others Inside: Insanity, Addiction, and Belonging in America*. Philadelphia: Temple University Press

Essay Topics

1. Critically evaluate the costs and benefits of medicalisation.

Lecture 7: Biomedicalisation and pharmaceuticalisation

Building on the previous lecture, we examine new theories that have sought to supplant or augment the concept of medicalization.

Core reading

Bell, S.E. and Figert, A.E. (2012). Medicalization and pharmaceuticalization at the intersections: looking backward, sideways and forward. *Social Science & Medicine* 75 775-783

Clarke, A.E., J.K. Shim, L. Mamo, J.R. Fosket, and J.R. Fishman. (2003). "Biomedicalization: technoscientific transformation of health, illness, and U.S. biomedicine." *American Sociological Review*. 68_161-194

Williams, S. J., Martin, P., & Gabe, J. (2011a). The pharmaceuticalization of society? A framework for analysis. *Sociology of Health & Illness*, 33, 710-725.

Additional reading

Clarke, A. E., & Shim, J. K. (2009). Medicalization and biomedicalization Revisited: technoscience and transformations of health, illness and biomedicine. In A. Maturo, & P. Conrad (Eds.), *Salute e Società: The medicalization of life* (pp.209-241). FrancoAngeli.

Clarke, A., Shim, J., Mamo, L., Fosket, J. R., & Fishman, J. R. (Eds.). (2010). *Biomedicalization: Technoscience health and illness in the U.S*. Duke University Press.

Coveney, C., Williams, S. J., & Gabe, J. (2019). Medicalisation, pharmaceuticalisation, or both? Exploring the medical management of sleeplessness as insomnia. *Sociology of health & illness*, 41(2), 266-284.

Davis, C. (2015). Drugs, cancer and end-of-life care: a case study of pharmaceuticalization?. *Social Science & Medicine*, 131, 207-214.

Faulkner, A. (2012). Tissue engineered technologies: regulatory pharmaceuticalization in the European Union. *Innovation: The European Journal of Social Science Research*, 25(4), 389-408.

Gabe, J., Williams, S., Martin, P., & Coveney, C. (2015). Pharmaceuticals and society: Power, promises and prospects. *Social Science & Medicine*, 131, 193-198.

Williams, S. J., Gabe, J., & Davis, P. (2008). The sociology of pharmaceuticals: progress and Prospects. *Sociology of Health & Illness*, 30(6), 813-824.

Williams, S., Gabe, J., & Martin, P. (2012). Medicalization and pharmaceuticalization at the intersections: A commentary on Bell and Figert (2012). *Social Science & Medicine*, 75(12), 2129-2130.

Essay Topic

1. Critically evaluate the claim that the dynamics of medicalisation have changed substantially over last couple of decades.

Lecture 8: Stratifications of reproductive health: racialisation

In this lecture, we look at how reproductive health is stratified, in particular through racialised inequalities, which then intersect with other hierarchies such as immigration status or class. Through

the work of Laura Briggs (2018), we analyse how the politics of gender in neoliberal modernity shape and stratify reproduction (see also Colen 1995) and reproductive health, and how these stratifications are further exacerbated by the politics of race in the USA. Through the anthropological account of obstetric racism (Davis 2018) we analyse how race and other interlinked hierarchies operate in maternity and fertility care in the US, which we compare to similar findings from the UK (Beynon-Jones 2013; Blell 2017; Douglas 2019; Medien 2019; Franklin & Ginsburg 2019). We also look at the intersections of race with immigration status, notably through the case of the NHS charges for maternity care in the UK (Maternity Action 2018). We refer to the analysis of historical and present uses of the categories of race in the context of reproduction, provided by Camisha Russell's work (2018). We close by looking at possible solutions: the alternatives to neoliberal politics (Briggs 2018) such as reproductive justice activism and scholarship (Luna & Luker 2013) as well as diaspora community work and alliances (Douglas 2019).

