

12/90:259 Sociology of Medical Systems
Winter 2021: Undergraduate Course
Monday, Wednesday, and Friday Slot 6: Zoom

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Zoom Office Hours: Friday 2.30 – 3.30pm by appointment only

We respect the treaties that were made on these lands and acknowledge that Brandon University is located on Treaty 2 Lands, traditional homelands of the Dakota, Anishanabek, Cree, and Métis peoples.

I. Course Description and Objectives

This course provides an interdisciplinary sociological and anthropological exploration of medical systems, with a special emphasis on Canadian healthcare. By adopting critical social science approaches to explore healthcare services and health, illness and well-being at individual and societal levels, students will gain an in-depth understanding of the social determinants of health, and the role played by medical systems in remedying or even worsening population health disparities and inequalities.

The first half of the course explores the evolution and recent history of Canada's medical systems, with attention paid to the development, policy and operations of Medicare. We will then discuss the contribution of religious healing and complementary and alternative medical systems for Canadians' sense of wellbeing and their health and healing practices. The second half of the course will introduce and critically evaluate the beliefs that shape the social acceptability and provision of particular medical services, inform health decision-making, access and use, animate provider-patient interactions and treatment processes, and determine outcomes. In the area of medical systems research and theory, special attention will be paid to the social construction of health, illness and medical knowledge, biomedical hegemony and its effects for medical pluralism, and the hierarchies, politics and ethical challenges associated with medical service provision. Then, in order to emphasize the diverse ways that clinical medicine is subjectively understood and experienced, the course will draw on an innovative array of ethnographic studies of health, healing and healthcare systems, and those that prioritize patients' and providers' points of view in particular.

With regard to patients' navigation and experience of these same systems, the course will assess how the social determinants of health - such as how they concern economic standing, gender, ethnicity, and race - impact health at individual and societal levels. Efforts will also be made to identify the health inequities, deprivations and disadvantages that are over-distributed among and experienced by First Nations, Inuit and Métis, ethnic minority and LGBTQ+ communities. As importantly, the course will investigate how health beliefs, experiences, practices and even medical ethics are shaped and conveyed by culturally specific illness representations, treatment accounts, and narratives.

Throughout the course, attention will be paid to the ways the aforementioned issues intersect with the COVID-19 pandemic.

By the end of this course, students will be able to:

- Understand differences and similarities in the theories, methods and analytical approaches used by sociologists and anthropologists to study health and illness, and healing and medical systems;

- Identify the social and political construction of medical knowledge, authority and diagnoses;
- Discuss the historical development and contemporary organization, administration and provision of Canada's national and privately insured or funded biomedical, complementary and alternative health systems;
- Evaluate how socio-cultural, economic and political forces determine the character and reach of Canadian healthcare provision, and the effectiveness of healthcare services for patient populations;
- Recognize the forms of power and social hierarchies that inform the administration, provision and use of medical services, and permit medicine to operate as a form of socio-political control and surveillance;
- Distinguish how socio-cultural contexts and beliefs inform the sources and distribution of illness, disease and death among Canadians, as well as medical practices, behaviors, professionalism and ethics.

II. Prerequisites:

One of the following: 90:154 or 90:155 or 12:153, or the permission of the Instructor.

III. Teaching Methods:

The course will incorporate both online lecture and, whenever possible, seminar approaches. Formal lectures will be combined with in-class seminar discussions among and between students and the Instructor. When scheduled, class discussions will be organized around pre-assigned readings questions. The lectures will be supplemented by documentary films shown in-class. Please be aware that the lectures are intended to build on, rather than directly repeat, the content of your weekly assigned readings.

The course's assigned readings and documentary films screened during lecture are all 'testable' material, which means that they may appear in-whole or in-part as part of the mid-term and final exams. Students are therefore advised to take careful and comprehensive notes of all class lectures, or ensure that a responsible classmate takes them on your behalf in case of your absence. Video recordings of the lectures, and PDFs of the lecture PPTs, will be posted to Moodle on a biweekly basis.

Please consult the course website on Moodle for assigned and supplementary readings, links to relevant additional resources, course-related discussion and class announcements.

