



RHODES UNIVERSITY
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Department of Sociology & Industrial Sociology

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SOCIOLOGY HONOURS

TERM 2: 2024

SOCIOLOGY OF HEALTH AND ILLNESS



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INTRODUCTION

Welcome to the module on the sociology of health and illness! Previously known as medical sociology, the sociology of health and illness module draws on perspectives and theories from mainstream sociology, which include functionalism, symbolic interactionism, Marxism, feminism and postmodernism. Medical sociology has changed drastically over the past few decades. It was largely pioneered by sociologists who worked closely with doctors and who took for granted doctors' assumptions about health and healthcare. Consequently, early medical sociologists, such as Talcott Parsons, primarily asked questions that doctors deemed important. However, by the 1970s, the field had begun shifting toward a very different set of questions. Some of these questions challenged the doctors' assumptions, and others focused on issues that were beyond most doctors' areas of interest or expertise, such as the effects of poverty on health or how individuals develop meaningful lives despite living with chronic illness.

In this module, we will explore the following questions among others: What does it mean to be healthy or ill? How is illness socially constructed? How does illness affect people's identities and the ways that they experience their lives? What are the sources of inequality in health status? How is medicine a form of social control? Has society become more or less *medicalized*, and what are the consequences of medicalization? Why is biomedicine dominant in capitalist society? Is healthcare a right or a commodity? What determines the degree to which health services are funded and provided by the government, employers or private individuals? How is the health care system organized in South Africa?

The module aims to provide a thorough grounding in the sociology of health, illness and healthcare, with a focus on South African health policy and healthcare system. We will also discuss critical sociological perspectives on medicine, health, and society, as well as the changing nature and status of professional power and dominance, illness experience, and patient-professional relations in medicine and healthcare. We will also discuss happiness as a measure of well-being (health) in line with the World Health Organisation's (1949) definition of health as "a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity".

Sociological explanations of health and illness move beyond individual explanations towards a social analysis of these phenomena, including a critique of healthcare. A sociological focus, however, in no way denies the many advantages and successes of medical knowledge and practice.

MODULE OBJECTIVE

Upon completion of this module, you will be able to:

- develop an understanding of different sociological perspectives on health and be able to evaluate the strengths and weaknesses of different theories;
- examine key concepts and approaches in public health from a critical sociological perspective and develop your awareness of issues regarding the production and distribution of medical knowledge and power;

- apprehend the link between individual experiences of health and illness with social forces, group dynamics, especially the political economy of health and healthcare in South Africa; and
- understand the running theme of the module, that ideas about the body and the body itself are socially constructed and that power and control play an important role in this process.

MODULE REQUIREMENTS & ASSIGNMENTS

There will be two seminars a week, on Mondays and Wednesdays from 09h30 to 12h00, in the Steve Biko Seminar Room. Due to a public holiday on Wednesday, 1st May (Worker's Day), seminar 8 will be conducted on Friday, 3rd May, at 14h00 pm in the Steve Biko Seminar Room. Attendance at all seminars is *compulsory*.

In preparation for each seminar, you must read the prescribed readings and answer the set question/s for each week's seminar (see seminar structure below). You must read, think and write critically, which means "active, persistent and careful consideration of any belief or supposed form of knowledge in the light of the grounds that support it and further conclusions to which it tends" (Dewey, 1933:118). This will make you aware that knowledge, particularly medical knowledge, is always culturally and disciplinarily constructed. Medical knowledge is always the product of particular people thinking in particular ways at particular times and in particular places. For this reason, you need to ask critical questions about all medical 'facts' and ideologies, as well as research findings on health, illness, and health policy and practice. Therefore, success is dependent on your active engagement with the module and reading beyond the prescribed material.

Given that health, illness, and healthcare are issues that you can all relate to, you are encouraged to reflect on and incorporate your understanding of and experience of these phenomena into your assignments. You should incorporate media accounts, especially those on South African healthcare, health and illness narratives.

