

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

### **Course Organiser:**

Dr. Darin Weinberg, dtw23@cam.ac.uk

### **Lecturers:**

Dr. Darin Weinberg  
Dr. Marcin Smietana

### **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

## Supervision Arrangements

Supervisions will be arranged by the course organiser on the first lecture.

## 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
- 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.

## Michaelmas Term

### The Sociology of Health and Illness, Dr. Darin Weinberg (Weeks 1-6)

#### 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 con-sequences of the biomedical paradigm's ascendancy. We also consider the differences between a sociology in medicine and a sociology of medicine.

#### References

- 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
- Gadamer, H-G. 1996. *The Enigma of Health*. Cambridge: Polity
- Gerhardt, U. 1989. *Ideas about Illness*. Basingstoke: Macmillan.
- King, L. S.. 1982. *Medical Thinking: An Historical Preface*. Princeton, NJ: Princeton University Press (chs 3-8).
- Parsons, T. 1991. *The Social System*. London: Routledge (ch.10).
- \*Parsons, T. 1999. "Illness and the role of the physician." in *The Talcott Parsons Reader*. Edited by B.S. Turner. Oxford: Blackwell (ch.5).
- 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.
- \*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
- Turner, B. S. 1995. *Medical Power and Social Knowledge, second edition*. London: Sage (ch.1,3).
- Turner, B.S. 2004. *The New Medical Sociology*. New York: Norton

## Essay Topics

1. Critically evaluate the relationships between impairment, illness and disease.
2. Has the concept of the sick role survived criticism?
3. 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.

## References

- Corbin, A.. 1986. *The Foul and the Fragrant*. Cambridge, MA: Harvard University Press
- Foucault, M. 1967. *Madness and Civilization*. London: Tavistock.
- Foucault, M. 1973. *The Birth of the Clinic*. London: Tavistock.
- Foucault, M. 1980. "The politics of health in the eighteenth century." in *Power/Knowledge*. Edited by C. Gordon. Brighton: Harvester Press, pp.166-83.
- Foucault, M. 1981. *The History of Sexuality, Volume One: An Introduction*. Harmondsworth: Penguin (Part five).
- Laqueur, T. 1990. *Making Sex: Body and Gender from the Greeks to Freud*. Cambridge, MA: Harvard University Press.
- Leder, D. 1990. *The Absent Body*. Chicago: University of Chicago Press
- Mol, A. 2002. *The Body Multiple: Ontology in Medical Practice*. Durham, NC: Duke University Press
- \*Petersen, A. 2012. "Foucault, Health and Healthcare." in *Contemporary Theorists for Medical Sociology*. edited by G. Scambler. New York: Routledge, pp. 1-19
- \*Petersen, A., and Bunton, R. eds. 1997. *Foucault, Health, and Medicine*. London: Routledge (Foreword and Part one).
- Turner, B. S. 1992. *Regulating Bodies: Essays in medical sociology*. London: Routledge (chs. 3,5,6,7)
- Turner, B. S. 1996. *The Body and Society*. London: Sage (ch.8).
- Turner, B.S., ed. 2012. *Routledge Handbook of Body Studies*. London: Routledge
- Samson, C., ed. 1999. *Health Studies*. Oxford: Blackwell (Part one).
- Weinberg, D. 2005. *Of Others Inside: Insanity, Addiction, and Belonging in America*. Philadelphia: Temple University Press

## 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.

## References

- 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
- \*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

- Cockerham, W. C. ed. 2009. *The New Blackwell Companion to Medical Sociology*. Oxford: Blackwell
- Harrison, M. 2004. *Disease and the Modern World: 1500 to the Present Day*. Cambridge: Polity
- Lupton, D. 1995. *The Imperative of Health: Public Health and the Regulated Body*. London: Sage
- \*Mechanic, D., and D.A. Rochefort. 1997. "Comparative Medical Systems." *Annual Review of Sociology*. 22: 239-70
- \*Porter, D. 1999. *Health, Civilization, and the State: A History of Public Health from Ancient to Modern Times*. London: Routledge
- 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.

### 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.
3. Critically discuss the role played by risk evaluations in contemporary medical systems.

