



Teaching Guide

| Identifying Data | | | | | 2018/19 |
|---------------------|---|--------|------------------|-----------|---------|
| Subject (*) | Sociology of health and disease | | Code | 615G01307 | |
| Study programme | Grao en Socioloxía | | | | |
| Descriptors | | | | | |
| Cycle | Period | Year | Type | Credits | |
| Graduate | 2nd four-month period | Third | Obligatory | 6 | |
| Language | Spanish | | | | |
| Teaching method | Face-to-face | | | | |
| Prerequisites | | | | | |
| Department | Socioloxía e Ciencias da Comunicación | | | | |
| Coordinador | Cotillo Pereira, Alberto | E-mail | a.cotillo@udc.es | | |
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| Web | | | | | |
| General description | <p>The sociology of health and illness is deeply rooted in the curricula of the Degree in Sociology at major universities. It is one of the main specialties of sociological literature and has a wide theoretical and practical academic application. This subject tries to analyze the social basis of the problems related to health and illness. It start off the attempt to overcome the limitations of the hegemonic biomedical approach to health and illness and seeks to discover the deep social root of both.</p> <p>To a large extent, the sociology of health and illness is nourished by discoveries and contributions from related areas such as epidemiology, health anthropology and health policy. In a certain sense, it should be considered that this subject implies an in-depth analysis of the social bases of health and illness and, as a result, serves as a foundation for its related areas.</p> | | | | |

Study programme competences / results

| Code | Study programme competences / results |
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| A1 | Conocimiento de los componentes básicos de las desigualdades sociales y las diferencias culturales. |
| A3 | Introducción a la evolución de las sociedades contemporáneas y de sus movimientos sociales y políticos. |
| A8 | Análisis de las transformaciones y evolución de las sociedades contemporáneas. |
| A13 | Habilidades para la evaluación y realización de estudios de calidad y satisfacción. |
| A14 | Capacidades en elaborar, utilizar, e interpretar indicadores sociales e instrumentos de medición social. |
| A15 | Conocimientos y habilidades para plantear y desarrollar una investigación aplicada en las diferentes áreas de la sociedad. |
| A16 | Conocimientos y habilidades técnicas para la producción y el análisis de los datos cuantitativos y cualitativos. |
| A17 | Conocimientos y habilidades en la búsqueda de información secundaria en las diferentes fuentes (instituciones oficiales, bibliotecas, internet, etc.). |
| A21 | Capacidades para identificar y medir factores de vulnerabilidad social y procesos conflictivos. |
| A24 | Conocimientos y habilidades en transmitir los conceptos, problemáticas y perspectivas sociológicas. |
| A35 | Actitud crítica frente a las doctrinas y las prácticas sociales. |
| A36 | Actitud de compromiso frente a los problemas sociales y culturales. |
| B3 | Capacidad de análisis y síntesis. |
| B4 | Resolución de problemas. |
| B5 | Capacidad de gestión de la información. |
| B6 | Comunicación oral y escrita en la lengua nativa. |
| B7 | Conocimientos de informática relativos al ámbito de estudio. |
| B12 | Trabajo en equipo. |
| B13 | Razonamiento crítico. |
| B21 | Aprendizaje autónomo. |
| B27 | Capacidades en reconocer la complejidad de los fenómenos sociales. |
| C1 | Expresarse correctamente, tanto de forma oral como escrita, en las lenguas oficiales de la comunidad autónoma. |
| C3 | Utilizar las herramientas básicas de las tecnologías de la información y las comunicaciones (TIC) necesarias para el ejercicio de su profesión y para el aprendizaje a lo largo de su vida. |
| C6 | Valorar críticamente el conocimiento, la tecnología y la información disponible para resolver los problemas con los que deben enfrentarse. |