Core readings:

Briggs, Laura. 2017. *How All Politics Became Reproductive Politics: From Welfare Reform to Foreclosure to Trump*. University of California Press. Section 'The other infertility: Those who are not supposed to get pregnant' on pp. 126-148 in Chapter 4 'The politics and economy of reproductive technology and Black infant mortality'. *available as an e-book in Cambridge University online library*

Davis, Dana-Ain. 2018. Obstetric racism: The racial politics of pregnancy, labor, and birthing. *Medical Anthropology*, 1-14. <https://doi-org.ezp.lib.cam.ac.uk/10.1080/01459740.2018.1549389>

Maternity Action. 2018. *What Price Safe Motherhood? Charging for NHS Maternity Care in England and its Impact on Migrant Women*. Maternity Action: <https://www.maternityaction.org.uk/wp-content/uploads/WhatPriceSafeMotherhoodFINAL.pdf> - At least: the Executive Summary and Recommendations, pp. 4-10.

Additional reading

Beynon-Jones, Siân M. 2012. Expecting motherhood? Stratifying reproduction in twenty-first century Scottish abortion practice. *Sociology*, 47 (3) 509-525.

Blell, Mwenza. 2018. British Pakistani Muslim masculinity, (In)fertility, and the clinical encounter. *Medical Anthropology* 37 (2), 117–130.

Colen, Shellee. 1995. 'Stratified reproduction and West Indian childcare workers and employers in New York'. In: Ginsburg, Faye & Rapp, Rayna (eds.) *Conceiving the New World Order: The Global Politics of Reproduction*, Berkeley and Los Angeles: University of California Press, pp. 78-102. (You can also see the Introduction by Ginsburg & Rapp, pp.1-17)

De Zordo, Silvia. 2016. The biomedicalisation of illegal abortion: the double life of misoprostol in Brazil. In: *História, Ciências, Saúde – Manguinhos*, Rio de Janeiro, v.23, n.1, jan.-mar. 2016, p.19-35. https://www.researchgate.net/publication/299357485_The_biomedicalisation_of_illegal_abortion_The_double_life_of_misoprostol_in_Brazil.

Douglas, Jenny. 2019. [Black women's activism and organisation in public health - struggles and strategies for better health and wellbeing](#). *Caribbean Review of Gender Studies*, 13: pp. 51-68.

Franklin, Sarah; & Ginsburg, Faye. 2019. Reproductive politics in the age of Trump and Brexit. *Cultural Anthropology* 34 (1), 3-9.

Luna, Zakiya; & Luker, Kristin. 2013. Reproductive Justice. *Annual Review of Law and Social Science* 9, 327–352.

Medien, Kathryn. 2019. #BlackMumsMatter. A Conference Report. <http://www.reposoc.com/blog/2019/11/11/blackmumsmatter-a-conference-report>

Medien, Kathryn. 2020. Patients not Passports: Challenging Border Controls in Healthcare. <http://fass.open.ac.uk/school-social-sciences-global-studies-sociology/news/patients-not-passports-challenging-border>

Russell, Camisha. 2018. *The Assisted Reproduction of Race*. Indiana University Press. (in particular Chapter 5 'Race and choice in the era of liberal eugenics' pp. 132-158; and Chapter 4 'I just want children like me' pp. 103-129) - *available as an e-book in Cambridge University online library*

Additional web resources:

United Nations Population Fund: Sexual and Reproductive Health: <https://www.unfpa.org/sexual-reproductive-health>

World Health Organisation: Sexual and Reproductive Health: <https://www.who.int/reproductivehealth/en/>

Essay topics:

In what ways is reproductive health racialised? Discuss using examples.

Lent Term

Lecture 9: Redefining fertility, queering reproduction

In this lecture, we first look at medical definitions of (in)fertility (WHO; NHS). We review demographic definitions of fertility, through the anthropological critique of the theories of fertility transition (Greenhalgh 1995), and we consider what sociological analysis of neoliberal politics in the US and the UK can contribute to understanding ‘fertility rates’ (Briggs 2017; Faircloth 2020). We then briefly look at research on contemporary reproductive decision-making in several different contexts (Alvarez 2018; Mjaaland 2014; Taragin-Zeller 2019). In our overview of social forces shaping (in)fertility, we also include reproductive technologies and fertility industries (Franklin 2013; Van de Wiel 2020). Finally, we discuss specific examples of stratifications of (in)fertility, in which neoliberal circumstances may be exacerbated by other hierarchies: alongside the previous lecture’s insights on how racialisation shapes (in)fertility, in this lecture we also briefly introduce findings on how individuals’ sexuality and gender identifications are made to matter for their (in)fertility (Birenbaum-Carmeli, Inhorn & Patrizio 2020; Mamo 2007; Stacey 2006).