### Lecture 4: Health and Inequality

In this lecture we examine the social forces that shape the distributions of health and illness across a variety of social categories including: nationality, class, gender, race & ethnicity. Rather than sociologically ana-lyzing the emergence and evolution of medical categories, research in this area draws upon those categories in an effort to learn who gets sick, who remains healthy, and why. In addressing these questions the lecture also seeks to shed light on the role of epidemiology as a tool of medical sociological research and on some of the social structural mechanisms that produce 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
- 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
- Hutton, W. 2000. *New Life for Health: The Commission on the NHS*. London: Vintage.
- 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)
- \*Marmot, M. 2004. *Status Syndrome: How social standing directly affects your health*. London: Blooms-bury
- 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.
- McKeown, T. 1979. *The Role of Medicine*. Oxford: Basil Blackwell.
- 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
- \*Townsend, P., and Davidson, N. 1982. *Inequalities in Health (The Black Report)* London: Penguin.
- 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.

## Essay Topics

1. Critically review the Black Report.
2. 'Women live longer with higher morbidity than men' Discuss.
3. What is at stake in conflict between the individual biomedical model and the social determinants of health framework?

## Lecture 5: Clinical Encounters and the Care of the Self

Social scientists are becoming increasingly interested in the doctor-patient relationship. What kinds of so-cial factors determine how clinical interactions proceed? Patients were once expected to place themselves completely at the disposal of their health care providers and deviations from such total compliance were looked upon as pathological. Now one increasingly hears calls for patient-centred medicine, informed con-sent, the codification of patients' rights, and so on. 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.

## References

- Annandale, E., M. Elston, and L. Prior. 2005. *Medical Work, Medical Knowledge and Health Care*. Oxford: Blackwell, Part II
- Brown, P., and S. Zavestoski. 2005. *Social Movements in Health*. Oxford: Blackwell
- Corrigan, O. 2003. "Empty Ethics: the problem with informed consent." *Sociology of Health and Illness*. 25(7): 768-792
- Delvecchio-Good, M.J., and B. Good. 2000. "Clinical Narratives and the Study of Contemporary Doctor-Patient Relationships." In *The Handbook of Social Studies in Health & Medicine*. Edited by Albrecht, G. et al. London: Sage, pp. 243-58
- Epstein, S.. 1996. *Impure Science: AIDS, Activism, and the Politics of Knowledge*. Berkeley: University of California Press
- Mattingly, C.. 1994. *Healing Dramas and Clinical Plots*. Cambridge: Cambridge University Press
- Parsons, T. 1991. *The Social System*. London: Routledge (ch.10).
- \*Parsons, T. 1999. "Illness and the role of the physician." in *The Talcott Parsons Reader*. edited by B.S. Turner. Oxford: Blackwell (ch.5)
- Pols, J. 2003. "Enforcing patients rights or improving care? The interference of two modes of doing good in mental health care." *Sociology of Health and Illness*. 25(4): 320-47
- Prior, L. 2003. "Belief, knowledge and expertise: the emergence of the lay expert in medical sociology." *Sociology of Health and Illness*. 25(3):41-57
- Weinberg, D. 2014. "Psychiatric Diagnosis as Collective Action in a Residential Therapeutic Community." In *Turning Troubles into Problems*. Edited by J. Gubrium and M. Jarvinen. London: Routledge, pp. 67-84

## Essay Topics

1. Why are doctors increasingly receptive to the empowerment of patients?
2. Explain why patients have grown more proactive.

## 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 hither-to been thought to properly fall within the proper jurisdiction of medicine.

## References

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

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

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

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.. 2005. "The Shifting Engines of Medicalization." *Journal of Health and Social Behavior*. 46:3-14

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

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

Rosenberg, C.E.. 2002. "The Tyranny of Diagnosis: Specific Entities and Individual Experience." *The Milbank 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.
2. Critically evaluate the claim that the dynamics of medicalisation have changed substantially over last couple of decades.

### **Gender, Health and Reproduction - Dr Marcin Smietana**

#### **Lecture 7: Sex, gender, reproduction and health**

In this lecture, we look at how dominant notions and practices related to reproductive and sexual health, and indeed to the health and reproduction of entire communities, are linked to social hierarchies. We discuss selected cases where perceptions and behaviours with regard to health and reproduction have been dependent on hierarchical relationships. Alongside the core text by Jasbir Puar (2017), which develops the earlier frameworks of stratified reproduction with regard to health, we will briefly discuss cases from each of the five reading topic(s) below: gender identity, sexuality, race and nation, (dis)ability, and species.