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| C8 | Valorar la importancia que tiene la investigación, la innovación y el desarrollo tecnológico en el avance socioeconómico y cultural de la sociedad. |
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| Learning outcomes | | | |
|---|--|--|----------------|
| Learning outcomes | Study programme competences / results | | |
| Upon successful completion of the course, the student will be able to identify the limitations of the biomedical model of health and disease and the social character of both. | A24 A35 A36 | B3 B13 B21 B27 | C6 |
| Upon successful completion of the course, the student will be able to recognize the main issues, orientations, approaches and theories within the field of the sociology of health and illness. | A24 A35 A36 | B3 B6 B13 B21 B27 | C1 C6 C8 |
| Upon successful completion of the course, the student will be able to identify the factors of inequality and social vulnerability in health. | A1 A21 A35 A36 | B3 B6 B13 B21 B27 | C6 |
| Upon successful completion of the course, the student will be able to understand the processes of social change that affect health and disease in advanced societies. | A3 A8 | B3 B13 B21 B27 | C6 C8 |
| Upon successful completion of the course, the student will be able to collect, process and analyze statistical data related to the field of health and health policy. | A13 A14 A15 A16 A17 | B3 B4 B5 B6 B7 B12 B27 | C1 C3 C8 |
| Upon successful completion of the course, the student will be able to identify the social processes underlying specific cases of social phenomena related to health and illness. | A15 A16 A17 A21 A35 A36 | B3 B4 B6 B12 B13 B21 B27 | C1 C8 |
| Upon successful completion of the course, the student will be able to transmit to others in public the results of their own analysis and their own research. | A24 A35 A36 | B3 B5 B6 B12 B13 B27 | C1 C3 |

| Contents | |
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| Topic | Sub-topic |
| Subject 1. Introduction. Concepts and theories about health and illness | Sociology of health and illness. Sociology of the body. Sociological theories on health and illness. |



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| Subject 2. Health and Society | Social basis of health: Socio-demographic changes and cultural and material determinants that affect health. Health indicators. |
| Subject 3. Health models. Doctor-patient relationship. | Sociological Perspectives on Medicine.- Public health and healthcare professionals. The role of the patient and the doctor: From healing to care. |
| Subject 4. Quality of life and lifestyles | Factors conditioning health: Environment and lifestyles. The value of health: quality of life and personal responsibility. Aging, dependence and disability in terms of quality of life. |
| Subject 5. Social diseases | Social diseases: Smoking, alcoholism and drugs. Anorexia and Bulimia. Obesity, diet and sedentary lifestyle. Mental health. Regulations on healthy lifestyles. |
| Subject 6. Disability | Limitations of the individual model of disability. The social model of disability. From handicap to disability. From disability to functional diversity. Criticisms of the social model of disability. |
| Subject 7. Institutions and public policies | Health as a social and economic value: public responsibility for the health of the population. The health system in Spain: National Health System. Sustainability of the public health system. |
| Subject 8. The plurality of health services in the national health system: inequalities and deficiencies. | Health determinants of health. Differences in accessibility and use in health care. Health needs and patient / client care. Impact of health policies on health equity. Situation of inequality by autonomous communities. |
| Subject 9. Measurement of the health status of the population and perceptions about health care | The measure of health. Review of scales to control the degree of health and disease of the population. Health Surveys of the Ministry of Health. Opinion on the health status of citizens (CIS and others). |

| Planning | | | | |
|---|---|--------------------------------------|-------------------------------|-------------|
| Methodologies / tests | Competencies / Results | Teaching hours (in-person & virtual) | Student?s personal work hours | Total hours |
| Document analysis | A1 A8 A13 A14 A15 A16 A17 A21 A24 B3 B4 B5 B6 B7 B12 C1 C3 | 0 | 24 | 24 |
| Case study | A1 A3 A8 A24 A35 A36 B3 B4 B6 B12 B13 B21 B27 C1 C6 | 0 | 36 | 36 |
| Mind mapping | A3 A8 A24 A35 A36 B6 B21 B27 C1 C6 | 0 | 15 | 15 |
| Oral presentation | A24 A35 B5 B6 B12 C1 | 12 | 0 | 12 |
| Guest lecture / keynote speech | A1 A3 A8 A24 A35 A36 B27 C6 | 24 | 0 | 24 |
| Mixed objective/subjective test | A1 A3 A8 A24 A35 A36 B6 B21 B27 C1 C6 C8 | 2 | 32 | 34 |
| Personalized attention | | 5 | 0 | 5 |
| (*)The information in the planning table is for guidance only and does not take into account the heterogeneity of the students. | | | | |

| Methodologies | |
|---------------|-------------|
| Methodologies | Description |



