

## **I. Contact and General Information**

Instructor: **J. Cristian Rangel**  
E-mail: **cristian.rangel@mail.utoronto.ca**  
Class: **January 13<sup>th</sup> to April 6<sup>th</sup>**  
Office Hours: **Thursdays 3 to 5 (or by appointment), 725 Spadina Avenue, Room 397**  
TA: **Marie-Pier Joly**  
Email: **mariepier.joly@utoronto.ca**  
Office Hours: **To be announced on BB (Rooms 225 or 397 according to availability)**

## **II. Course Goals and Learning Outcomes**

1. Developing a historically grounded understanding of healthcare systems as social and political institutions, that is, the product of compromises amongst competing social actors.
2. Developing your sociological imagination. The sociological imagination is a useful skill for understanding the connections between people's health outcomes and social forces.
3. Developing a basic stock of theoretical and practical knowledge to engage as both an informed citizen and a well trained professional so that you are able to provide meaningful critiques and solutions to current issues in healthcare.

## **III. Course Description**

This course is a 200 level course, so it is an introductory and survey level course to the complex issues in the sociology of health care and health care systems analysis. In terms of content, the course is divided into four main thematic areas: Social and historical forces, populations and social determinants of health, and the body, technology and ethical-moral debates.

The first thematic area, Social and Historical Forces, presents us with the challenges of historical analyses and the theories and ideologies that influence the organizational structure of health care systems in selected Western countries, including Canada. The historical segment of the course focuses on how health systems develop, how they are maintained, and how they can change over time. The second thematic area explores social forces that determine people's health outcomes such as social class, race/ethnicity, and gender and sexuality. The third area explores issues around the body in health care, the illness experience and the challenges that current medical technologies pose to enduring moral questions about human life. These topics will be explored in detail in specific lectures. However, every lecture will be imbued with conversations that link more than one theme at the time.

## **IV. Class Structure**

This is a large class with more than 130 students enrolled. Despite the size of the class, I invite and expect you to engage in each lecture in the form of discussion and questions related to each topic. In some classes we will develop short writing exercises. These exercises will count as in-class participation. As students you are required to be familiar with the class material in advance of each lecture.

The class structure is a lecture-style discussion. That means that as your instructor, I will lecture every week and position each week's theme in its larger historical and cultural context. Also, we will have a number of guest lecturers during the semester. These lecturers will share with you the outcomes of their ongoing doctoral work and research agendas in connection with each week's specific themes. Both lectures and guests' presentation materials are included in the evaluation structure of the course.

In addition to lectures and presentations, we will discuss audiovisual materials in class, and some of these materials will be part of your preparation before class. Again, there will be required readings prior to each class and all of the required readings have been included in the syllabus. I will post the required links when necessary, and I will send a structure of the class in Power Point Format in advance to each class by 12 noon each Wednesday.

Please note that the lecture aids, such as power point presentations and videos are not supposed to stand in for lecture material and notes. These materials are supposed to serve as visual aids to emphasize the points made in each lecture, they are not a summary of the class lecture, and thus there is no need/use to have them posted in advance of each lecture.

#### **V. Prerequisites**

SOC101Y1 or SOC102H1 or SOC103H1. As per regulations, students without this prerequisite can be removed at any time and without notice as per university regulations.

#### **VI. Students Rights and Responsibilities**

We encourage you to become familiar with your rights and responsibilities as student. Please make sure that you are familiar with the support provided by your students' union representatives. For more information visit <http://life.utoronto.ca/get-help/rights-responsibilities/>

#### **VII. Student Support Systems**

University life can be challenging due to academic demands, job schedules and personal responsibilities. Please make sure that you know the services that are available through the university support system (academic, financial and health services included). Make sure that you visit: <http://life.utoronto.ca/get-smarter/academic-support/>

#### **VIII. Accessibility Needs**

The University of Toronto is committed to accessibility. If you require accommodations or have any accessibility concerns, please visit <http://studentlife.utoronto.ca/accessibility> as soon as possible.

#### **IX. Plagiarism**

Cheating and misrepresentation will not be tolerated. Students who commit an academic offence face serious penalties. Avoid plagiarism by citing properly: practices acceptable in high

school may prove unacceptable in university. Know where you stand by reading the “Code of Behaviour on Academic Matters” in the Calendar of the Faculty of Arts and Science. For more information, please visit: <http://life.utoronto.ca/get-smarter/academic-honesty/>

## **X. Evaluation & Assessment**

This course has multiple sources of evaluation and are intended to assess your grasp of the topics and your ability to assess them in a critical fashion and your ability to communicate in a scholarly and professional manner.