#### **References:**

##### **Core reading:**

Puar, Jasbir. 2017. *The Right to Maim: Debility, Capacity, Disability*. Duke University Press. - 'Introduction: 'The Cost of Getting Better,' pp.1-31, DOI: <https://doi-org.ezp.lib.cam.ac.uk/10.1215/9780822372530-001>

**Further readings** (please choose as per your interests; the readings with asterisk\* are additional):

##### ***On gender identity:***

Burns, Christine (ed.) 2018. *Trans Britain: Our Long Journey from the Shadows*.

Burke, Mary C. 2011. Resisting pathology: GID and the contested terrain of diagnosis in the transgender rights movement. In: McGann, P., & Hutson, D.: *Sociology of Diagnosis: (Advances in Medical Sociology, Vol. 12)*, Emerald Group Publishing Limited, Bingley: pp. 183-210. [https://doi.org/10.1108/S1057-6290\(2011\)0000012013](https://doi.org/10.1108/S1057-6290(2011)0000012013)

Fausto-Sterling, Anne. 2000. *Sexing the Body: Gender Politics and the Construction of Sexuality*. Basic Books. (in particular Chapter 3 'Of gender and genitals: The use and abuse of the modern intersexual' pp. 45-77)

Hines, Sally and Santos, A. C., 2018. Transgender rights and recognition in the UK and Portugal. In: Hines, S.; Davy, Z.; Monro, S.; Motmons, J.; Santos, A.C.; Van da Ros, J. *Critical Social Policy* 38 (1): *Special Issue: Trans\* Policy, Practice and Lived Experience within a European Context*. Doi: 10.1177/0261018317732880

Stryker, Susan & Whittle, Steven (eds.) 2006. *The Transgender Studies Reader*. London: Taylor and Francis. (in particular the introduction paper by Susan Stryker, pp. 1-19: '(De)Subjugated Knowledges: An Introduction to Transgender Studies')

#### **On sexuality:**

Pralat, Robert. 2014. Repro-sexual intersections: Sperm donation, HIV prevention and the public interest in semen. *Reproductive Biomedicine Online*, 30 (3): 211-219.

Rubin, Gayle. 2011. The leather menace. Comments on politics and S/M. In: Rubin, Gayle. *Deviations: A Gayle Rubin Reader*. Duke University Press: Durham & London, pp. 109-136.

Stacey, Judith. 2004. Marital suitors court social science spinsters: The unwittingly conservative effects of public sociology. *Social Problems*, 51(1): 131-45.

Stacey, Judith; & Biblarz, Timothy J., 2001. (How) does the sexual orientation of parents matter? *American Sociological Review* 66 (2), 159–183.

#### **On race and nation:**

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>

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](https://www.researchgate.net/publication/299357485_The_biomedicalisation_of_illegal_abortion_The_double_life_of_misoprostol_in_Brazil).

#### **On (dis)ability:**

Saxton, Marsha. 1997. Disability rights and selective abortion. In: Davis, Lennard J. (Ed.), *The Disability Studies Reader*. Routledge: London & New York. The Fifth Edition 2017, pp. 73-86.

Wahlberg, Ayo; & Gammeltoft, Tine. 2017. Introduction: Kinds of Children. In: Wahlberg, Ayo; & Gammeltoft, Tine (eds.) *Selective Reproduction in the 21st Century*. Palgrave Macmillan, pp. 1-24. [https://doi.org/10.1007/978-3-319-58220-7\\_1](https://doi.org/10.1007/978-3-319-58220-7_1)

#### **On species:**

Merleau-Ponty, Noémie. 2019. A hierarchy of deaths: Stem cells, animals and humans understood by developmental biologists". *Science as Culture*. Doi: 10.1080/09505431.2019.1579787

Yoon, Hyaesin. 2017. Feral Biopolitics. *Angelaki, Journal of the Theoretical Humanities* 22: 2, 135-150, Doi: 10.1080/0969725X.2017.1322829

#### **Essay topics:**

1. In what ways has the use of measurements of psychological/mental health been successful in legitimizing gay parenting, and what are its limitations?
2. (How) is reproductive health stratified? Discuss using examples.