Assessment

- The coursework component consists of two essays, which are due on the **19th of April** and the **17th of May**. The essays must be submitted on Turnitin by **17h00** on the due date and count 40% each (80%) of the in-term mark. The first essay question is based on seminars 1 - 4, and the second essay on seminars 5-10. The required word count for the essays is 2500-3000 words, and they must be typed in size 12 font with 1.5 line spacing.
 - **Essay 1:** Critically discuss the notion that medical knowledge is a form of power with the potential to control and influence the lives of its recipients.
 - **Essay 2:** Critically discuss the obstacles to achieving a more equitable health system in South Africa. The discussion must include disease prevalence (e.g., diabetes, HIV/Aids, cancer, etc.) and the political economy of health.
- Individual or duo presentations in seminars 10 and 11 will count for 20% of your term mark. The broad topic for the presentation is *healthism*. The presentation paper/PowerPoint *must* draw on the theoretical and policy discussions in prescribed readings on *healthism*, *consuming bodies* and the *National Department of Health's Strategy on Obesity* (see Seminar 10 & 11

Schedule below). Examples can be anecdotal evidence or case studies on healthism and obesity or social media accounts on YouTube, TikTok, blogs, Instagram, Facebook, etc. The presentation should be emailed to me (j.chisaka@ru.ac.za) for those presenting on **Monday, 13th May, and on Tuesday if you are presenting on Wednesday, 15th May.**

- For the June exam, you will write three essays, one compulsory and two chosen from a list of four essay questions.
- The overall module mark is as follows:
 - June exam 60%
 - Class assignments (essays & presentation) 40%

Please consult the Sociology handbook for an outline of the University's policy on plagiarism, guidelines on the formatting and writing of assignments, the departmental rules regarding citations and references, and the criteria for assessing written work. A copy of the Assignment Cover Sheet, which must accompany all assignments submitted to the Department, is also available from the department.

Module evaluation

As a department, we are committed to reflecting on our teaching practices and module content to strengthen our courses. Towards the end of the term, you will be asked to participate in a module evaluation process. Please take this seriously and evaluate the module honestly and comprehensively. Your input will be highly appreciated and will make a real contribution to enhancing teaching and learning in the department.

Consultation times

Please email me (j.chisaka@ru.ac.za) to make an appointment on the following days:

Tuesday 09h30 - 12h00

Thursday 09h30 - 12h00

Friday 09h30 - 12h00

SEMINAR SCHEDULE

Seminars 1 & 2 – The biomedical model of health and healthcare

Questions to guide your reading:

- Why is it important to understand the development of modern medicine historically?
- Does medical knowledge provide an accurate description of a healthy and diseased body?

Prescribed readings and video

Barry, A. & Yuill, C. (2002). *Understanding health: A sociological introduction*. London: SAGE Publications. [Chapters 1 & 2]

Bowler, S. (2008). The object of medicine. In: D. Wainwright (ed.) *A sociology of health*. London: SAGE Publications. [Chapter 3]

National Geographic. (2020). In the 19th century, going to the doctor could kill you. Available at: <https://www.youtube.com/watch?v=0BmGw3a-JDQ>

White, K. (2002). *An introduction to the sociology of health and illness*. London: SAGE Publications. [Chapter 2 – The social construction of medical knowledge; Chapter 7 Foucault and the sociology of medical knowledge]

Recommended readings

Arksey, H. (1994). Expert and lay participation in the construction of medical knowledge. *Sociology of Health & Illness*, Vol. 16 (4), pp. 448-468.

Armstrong, D. (1990). Medicine as a profession: Times of change. *British Medical Journal*, Vol. 301, pp. 691-693.

Armstrong, D. (1985). The subject and the social in medicine: An appreciation of Michel Foucault. *Sociology of Health and Illness*, Vol. 7 (1), pp.108-117.

