

SOC 6022H Sociology of Health & Illness Winter 2022 (January 10-April 8)

Fridays 10AM-1PM (with a break) Room 240

Course Website on Quercus!

Instructor: William Magee, Associate Professor Office: Room 384, 725 Spadina

Course Description & Goals

Research on the sociology of health and illness employs many different theoretical orientations and methodological approaches, and this course surveys some of that diversity. We will select from the reading list presented below, and students might read different material based on interests or practical considerations. There will be few core readings that everyone will do each week to provide some common basis for discussion. This is a seminar course, and marks will be given for weekly in-class presentations, so obviously the expectation is that all students will attend all classes.

Goals and intended outcomes include: Improved ability to integrate or shift between alternative theoretical perspectives or lenses when thinking about health and illness.; Increased capability to understand and critique primary research on health and illness from substantive and methodological perspectives; Further the development of students' capacity to build on knowledge about current & emerging issues in health; Increased knowledge of the major theories related to the social control of health and illness; Increased knowledge of major trends in epidemiological patterns and health illness behaviors; Support novel and creative thinking and the development of research plans and projects of students.

Summary of Evaluation ("Course Requirements):

"Take Home" Test 1 - 14% (day window before/ during Reading Week TBD)

"Take Home" Test 2 - 14% (2 day window after week 11 class TBD)

Reaction Papers & Presentation (3-4 pages, 5% each, for 2 weeks) 8%

In-class Presentation of Readings 3%/week, for 8 weeks 24%

Paper (20 pages) 28% Due last class, but extensions will be given

Attendance & Verbal Participation: 10%

Final Paper Presentation: 2% - Final Class

Penalties for "Lateness" / Missing a Course Requirement

There are different policies for lateness/ missingness for each evaluation component, so see each below.

Detailed Description of Evaluation

Attendance & Participation: In addition to presenting selected readings every week, it is also expected that you will be able to respond knowledgeably to questions about the assigned core readings that every is assigned, if asked, and participate in discussion of issues raised in readings you were not assigned (that others present). If you have to miss class it is good form to notify the instructor in advance. If you miss a more than one class due to illness, or if you miss any class when you are scheduled to present for that reason, you must follow whatever the current UofT procedures are at the time (as you know, procedures have been changing over time in response to COVID). Otherwise there will be a 1 point deduction for each class missed (or a proportional deduction from those enrolling late).

In-class Overview of Selected Readings & Issues (8 weeks): Outline the most important issues raised in (or by) selected readings for the week. This might include some review of research methods as well as finding and their theoretical implications. Although this will require some amount of review and descriptive summary, you should try to place issues raised in the readings in broader historical and theoretical context. Depending on enrolment presentations might be in groups. My grading policy will be that a very good presentation will get an A. A+ is reserved for presentation of novel insights about the material that go beyond the existing literature. Since this assignment and the following are almost weekly, there are limited opportunities to “make up” missing presentations. Thus, unless there is a formal (e.g., medical “excuse”), there will be no opportunity to recoup these marks. This with a valid formal excuse will have the credit shifted to the final paper or the take home test at the discretion of the instructor (this will depend on what is missed, and when).

Reaction Papers: For two of the 8 weeks that you do presentations you will do a bit more than present on a few of the readings in class; You will also write a 3-4 page paper that provides an analysis of a theoretically or methodologically relevant topic raised in the readings, and going beyond them. Some synthesis across readings is also encouraged. These will be made available to everyone before class (i.e. uploaded to the website). See also the above for penalties for “In-class Overview of Selected Readings & Issues”. The same applies here.

Paper (and Paper Presentation): This can be a research proposal or a secondary analysis of existing data. The topic must be approved after an individual meeting.