Supplementary updates concerning the sociology and anthropology of medical systems research, events and related news will also be posted to the course Facebook Group Page:

<https://www.facebook.com/groups/2791119907815509>

Students who sign up for the Facebook page and regularly review posted content will receive a **2.5%** bonus mark. Students more actively contributing with postings, discussions, and responses – especially those that provide Canadian examples of the issues, debates, concepts, and theories detailed by our course textbook – will receive a **5%** bonus mark.

IV. Course Evaluation and Assignments

The course evaluation will be based your online participation, a film review paper, group presentation, and a mid-term and final exam.

Unless previous and/or alternative arrangements are made with the course instructor, late assignments will be penalized **5%** of the total assignment mark per day.

Your final grade will be based on the following:

- Online Participation = 10%*
 - Mid-Term Take Home Exam = 20% (February 26)
 - “Extremis” (2016: 24 minutes, Netflix) or “Heroin(e)” (2017: 39 minutes, Netflix) Film Review (5 pages) = 20% (March 19)
 - In-class, 10 minutes group presentation (7 people) on a pre-assigned topic = 20% (April 1, 5, 7, 9)
 - Final Take Home Exam = 30% (April 16)
- TOTAL = 100%**

**Students unable to regularly participate online will be offered alternative ways by which the 10% can be earned. Please contact the Instructor for further information.*

Letter Grade and Marks

A+: 90.0 – 100%	A: 85.0– 89.9%	A-: 80.0 – 84.9%	B+: 77.0 – 79.9%
B: 74.0 – 76.9%	B-: 70.0 – 73.9%	C+: 67.0 – 69.9%	C: 64.0 – 66.9%
C-: 60.0 – 63.9%	D: 50.0 – 59.9%	F: 0 – 49.9%	

Unless previous and/or alternative arrangements are made with the course instructor, late assignments will be penalized **5%** of the total assignment mark per day.

Academic Integrity

Students are referred to Sections 3 and 4 of Brandon University’s Academic Integrity Policy (which can be found at <https://www.brandonu.ca/senate-office/senate-policies/>). Violations of this policy, including all forms of plagiarism, will not be tolerated. Your written assignments must represent original work, with your use of all resources properly cited (style requirements will be discussed in-class and posted on the course website).

Human Rights Compliance

Brandon University values diversity and inclusion, recognizing disability as an aspect of diversity. Our shared goal is to create learning environments that are accessible, equitable, and inclusive for all students. Student Accessibility Services (SAS) works with students who have permanent, chronic, or temporary disabilities. SAS supports students by developing an individualized plan of accommodation, helping students understand their learning needs, and assisting faculty with provision of accommodations for students registered with SAS.

If you have, or think you may have, a disability (e.g., mental health, attentional, learning, vision, hearing, physical, medical, or temporary), you are invited to contact Student Accessibility Services to arrange a confidential discussion at (204) 727-9759 or magnussonm@brandonu.ca. Additional information is available on the Student Accessibility Services website: <https://www.brandonu.ca/student-services/student-accessibility-services/>. If you are registered with SAS and have a letter requesting accommodations, you are encouraged to contact the instructor early in the term to discuss the accommodations outlined in your letter.

V. Texts

The course's assigned readings will consist of PDF articles, which will be available for downloading from the course website on Moodle, and chapters from the following textbook, which can be purchased online from the Brandon University Bookstore in owned hard-copy or leased e-copy forms:

Clarke, Juanne Nancarrow. (2021). Health, Illness, and Medicine in Canada: Eighth Edition. Don Mills, Ontario: Oxford University Press.

Unless otherwise indicated by the Instructor, the assigned readings must be completed *prior* to the start of each week's lectures. Suggested readings are noted as (SR) in the syllabus, and are complementary to your assigned readings and the course lectures. You are expected to choose from among these readings, as well as to draw on the wider literature, as the basis for your film review and in-class group presentation.