Bowler, S. (2008). The object of medicine. In D. Wainwright (editor). *A sociology of health*. London: SAGE Publications. [Chapter 3]

Coburn, D. & Willis, E. (2000). The medical profession: Knowledge, power, and autonomy. In: G.L. Albrecht, R. Fitzpatrick & S.C. Scrimshaw (eds.) *Handbook of social studies in health and medicine*. London: SAGE Publications.

Conrad, P. (1979). Types of medical social control. *Sociology of Health and Illness*, Vol. 1 (1), pp. 1-11.

Conrad, P. (1992). Medicalization and social control. *Annual Review of Sociology*, Vol. 18 (1), pp. 209-232.

Conrad, P. (2005). The shifting engines of medicalization. *Journal of Health & Social Behavior*, Vol. 46 (1), pp. 3-14.

Freidson, E. (1993). How dominant are the professions? In: F. Hafferty & J. McKinlay (eds.). *The changing medical profession: an international perspective*. New York: Oxford University Press.

Freund, P. E. S., McGuire, M. & Podhurst, L. S. (2003). *Health, illness, and the social body: A critical sociology* (fourth edition) New Jersey: Pearson Education. [Chapter 1]

Foucault, M. (1975). *The birth of the clinic: An archaeology of medical perception*. New York: Vintage Books.

Foucault, M. (1979). *Discipline and punish: The birth of the prison*. Harmondsworth, Middlesex: Penguin.

Hafferty, F. W. & McKinlay J. B. (1993). *The changing medical profession: An international perspective*. New York: Oxford University Press.

Illich, I. (1976). *Medical nemesis: The expropriation of health*. New York: Bantam.

Kelleher, D., Gabe, J. & Williams G. (1994). *Challenging medicine*. London: Routledge

Light, D. & Levine S. (1988). The changing character of the medical profession: A theoretical overview. *The Milbank Quarterly*, Vol. 66 (Suppl. 2), pp. 10-32.

- Lupton, D. (1997). Doctors on the medical profession. *Sociology of Health and Illness*, Vol. 19 (4), pp. 480-497.
- Lupton, D. (1997). Foucault and the medicalisation critique. In: A. Petersen & R. Bunton (eds.) *Foucault: Health and medicine*. London: Routledge.
- McKinlay, J. B. & Marceau, L. D. (2002). The end of the golden age of doctoring. *International Journal of Health Services*, Vol. 32 (2), pp. 379-416.
- McKinlay, J. B. & Stoeckle, J. D. (1988). Corporatization and the social transformation of doctoring. *International Journal of Health Services*, Vol. 18 (2), pp.191-193.
- Navarro, V. (1988). Professional dominance or proletarianization?: Neither. *The Millbank Quarterly*, Vol. 66 (Suppl. 2), pp. 57-75.
- Petersen, A. (2012). Foucault, health and healthcare. In: G. Scambler (ed.) *Contemporary theorists for medical sociology*. London: Routledge. [Chapter 1, pp. 9-17]
- Ritzer, G. (1975). Professionalization, bureaucratization and rationalization: the views of MaxWeber. *Social Forces*, Vol. 53 (4), pp. 627-634.
- Turner, B. S. (1987). *Medical power and social knowledge*. London: SAGE Publications.
- Williams, S. J. (2012). Health and medicine in the information age: Castells, informational capitalism, and the network society. In: G. Scambler (ed.) *Contemporary theorists for medical sociology*. London: Routledge. [Chapter 10]
- Zola, I. K. (1972). Medicine as an institution of social control. *Sociological Review*, Vol. 20 (4), pp. 487-504.

Seminars 3 & 4: The sociological perspective on health

Questions to guide your reading:

- Why is a sociological perspective on health, disease and healthcare important?
- What is the impact of gender on health?
- Do you think preventative health programmes seek to ‘control health from within’?