Core reading

Greenhalgh, Susan. 1995. *Situating Fertility: Anthropology and Demographic Enquiry*. Cambridge University Press: Chapter 1 ‘Anthropology theorizes reproduction’ pp. 3-15 (and additionally to the end of the chapter i.e. p. 28) – available as an e-book in Cambridge University online library

Briggs, Laura. 2017. *How All Politics Became Reproductive Politics: From Welfare Reform to Foreclosure to Trump*. University of California Press. Introduction, pp. 1-18 – available as an e-book in Cambridge University online library

Mamo, Laura. 2007. *Queering Reproduction: Achieving Pregnancy in the Age of Technoscience*. Duke University Press. Chapter 2: ‘Real Lesbians Don’t Have Kids’ or Do They? Getting Ready for Lesbian Motherhood, pp. 58-85. – available as an e-book in Cambridge University online library

Additional reading

Alvarez, Bruna, 2018. Reproductive decision making in Spain: Heterosexual couples' narratives about how they choose to have children. *Journal of Family Issues* 39 (13), 3487–3507
<https://doi.org/10.1177%2F0192513X18783494>

Birenbaum-Carmeli, Daphna; Inhorn, Marcia & Patrizio, Pasquale. 2020. Transgender men’s fertility preservation: experiences, social support, and the quest for genetic parenthood. *Culture, Health & Sexuality*, DOI: 10.1080/13691058.2020.1743881

Faircloth, Charlotte. 2020. Parenting and social solidarity in cross-cultural perspective. *Families, Relationships and Societies*, 9 (1): 143–159, DOI: 10.1332/204674319X15668430693616

Franklin, Sarah. 2013. *Biological Relatives: IVF, Stem Cells and the Future of Kinship*. Duke University Press: Durham and London. Chapter 1: Miracle Babies, in particular pp. 31-49. (And additionally: Chapter 6: IVF Live, in particular pp. 221-229). – available as an e-book in Cambridge University online library

Mjaaland, Thera. 2014. Having fewer children makes it possible to educate them all: an ethnographic study of fertility decline in north-western Tigray, Ethiopia, *Reproductive Health Matters*, 22:43, 104-112, DOI: 10.1016/S0968-8080(14)43768-6

Smietana, Marcin, 2019. ‘Procreative consciousness in a global market: Gay men’s paths to surrogacy in the US,’ In: Smietana, Marcin and Thompson, Charis (eds.) 2018 ‘Making Families: Transnational Surrogacy, Queer Kinship, and Reproductive Justice’. Special Issue of *Reproductive Biomedicine and Society*, [https://www.rbmsociety.com/issue/S2405-6618\(18\)X0003-3](https://www.rbmsociety.com/issue/S2405-6618(18)X0003-3) (open access)

Stacey, Judith. 2006. Gay parenthood and the decline of paternity as we knew it. *Sexualities*, 9(1): 27–55 DOI: 10.1177/1363460706060687

Taragin-Zeller, Lea. 2019. Conceiving God's children: Towards a flexible model of reproductive decision-making. *Medical Anthropology*, <https://doi.org/10.1080/01459740.2019.1570191>.

Van de Wiel, Lucy. 2020. The speculative turn in IVF: Egg freezing and the financialization of fertility. *New Genetics and Society*, DOI: 10.1080/14636778.2019.1709430

Web resources:

Infertility:

World Health Organization: Infertility:

<http://www.who.int/reproductivehealth/topics/infertility/definitions/en/>

National Health Service (UK): Infertility

<http://www.nhs.uk/conditions/Infertility/Pages/Introduction.aspx>

American Society for Reproductive Medicine (US): Infertility: <https://www.asrm.org/topics/topics-index/infertility/>

Human Fertilisation and Embryology Authority (UK): <http://www.hfea.gov.uk/>

European Society for Human Reproduction and Embryology: <https://www.eshre.eu/>

Trans:

Human Fertilisation and Embryology Authority (UK): Fertility Preservation for Trans and Non-Binary People: <https://www.hfea.gov.uk/treatments/fertility-preservation/information-for-trans-and-non-binary-people-seeking-fertility-treatment/>

Gay:

Kaufman, David, 2020, The Fight for Fertility Equality, *New York Times*, July 22, <https://nyti.ms/2OPUFek> (accessed on 23 July 2020).