### 1. Critical writing exercises:

- A. Three (3) critical review papers are to be submitted at three different times during the semester, one for each theme.
  - i. Critical Paper I: This assignment is a two-page critique of a set of selected readings from thematic cluster 1 (weeks 1-4). The specifics for this assignment will be posted on January 6<sup>th</sup> 2016.
  - ii. Critical Paper II: This assignment is a three-page critique of the selected readings from thematic cluster 2 (weeks 5-9). This paper will include at least one conceptual or methodological reference in relation to the previous theme of readings. The specifics for this assignment will be posted on January 27<sup>th</sup> 2016.
  - iii. Critical Paper III: This assignment is a three-page critique of at least one of the papers in the third theme in relation to the previous two themes. The specifics for this paper will be posted on February 24<sup>th</sup> 2016.
  - iv. Each paper will be submitted in two forms: 1) A printed copy at the beginning of the class of the first, or last due date for each assignment; and 2) and digitally copy via turnitin.
    - a) Students agree that by taking this course all required papers may be subject to submission for textual similarity review to Turnitin.com for the detection of plagiarism. All submitted papers will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of such papers. The terms that apply to the University’s use of the Turnitin.com service are described on the Turnitin.com web site.
    - b) There may be accommodations for alternative submission forms for turnitin submission as per agreement with the instructor. You will have to meet with the instructor within the first two weeks of class to set alternative submission forms.
  - v. Submission dates for each assignment are posted below.
  - vi. Each paper will be written in 12-point size and only in Times New Roman, Garamond, or Calibri fonts. The paper format will be double or 1.5 spaces, and have margins will be of at least one inch on each side of the paper.

- vii. The evaluation scheme and rubric will follow the University of Toronto guidelines. You can find it here:  
<http://www.writing.utoronto.ca/advice/general/grading-policy>
- viii. **Penalties for late submission: 25% per day after the final due date for each assignment.**
- ix. Penalties for late submission: 33% per day after the final due date for each assignment.
- x. **Late submission procedure: You will submit both a digital and a printed copy of your assignment. The printed copy will be placed in the mailbox for the 200 Level Courses. You will send an email to your TA informing him/her of your late submission.**

B. One Learning Objective Piece

- i. This piece is divided in two parts. The first part is to be submitted at the beginning of the semester (see dates below). The second part is a revised reflective version of the first piece. The reflective piece is to be submitted by the end of the semester (see dates below).
  - ii. Guidelines for part 1 will be posted by January 6<sup>th</sup> 2016.
  - iii. Guidelines for part 2 will be posted by February 28<sup>th</sup> 2016.
  - iv. The reflective component will be assessed in reference to adherence to instruction in guidelines.
  - v. Late submission procedures for written assignments in Title X.1.A ix and x apply.
2. 5 in-class exercises to be submitted at the end of the class as indicated by the instructor in the specific lectures. See Title XI. 1. (below)
3. One Final Exam. This examination covers all the topics reviewed during the semester. This will **not** be a multiple-choice examination, but will consist of short answers and essay questions.
4. All forms of assessment and evaluation are subject to the University of Toronto's regulations under the Academic Honesty Guidelines (See Title IX in this document). The University of Toronto treats cases of academic misconduct very seriously. All suspected cases of academic dishonesty will be investigated following the procedures outlined in the Code. The consequences for academic misconduct can be severe, including a failure in the course and a notation on your transcript. To remind you of these expectations, and help you avoid accidental offences, I will ask you to include a signed Academic Integrity Checklist with every assignment. If you do not include the statement, your work will not be graded. The statement will be posted on BB (Course Documents).

If you have any questions about what is or is not permitted in this course, please do not hesitate to contact me. If you have questions about appropriate research and citation methods, seek out additional information from me, or from other available campus resources like the U of T Writing Website, please visit:  
<http://www.writing.utoronto.ca/writing-centres>.

If you are experiencing personal challenges that are having an impact on your academic work, please speak to me or seek the advice of your college registrar.