Marking: Grading of papers and essays will be based on how well you draw on the literature. At minimum this requires logical coherence, but innovation and insight are of course encouraged. Part of the credit will be allocated on the basis of technical aspects of writing (i.e., grammar, sentence structure, references, etc.). Please submit both a hard copy and electronic version online. *Extensions of up to 3 weeks will be given*, though you will have to have something substantial concerning the paper to discuss by the final session to get that credit. Note that if you need a mark to graduate by a deadline you need to have the paper available for marking at least a

week in advance of when the mark would be due.

Take Home Tests: These might be structured to resemble comprehensive exam question in form, although an alternative approach involving shorter questions might be employed. All material that is presented in class will be subject for inclusion (i.e., not just material from the core readings). Answers should be 4-5 pages long in total, in any case, double-spaced, excluding references and cover page. As with a comp, there will be no extensions except in cases of serious illness, or serious personal problem. All students must take the test at the same time (no collaboration allowed, though). The enrolment will probably be small enough that we can find a time that suits everyone.

Reading List & Course Schedule

We will not all read all the items listed below, and some of additional items may be added. Depending on interests of students enrolled, we will decide as a group who will present what each week (if there are lumps or gaps, I will make assignments). In all cases everyone is expected to engage with multiple readings. For example, if you look at the readings listed for week 2, there are multiple readings on each of the following themes: face mask use, vaccine uptake, suicide, body tracking and self-monitoring. One person might do all the readings related face masks, another might do all related self-monitoring, etc. Some readings everyone will do (e.g. Cockerham; Salamonsen & Ahlzén) that week.

Academic Integrity Clause

Copying, plagiarizing, falsifying medical certificates, or other forms of academic misconduct will not be tolerated. Any student caught engaging in such activities will be referred to the Dean's office for adjudication. Any student abetting or otherwise assisting in such misconduct will also be subject to academic penalties. Students are expected to cite sources in all written work and presentations. See this link for tips for how to use sources well: (<http://www.writing.utoronto.ca/advice/using-sources/how-not-to-plagiarize>).

According to Section B.I.1.(e) of the Code of Behaviour on Academic Matters it is an offence *"to submit, without the knowledge and approval of the instructor to whom it is submitted, any academic work for which credit has previously been obtained or is being sought in another course or program of study in the University or elsewhere."*

By enrolling in this course, you agree to abide by the university's rules regarding academic conduct, as outlined in the Calendar. You are expected to be familiar with the *Code of Behaviour on Academic Matters*

(<http://www.artsci.utoronto.ca/osai/The-rules/code/the-code-of-behaviour-on-academic-matters>) and *Code of Student Conduct*

(<http://www.viceprovoststudents.utoronto.ca/publicationsandpolicies/codeofstudentconduct.htm>) which spell out your rights, your duties and provide all the details on grading regulations and academic offences at the University of Toronto.

"Normally, students will be required to submit their course essays to the University's plagiarism detection tool for a review of textual similarity and detection of possible plagiarism. In doing so, students will allow their essays to be included as

source documents in the tool's reference database, where they will be used solely for the purpose of detecting plagiarism. The terms that apply to the University's use of this tool are described on the Centre for Teaching Support & Innovation web site (<https://uoft.me/pdt-faq> (Links to an external site.))."

Accessibility Services

It is the University of Toronto's goal to create a community that is inclusive of all persons and treats all members of the community in an equitable manner. In creating such a community, the University aims to foster a climate of understanding and mutual respect for the dignity and worth of all persons. Please see the University of Toronto Governing Council "Statement of Commitment Regarding Persons with Disabilities" at

<http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppnov012004.pdf>.

In working toward this goal, the University will strive to provide support for, and facilitate the accommodation of individuals with disabilities so that all may share the same level of access to opportunities, participate in the full range of activities that the University offers, and achieve their full potential as members of the University community. We take seriously our obligation to make this course as welcoming and accessible as feasible for students with diverse needs. We also understand that disabilities can change over time and will do our best to accommodate you.