Essay topic:

What does 'fertility' actually mean, and how can it be shaped by social conditions? Discuss using examples.

Lecture 10: The problem of health technology

Modern medicine is commonly understood to be technological medicine, and in this lecture we shall explore some key themes in the sociology of health technologies. We focus in particular on technological change or innovation, exploring the development and clinical adoption of new technologies. We attend to the ways in which medical technologies reshape clinical practice, their influence on institutional power dynamics, such as the growth of specialty sub-disciplines and their mediatory role in doctor-patient relations, and the growing market for consumer technologies. We address the ways in which medical technology has become an object of governance in response to a range of societal concerns including safety, effectiveness, equity of access, affordability and ethical issues.

Core reading

Blaxter, M. (2009). The case of the vanishing patient? Image and experience. *Sociology of health & illness*, 31(5), 762-778.

Lehoux, P. (2008). The duality of health technology in chronic illness: how designers envision our future. *Chronic illness*, 4(2), 85-97.

Joyce, K. (2005). Appealing images: Magnetic resonance imaging and the production of authoritative knowledge. *Social Studies of Science*, 35(3), 437-462.

Additional reading

Reiser, S. J. (1978) Ch.8 *Medicine and the Reign of Technology*. (Cambridge University Press).

Blume, S. (1992) Ch.1 *Insight and Industry: On the Dynamics of Technological Change in Medicine*. (MIT Press)

Faulkner, A. (2009) Ch.2 *Medical Technology into Healthcare and Society: A Sociology of Devices, Innovation and Governance* (Palgrave Macmillan)

Lehoux, P. (2006) Ch.2 *The Problem of Health Technology* (Taylor and Francis)

Miller, F. A., et al. (2005). Ruling in and ruling out: Implications of molecular genetic diagnoses for disease classification. *Social Science & Medicine*, 61(12), 2536-2545.

Blume, S. (2003). Medicine, technology and industry. In Cooter, R and Pickstone, J (eds) *Companion to Medicine in the Twentieth Century* (Routledge).

Amsterdamska O, Hiddinga A. (2003). The analyzed body. In Cooter R, Pickstone, J (eds) *Companion to Medicine in the Twentieth Century*. (Routledge).

Gelijns, A., & Rosenberg, N. (1994). The dynamics of technological change in medicine. *Health affairs*, 13(3), 28-46.

Brown, N and Webster A. (2004) *New medical technologies and society: reordering life* (Polity Press)

Timmermans, S., and M. Berg. (2003). The practice of medical technology. *Sociology of Health and Illness* 25

Timmermans, S., & Almeling, R. (2009). Objectification, standardization, and commodification in health care: A conceptual readjustment. *Social Science & Medicine*, 69(1), 21-27.

Essay Topics

1. Does high-tech medicine alienate patients and reinforce medical dominance?
2. What is the relationship between medical technology and medical knowledge?

Lecture 11: The Sociology and Social History of the Medical Profession

This lecture will 1) provide a comparative analysis of examination of the history and of the modern medical profession, 2) explore the roles played by science and technical expertise in fortifying the claims of health care providers to professional privilege, 3) examine how government officials became, and remain, involved in sustaining the privileges of the medical profession.

Core reading

Starr, P. 1982. Introduction. *The Social Transformation of American Medicine*. New York: Basic Books

Coburn, D. (2006). Medical dominance then and now: critical reflections. *Health Sociology Review*; Dec 2006; 15, 5

Pescosolido, B. 2013. "Theories and the Rise and Fall of the Medical Profession." in *Medical Sociology on the Move*. Edited by C. Cockerham. London: Springer, pp. 173-94 E-book

Turner, D. (1995) Ch.7 Professions, knowledge and power. In Turner, B and Samson, C (eds) *Medical Power and Social Knowledge*. (Sage)

Additional reading

Allsop, J. (2006) Medical dominance in a changing world: the UK case. *Health Sociology Review*; Dec 2006; 15, 5

Bynum, W.F. 1994. *Science and the Practice of Medicine in the Nineteenth Century*. Cambridge: Cambridge University Press

Harrison, S. and Ahmad W. (2000) Medical autonomy and the UK state 1975 to 2025. *Sociology* 34(1), 129-146.

