# **HPSC0038 Medicine and Society**

## **Course Syllabus**

2023-24 session | Dr Erman Sözüdoğru | erman.sozudogru@ucl.ac.uk

In this module we investigate the complex and fascinating relationship between medicine and society. The main aim is to develop a nuanced understanding of how the practice of medicine is shaped by its social, cultural, and political context and at the same time study how medicine transforms and shapes society. This module focuses on the relations among health, social and political conditions, science, and technology using different conceptual lenses. To achieve this aim, we will look at different historical and contemporary case studies and study concepts from a range of disciplines including sociology, philosophy, and history of medicine.

## **Course Information**

## Basic course information

Moodle Web site:	https://moodle-1819.ucl.ac.uk/course/view.php?id=7443		
	20% Abstract (200 words)		
Assessment:	50% Academic essay (2500 words)		
	30% Public engagement piece (700 words)		
Timetable:	www.ucl.ac.uk/sts/hpsc		
Prerequisites:	None.		
Required texts:	Essential readings available via the <u>UCL reading list</u> (search for HPSC0038).		
Course tutor:	Dr Erman Sözüdoğru		
Contact:	erman.sozudogru@ucl.ac.uk		
Office location:	22 Gordon Square, 3.3		
Office hours:	See Moodle		

## **Schedule**

Topic	Essential Reading		
Thinking about medicine and society	Familiarise yourself with the module syllabus		
Social determinants of health	Aronowitz (2008), Sorci (2023)		
Medicalisation	Zola (1972), Gunson (2010)		
Stigma and metaphors in medicine	Brandt (1986)		
HIV/AIDS activism then and now	Epstein (1995), Spieldenner (2016)		
Reading week			
Cultural Capital and Social Inequality	Abel (2007) Shim (2010)		
Cultural Capital and Social Inequality  Medicine and Gender	Abel (2007) Shim (2010) Martin (1991), Briggs (2000)		
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Medicine and Gender	Martin (1991), Briggs (2000)		

## **Aims & Objectives**

#### Aims

This is a second-year module in science and technology studies. It is concerned with relations among knowledge, health, and power.

This course content aims to:

- Introduce key concepts for analysing relations among health, social and political conditions, science and technology.
- Provide students with research skills to independently develop original lines of inquiry

## **Objectives:**

Intended learning outcomes for this module operate at several levels. By the end of the module, students should be able to:

- 1. Use key concepts to analyse the complex and relationship between medicine, science and society
- 2. Recognise the link between knowledge, health, and power.
- 3. Critically discuss and analyse concepts from sociology, philosophy, and history of medicine. in relation to case studies from medical and scientific practices.
- 4. Plan and carry out independent research
- 5. Demonstrate effective critical reading, discussion and writing skills

Assessment	summary	and	deadlines:
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	Description	Deadline	Word limit
20%	Abstract	26/02/2020 5pm	300 words
50%	Essay	25/03/2024 5pm	2500 words
30%	Public Engagement Piece	22/04/2020 5pm	700 words

#### **Assessment Details:**

There are three connected elements of coursework for this module. You will be asked to develop your own research question and produce an abstract (20%), an academic essay (50%) and a public engagement piece (20%).

In your **abstract**, you will be outlining your research question and argument based on topics we will cover in this module. For this assessment you need to identify the topic you are interested in, go through the relevant readings in the syllabus. You should use the 300 words to explain the rationale behind your research question and how you want to answer it in your essay. You'll notice that I haven't provided any sample titles here. This is because an integral part of this assignment is for you to develop your own essay topic. Again, I know that this might feel a bit daunting. However, we will spend lots of time during the term discussing how you might go about doing this.

The biggest problem that students tend to have with developing essay questions is that they pick a topic that is much too broad. This is a serious mistake. The broader the topic, the harder an essay is to write. Let me illustrate what should happen with an example. Say you want to work on medicine and identity, and you are interested in HIV. There is (obviously) a huge amount to say on this topic. Do not attempt to cram everything imaginable into your essay. Instead, pick a specific theme, and develop it slowly and carefully. This means that you will generally need to choose to look at one aspect of HIV at one specific time and place using one specific approach. So, you might write a social history (approach) of HIV patient groups (one aspect of the topic) 1982-1986 in New York (time and place). Or you might write something more analytical — what is the epistemic barriers (approach) to access to HIV prophylaxis (one aspect of the topic) in the UK today (time place).

You will then develop your abstract into an **academic essay**. This is a standard scholarly essay of 2500 words. We will spend some time in our seminars, looking at some essay writing strategies and departmental marking criteria. Your main aim is to answer the research question you developed in your abstract and provide a detailed scholarly argument to support your answer. The idea of arguing in a convincing way might be a bit daunting, but really, it's not too complicated. Your main focus should be on providing a clear argument, with plenty of support. And you need to make sure that the essay is clearly structured, with a clear writing style. For this module, I would expect you to be able to engage with arguments in the following ways:

**Describe**: Provide a detailed description of the problem or the question you identified in the literature – this can be conceptual, or case driven.