CLASS SCHEDULE

Date	Topic	Readings and Assignments
Week One <i>January 8</i>	Introduction: Part I	Clarke, Juanne Nancarrow. (2021). "Ways of Thinking Sociologically about Health, Illness, and Medicine." <u>Health, Illness, and Medicine in Canada</u> . Don Mills, Ontario: Oxford University Press, pp. 2-29.
Week Two <i>January 11, 13, 15</i>	Introduction: Part II	Singer, Merrill and Hans Baer. (2007). "What Medical Anthropologists Do." <u>Introducing Medical Anthropology: A Discipline in Action</u> . Plymouth, UK: Altamira Press, pp. 35-64. Witeska-Młynarczyk, Anna. (2015). "Critical Medical Anthropology – a voice for just and equitable healthcare." <i>Annals of Agricultural and Environmental Medicine</i> , 22 (2): 385–389. (SR) Baer, Hans A. (2003). "Theoretical Perspectives in Medical Anthropology." <u>Medical Anthropology and the World System</u> . Westport, CT: Praeger Publishers, pp. 3-30.
Week Three <i>January 18, 20, 22</i>	The Social Construction of Illness and Medicine	Clarke, Juanne Nancarrow. (2021). "The Social Construction of Scientific and Medical Knowledge and Medical Practice." <u>Health, Illness, and Medicine in Canada</u> . Don Mills, Ontario: Oxford University Press, pp. 195-215. Hoberman, John. (2012). "Medical consequences of racializing the human organism." <u>Black & Blue: The Origins and Consequences of Medical Racism</u> . Berkeley: University of California Press, pp. 71-145. (SR) Yearby, Ruqaiyah. (2020). "Race Based Medicine, Colorblind Disease: How Racism in Medicine Harms Us All." <i>The American Journal of Bioethics</i> : 1-14. (SR) Young, Allan. (1993) "A Description of How Ideology Shapes Knowledge of a Mental Disorder (Posttraumatic Stress Disorder)." <u>Knowledge, Power and Practice: The Anthropology of Medicine in Everyday Life</u> . (Shirley Lindenbaum, Margaret

		Lock: Editors) Berkeley, CA: University of California Press, pp. 108-128.
Week Four <i>January 25, 27, 29</i>	Canada's Medical Systems	<p>Clarke, Juanne Nancarrow. (2021). "The Social Democratic and Current History of Medicare: Privatization and the State of Medicare in Canada." <u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 239-262.</p> <p>Moffat, Jessica, Maria Mayan and Richard Long. (2013). "Sanatoriums and the Canadian Colonial Legacy: The Untold Experiences of Tuberculosis Treatment." <i>Qualitative Health Research</i>, 23 (12): 1591–1599.</p> <p>(SR) Lux, Maureen K. (2016). "Life and Death in an Indian Hospital." <u>Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s</u>. Toronto, ON: University of Toronto Press, pp. 94-129.</p>
Week Five <i>February 1, 3, 5</i>	Biomedical Hegemony and Medical Pluralism	<p>Clarke, Juanne Nancarrow. (2021). "Complementary and Alternative Medicine." <u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 317-339.</p> <p>Waldram, James B. (2013). "Transformative and Restorative Processes: Revisiting the Question of Efficacy of Indigenous Healing." <i>Medical Anthropology</i>, 32 (3): 191-207.</p> <p>(SR) Jasen, Patricia. (1997). "Race, Culture, and the Colonization of Childbirth in Northern Canada." <i>Social History of Medicine</i>, 10 (3): 383-400.</p>
Week Six <i>February 8, 10, 12</i>	Medical Professionalism, Error, and Abuse	<p>Clarke, Juanne Nancarrow. (2021). "The Medical Profession, Autonomy, and Error." <u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 263-290.</p> <p>Washington, Harriet A. (2006). "Caged Subjects: Research on Black Prisoners." <u>Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present</u>. New York: First Anchor Books, pp. 244-270.</p> <p>(SR) Bosk, Charles L. (1979 [2003]). "Error, Rank and Responsibility." <u>Forgive and Remember: Managing Medical Failure</u>. Chicago, IL: University of Chicago Press, pp. 36-70.</p>
Week Seven <i>February 15, 17, 19</i>	Louis Riel Day and Winter Study Break	February 15, 17, 19: No Classes
Week Eight	Nurses and Midwives	Clarke, Juanne Nancarrow. (2021). "Nurses and Midwives: The Stresses and Strains of the Privatizing Medical Care System."