Timmermans, S., and H. Oh. 2010. "The Continued Social Transformation of the Medical Profession." *Journal of Health and Social Behavior*. 51(S): S94-S106

Starr, P. 1982. Ch.5 *The Social Transformation of American Medicine*. New York: Basic Books

Willis, E. (2006) Taking stock of medical dominance. *Health Sociology Review*; Dec 2006; 15, 5

Essay Topics

1. What role did science play in the ascendancy of the modern medical profession? Use empirical examples from the readings to support your argument.
2. What role did government play in the ascendancy of the modern medical profession? Use empirical examples from the readings to support your argument.

Lecture 12: The Social Organisation of Medical Research

This lecture will critically examine how medical science is influenced by the social contexts within which it is undertaken, focusing in particular on the changing roles of academic medicine and corporate science in the production of new biomedical knowledge.

Core reading

Marks, H. M. (2000). Trust and mistrust in the marketplace: Statistics and clinical research, 1945–1960. *History of Science*, 38(3), 343-355.

Hogarth, S., Hopkins, M. M., & Rodriguez, V. (2012). A molecular monopoly? HPV testing, the Pap smear and the molecularisation of cervical cancer screening in the USA. *Sociology of Health & Illness*, 34(2), 234-250.

Mirowski, P., & Van Horn, R. (2005). The contract research organization and the commercialization of scientific research. *Social studies of science*, 35(4), 503-548.

Sismondo, S. (2008). How pharmaceutical industry funding affects trial outcomes: causal structures and responses. *Social science & medicine*, 66(9), 1909-1914.

Additonal reading

Vallas, S. P., & Kleinman, D. L. (2008). Contradiction, convergence and the knowledge economy: the confluence of academic and commercial biotechnology. *Socio-Economic Review*, 6(2), 283-311.

Kerr, A., Swallow, J., Chekar, C. K., & Cunningham-Burley, S. (2019). Genomic research and the cancer clinic: uncertainty and expectations in professional accounts. *New Genetics and Society*, 38(2), 222-239.

Starr, P. 1982. *The Social Transformation of American Medicine*. New York: Basic Books. (Book I, Ch. 3 and Book II, Ch. 3)

Bynum, W.F. 1994. *Science and the Practice of Medicine in the Nineteenth Century*. Cambridge: Cambridge University Press

Cambriosio, A., P. Keating, T. Schlich, and G. Weisz. 2006. "Regulatory objectivity and the generation and management of evidence in medicine." *Social Science & Medicine*. 63(1): 189-99

Epstein, S. 2007. *Inclusion: The Politics of Difference in Medical Research*. Chicago: University of Chicago Press

Timmermans, S., and M. Berg. 2003. *The Gold Standard: The Challenge of Evidence-Based Medicine and Standardization in Health Care*. Philadelphia: Temple University Press

Marks, H. M. (2000). Trust and mistrust in the marketplace: Statistics and clinical research, 1945–1960. *History of Science*, 38(3), 343-355.

Kerr, A., Swallow, J., Chekar, C. K., & Cunningham-Burley, S. (2019). Genomic research and the cancer clinic: uncertainty and expectations in professional accounts. *New Genetics and Society*, 38(2), 222-239.

Stuart Blume & Ingrid Geesink (2000) Vaccinology: An Industrial Science?, *Science as Culture*, 9:1, 41-72,

Faulkner, A. (1997). 7. 'Strange bedfellows' in the laboratory of the NHS? An analysis of the new science of health technology assessment in the United Kingdom. *Sociology of Health & Illness*, 19(19B), 183-208.

May, C. (2006). Mobilising modern facts: health technology assessment and the politics of evidence. *Sociology of Health & Illness*, 28(5), 513-532.