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|---------------------------------|--|
| Document analysis | It consists in the statistical exploitation of data from surveys or barometers that address issues related to health and the health system in Spain. Students are required to apply at least one multivariate analysis technique to the data they handle. The analysis of the documentary sources implies that the students define the focus of the research (objectives, hypothesis, methodology), obtain the secondary data, exploit them, analyze the results and write the report. This must be delivered to the teacher in electronic format and exposed at the classroom. This activity will be carried out in groups of 2 or 3 students. |
| Case study | It consists of analyzing a specific piece of information that has appeared in some mass media. The objective is that the students establish an adequate interpretation of the case in question and relate it to the theoretical contents of the subject through the different interpretations offered by the different predominant perspectives in the sociology of health and illness. The teacher will provide the case and students should prepare a report that accounts for their work. The report must be sent to the teacher in electronic format and presented at the classroom. This activity will be carried out in groups of 2 or 3 students. |
| Mind mapping | The idea is that the students prepare a summary and a conceptual map that explains the reading of a particular text. Students can choose the text in question from the list that the teacher will provide. The preparation of the abstract and the conceptual map will be individual and should be sent to the teacher in electronic format. |
| Oral presentation | On the dates in which it is determined, the students organized in groups will present to the rest of the students and the professor the main results of their research both in regard to the analysis of the documentary sources and in the case study. |
| Guest lecture / keynote speech | Throughout the semester, the teacher will present at the classroom the main issues, orientations, approaches and theories in the field of the sociology of health and illness. Students must attend classes regularly. |
| Mixed objective/subjective test | Students must take an exam on the contents of the subject with the materials indicated by the teacher for this purpose. As far as possible, it will ensure that the examination consists of questions in different response formats. The exam will be done individually. |

Personalized attention

| Methodologies | Description |
|---|--|
| Document analysis Case study Mind mapping | Groups of students can count on the help and advice of the teacher in their analysis of documentary sources, their case study and the preparation of their conceptual map. This assistance will be developed during the hours of tutorials at the teacher's office. Student groups will notify their tutorials in advance by sending an email. |

Assessment

| Methodologies | Competencies / Results | Description | Qualification |
|---------------------------------|--|---|---------------|
| Mixed objective/subjective test | A1 A3 A8 A24 A35 A36 B6 B21 B27 C1 C6 C8 | On the official date for both opportunities in June and July, the student must submit an exam on the contents of the subject, both those taught in the theoretical lessons and readings indicated by the teacher. Students who opt for continuous assessment as well as those who opt for non-continuous assessment may take the exam. For the students in the continuous evaluation, the score in the exam will suppose the 40 percent of its score in the subject. Students must reach at least 20 points (out of a maximum of 40 possible) in the exam in order to pass the course. Students in the non-continuous assessment must obtain at least three quarters of the maximum exam score to pass the subject (at least 30 points out of the possible maximum of 40) on the June exam. All students who attend the July opportunity, whether they chose one kind of evaluation or another, must obtain at least 30 points out of the 40 possible maximums in the exam to pass the subject. | 40 |



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| Document analysis | A1 A8 A13 A14 A15 A16 A17 A21 A24 B3 B4 B5 B6 B7 B12 C1 C3 | The analysis of documentary sources is one of the activities that constitute the practical part of the subject. Students must submit a report of their research on secondary data on the date established for this purpose and present at the classroom. The grade obtained by the students in the analysis of the documentary sources will represent 15 percent of their final score in the subject. It is an essential condition in order to pass the subject to obtain more than 5 points (of the maximum of 15 possible) in the analysis of documentary sources. This activity is only required for those students who opt for continuous assessment. | 15 |
| Oral presentation | A24 A35 B5 B6 B12 C1 | In the established dates, the students organized in groups must present to the rest of the students and the professor the main results both of the analysis of the documentary sources and of their case study. The score in the two exhibitions at the classroom will entail 10 percent of the final grade of the subject. Another of the basic conditions to pass the course is that students get at least 4 points (out of a possible 10) at the exhibitions. This activity is only required for those students who opt for continuous assessment. | 10 |
| Case study | A1 A3 A8 A24 A35 A36 B3 B4 B6 B12 B13 B21 B27 C1 C6 | The case study is also part of the practices in the subject. Students organized in groups of two or three people will submit a report of their research on the date established for this purpose and must present it at the classroom. The grade obtained by the students in their case study entail 25 percent of their final grade in the subject. In order for students to pass the course, it is essential that they obtain at least 10 points (out of a possible maximum of 25) in their case study. This activity is only required for those students who opt for continuous assessment. | 25 |
| Mind mapping | A3 A8 A24 A35 A36 B6 B21 B27 C1 C6 | The third report that students must submit is the preparation of a summary and a conceptual map related to a text that will be provided. The evaluation of the report that the students will elaborate will suppose a 10 percent of its final score. To pass the subject, the student must obtain a grade, at least, equal to 4 points (in a maximum of 10 possible) in their conceptual map. This activity is only required for those students who opt for continuous assessment. | 10 |