**XI. Attendance & Missing Deadlines and Other Forms of Evaluation**

1. Attendance is strongly encouraged as there will be in class exercises that will constitute up to 15% of your total marks for the semester. These exercise will not be subject to make-up options as per University of Toronto Regulations for these matters. Students will receive a zero (0) mark for the missing in-class exercises.
2. Written Assignment Late Penalties and procedures can be found in Title X.1.A ix and x.
3. Missing the exam as programmed by the Faculty of Arts & Science policy will be dealt in accordance to Faculty of Arts and Science Procedures. Please make sure that you visit:  
<http://www.artsci.utoronto.ca/current/petitions/appendix>

**XII. Important Dates for Evaluation & Assessment**

DATES	ASSIGNMENT	INDIV VALUE	TOTAL VALUE	CUMULATIVE VALUE
JANUARY 20 <sup>TH</sup>	Learning Objective I (initial)	2%	2%	2%
MARCH 30 <sup>TH</sup>	Learning Objective 2 (Final)	5%	5%	7%
OPEN DATES	In-class exercises (5)	3%	15%	22%
JAN 27 <sup>TH</sup> TO FEB 3 <sup>RD</sup>	Critical Paper I	10%	10%	32%
FEB 24 <sup>TH</sup> TO MAR 2 <sup>ND</sup>	Critical paper II	15%	15%	47%
MAR 23 <sup>RD</sup> TO MAR 30 <sup>TH</sup>	Critical paper III	20%	20%	67%
APRIL (FA&S DATE)	Final Exam	33%	33%	100%

**XIII. SOC244H1S Detailed Program of Study Winter 2016**

	<u>Themes</u>
	<u>Overview of the course</u>
Week 1 – January 13 <sup>th</sup>	1. Introduction (syllabus, evaluations, research component, etc.) 2. Survey I

	<p>3. Lecture: -The Social Construction of Health and Illness -Medical Power</p> <hr/> <p>Readings: Textbook Ch. 7</p>
<p>Theme: Structural Forces</p>	
<p>Week 2 – January 20<sup>th</sup></p>	<p><u>Health, Rights and the State</u></p> <ol style="list-style-type: none"> <li>1. Is Health a Human Right?</li> <li>2. The State: citizenship, social rights and Health Rights</li> <li>3. From Social Integration to Health</li> </ol> <hr/> <p>Readings: Textbook Reading on page 258 (Ch. 11)</p> <ol style="list-style-type: none"> <li>1. WHO. N.A. Anchoring Universal Health Coverage in the Right to Health, Policy Brief. Available at: <a href="http://www.who.int/gender-equity-rights/knowledge/anchoring-uhc.pdf?ua=1">http://www.who.int/gender-equity-rights/knowledge/anchoring-uhc.pdf?ua=1</a></li> <li>2. From: T.H. Marshall: Citizenship and Social Class (1950); in: Citizenship and Social Class; T.H. Marshall/Tom Bottomore; London: Pluto Press, 1992, Pp. 8 – 17</li> <li>3. Berkman, L. F., Glass, T., Brissette, I., &amp; Seeman, T. E. (2000). From social integration to health: Durkheim in the new millennium. <i>Social science &amp; medicine</i>, 51(6), 843-857</li> </ol>
<p>Week 3 – January 27<sup>th</sup></p>	<p><u>Comparative Political Economy of HCS I:</u></p> <ol style="list-style-type: none"> <li>1. Health Care in Germany and France</li> <li>2. Health Care in the UK and Spain</li> <li>3. Comparative Health Care (4 dimensions)</li> <li>4. What does each country provide?</li> </ol> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Textbook Ch. 11</li> <li>2. Oduncu, F. S. (2013). Priority-setting, rationing and cost-effectiveness in the German health care system. <i>Medicine, Health Care and Philosophy</i>, 16(3), 327-339</li> </ol>