Miller, F. A., Hayeems, R. Z., & Hogarth, S. (2016). Informally regulated innovation systems: challenges for responsible innovation in diagnostics. In *Emerging Technologies for Diagnosing Alzheimer's Disease* (pp. 227-244). Palgrave Macmillan, London.

Martin, P., Brown, N. & Kraft, A. (2008) From bedside to bench? communities of promise, translational research and the making of blood stem cells. *Science as Culture*, 17:1, 29-41,

Sismondo, S. (2020). Ghost-managing and gaming pharmaceutical knowledge. *Gaming the Metrics*, 123.

Essay Topics

1. Has corporate control eclipsed professional dominance in the contemporary medical research enterprise?

Lecture 13: HIV/AIDS and the sociology of sexual health

In this lecture, we will explore how associations between sexuality, disease and morality shaped knowledge about HIV/AIDS as it was first identified in the 1980s, and how ongoing work on HIV treatment and prevention affects, and is affected by, sexual practices and intimate relationships. Through the lens of HIV/AIDS, we will think about sexual health more broadly, touching on lay, public health and sociological understandings of and approaches to risk and stigma. We will also examine the role of social movements in how HIV science and clinical practice have evolved and what trajectories they have taken in different cultural contexts.

Core Reading

Mowlabocus, Sharif. 2019. "'What a skewed sense of values': Discussing PreP in the British press." *Sexualities* 23(8):1343–1361. <https://doi.org/10.1177/1363460719872726>

Watkins-Hayes, Celeste. 2019. *Remaking a Life: How Women Living With HIV/AIDS Confront Inequality*. Berkeley, CA: University of California Press. (Introduction; pp. 1–19)

Additional Reading

Epstein, Steven. 1996. *Impure Science: AIDS, Activism, and the Politics of Knowledge*. Berkeley, CA: University of California Press.

Esacove, Anne W. 2010. "Love matches: Heteronormativity, modernity, and AIDS prevention in Malawi." *Gender & Society* 24(1):83–109. <https://doi.org/10.1177/0891243209354754>

Gamson, Josh. 1989. "Silence, death, and the invisible enemy: AIDS activism and social movement 'newness'." *Social Problems* 36(4):351–367. <https://doi.org/10.2307/800820>

Hoppe, Trevor. 2018. *Punishing Disease: HIV and the Criminalization of Sickness*. Berkeley, CA: University of California Press.

Mazanderani, Fadhila. 2012. "An ethics of intimacy: Online dating, viral-sociality and living with HIV." *Biosocieties* 7(4):393–409. <https://doi.org/10.1057/biosoc.2012.24>

Parker, Richard, and Peter Aggleton. 2003. "HIV and AIDS-related stigma and discrimination: A conceptual framework and implications for action." *Social Science & Medicine* 57(1):13–24. [https://doi.org/10.1016/S0277-9536\(02\)00304-0](https://doi.org/10.1016/S0277-9536(02)00304-0)

Persson, Asha, and Christy Newman. 2008. "Making monsters: Heterosexuality, crime and race in recent Western media coverage of HIV." *Sociology of Health & Illness* 30(4):632–646. <https://doi.org/10.1111/j.1467-9566.2008.01082.x>

Race, Kane. 2016. "Reluctant objects: Sexual pleasure as a problem for HIV biomedical prevention." *GLQ: A Journal of Lesbian and Gay Studies* 22(1):1–31. <https://doi.org/10.1215/10642684-3315217>

Schieber, David. 2018. "Money, morals, and condom use: The politics of health in gay and straight adult film production." *Social Problems* 65(3):377–394. <https://doi.org/10.1093/socpro/spw046>

Vijayakumar, Gowri. 2020. "Sexual laborers and entrepreneurial women: Articulating collective identity in India's HIV/AIDS response." *Social Problems* 67(3):507–526. <https://doi.org/10.1093/socpro/spz031>

Supervision Essay Questions

1. Why is there stigma around HIV and how can it be challenged?
2. What role have social movements played in response to HIV/AIDS?

Lecture 14 Political economy of pandemics

Are pandemic diseases like COVID-19 "great levellers"—equalising events in which we are "all in the same boat"—or do they exacerbate existing inequalities? What are the political-economic contributory

factors in the emergence and spread of infectious disease, especially novel zoonotic infections? How do private- and public-sector actors and institutions respond in acute public health crises, and why do they behave in these ways?