**Analyse** and **critique**: Provide a systematic analysis of the issues you described using the wider literature (including scholarly literature and gray literature).

**Synthesise:** Provide your position on the issue you described and analysed. This will be the thesis of your essay, which needs to be clear and well supported.

This might not make much sense to you at this stage, but do not worry! We will dedicate plenty of time in our seminars to look at some essay writing strategies (including some of the practical aspects of essay writing like style, referencing, and so on).

Finally, you will be asked to produce a **public engagement piece**. Your goal here is to identify an audience outside academia that will be interested in your topic and present your thesis to this audience using an appropriate language. Your aim here is to think about the impact that your research might have beyond academia. Therefore, once you have written your essay you need to think about an alternative audience that you would like to present your ideas to. As part of this assessment, you need to identify a specific audience and decide on a medium that will allow you to present your academic work to this audience in a way that is engaging. There will be specific guidance and examples on Moodle under the assessment tab.

## **Assignment submissions:**

Essays must be submitted via Moodle. In order to be deemed complete on this module students must attempt all three.

#### **Criteria for assessment:**

The departmental marking guidelines can be found in the STS Student Handbook. Detailed assessment criteria for each of the three assessments can be found on the module Moodle page.

## Important information on the use of AI

The assessments for this module falls under category 1 of <u>UCL's three-tiered categorisation of AI use in an assessment</u>. This means you are not allowed to use AI tools in developing sll three aspects of the coursework. The aim of this module is to teach you how to construct an argument and develop appropriate communication tools. The key point is to find connections between different ideas, theories, concepts in STS and medicine, engage with existing literature, build your own argument, write a convincing essay and develop a public engagement piece. You can only learn that by engaging with the process in full.

## Reading list

All the readings are available online through UCL library. You can access them all through the <u>UCL reading list</u> the module reading list at readinglists.ucl.ac.uk.

### Week 1 - Thinking about Medicine and Society

There is no set reading for week 1. I want you to familiarise yourself with the syllabus and the module aims and objectives. I also want you to explore readings assigned for each week and reflect on each topic.

Following are some of the sources used in developing the case study we will look at in this session.

- Hill, A. B. (1990). Memories of the British streptomycin trial in tuberculosis: the first randomized clinical trial. Controlled clinical trials, 11(2): 77-79. <a href="https://doi.org/10.1016/0197-2456(90)90001-I">doi.org/10.1016/0197-2456(90)90001-I</a>
- Francis, G. (2022) Recovery: the lost art of convalescence. London: Wellcome Collection.
- Hargreaves, J. R. et al. (2011) "The Social Determinants of Tuberculosis: From Evidence to Action". *American journal of public health* (1971). [Online] 101 (4), 654–662.
- MRC. (1948). Streptomycin Treatment of Pulmonary Tuberculosis: A Medical Research Council Investigation. *British Medical Journal*, **2**: 769-782. doi.org/10.1136/bmj.2.4582.769
- Wainwright, M. (1991). Streptomycin: Discovery and Resultant Controversy. *History and Philosophy of the Life Sciences* **13**(1): 97-124. <a href="http://www.jstor.org/stable/23330620">http://www.jstor.org/stable/23330620</a>
- Wainwright, M. (2005). A Response to William Kingston, "Streptomycin, Schatz versus Waksman, and the balance of Credit for Discovery". *Journal of the History of Medicine and Allied Sciences* 60(2): 218-220. doi.org/10.1093/jhmas/jri024
- Yoshioka A. (2008). "The Randomized Controlled Trial of Streptomycin" in Emanuel EJ, Grady C, Crouch RA, Lie RK, Miller FG, Wendler D, (eds). *The Oxford Textbook of Clinical Research Ethics*. Oxford: University Press Oxford; 2008. pp. 46–60.

# Week 2 – Social Determinants of Health Essential Reading:

- Aronowitz, R. (2008) "Framing disease: An underappreciated mechanism for the social patterning of health". Social science & medicine. [Online] 67 (1), 1–9.
- Sorci, G. (2023) "Social inequalities and the COVID-19 pandemic". *Social Science & Medicine*. [Online] 340(2004), 1-3.

#### **Additional Reading:**

- Link, B. G. & Phelan, J. (1995) Social Conditions As Fundamental Causes of Disease. Journal of health and social behavior. [Online] Spec No80–94.
- Clarkson, J. et al. (2018) A systems approach to healthcare: from thinking to practice. Future healthcare journal. [Online] 5 (3), 151–155.

### Week 3 - Medicalisation

#### **Essential Reading:**

- Zola, I. K. (1972) "Medicine as an institution of social control". *The Sociological review (Keele)*. [Online] 20 (4), 487–504.
- Gunson, J. S. (2010) "More natural but less normal": Reconsidering medicalisation and agency through women's accounts of menstrual suppression. *Social science & medicine (1982)*. [Online] 71 (7), 1324–1331.