Prescribed readings

- Lee, E & Frayan, E. (2008). The ‘feminisation’ of health. In: D. Wainwright (ed.) *A sociology of health*. London: SAGE Publications.
- Navarro, V. (1976). Social class, political power and the state and their implications in medicine. *Social Science & Medicine*, Vol. 10, pp. 437-457
- White, K. (2002). *An introduction to the sociology of health and illness*. London: SAGE Publications. [Chapter 8 - *Health, gender and feminism*]

Recommended readings

- Annandale, E. (1998). *The sociology of health and medicine: A critical introduction*. Malden: Blackwell Publishers.

- Annandale, E. (2014). *The sociology of health and medicine: A critical introduction*. Cambridge: Polity.
- Armstrong, D. 2008. The subject and the social in medicine: an appreciation of Michel Foucault. Available at: <https://onlinelibrary.wiley.com/doi/10.1111/1467-9566.ep10831391>
- Kuhlmann, E. & Annandale, E. (2010). *The Palgrave handbook of gender and healthcare*. Basingstoke: Palgrave Macmillan.
- Mooney, G. (201). *The health of the nations: Towards a new political economy*. London: ZED Books.
- Navarro, V. (1979). *Imperialism, health and medicine*. New York: Baywood.
- Navarro, V. (1986). *Crisis, health, and medicine: a social critique*. New York: Tavistock.
- Navarro, V. (2004). *The political and social contexts of health*. New York: Baywood.
- Navarro, V. (2007). *Neoliberalism, globalization and inequalities: Consequences for health and quality of life*. New York: Baywood.
- Navarro, V. (2009). What we mean by social determinants of health. *International Journal of Health Services*, Vol. 39 (3), pp. 423-441.
- Nettleton, S. (1995). *The sociology of health and illness* (first edition). Cambridge: Polity Press.
- Nettleton, S. (2013). *The sociology of health and illness* (third edition). Cambridge: Polity Press.
- Nettleton, S. & Gustafsson, U. (eds.) (2002). *The sociology of health and illness reader*. Cambridge: Polity Press.
- Parsons, T. (1951). *The social system*. Glencoe, Illinois: Free Press.
- Weitz, R. (2004). *Sociology of health, illness, and health care: A critical approach*. Belmont, California: Wadsworth/Thomson.

Seminars 5 & 6: The experience of chronic illness and disability

Question to guide your reading:

Why is disease or sickness more than an objective label (reality)?

Prescribed readings

- Bury, M. (1982). Chronic illness as biographical disruption. *Sociology of Health and Illness*, Vol. 4 (2), pp. 167-182.
- Charmaz, K. (1983). Loss of self: A fundamental form of suffering in the chronically ill. *Sociology of Health and Illness*, Vol. 5 (2), pp. 168-197.
- Hartle, R. (2020), "Why me, Lord?": Some social factors associated with the receipt of a donor heart in South Africa. Unpublished Master's Thesis. Makhanda: Rhodes University.
- Ned, L., McKinney, E. L., Mckinney, V. & Swartz, L. (2021). Experiences of vulnerability of people with disabilities during COVID-19 in South Africa. *South African Health Review*, pp. 135-142.

Recommended Readings

- Freund, P. E. S., McGuire, M. & Podhurst, L. S. (2003). *Health, illness, and the social body: A critical sociology* (fourth edition). New Jersey: Pearson Education. [Chapter 1]
- Kelly, M. P. & Field, D. (1996). Medical sociology, chronic illness and the body. *Sociology of Health and Illness*, Vol. 18 (2), pp. 241-257.
- Kleinman, A. (1988). *The illness narratives: Suffering, healing and the human condition*. New York: Basic Books.
- Sontag, S. (1991). *Illness as metaphor: AIDS and its metaphors*. London: Penguin.
- Szasz, T. (1957). *Pain and pleasure*. New York: Basic Books.

Seminars 8 & 9: Health policy and healthcare in South Africa

Question to guide your reading:

What factors affect the Department of Health's attempts at achieving a more equitable health system in South Africa?