Students seeking support must have an intake interview with a disability advisor to discuss their individual needs. In many instances it is easier to arrange certain accommodations with more advance notice, so we strongly encourage you to act as quickly as possible. To schedule a registration appointment with a disability advisor, please visit Accessibility Services at <http://www.studentlife.utoronto.ca/as>, call at 416-978-8060, or email at: accessibility.services@utoronto.ca. The office is located at 455 Spadina Avenue, 4th Floor, Suite 400.

Additional student resources for distressed or emergency situations can be located at distressedstudent.utoronto.ca; Health & Wellness Centre, 416-978-8030, <http://www.studentlife.utoronto.ca/hwc>, or Student Crisis Response, 416-946-7111.

Equity and Diversity Statement

The University of Toronto is committed to equity and respect for diversity. All members of the learning environment in this course should strive to create an atmosphere of mutual respect. As a course instructor, I will neither condone nor tolerate behaviour that undermines the dignity or self-esteem of any individual in this course and wish to be alerted to any attempt to create an intimidating or hostile environment. It is our collective responsibility to create a space that is inclusive and welcomes discussion. Discrimination, harassment and hate speech will not be tolerated.

Additional information and reports on Equity and Diversity at the University of Toronto is available at <http://equity.hrandequity.utoronto.ca>.

Note: The following code reflects are initial division of the material into core indicated by “*”, which everyone will read, and (1), (2) or (3), etc., for readings only one presenter or presenter group will read to present to the whole group.

Classes 1 & 2: Action, Health & Illness: With an Illustrative Focus on Illness (i.e. Covid-related) Actions, and Health/ Fitness-Related Actions (Jan 14 & Jan 21)

- * Salamonsen, Anita and Rolf Ahlzén (2018) "Epistemological Challenges in Contemporary Western Healthcare Systems Exemplified by People's Widespread Use of Complementary and Alternative Medicine." *Health* 22(4):356-71.
- * Cockerham, William C. (2005). "Health Lifestyle Theory and the Convergence of Agency and Structure." *Journal of Health and Social Behavior* 46(1):51-67.
- *Gengler, A. M. (2020). Emotions and Medical Decision-Making. *Social Psychology Quarterly*, 83(2), 174-194.
- (1) Reich, J. A. (2020). Vaccine Refusal and Pharmaceutical Acquiescence: Parental Control and Ambivalence in Managing Children's Health. *American Sociological Review*, 85(1), 106-127.
- (1) Milani, Elena, Emma Weitkamp and Peter Webb. 2020. "The Visual Vaccine Debate on Twitter: A Social Network Analysis." *Media and Communication* 8(2): 1-12
- (1) Ten Kate, J., Koster, W., & Van der Waal, J. (2021, Mar). "Following Your Gut" or "Questioning the Scientific Evidence": Understanding Vaccine Skepticism among More-Educated Dutch Parents. *Journal of Health & Social Behavior*, 62(1), 85-99.
- (2) Niewöhner, J., & Beck, S. (2017). Embodying practices: The human body as matter (of concern) in social thought. In *Methodological Reflections on Practice Oriented Theories* (pp. 63-77). Springer.
- (2) Kristensen, D. B., Kuruoglu, A. P., & Banke, S. (2021). Tracking towards care: Relational affordances of self-tracking in gym culture. *Sociology of Health & Illness*, 43(7), 1598-1613.
- (2) Bergroth, H., & Helén, I. (2019). Chapter 7. "The datafication of therapeutic life management." in *Assembling Therapeutics: Cultures, Politics and Materiality* (Suvi Salmenniemi, Ed.) Abingdon, Oxon ; New York, NY : Routledge. 17pp.