<p>February 22, 24, 26</p>		<p><u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 291-316.</p> <p>Robbie Davis-Floyd, Kim Gutschow & David A Schwartz. (2020). “Pregnancy, Birth and the COVID-19 Pandemic in the United States.” <i>Medical Anthropology</i>, 39 (5): 413-427.</p> <p>Gabrielson, Ryan. (April 24, 2020). “Life and Death, But No Trash Pickup: Diary of a Young COVID-19 Nurse. Despite all the talk about appreciating health care workers, one California nurse caring for the sickest patients felt she needed more support.” <i>ProPublica</i>: 6 pages, https://www.propublica.org/article/diary-of-a-covid-nurse</p> <p>(SR) Benoit, Cecilia et al. (2010). “Medical dominance and neoliberalisation in maternal care provision: The evidence from Canada and Australia.” <i>Social Science & Medicine</i>, 71: 475-481.</p> <p>(SR) Macdonald, Margaret. (2006). “Gender Expectations: Natural Bodies and Natural Births in the New Midwifery in Canada.” <i>Medical Anthropology Quarterly</i>, 20 (2): 235–256.</p>
<p>Week Nine March 1, 3, 5</p>	<p>Illness and Medicalization</p>	<p>Clarke, Juaane Nancarrow. (2021). “A Brief History of Medicine and the Development and Critique of Modern Medicalization.” <u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 216-238.</p> <p>Greil, Arthur L. and Julia McQuillan. (2010). “‘Trying’ Times: Medicalization, Intent, and Ambiguity in the Definition of Infertility.” <i>Medical Anthropology Quarterly</i>, 24 (2): 137-156.</p> <p>Documentary: “Extremis” (2016: 24 minutes, Netflix)</p> <p>(SR) Kaufert, Patricia and John O’Neil. (1990). “Cooptation and Control: The Reconstruction of Inuit Birth.” <i>Medical Anthropology Quarterly</i>, 4 (4): 427-442.</p> <p>(SR) Kaufman, Sharon R. (2015). “Influencing the character of the future: Prognosis, risk, and time left.” <u>Ordinary Medicine: Extraordinary Treatments, Longer Lives, and Where to Draw the Line</u>. Durham, NC: Duke University Press, 195-216.</p> <p>(SR) Good, Byron J. (1994). “Illness representations in medical anthropology: a reading of the field.” <u>Medicine, Rationality and Experience: An Anthropological Perspective</u>. Cambridge, UK: Cambridge University Press, pp. 25-64.</p> <p>(SR) Ryang, Sonia. (2017). “A critique of medicalization: three instances.” <i>Anthropology & Medicine</i>, 24 (3): 248-260.</p>
<p>Week Ten March 8, 10, 12</p>	<p>Therapeutics: Pharmaceutical Drugs and Dispensing</p>	<p>Clarke, Juaane Nancarrow. (2021). “The Pharmaceutical Industry and Medical-Industrial Complex.” <u>Health, Illness, and Medicine in Canada</u>. Don Mills, Ontario: Oxford University Press, pp. 340-370.</p>

		<p>Berlivet, Luc and Ilana Löwy. (2020). “Hydroxychloroquine Controversies: Clinical Trials, Epistemology, and the Democratization of Science.” <i>Medical Anthropology Quarterly</i>, 34 (4): 525–541.</p> <p>Documentary: “Heroin(e)” (2017: 39 minutes, Netflix)</p> <p>(SR) Carpenter-Song, Elizabeth. (2009). “Children’s Sense of Self in Relation to Clinical Processes: Portraits of Pharmaceutical Transformation.” <i>Ethos</i>, 37 (3): 257-281.</p> <p>(SR) Gottlieb, Samantha D. (2013). “The Patient-Consumer-Advocate Nexus: The Marketing and Dissemination of Gardasil, the Human Papillomavirus Vaccine, in the United States.” <i>Medical Anthropology Quarterly</i>, 27 (3): 330-347.</p> <p>(SR) Oldani, Michael J. (2004). “Thick Prescriptions: Toward an Interpretation of Pharmaceutical Sales Practices.” <i>Medical Anthropology Quarterly</i>, 18 (3): 325-356.</p>
<p>Week Eleven March 15, 17, 19</p>	<p>The Social Determinants of Health: Inequity and Inequality</p>	<p>Clarke, Juaane Nancarrow. (2021). “Neo-liberalism, Social Inequity, Disease, and Death: The Social Determinants of Health.” <i>Health, Illness, and Medicine in Canada</i>. Don Mills, Ontario: Oxford University Press, pp. 87-113.</p> <p>Clarke, Juaane Nancarrow. (2021). “Diversities and Health: Age, Gender, Sexualities, Racialization, and Indigenous Peoples” <i>Health, Illness, and Medicine in Canada</i>. Don Mills, Ontario: Oxford University Press, pp. 114-144.</p> <p>Assignment: Film review due March 19.</p> <p>(SR) Lavalley, Lynn F. and Jennifer M. Poole. (2010). “Beyond Recovery: Colonization, Health and Healing for Indigenous People in Canada.” <i>International Journal of Mental Health and Addiction</i>, 8: 271-281.</p> <p>(SR) Obinna, Denise N. (2020): “Essential and undervalued: health disparities of African American women in the COVID-19 era.” <i>Ethnicity & Health</i>: 1-12.</p>
<p>Week Twelve March 22, 24, 26</p>	<p>The Social Determinants of Health: The Social and Racial Politics of Medical Encounters</p>	<p>Browne, Annette J. (2007). “Clinical encounters between nurses and First Nations women in a Western Canadian hospital.” <i>Social Science & Medicine</i>, 64: 2165-2176.</p> <p>Downe, Pamela J. (2020). “‘The Hospital is Haunted’: Maternal Health, Pandemics, and Collective Care among Indigenous Women affected by HIV.” <i>Medical Anthropology Quarterly COVID-19 Responses</i>: http://medanthroquarterly.org/2020/08/11/the-hospital-is-haunted-maternal-health-pandemics-and-collective-care-among-indigenous-women-affected-by-hiv/</p> <p>Sufrin, Carolyn. 2017. “Cultivating Ambiguity: Normalizing Care in the Jail Clinic.” <i>Jailcare: Finding the Safety Net for</i></p>