	<ol style="list-style-type: none"> <li>3. Costa-Font, J., Forns, J. R., &amp; Sato, A. (2015). Participatory health system priority setting: Evidence from a budget experiment. <i>Social Science &amp; Medicine</i>, 146, 182-190</li> <li>4. Shah, K. K. (2009). Severity of illness and priority setting in healthcare: a review of the literature. <i>Health policy</i>, 93(2), 77-84</li> </ol>
<p>Week 4 – February 3<sup>rd</sup></p>	<p><u>Comparative Political Economy of HCS II:</u></p> <ol style="list-style-type: none"> <li>1. The Canadian Health Care: origins, structure and challenges</li> <li>2. Principles and Values</li> <li>3. What do we get?</li> <li>4. HCS as Ideal Types</li> </ol> <hr/> <p>Readings</p> <ol style="list-style-type: none"> <li>1. Textbook Ch. 10</li> <li>2. Abelson, J. et al., 2009. What does it mean to trust a health system? A qualitative study of Canadian health care values <i>Health Policy</i> 91(1): 63–70</li> <li>3. Light, D. W. (2000). Fostering a Justice-Based Health Care System. <i>Contemporary Sociology</i>, 29(1), 62–74</li> <li>4. Wendt, C. et al. 2009. Healthcare System Types: A Conceptual Framework for Comparison. <i>Social Policy &amp; Administration</i> 43(1): 70–90</li> </ol>
<p>Theme: Populations</p>	
<p>Week 5 – February 10<sup>th</sup></p>	<p><u>Social Determinants of Health</u></p> <ol style="list-style-type: none"> <li>1. Inequalities and Categories: Class, income, education, gender and sexuality</li> <li>2. Health Status and Native Peoples in Canada</li> </ol> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Biggs, B., King, L., Basu, S., and Stuckler, D. (2010) Is wealthier always healthier? The impact of national income level, inequality, and poverty on public health in Latin America. <i>Social Science &amp; Medicine</i>, 71:266-273</li> <li>2. Navarro, V. (2009). What we mean by social determinants of health. <i>International Journal of Health</i></li> </ol>

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Class Schedule: Wednesdays 2 pm – 4 pm

Room: SS2117

	<p>Services 39(3):423-441</p> <ol style="list-style-type: none"> <li>3. Raphael, D., Curry-Stevens, A., &amp; Bryant, T. (2008). Barriers to addressing the social determinants of health: Insights from the Canadian experience. <i>Health Policy</i>, 88(2), 222-235</li> <li>4. Richmond, C. A. &amp; N. A. Rose. 2009. The Determinants of First Nations and Inuit Health: A critical population health approach. <i>Health and Place</i> 15: 403-411</li> </ol>
<p>Reading Week Feb 16<sup>th</sup>-19<sup>th</sup></p>	<p>No class No readings</p>
<p>Week 6 – February 24<sup>th</sup></p>	<p><u>Public Health</u></p> <ol style="list-style-type: none"> <li>1. Concepts: Population Health and Syndemics</li> <li>2. Dental Care as Public Health</li> <li>3. The Great Exclusion: The Working Poor and Dental Care</li> </ol> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Kindig, D., &amp; Stoddart, G. (2003). What is population health? <i>American Journal of Public Health</i>, 93(3), 380-383</li> <li>2. Singer, M., &amp; Clair, S. (2003). Syndemics and public health: reconceptualizing disease in bio-social context. <i>Medical anthropology quarterly</i>, 423-441</li> <li>3. Quiñonez, C. (2013). Why was dental care excluded from Canadian Medicare?. Network for Canadian Oral Health Research Working Papers Series, 1(1)</li> <li>4. Barnes, S. Abban, V. Weiss, A. (2015). Low Wages, No Benefits - Expanding Access to Health Benefits For Low Income Ontarians. Wellesley Institute. Retrieved from <a href="http://www.wellesleyinstitute.com/wp-content/uploads/2015/02/Low-Wages-No-Benefits-Wellesley-Institute-Feb-2015.pdf">http://www.wellesleyinstitute.com/wp-content/uploads/2015/02/Low-Wages-No-Benefits-Wellesley-Institute-Feb-2015.pdf</a></li> </ol>
<p>Week 7 – March 2<sup>nd</sup></p>	<p><u>Reproductive Justice: Case Studies from the Canadian Movement</u></p> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Fox, Bonnie and Diana Worts. 1999. “Revisiting the Critique of Medicalized Childbirth: A Contribution to</li> </ol>