Additional Materials TBD

Class 3: Medicalization, Pharmaceuticalization & Biomedicalization (Jan 28)

- *Joan Busfield (2017) "The Concept of Medicalisation Reassessed." *Sociology of Health & Illness*. 1-16.
- *Clarke, Adele E., Janet K. Shim, Laura Mamo, Jennifer Ruth Fosket, and Jennifer R. Fishman. "1/Biomedicalization Technoscientific Transformations of Health, Illness, and US Biomedicine." *Biomedicalization* (2010): 47-87.
- *Bliss, C. (2018). Biomedicalization in the Postgenomic Age. In *Routledge Handbook of Genomics, Health and Society* (pp. 15-23): Routledge.
- (1) China Mills. (2014) "Psychotropic Childhoods: Global Mental Health and Pharmaceutical Children" *Children & Society* 28: 194-204.
- (1) Morrison, M. (2015). Growth hormone, enhancement and the pharmaceuticalisation of short stature. *British Medical Journal*, 131, 305-312.
- (1) Ecks, Stefan (2017) "The Public and Private Lives of Psychopharmaceuticals in the Global South." Pp. 249-69 in *The Sedated Society*: Springer.
- (2) Campbell, Nancy D. (2017) "Pharmaceuticals." In *Human, Transhuman, Posthuman: Emerging Technologies and the Boundaries of Homo Sapiens*, ed. Michael Best & Diana Walsh Pasulka. Farmington Hills, MI: Gale / Cengage Learning, pp 63-74.
- (2) Hupli, A., Didžiokaitė, G., & Ydema, M. (2019). Beyond Treatment Versus Enhancement: A Qualitative Study of Pharmacological Neuro-Enhancement Among Dutch and Lithuanian University Students. *Contemporary Drug Problems*, 46(4), 379-399.
- (2) Jenson, Jane, Francesca Polletta and Paige Raibmon. 2019. "The Difficulties of Combating Inequality in Time." *Daedalus* 148(3):~~136-63~~. doi: 10.1162/daed_a_01753. Note **Read – pp 142-144 ONLY**
- (3) Lemke, T., & Rüppel, J. (2019). Social dimensions of preimplantation genetic diagnosis: a literature review. *New Genetics and Society*, 38(1), 80-112.
- (3) Evans, J. H. (2020). The First Barriers in the Human Genetic Engineering Debate pp 25-66 in *The human gene editing debate*. Oxford University Press.

Class 4: History, Culture & Trends and Transitions

(Feb 4)

- *Snowden, F. M. (2019). Chapter 21. "Emerging and Re-Emerging Diseases". In *Epidemics and society: from the black death to the present* (pp. 448-465): Yale University Press. <https://www-degruyter-com.myaccess.library.utoronto.ca/document/doi/10.12987/9780300249149/html> (note – the book was produced pre-Covid)
- *James Colgrove (2002) "The McKeown thesis: a historical controversy and its enduring influence." *American Journal of Public Health* 92(5): 725-729.
- (1) Friedman, S. R., et al. (2021, Aug-Sep). Big Events theory and measures may help explain emerging long-term effects of current crises. *Global Public Health*, 16(8-9), 1167-1186.
- (2) Decoteau, C. L. (2017) The "Western disease": Autism and Somali parents' embodied health movements. *Social Science & Medicine*, 177, 169-176.
- (2) Gelfand, M. J. et al. (2021). The relationship between cultural tightness–looseness and COVID-19 cases and deaths: a global analysis. *The Lancet Planetary Health*, 5(3), e135-e144.
- (3) McIntyre, R. S., et al. (2021, Sep 22). Suicide reduction in Canada during the COVID-19 pandemic: lessons informing national prevention strategies for suicide reduction. *Journal of the Royal Society of Medicine*, 1-7.
- (3) Pirkis, J., et al (2021). Suicide trends in the early months of the COVID-19 pandemic: an interrupted time-series analysis of preliminary data from 21 countries. *The Lancet Psychiatry*, 8(7), 579-588.