Core reading

Souza, D.O., 2020. "The COVID-19 pandemic beyond Health Sciences: reflections on its social determination." *Ciência & Saúde Coletiva*. 25(Supl.1): 2469–2477.

Bellamy Foster, J., and Suwandi, I. 2020. "COVID-19 and Catastrophe Capitalism." *Monthly Review*. 72(2)

Wallace, R., et al. 2020. "COVID-19 and Circuits of Capital." *Monthly Review*. 72(1)

Additional reading

Wallace, R. 2016. *Big Farms Make Big Flu*. Pp. 50-84, 192-201, and 297-315

Karesh, W.B., et al. 2012. "Ecology of zoonoses: natural and unnatural histories." *The Lancet*. 380: 1936-1945

Wood, J.L.N., et al. 2012. "A framework for the study of zoonotic disease emergence and its drivers: spillover of bat pathogens as a case study." *Phil. Trans. R. Soc. B*. 367: 2881-92

Mitropoulos, A. 2020. *Pandemonium: Proliferating Borders of Capital and the Pandemic Swerve*. London: Pluto Press.

Wallace, R. 2020. *Dead Epidemiologists: On the Origins of COVID-19*. New York: Monthly Review Press.

Supervision essay question

1. Which of these is a more accurate description of the COVID-19 pandemic, and why: 'natural disaster' or 'market externality'?

Lecture 15: Race, Reproduction and Eugenics

In this lecture we examine the interconnections between race and reproduction in the context of eugenics, focusing on the work of R A Fisher at Cambridge. Beginning with the question of how the eugenics movement has been defined historically, and with a focus on its close relationship to the social sciences, we critically examine the methodologies used in eugenic analysis, and how they co-produce social, biological and moral categories.

Core reading

Philippa Levine and Alison Bashford. 2010. 'Introduction: Eugenics and the Modern World' in Bashford and Levine, ed. *The Oxford Handbook of the History of Eugenics*, Oxford University Press, pp. 3-26 [available online]

Additional Reading

Barkan, E. (1991). *The Retreat of Scientific Racism: Changing Concepts of Race in Britain and the United States between the World Wars*. Cambridge: Cambridge University Press.
doi:10.1017/CBO9780511558351

Edwards, Jeanette, and Carles. Salazar. *European Kinship in the Age of Biotechnology / Edited by Jeanette Edwards and Carles Salazar*. New York: Berghahn, 2008. Fertility, Reproduction, and Sexuality ; v. 14. Web.

Franklin, S., 2003. Re-thinking nature—culture: Anthropology and the new genetics. *Anthropological theory*, 3(1), pp.65-85.

Franklin, Sarah, and Celia Roberts. *Born and Made : An Ethnography of Preimplantation Genetic Diagnosis*. Princeton: Princeton UP, 2006. Web.

Franklin, Sarah. *Dolly Mixtures the Remaking of Genealogy*. Durham: Duke UP, 2007. Web.

Fisher, Ronald Aylmer. *The Social Selection of Human Fertility*. Oxford: Clarendon, 1932. Print.

Fall of the Birth-rate; a Paper Read before the Cambridge University Eugenics Society, 20 May 1920.

1920. Web.

Galton, F., 1904. Eugenics: Its definition, scope, and aims. *American Journal of Sociology*, 10(1), pp.1-25.

Gilman, Sander L. *Race in Contemporary Medicine / Edited by Sander L. Gilman*. New York: Routledge, 2008. Web.

Kevles, D.J., 1999. Eugenics and human rights. *Bmj*, 319(7207), pp.435-438.

MacKenzie, D., 1976. Eugenics in Britain. *Social studies of science*, 6(3-4), pp.499-532.

Supervision Question

To what extent have sociological methods, theories and objectives been shaped by eugenic aspirations?

Lecture 16 Eugenics and Geneticization

In this lecture we continue the themes of the previous session by examining the legacies of eugenics in the present day. In the context of new genetic technologies and the Human Genome Project have we witnessed the emergence of a 'new eugenics'? Answering this question requires thinking carefully about how the term 'eugenics' is used, and what is meant, exactly, by 'geneticization'. This session emphasizes the importance of using sociological methods and evidence to understand how 'genes' make sense in both professional (clinical, legal, etc.) and personal, popular or familial settings. Understanding how geneticization is linked to social stratification continues to be an important and challenging areas of contemporary sociological research, especially in relation to new techniques such as gene editing.