Prescribed reading & video

- Baker, P. A. (2010). From apartheid to neoliberalism: Health equity in post-apartheid South Africa. *International Journal of Health Services*, Vol. 40 (1), pp.79-95.
- Blecher, M. S., Davén, T. Meyer-Rath, G., Silal, S. P., Makrelov, K. & van Niekerk, M. (2021). The South African government's response to COVID-19: Protecting lives and livelihoods. *South African Health Review*, pp. 1-17.
- Gittings, L., Casale, M., Kannemeyer, N., Rayalo, N., Cluver, L., Kelly, J., Logie, C. & Toska, E. (2021). "Even if I am well informed, I will never get it": COVID-19 vaccine beliefs, intentions and acceptability among adolescents and young people in South Africa. *South African Health Review*, pp. 297-203.
- Phalime, M. (2014). The doctor who walked away. Available at: <https://www.youtube.com/watch?v=JeHqgambbcI>

Recommended readings

- African National Congress. (1994a). *Policy document: A national health plan for South Africa*. Available at: <https://www.anc1912.org.za/policy-documents-1994-a-national-health-plan-for-south-africa/>
- Coovadia, H. Jewkes, R., Barron, P., Sanders, D. & McIntyre, D. (2009). The health and health system of South Africa: historical roots of current public health challenges. *Lancet*, Vol. 374 (9692), pp. 813-817.
- Department of Health. (2023). *National Health Insurance*. Available at: <https://www.health.gov.za/nhi/>
- Department of Health. (2017). *Demographic and health survey 2016: Key indicators*. Available at: <https://www.statssa.gov.za/publications/Report%2003-00-09/Report%2003-00092016.pdf>

- Engelbrecht, B. & Crisp, N. (2010). Improving performance of the health system: Perspective on a national health insurance. *South African Health Review*, pp. 195-204.
- Gittings, L., Casale, M., Kannemeyer, N., Rayalo, N., Cluver, L., Kelly, J., Logie, C. & Toska, E. (2021). “Even if I am well informed, I will never get it”: COVID-19 vaccine beliefs, intentions and acceptability among adolescents and young people in South Africa. *South African Health Review*, pp. 297-203.
- Padayachee, T., Seunanden, T., Ogunmefun, C., Morley, P., Zide, B. Mureithi, L., van Schaik, N. & English, R. (2013). *Documenting good practices in the public health sector of South Africa: From policy to practice*. Durban: Health Systems Trust.
- Ruiters, G. & van Niekerk, R. (eds). (2012). *Universal health care in southern Africa: Policy contestation in health system reform in South Africa and Zimbabwe*. Scottsville: University of KwaZulu Natal Press.

Seminars 10 & 11: Presentations on Healthism & Obesity

Prescribed readings

- Crawford, R. (1980). Healthism and the medicalization of everyday life. *International Journal of Health Services*, Vol. 10 (3), pp. 365-388
- Higgs, P. (2012). Consuming bodies: Zygmunt Bauman on the difference between health and fitness. In: G. Scambler (ed.) *Contemporary theorists for medical sociology*. London: Routledge. [Chapter 2]
- National Department of Health (2023). *Strategy for the Prevention and Management of Obesity in South Africa, 2023 – 2028*. Available at:
https://www.health.gov.za/wpcontent/uploads/2023/05/Obesity-Strategy-2023-2028_Final_Approved.pdf

Recommended readings

- Boachie, M. (2022). *Obesity costs South Africa billions. We did the sums*. Available at:
<https://www.wits.ac.za/news/latest-news/opinion/2022/2022-09/obesity-costs-south-africabillions-we-did-the-sums.html>
- Omarjee, L. (2017). *Obesity costs SA economy more than R700bn per year – study*. Available at:
<https://www.fin24.com/Economy/obesity-costs-sa-economy-more-than-r700bn-per-year-study-20171012>