Additional Materials TBD

Class 5: Environmental & Planetary Health

(Feb 11)

- * Davies, Thom (2018) "Toxic Space and Time: Slow Violence, Necropolitics, and Petrochemical Pollution." *Annals of the American Association of Geographers* 108(6):1537-53.
- * Gill, S. R., & Benatar, S. R. (2019). Reflections on the political economy of planetary health. *Review of International Political Economy*, 27(1), 167-190.
- *Sell, S. K., & Williams, O. D. (2019). Health under capitalism: a global political economy of structural pathogenesis. *Review of International Political Economy*, 27(1), 1-25.

- (1) Powers, M., Brown, P., Poudrier, G., Ohayon, J. L., Cordner, A., Alder, C., & Atlas, M. G. (2021). COVID-19 as Eco-Pandemic Injustice: Opportunities for Collective and Antiracist Approaches to Environmental Health. *Journal of Health and Social Behavior*, 62(2) 222–229
- (1) Austin, K. F. (2021). Degradation and disease: Ecologically unequal exchanges cultivate emerging pandemics. *World Development*, 137, 1-3.
- (2) David, P. M., Le Devedec, N., & Alary, A. (2021, Aug-Sep). Pandemics in the age of the Anthropocene: Is 'planetary health' the answer? *Glob Public Health*, 16(8-9), 1141-1154.
- (3) Zinn, J. O. (2021). Conclusions: Towards a sociology of pandemics and beyond. *Current Sociology*, 00113921211023518.

Additional Materials TBD

Class 6: Broad Historical, Cohort Trends & Movements (Feb 18)

- * Sean AP Clouston, Marcie S Rubin, Jo C Phelan and Bruce G Link (2016) "A Social History of Disease: Contextualizing the Rise and Fall of Social Inequalities in Cause-Specific Mortality." *Demography* 53(5):1631-1656.
- * Boardman, J. D., & Fletcher, J. M. (2021). Evaluating the Continued Integration of Genetics into Medical Sociology. *Journal of Health and Social Behavior*, 62(3), 404-418.
- (1) Crimmins, Eileen M. and Yuan S. Zhang. (2019) "Aging Populations, Mortality, and Life Expectancy." *Annual Review of Sociology* 45(1):69-89
- (2) Epstein, S., & Timmermans, S. (2021). From Medicine to Health: The Proliferation and Diversification of Cultural Authority. *Journal of Health and Social Behavior*, 62(3), 240-254.
- (2) Willms, M., & Virji-Babul, N. (2020). Neuroenhancement using transcranial electrical brain stimulation in adolescence: Ethical and social concerns. In *Ethical Dimensions of Commercial and DIY Neurotechnologies* (pp. 157-177).

Additional Materials TBD

Class 7: Illness and Health Care Experiences (March 4)

- * Nettleton, Sarah. (2006). " 'I Just Want Permission to be Ill': Towards a Sociology of Medically Unexplained Symptoms." *Social Science & Medicine* 62(5)1167-1178.

- * Zajacova, A., Grol-Prokopczyk, H., & Zimmer, Z. (2021). Sociology of Chronic Pain. *Journal of Health and Social Behavior*, 62(3), 302-317.
- * Zawadka-Kunikowska, M., Zalewski, P., & Newton, J. L. (2021). The similarities between Long-haul COVID-19 and Myalgic Encephalomyelitis/ Chronic Fatigue Syndrome (ME/CFS). *Medical Research Journal*, 6(1), 77-78.
- (1) Carla Willig (2011) Cancer diagnosis as discursive capture: Phenomenological repercussions of being positioned within dominant constructions of cancer. *Social Science & Medicine* 73: 897-903.
- (1) Klawiter, Maren. (2005). "Breast Cancer in Two Regimes: the impact of social movements on illness experience." Pp. 161-189 in *Social Movements in Health Sociology*,
- (2) Sarah L Bell, Jessica Tyrrell and Cassandra Phoenix (2016) "A Day in the Life of a Ménière's Patient: Understanding the Lived Experiences and Mental Health Impacts of Ménière's Disease." *Sociology of Health & Illness*:1-16
- (2) Kenner, Alison (2019) "Emplaced Care and Atmospheric Politics in Unbreathable Worlds." *Environment and Planning C: Politics and Space* 1-16.
- (2) Lupton, D., Southerton, C., Clark, M., & Watson, A. (2021). Chapter 4 "Face Masks & Breath" pp 44-56 in *The Face Mask In COVID Times: A Sociomaterial Analysis*. Walter de Gruyter GmbH & Co KG.
- (3) Samardzic, T., Soucie, K., Schramer, K., & Katzman, R. (2021). "I didn't feel normal": Young Canadian women's experiences with polycystic ovary syndrome. *Feminism & Psychology*. 1-20.
- (3) Siegel, D. P. (2021). Wanting a "Feminist Abortion Experience": Emotion Work, Collective Identity, and Pro-Choice Discourse *Sociological Forum*, 36(2), 471-490.