Core Reading

Duster, Troy. *Backdoor to Eugenics*. 2nd ed. New York ; London: Routledge, 2003. Web.

Additional Reading

Benjamin, Ruha. *Captivating Technology : Race, Carceral Technoscience, and Liberatory Imagination in Everyday Life*. 2019. Web.

Benjamin, Ruha. 2009. "A Lab of Their Own: Genomic Sovereignty as Postcolonial Science Policy." *Policy and Society* 28 (4): 341–55

Braun, Lundy, and Evelyn Hammonds. 2008. "Race, Populations, and Genomics: Africa as Laboratory." *Social Science & Medicine* 67 (10): 1580–88

Finkler, K., Dolgin, J., Franklin, S., Gusterson, H., Hadler, N.M., Evans, J.P., Melhuus, M., Nelkin, D., Richards, M., Sachs, L. and Finkler, K., 2001. The kin in the gene: the medicalization of family and kinship in American society. *Current anthropology*, 42(2), pp.235-263.

Kerr, A. and Franklin, S., 2006. Genetic ambivalence: expertise, uncertainty and communication in the context of new genetic technologies. In *New Technologies in Health Care* (pp. 40-53). Palgrave Macmillan, London.

Lock, M., Cunningham-Burley, S., Franklin, S., Fullerton, S., Goodman, A., Maes, K., Armelagos, G., Rapp, R. and Lock, M., 2005. Eclipse of the gene and the return of divination. *Current anthropology*, 46(S5), pp.S47-S70.

Mazumdar, P., 2005. *Eugenics, human genetics and human failings: the Eugenics Society, its sources and its critics in Britain*. Routledge.

Nelkin, Lindee, and Lindee, M. Susan. *The DNA Mystique The Gene as a Cultural Icon*. Ann Arbor: U of Michigan, 2004. Conversations in Medicine and Society. Web.

Nelkin, D. and Michaels, M., 1998. Biological categories and border controls: the revival of eugenics in anti-immigration rhetoric. *International Journal of Sociology and Social Policy*.

Nelson, Alondra. *The Social Life of DNA : Race, Reparations, and Reconciliation after the Genome*. 2016. Web.

Osborne, T. and Rose, N., 2008. Populating sociology: Carr-Saunders and the problem of population. *The Sociological Review*, 56(4), pp.552-578.

Paul, D. (2009). Darwin, social Darwinism and eugenics. In J. Hodge & G. Radick (Eds.), *The Cambridge Companion to Darwin* (Cambridge Companions to Philosophy, pp. 219-245). Cambridge: Cambridge University Press. doi:10.1017/CCOL9780521884754.010

Pearson, K. (2011). *The Life, Letters and Labours of Francis Galton* (Cambridge Library Collection - Darwin, Evolution and Genetics). Cambridge: Cambridge University Press. doi:10.1017/CBO9780511973185

Ramya M. Rajagopalan, Alondra Nelson, and Joan H. Fujimura, 2017 Chapter 12: Race and Science in the Twenty-First Century, in Ulrike Felt, et al. *The Handbook of Science and Technology Studies*. Vol. Fourth edition, The MIT Press. Web.

Renwick, C., 2011. From political economy to sociology: Francis Galton and the social-scientific origins of eugenics. *The British Journal for the History of Science*, 44(3), pp.343-369.

Renwick, C., 2016. Eugenics, Population Research, and Social Mobility Studies in Early and Mid-Twentieth-Century Britain. *The Historical Journal*, pp.845-867.

Schuster, E., 1913. Eugenics as a branch of medical sociology. *The Eugenics Review*, 5(3), p.270.

Strathern, M., 1995. Nostalgia and the new genetics. *Rhetorics of self-making*, pp.97-120.

Wertz, D.C., 1998. Eugenics is alive and well: a survey of genetic professionals around the world. *Science in Context*, 11(3-4), pp.493-510.

Supervision Question: Are eugenic values still a dominant social force?