3. (How) can Jasbir Puar's framework of debility-capacity-disability be helpful (or not) in analysing social hierarchies visible at the intersection of health and reproduction?

### **Lecture 8: Redefining fertility**

In this lecture, we look at how perceptions and meanings of (in)fertility and reproductivity are contextual and how they are changing, following Susan Greenhalgh's (1995) notion of 'situated fertility' and Sarah Franklin's (2013) work on 'post-ART fertility'. In this process, we examine how affective, economic and other aspects of fertility and reproduction merge in the contemporary 'biomedical mode of reproduction' (Thompson 2005). We also trace links between fertility, the politics of reproduction and broader neoliberal politics (Briggs 2018), as well as the legacies of eugenics, settler colonialism and extractivist environmental politics (Bashford 2018). In discussing how neoliberal politics can obscure histories of exclusion and racialize fertility, one of the key cases we look at is what contemporary scroll-down menus in fertility clinics may have to do with the 19<sup>th</sup>-century 'race science' (Russell 2018). We consider reproductive justice (Luna & Luker 2013) as an activist and scholarly framework with a potential to make fertility less stratified and more egalitarian.

### **References:**

#### **Core readings:**

Briggs, Laura. 2018. *How All Politics Became Reproductive Politics: From Welfare Reform to Foreclosure to Trump*. University of California Press. (in particular Chapter 4 'The politics and economy of reproductive technology and Black infant mortality' pp. 101-148)

Greenhalgh, Susan. 1995. *Situating Fertility: Anthropology and Demographic Enquiry*. Cambridge University Press. (in particular Chapter 1 'Anthropology theorizes reproduction' pp. 3-28)

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)

#### **Further readings:**

Bashford, Alison. 2018. World population from eugenics to climate change. In: Hopwood, Nick; Flemming, Rebecca; & Kassell, Lauren (eds.). *Reproduction: Antiquity to the Present Day*. Cambridge University Press: pp. 505-519.

Franklin, Sarah. 2013. *Biological Relatives: IVF, Stem Cells, and the Future of Kinship*. Durham: Duke University Press. (in particular: Introduction 'Relatively Biological' pp. 1-29)

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

Marre, Diana; San Román, Beatriz; & Guerra, Diana. 2018. On reproductive work in Spain: Transnational adoption, egg donation, surrogacy. *Medical Anthropology* 37 (2).

Smietana, Marcin; Thompson, Charis & Twine, France Winddance. 2018. [Introduction: Making and Breaking Families: Reading Queer Reproductions, Stratified Reproduction and Reproductive Justice Together](#). In: Marcin Smietana & Charis Thompson (eds.) 2018. 'Making Families: Transnational Surrogacy, Queer Kinship, and Reproductive Justice'. Special Issue of *Reproductive Biomedicine & Society Online*, vol. 7 Nov. 2018, pp. 1-160, [https://www.rbmsociety.com/issue/S2405-6618\(18\)X0003-3](https://www.rbmsociety.com/issue/S2405-6618(18)X0003-3) [open access]

Thompson, Charis. 2005. *Making Parents: The Ontological Choreography of Reproductive Technologies*. Cambridge, MA; London: MIT Press. (in particular Chapter 8: 'The sacred and profane human embryo: Biological mode of (re)production?' pp.246-276; and additionally also Chapter 4 'Is man to father as woman is to mother? Masculinity, gender performativity and social (dis)order' pp. 117-143)

Van de Wiel, Lucy, 2018. Prenatal imaging: Egg freezing, embryo selection and the visual politics of reproductive time. *Catalyst: Feminism, Theory, Technoscience* 4 (2), 1–35. <https://doi.org/10.28968/cftt.v4i2.29908>.



**Essay topics:**

1. What does 'fertility' actually mean? Discuss examples of its situated and changing meanings today.
2. In what ways can fertility become racialized? Discuss with reference to examples.

## Lent Term

### Medical Knowledge and Medical Practice, Dr. Darin Weinberg (Weeks 9-16)

#### Lecture 9: Overview of the Sociology of Medical Knowledge and Practice

This lecture will: 1) introduce students to the sociology of medical practice; 2) describe the subject matter of the course by specifying contemporary sociological approaches to understanding medical practice in contrast to other analytic approaches; and 3) begin to encourage students to develop a deeper and more critical outlook on the practice of medicine through investigation of its historical origins, contemporary composition, and human consequences.