		<p><u>Women behind Bars</u>. Berkeley, CA: University of California Press, pp. 81-100.</p> <p>(SR) Baker, Kelly and Brenda Beagan. (2014). “Making Assumptions, Making Space: An Anthropological Critique of Cultural Competency and Its Relevance to Queer Patients.” <i>Medical Anthropology Quarterly</i>, 28 (4): 578-598.</p> <p>(SR) Kaufert, Patricia A. and John O’Neil. (1993). “Analysis of a Dialogue on Risks in Childbirth: Clinicians, Epidemiologists, and Inuit Women.” <u>Knowledge, Power and Practice: The Anthropology of Medicine in Everyday Life</u>. (Shirley Lindenbaum, Margaret Lock: Editors) Berkeley, CA: University of California Press, pp. 32-54.</p> <p>(SR) O’Neil, John D. (1989). “The Cultural and Political Context of Patient Dissatisfaction in Cross-Cultural Clinical Encounters: A Canadian Inuit Study.” <i>Medical Anthropology Quarterly</i>, 3 (4): 325-344.</p>
<p>Week Thirteen March 29, 31; April 2</p>	<p>The Social Determinants of Health: COVID-19 Pandemic</p>	<p>Castro, Shakti. (2020) “Surveilling Racialized Bodies.” <i>NACLA Report on the Americas</i>, 52 (3): 296-302.</p> <p>Metzl, Jonathan et al. (2020). “Responding to the COVID-19 Pandemic: The Need for a Structurally Competent Health Care System.” <i>JAMA</i>, 324 (3): 231-232.</p> <p>Oyarzun, Yesmar. (2020). “Plantation Politics, Paranoia, and Public Health on the Frontlines of America’s COVID-19 Response.” <i>Medical Anthropology Quarterly</i>, 34 (4): 578–590.</p> <p>Assignment: Group Presentations (April 2)</p> <p>(SR) Chuvileva, Yulia E., and Andrea Rissing, Hilary B. King. (2020). “From wet markets to Wal-Marts: tracing alimentary xenophobia in the time of COVID-19.” <i>Social Anthropology/Anthropologie Sociale</i>, 28 (2): 241-243.</p> <p>(SR) Sabatello, Maya et al. (2020). “Structural Racism in the COVID-19 Pandemic: Moving Forward.” <i>The American Journal of Bioethics</i>: 1-19.</p> <p>(SR) Tabari, Parinaz and Mitra Amini, Kaveh Khoshnood & Neil Arya (2020). “Multi-dimensional effects of the COVID-19 pandemic considering the WHO’s ecological approach.” <i>Global Public Health</i>: 1-13.</p>
<p>Week Fourteen April 5, 7, 9</p>	<p>Conclusion</p>	<p>Assignment: Group Presentations (April 5, 7, 9)</p>