Class 8: Sex, Gender, Intersectionality & Related Issues (March 11)

- * Homan, P., Brown, T. H., & King, B. (2021). Structural intersectionality as a new direction for health disparities research. *Journal of Health and Social Behavior*,
- (1) Lappe, M., R. J. Hein and H. Landecker. 2019. "Environmental Politics of Reproduction." *Annual Review of Anthropology* 48:133-50.
- (1) Sherwood, Yvonne .P. 2019. "The Political Binds of Oil versus Tribes," *Open Rivers: Rethinking Water, Place, & Community*, no. 13
<https://editions.lib.umn.edu/openrivers/article/the-political-binds-of-oil-versus-tribes/>

- (2) Hsieh, N., & Shuster, S. M. (2021). Health and Health Care of Sexual and Gender Minorities. *Journal of Health and Social Behavior*, 62(3), 318-333.
- (2) Russell, Stephen T., and Jessica N. Fish. "Sexual minority youth, social change, and health: A developmental collision." *Research in Human Development* 16, no. 1 (2019): 5-20.
- (2) Epstein, Steven, and Laura Mamo. 2017. "The proliferation of sexual health: Diverse social problems and the legitimation of sexuality." *Social Science & Medicine* 188: 176-190.
- (3) Saikia, N., ... Jha, P. (2021). Trends in missing females at birth in India from 1981 to 2016: analyses of 2.1 million birth histories in nationally representative surveys. *The Lancet Global Health*, 9(6), e813-e821.
- (3) Verta Taylor & Lisa Leitz (2010). From Infanticide to Activism in Social Movements and the Transformation of American Health Care (Jane Banaszak-Holl, Sandra Levitsky, and Mayer Zald, Eds.). Oxford University Press. 24 pages.

Class 9: Some Additional Recent & Emergent Cohort-Related Issues (March 18)

- (1) Felbab-Brown, V., Caulkins, J. P., Graham, C., Humphreys, K., Pacula, R. L., Pardo, B., . . . Wise, P. H. (2020) "Overview" in *The Opioid Crisis in America*. Brookings Institution Report (Paper Series: Foreign Policy and Global Economy & Development programs at Brookings) June. pp. 1-6.
- (1) Harris, K. M., Majmundar, M., & Becker, T. (2021). National Academies of Sciences, Engineering, and Medicine 2021. *High and Rising Mortality Rates Among Working-Age Adults*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25976>.
- (1) Case, Anne and Angus Deaton. 2020. *Deaths of Despair and the Future of Capitalism*: Princeton University Press. pp 50-70 (part of chapter 4: on Education & Mortality, and Chapter 5 on "Black & White Deaths")
- (2) Lukianoff, Greg, Haidt, Jonathan (2018) Chapter 7: "Anxiety and Depression." Pp. 143-61 in *the Coddling of the American Mind: How Good Intentions and Bad Ideas Are Setting Up a Generation for Failure*. Penguin Press.
- (2) Material Released on Instagram & Teen Mental Health (Facebook Scandal)