#### References

- Blaxter, M. 2010. *Health, 2nd edition*. Cambridge: Polity
- Gadamer, H-G. 1996. *The Enigma of Health*. Cambridge: Polity
- Good, B.J.. 1994. *Medicine, rationality, and experience: An Anthropological Perspective*. Cambridge: Cambridge University Press
- Kirk, S., and H. Kutchins. 1992. *The Selling of DSM*. New York: Aldine de Gruyter
- \*Mol, A.. 2002. *The Body Multiple: Ontology in Medical Practice*. Durham, NC: Duke University 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
- Turner, B. S.. 1995. *Medical Power and Social Knowledge*. London: Sage
- Weinberg, D. 2005. *Of Others Inside: Insanity, Addiction, and Belonging in America*. Philadelphia: Temple University Press

#### Essay Topics

1. Is the practice of medicine more properly seen as science or as art? Why?
2. Define, and critically compare, *internalist* and *externalist* explanations of medical practice. Also, discuss the feasibility of taking a theoretical middle road between them.

#### Lecture 10: What is the Profession of Medicine?

This lecture will: 1) provide students with a sociological sense of the concept *profession*, 2) demonstrate the importance of this concept for understanding the practice of modern medicine, and 3) critically evaluate the extent to which specifically professional sorts of agendas structure the practice of modern medicine in all its various incarnations.

#### References

- Coburn, D., and Willis, E. 2000. "The Medical Profession: Knowledge, Power, and Autonomy." In *The Handbook of Social Studies in Health & Medicine*. Edited by G.L. Albrecht, et al.. London: Sage. Pp. 377-93
1988. *The Changing Character of the Medical Profession, a special issue of the Milbank Quarterly*. 66 (Supplement 2)
- Freidson, E.. 1988. *The Profession of Medicine: A Study of the Sociology of Applied Knowledge*. Chicago: University of Chicago Press.
- \*Starr, P. 1982. *The Social Transformation of American Medicine*. New York: Basic Books
- Timmermans, S., and M. Berg. 2003. *The Gold Standard: The Challenge of Evidence-Based Medicine and Standardization in Health Care*. Philadelphia: Temple University Press

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

\*Turner, B.S. 1995. *Medical Power and Social Knowledge*. London: Sage, (Chs 7, 8, 9, & 10)

### Essay Topics

1. What is a profession and why is it important to think of medicine as a profession?
2. How has the autonomy of professional medicine changed over the last several decades and how has this affected the practice of medicine?

### Lecture 11: A Social History of the Medical Profession

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

### References

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

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

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

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

### 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: 1) examine the origins and historical development of medical science, 2) critically examine how, and the extent to which, medical science is influenced by the social contexts within which it is undertaken, and 3) begin to consider the relationship between medical science and medical care.

### References

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

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

Sismondo, S. 2009. "Ghosts in the Machine: Publication Planning in the Medical Sciences." *Social Studies of Science*. 39(2): 171-98

McHenry, L. 2009. "Ghosts in the Machine: Comment on Sismondo." *Social Studies of Science*. 39(6): 943-947

Sismondo, S. 2009. "Ghosts in the Machine: Reply to McHenry." *Social Studies of Science*. 39(6): 949-952

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

### Essay Topics

1. What does it mean to argue that medical research is socially organised? Frame your answer in terms of the distinction between internalist and externalist explanations of medical practice.
2. Compare and contrast the origins and development of modern medical science with the origins and development of modern medical care giving. How, and to what extent, have science and care giving been linked since the late eighteenth century? Use empirical examples from the readings to support your argument.

### Lecture 13: Medical Knowledge and Medical Training

This lecture will: 1) explore the social history and contemporary social organisation of medical training, 2) identify the pedagogical priorities evident in contemporary medical training, and 3) critically assess the consequences these priorities entail for medical professionals, patients, and society at large.