#### **Additional Reading:**

- Tomes, N. (2007) Patient empowerment and the dilemmas of late-modern medicalisation. *The Lancet (British edition)*. [Online] 369 (9562), 698–700.
- Rose, N. (2007) Beyond medicalisation. The Lancet (British edition). [Online] 369 (9562), 700–702.
- Lane, C. 2006. How shyness became an illness: a brief history of social phobia. *Common Knowledge*, **12**(3): 388-409.

# Week 4 – Stigma and metaphors in medicine Essential reading

- Brandt, A. M. 1986. AIDS: From social history to social policy. *The Journal of Law, Medicine & Ethics.* **14**(5-6): 231-242.
- Read Chapter 1 Stigma and Social Identity for background in: Goffman, E. 1991, Stigma: 1: Stigma and Social Identity, Simon & Schuster, New York, NY.

#### **Additional reading:**

Note: these are both books so do not try and read all of this before the lecture but use them as source material for further research.

- Sontag, S. & Sontag, S. (1990) *Illness as metaphor; and AIDS and its metaphors / Susan Sontag*. 1st Anchor Books ed. New York: Doubleday.
- Brandt, A. M. (1985) No magic bullet: a social history of venereal disease in the United States since 1880 / Allan M. Brandt. New York: Oxford University Press.

## Week 5 – HIV/AIDS activism then and now

## **Essential Reading:**

- 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.
- Spieldenner, A. (2016) "PrEP Whores and HIV Prevention: The Queer Communication of HIV Pre-Exposure Prophylaxis (PrEP)". *Journal of homosexuality*. [Online] 63 (12), 1685–1697.

#### Additional reading:

- Belluz, J. (2014) The Truvada wars. BMJ (Online). [Online] 348 (jun24 19), g3811–g3811.
- Watch: The End of HIV? The Truvada Revolution

## Week 6 – Cultural Capital and Inequality

### **Essential Reading**

- Abel, T. (2008) "Cultural capital and social inequality in health". *Journal of epidemiology and community health* (1979). [Online] 62 (7), e13–e13.
- Shim, J. K. (2010) "Cultural Health Capital: A Theoretical Approach to Understanding Health Care Interactions and the Dynamics of Unequal Treatment". *Journal of health and social behavior*. [Online] 51 (1), 1–15.

## **Additional Reading**

- Kidd, I. J., and H. Carel. 2017. "Epistemic Injustice and Illness." Journal of Applied Philosophy 34
  (2):172-190.
- Pohlhaus Jr, G. (2017). Varieties of Epistemic Injustice. In I. J. Kidd, J. Medina, & G. Pohlhaus Jr, *The Routledge Handbook of Epistemic Injustice* (pp. 13-26). London: Routledge.

#### Week 7 - Medicine and Gender

### **Essential Readings:**

- Martin, Emily (1991). "The Egg and the Sperm: How Science Has Constructed a Romance Based on Stereotypical Male-Female Roles." *Signs* 16(3): 485-501.
- Briggs, L. (2000) "The Race of Hysteria: 'Overcivilization' and the 'Savage' Woman in Late Nineteenth-Century Obstetrics and Gynecology". *American quarterly*. [Online] 52 (2), 246–273.

#### **Additional Reading:**

- Kessler, S. J. (1990) "The Medical Construction of Gender: Case Management of Intersexed Infants". *Signs: Journal of Women in Culture and Society*. [Online] 16 (1), 3–26.
- Watch: NLM History Lecture Dissecting Gender: Reframing Anatomical History Through the Female Body

# Week 8 – Medicine and Structural Inequality Essential Reading:

• Viruell-Fuentes, E. A. et al. (2012) More than culture: Structural racism, intersectionality theory, and immigrant health. *Social science & medicine* (1982). [Online] 75 (12), 2099–2106.

• Came, H. (2014) "Sites of institutional racism in public health policy making in New Zealand". *Social science & medicine* (1982). [Online] 106214–220.

#### **Additional Reading:**

• Gunaratnam, Y. (2015) Death and the migrant: bodies, borders and care. Bloomsbury Publishing Plc.

## Week 9 – Disability Studies

#### **Essential Reading:**

- Moser, I. (2000) Against Normalisation: Subverting Norms of Ability and Disability. *Science as culture*. [Online] 9 (2), 201–240.
- Wendell, S. (1989). Toward a feminist theory of disability. *Hypatia*, 4(2), 104-124.

#### **Additional Reading**

- Shakespeare, T. (2006). "The social model of disability." In *The Disability Studies Reader* (4th edition) 214-221.
- Siebers, T. (2001) Disability in Theory: From Social Constructionism to the New Realism of the Body. *American literary history*. [Online] 13 (4), 737–754.

#### Week 10 - Value of Death

#### **Essential reading:**

- Sallnow, L. et al. (2022) "Report of the Lancet Commission on the Value of Death: bringing death back into life". *The Lancet (British edition)*. [Online] 399 (10327), 837–884.
- Listen to the podcast by the authors in this link

## **Important Policy Information**

Details of college and departmental policies relating to modules and assessments can be found in the STS Student Handbook www.ucl.ac.uk/sts/handbook

All students taking modules in the STS department are expected to read these policies.