Additional Materials TBD

Class 10: Lifecourse Trajectories & Health from Childhood to Adulthood

(March 25)

- * Conching, A. K. S., & Thayer, Z. (2019). Biological pathways for historical trauma to affect health: A conceptual model focusing on epigenetic modifications. *British Medical Journal*, 230, 74-82.
- * Simons, R. L., Lei, M.-K., Klopach, E., Berg, M., Zhang, Y., & Beach, S. S. (2021). Re (Setting) Epigenetic Clocks: An Important Avenue Whereby Social Conditions Become Biologically Embedded across the Life Course. *Journal of Health and Social Behavior*, 62(3), 436-453.
- * McMunn, A., Lacey, R., Worts, D., Kuh, D., McDonough, P., & Sacker, A. (2021). Work-family life courses and psychological distress: Evidence from three British birth cohort studies. *Advances in Life Course Research*.
<https://doi.org/10.1016/j.alcr.2021.100429>
- (1) Boyce, W Thomas and Clyde Hertzman (2018) "Early Childhood Health and the Life Course: The State of the Science and Proposed Research Priorities." Pp. 61-93 in *Handbook of Life Course Health Development*: Springer. **READ** pp 61-70 (9 pages) and "scan" the rest – i.e., look at the headings and figures
- (1) Harris, K. M. & McDade, T. W., (2018). The Biosocial Approach to Human Development, Behavior, and Health Across the Life Course. *The Russell Sage Foundation Journal of the Social Sciences*, 4(4), 2-26.
- (2) Kane, J. B., et al. (2017) "Pathways of health and human capital from adolescence into young adulthood." *Social Forces* 96(3): 949-976. **READ** pp 949-956 (8 pages) ; "scan" the rest – i.e., look at the headings and figures.
- (2) Thirlway, F. (2020). Explaining the social gradient in smoking and cessation: the peril and promise of social mobility. *Sociology of Health & Illness*, 42(3), 565-578.
- (3) Williams, Simon. 2000. "Chronic Illness as Biographic Disruption or Biographical Disruption as Chronic Illness? Reflections on a Core Concept." *Sociology of Health and Illness* 22(1):40-67.

Additional Materials TBD

Class 11: Socioeconomic Inequality, Risk & Illness

(April 1)

- *Maxmen, A. (2021). Inequality's Deadly Toll. *Nature*. 4 pages
- *Macmillan, R., & Shanahan, M. J. (2021). Why Precarious Work Is Bad for Health: Social Marginality as Key Mechanisms in a Multi-National Context. *Social Forces*.

- (1) Rose, N., Birk, R., & Manning, N. (2021). Towards Neuroecosociality: Mental Health in Adversity. *Theory, Culture & Society*. 0263276420981614
- (1) Fitzgerald, D., Rose, N., & Singh, I. (2016). Revitalizing sociology: urban life and mental illness between history and the present. *The British Journal of Sociology*, 67(1), 138-160.
- (2) Massey, Douglas S, et al. (2018) "Neighborhood Disadvantage and Telomere Length: Results from the Fragile Families Study." *RSF: The Russell Sage Foundation Journal of the Social Sciences* 4(4):28-42.
- (2) Schneider, Daniel and Kristen Harknett (2019) "Consequences of Routine Work-Schedule Instability for Worker Health and Well-Being." *American Sociological Review* 84(1):82-114.
- (3) Letelier, A., Madero-Cabib, I., Undurraga, E. A., & Pérez-Cruz, P. (2021). Lifetime socioeconomic determinants of health trajectories among older adults. *Advances in Life Course Research*, 100415.
- (3) Curran, M. and M. C. Mahutga (2018) "Income Inequality and Population Health: A Global Gradient?" *Journal of Health and Social Behavior* 59(4): 536-553.

Class 12: Student Paper Presentations (April 8)