### References

Bosk, C. 2003. *Forgive and Remember: Managing Medical Failure, second edition*. Chicago: University of Chicago Press

Brosnan, C., and B. S. Turner, eds.. 2009. *Handbook of the Sociology of Medical Education*. London: Routledge

Colombotos, J., ed. 1988. Continuities in the Sociology of Medical Education. A Special Issue of *Journal of Health and Social Behavior*. 29(4)

Good, B., and M. DelVecchio Good. 1993. "Learning Medicine': The Construction of Medical Knowledge at Harvard Medical School." In *Knowledge, Power, & Practice: The Anthropology of Medicine and Everyday Life*. Edited by S. Lindenbaum and M. Lock. Berkeley: University of California Press

Rothstein, W. G. 1987. *American Medical Schools and the Practice of Medicine: A History*: Oxford: Oxford University 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, Ch. 5

### Essay Topics

1. Why has the problem of reconciling training pertaining to medical "caring" and medical "competence" persisted in medical education despite so many apparent efforts to solve it?
2. Critically discuss the relationship between the basic sciences and clinical training in medical school. Use empirical examples from the readings to support your argument.

### Lecture 14: Medical Knowledge and Clinical Care

This lecture will: 1) closely examine the relationship between medical science and clinical care, 2) critically examine how, and the extent to which, clinical work is influenced by the social contexts within which it is undertaken, and 3) evaluate claims that clinical expertise is dependent upon, but not reducible to, medical science.

### References

Annadale, E., M. Elston, and L. Prior. 2005. *Medical Work, Medical Knowledge and Health Care*. Oxford: Blackwell

\*Atkinson, P. 1995. *Medical Talk and Medical Work: The Liturgy of the Clinic*. London: Sage

\*Jutel, A. 2011. *Putting a Name to It: diagnosis in contemporary society*. Baltimore, MD: Johns Hopkins University Press

Straus, A., Fagerhaugh, S., Suczek, B., and Wiener, C. 1985. *The Social Organization of Medical*

Work. Chicago: University of Chicago Press

Lynch, M. 1984. "'Turning Up Signs' in Neurobehavioral Diagnosis." *Symbolic Interaction*. 7: 67-86

Pols, J. 2003. "Enforcing patients rights or improving care? The interference of two modes of doing good in mental health care." *Sociology of Health and Illness*. 25(4): 320-47

Prior, L. 2003. "Belief, knowledge and expertise: the emergence of the lay expert in medical sociology." *Sociology of Health and Illness*. 25(3):41-57

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

Strong, P.M. 1979. *The ceremonial order of the clinic: parents, doctors, and medical bureaucracies*. London: Routledge & Kegan Paul

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

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

Weinberg, D. 2014. "Psychiatric Diagnosis as Collective Action in a Residential Therapeutic Community." In *Turning Troubles into Problems*. Edited by J. Gubrium and M. Jarvinen. London: Routledge, pp. 67-84

### Essay Topics

1. Critically discuss the claim that clinical work is a craft that cannot be reduced to scientific algorithms. What does this mean and why is it or is it not so?
2. Critically discuss the idea that there are profound differences between clinical expertise and a knowledge of medical science. If there are such differences, what are they?

### Lecture 15: Alternative Medicines and Mutual Help

This lecture will: 1) consider the extent to which traditional biomedicine is losing ground to alternative approaches to health care or to social movements organised around health care issues, 2) investigate the causes, characteristics, and consequences of various critiques of biomedicine, and 3) evaluate the credibility, efficacy, and wider social consequences of medical pluralism.

### References

\*Gale, N. 2014. "The Sociology of Traditional, Complementary and Alternative Medicine." *Sociology Compass*. 8(6): 805-822

\*Cant, S., and Sharma, U. 1999. *A new medical pluralism?: Alternative medicine, doctors, patients and the state*. London: UCL Press

Buckman, T. J. 1999. *Understanding Self-Help/Mutual Aid: Experiential Learning in the Commons*. New Brunswick, NJ: Rutgers University Press

Ruggie, M. 2004. *Marginal to Mainstream: Alternative Medicine in America*. Cambridge: Cambridge University Press

Tovey, P., G. Easthorpe, and J. Adams, eds.. 2003. *The Mainstreaming of Complementary and Alternative Medicine: Studies in Social Context*. London: Routledge

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

### Essay Topics

1. What is alternative medicine, what explains its growing importance, and what, if any, constraints might limit its potential for further growth? Use examples from the readings to support your argument.
2. Critically evaluate the importance of experiential knowledge as a source of therapeutic insight. What is the relationship between experiential knowledge and scientific knowledge? Use examples from the readings to support your argument.