	<p>the Sociology of Birth.” <i>Gender &amp; Society</i> 13(3): 326-346</p> <ol style="list-style-type: none"> <li>2. Saurette, P. &amp; Gordon, K. (2013). “Arguing abortion: The New Anti-Abortion Discourse in Canada.” <i>Canadian Journal of Political Science</i>: 1-29</li> <li>3. Shaw, J. 2012. “Full-Spectrum Reproductive Justice: The Affinity of Abortion Rights and Birth Activism.” <i>Studies in Social Justice</i> 7(1): 143-59...</li> </ol>
<p>Week 8 – March 9<sup>th</sup></p>	<p><u>Obesity</u></p> <ol style="list-style-type: none"> <li>1. Obesity as health discourse</li> <li>2. Obesity in the Clinic</li> </ol> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Elliott, C. D. (2007). Big persons, small voices: On governance, obesity, and the narrative of the failed citizen. <i>Journal of Canadian Studies/Revue d'études canadiennes</i>, 41(3), 134-149</li> <li>2. Jutel, A. (2006). The emergence of overweight as a disease entity: Measuring up normality. <i>Social Science &amp; Medicine</i>, 63(9), 2268-2276</li> <li>3. Throsby, K. (2007). “How could you let yourself get like that?”: Stories of the origins of obesity in accounts of weight loss surgery. <i>Social science &amp; medicine</i>, 65(8), 1561-1571</li> </ol>
<p>Week 9 – March 16<sup>th</sup></p>	<p><u>Global Health</u></p> <ol style="list-style-type: none"> <li>1. Concepts</li> <li>2. Humanitarianism</li> <li>3. Migration &amp; Health</li> <li>4. International Credentials</li> </ol> <hr/> <p>Readings:</p> <ol style="list-style-type: none"> <li>1. Textbook Ch. 10 p. 230-234 and Ch. 12 p. 285-292</li> <li>2. Dwyer, J. (2004). Illegal immigrants, health care, and social responsibility. <i>Hastings Center Report</i>, 34(1), 34-41</li> <li>3. Ruiz-Casares, M., Rousseau, C., Derluyn, I., Watters, C., &amp; Crépeau, F. (2010). Right and access to healthcare for undocumented children: Addressing the gap between international conventions and disparate implementations in North America and Europe. <i>Social Science &amp; Medicine</i>,</li> </ol>

70(2), 329-336

4. Scholte, A. J. 2000. What is Globalization? The Definitional issue—Again. *CSGR Working Paper*

Theme: The Body and Technology

Week 10 – March 23<sup>rd</sup>

The Body in Health Care

1. Embodiment
2. The Embodied Experience in Health Care

Readings:

1. Textbook Ch. 8 and Ch. 9
2. Crossley, N. (2005). Mapping reflexive body techniques: On body modification and maintenance. *Body & Society, 11*(1), 1-35
3. Poirier, Suzanne. “Medical Education and the Embodied Physician.” *Literature and Medicine, 25.2* (2006): 522-552
4. Tangenberg, K. M., & Kemp, S. (2002). Embodied practice: Claiming the body’s experience, agency, and knowledge for social work. *Social Work, 47*(1), 9-18 \*\*

Week 11 – March 30<sup>th</sup>

Bioethics

1. Concepts
2. Ethics in Human Research: HIV

Readings:

1. Textbook Ch. 14
2. Frank, Arthur W. 2004. Ethics as Process and Practice. *Internal Medical Journal (Australasian College of Physicians and Surgeons), 34*: 355-357
3. Zussman, R. (2000). The contributions of sociology to medical ethics. *Hastings Center Report, 30*(1), 7-11
4. Epstein, S. (1995). The construction of lay expertise: AIDS activism and the forging of credibility in the reform of clinical trials. *Science, Technology & Human Values, 20*(4), 408-437

SOC244H1S: Sociology of Health Care Syllabus Winter 2016

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Room: SS2117

Week 12 – April 6 <sup>th</sup>	<u>Final Lecture</u>
	<ol style="list-style-type: none"><li>1. Technology and Care</li><li>2. Post Survey II</li><li>3. Review of the Semester (one-hour review)</li></ol>
	Readings: <ol style="list-style-type: none"><li>1. Textbook Ch. 13</li><li>2. Can We Live for Ever? (Ch. 1)</li><li>3. Frank, Arthur W. 2004. Dignity, Dialogue, and Care. <i>Journal of Palliative Care</i> 20(3): 207- 211</li></ol>
Notes of the table:	<ol style="list-style-type: none"><li>1. All readings have been cited APA style</li><li>2. All readings are available through U of T Libraries</li><li>3. The readings for each week will be posted on BB a week before the respective class.</li><li>4. Some readings can be substituted as per indicated by the instructor.</li><li>5. Assignment due dates are specified in separate table (see Evaluation and Assessment (above)).</li></ol>

A final thought,

In the words of John Dewey, “The most important attitude that can be formed is that of desire to go on learning” (John Dewey, *Experience and Education*). I hope that the survey of the topics and ways of thinking about health care that we covered during this semester had inspired you to learn more, act more often, and contribute as an engaged citizen in the construction of a more equitable and humane health care system in Canada and beyond.

I wish you all my best,

J. Cristian Rangel, Ph.D. Candidate  
Department of Sociology – University of Toronto