## **Lecture 16: Future Directions in the Study of Medical Practice**

This lecture will: 1) re-evaluate the relationship between medical knowledge, medical practice, and our social lives; 2) consider future directions for the sociology of medical practice; and 3) consider how sociological research concerning medical practice might improve the practice of medicine itself.

### **References**

- Haraway, D.J. 1991. *Simians, Cyborgs, and Women: The Reinvention of Nature*. New York: Routledge, see in particular Chapter 10, pp. 203-30
- Epstein, S. 2008. "Patient Groups and Health Movements." In *The Handbook of Science and Technology Studies, third edition*. Edited by E.J. Hackett, O. Amsterdamska, M. Lynch, and J. Wajcman. London: MIT Press, pp. 499-539
- Lakoff, A. 2008. "The Right Patients for the Drug: Pharmaceutical Circuits and the Codification of Illness." In *The Handbook of Science and Technology Studies, third edition*. Edited by E.J. Hackett, O. Amsterdamska, M. Lynch, and J. Wajcman. London: MIT Press, pp. 741-59
- Mol, A. 2002. *The Body Multiple: Ontology in Medical Practice*. Durham, NC: Duke University Press
- Timmerman, S., and M. Berg. 2003. *The Gold Standard: The Challenge of Evidence-Based Medicine and Standardization in Health Care*. Philadelphia: Temple University Press
- Turner, B.S. 1996. *The Body & Society, second edition*. London: Sage, see in particular the Introduction to the second edition, pp. 1-37, and Chapters 7-10, pp. 159-235
- Weinberg, D. 2005. *Of Others Inside: Insanity, Addiction, and Belonging in America*. Philadelphia: Temple University Press

### **Essay Topic**

1. How might the sociology of medical practice contribute to the improvement of medical practice?

## **Easter Term**

### **The Sociology of Mental Health and Illness, Dr Darin Weinberg (Weeks 17-20)**

## **Lecture 17: Psychiatric Sociology: Epidemiology and social stress**

This lecture will: 1) introduce students to the field of psychiatric sociology; 2) by way of classic case studies, it will explore the benefits and pitfalls of epidemiological research on mental health; 3) by way of classic case studies, it will explore the benefits and pitfalls of research concerning the relationship between social stress and mental health.

### **References**

- Cockerham, W.C. 2013. *Sociology of Mental Disorder, ninth edition*. Upper Saddle River, NJ: Prentice Hall, Chapters Five through Nine
- Scheid, T.L., and T.N. Brown eds. 2010. *A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems, second edition*. Cambridge: Cambridge University Press, Especially chapters one, two, six and nine

### **Essay Topics**

1. Critically assess the benefits and pitfalls of epidemiological research on mental health.
2. Critically assess the benefits and pitfalls of research concerning the relationship between social stress and mental health.

## **Lecture 18: Interactionist Approaches**

This lecture will: 1) critically assess the contributions of Family Systems Theories, Labelling Theories, and Troubles Management Theories to the sociology of mental health and illness; 2) compare and contrast these approaches to each other and to those proffered by psychiatrists and psychiatric sociologists; and 3) explore whether these approaches to the understanding of mental health and illness are best viewed as complementary to, or intrinsically critical of, psychiatric sociology.

## References

### *Family Systems Theories*

Bateson, G. 2000. *Steps to an Ecology of Mind*. Chicago: University of Chicago Press, See especially pp. 201-43.

Laing, R.D. 1999. *The Divided Self: an existential study in sanity and madness*. London: Routledge

### *Labelling Theories*

Link, B.G., and J. Phelan. 1999. "The Labeling Theory of Mental Disorder (II): The Consequences of La-beling." In *A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems*. Edited by A.V. Horwitz and T.L. Scheid. Cambridge: Cambridge University Press Cambridge: Cambridge University Press, pp. 361-76

Phelan, J., and B.G. Link. 1999. "The Labeling Theory of Mental Disorder (I): The Role of Social Contin-gencies in the Application of Psychiatric Labels." In *A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems*. Edited by A.V. Horwitz and T.L. Scheid. Cambridge: Cambridge University Press Cambridge: Cambridge University Press, pp. 139-49

Scheff, T.. 1984. *Being Mentally Ill, second edition*. Chicago: Aldine

### *Troubles Management Theories*

Emerson, R.M., and S. Messinger. 1977. "The Micro -Politics of Trouble." *Social Problems*. 25(2): 121-34

Ingleby, D. 1983. "Mental Health and Social Order." in *Social Control and the State*. Edited by S. Cohen and A. Scull. Oxford: Blackwell, pp. 141-88

Lynch, M. 1983. "Accommodation Practices: Vernacular Treatments of Madness." *Social Problems*. 31(2): 152-64

Rosenhan, D. 1973. "On Being Sane in Insane Places." *Science*. 179:250-8

Weinberg, D. 1997. "The Social Construction of Non-Human Agency: The Case of Mental Disorder." *Social Problems*. 44(2): 217-234

## Essay Topics

1. Critically compare and contrast Family Systems, Labelling Theory, Troubles Management approaches to the study of mental health and illness.
2. Critically compare and contrast interactionist theories with social stress theories of mental health and illness.

## Lecture 19: Addiction

In this lecture we will trace the history of both medical and sociological thinking on the nature of addiction. In particular, we will be concerned to explore the extent to which received addiction science has succeeded in explaining the loss of self-control over putatively addictive behaviour. This will provide occasion to think more broadly about what it means to lose control of ourselves and why self-control has become such a deeply rooted cultural value in modern western societies.

## References

Campbell, N. D. 2010. Toward a critical neuroscience of 'addiction'. *BioSocieties*. 5(1), 89–104.

Courtwright, D. T. 2010. The NIDA brain disease paradigm: History, resistance, spinoffs. *BioSocieties*. 5(1), 137–147.

Fraser, S., D. Moore and H. Keane. 2014. *Habits: Remaking Addiction*. New York: Palgrave

Granfield, R., and C. Reinarman, eds. 2015. *Expanding Addiction: Critical Essays*. London: Routledge

Levine, H. G. 1978. The discovery of addiction: Changing conceptions of habitual drunkenness in America. *Journal of Studies on Alcohol*, 39(1), 143–174.

Reinarman, C. 2005. Addiction as accomplishment: The discursive construction of disease. *Addiction Re-search and Theory*, 13(4), 307–320

Reith, Gerda. 2019. *Addictive Consumption: Capitalism, Modernity and Excess*. London: Routledge

Weinberg, D. 2000. "'Out There': The ecology of addiction in drug abuse treatment discourse." *Social Problems*. 47(4): 217-34

Weinberg, D. 2013. "Post-humanism, addiction and the loss of self-control: Reflections on the missing core in addiction science." *International Journal of Drug Policy* 24:173–181

### **Essay Topics**

1. Critically evaluate whether, and how, it is scientifically justifiable to claim addiction entails a loss of self-control.
2. Are sociological and biomedical orientations to addiction compatible?

### **Lecture 20: Anti-psychiatry**

In this lecture we will: 1) critically consider the claims of some of the better known polemics against the profession of psychiatry and psychiatric practice; 2) explore the sorts of public policies that flow from these claims; and 3) investigate the future of anti-psychiatry in light of the failures of the community mental health movement.

### **References**

Breggin, P.R. 1991. *Toxic Psychiatry: Why Therapy, Empathy, and Love Must Replace the Drugs, Electro-shock, and Biochemical Theories of the New Psychiatry*. New York: St. Martin's.

Brown, P. 1985. *The Transfer of Care: Psychiatric Deinstitutionalization and Its Aftermath*. London: Routledge, chapter 9, pp. 167-208

\*Crossley, N. 2006. *Contesting Psychiatry: Social Movements in Mental Health*. London: Routledge

Goffman, E. 1961. *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*. New York: Anchor Books

Goldstein, M.S. 1980. "The Politics of Thomas Szasz: A Sociological View." *Social Problems*. 27(5): 570-83

Laing, R.D. 1999. *The Divided Self: an existential study in sanity and madness*. London: Routledge

Sedgwick, P. 1982. *Psychopolitics*. New York: Harper & Row Publishers

Szasz, T. 1961. *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct*. New York: Hoeber-Harper

### **Essay Topics**

1. Is anti-psychiatry better understood as a theoretical critique or as a social movement? Why?