Assessment comments

Before the maximum date established, the student must communicate by e-mail to the teacher if they choose the continuous assessment or the non-continuous evaluation. It will be considered that all students who have not communicated their option electronically before the established deadline opt for the non-continuous evaluation. In some of the lessons given by the teacher or the students' exhibition a signature sheet will be passed to control the attendance of the students. Students who opt for continuous assessment must attend at least 70% of the lessons in which the signature sheet were passed. The professor reserves the right to introduce additional conditions throughout the course to those indicated in this guide, as long as they do not contradict what was expressed in it.

Sources of information



| | |
|-----------------------------|---|
| <p>Basic</p> | <ul style="list-style-type: none"> - EHRENREICH, B. (2018). Natural Causes. Life, Death, and the Illusion of Control. Granta Books - BLASCO, HERNÁNDEZ, T. y RODRÍGUEZ REINADO, C. (2017). La salud integral. Madrid: Instituto de Salud Carlos III y La Catarata - PORTER, D. (1999). Health, Civilization and the State. A History of Public Health from Ancient to Modern Times. Londres: Routledge - SUJATHA, V. (2014). Sociology of Health and Medicine. New Perspectives. Oxford: Oxford University Press - WHITE, K. (2006). The SAGE Dictionary of Health and Society. Londres: Sage - BARRY, A.-M. y YUILL, C. (2016). Understanding the Sociology of Health. Londres: Sage - TAYLOR, S. y FIELD, D. (2007). Sociology of Health and Health Care. Oxford: Blackwell Publishing - HELMAN, C. G. (2007). Culture, Health, and Illness. Boca Ratón: CRC Press - COCKERHAM, W. C. (1992). Medical Sociology. Englewood Cliffs: Prentice Press - ROGERS, A. y PILGRIM, D. (2014). A Sociology of Mental Health and Illness. Maidenhead: Mc-Graw-Hill - Open University Press - CONRAD, P. (ed.) (2009). The Sociology of Health and Illness. Critical Perspectives. Nueva York: Worth Publishers - MARMOT, M. y WILKINSON, R. G. (eds.) (2006). Social Determinants of Health. Oxford: Oxford University Press - BROGNA, P. (comp.) (2009). Visiones y revisiones de la discapacidad. México: Fondo de Cultura Económica - MARKS, D. (1999). Disability. Controversial Debates and Psychosocial Perspectives. Londres: Routledge - FOX, R. C. (1989). The Sociology of Medicine. A Participant Observer's View. Englewood Cliffs: Prentice Press - FOUCAULT, M. (1963). El nacimiento de la clínica: una arqueología de la mirada médica. México: Siglo XXI - FLECK, L. (1935). La génesis y el desarrollo de un hecho científico. Madrid: Alianza Editorial - BARTON, L. (comp.) (1998). Discapacidad y sociedad. Madrid: Fundación Paideia-Ediciones Morata - WHITE, K. (2017). An Introduction to the Sociology of Health and Illness. Londres: Sage - ANDREU, J. et al. (2003). Sociología de la discapacidad. Exclusión e inclusión social de los discapacitados. Revista del Ministerio de Trabajo y Asuntos Sociales 48;77-107 - BOWLING, A. (1994). La medida de la salud; revisión de las escalas de medida en la calidad de vida. Barcelona: Masson - MARTINEZ, L. et al. (2005). Exclusión social y discapacidad. Madrid: Universidad Pontificia de Comillas/Fundación BBVA - RODRÍGUEZ, J.A. y DE MIGUEL, J.M. (1999). Salud y poder. Madrid: CIS <p>Documentación electrónica Documentación del Ministerio de Sanidad, Servicios sociales y de igualdad Encuestas de Salud de las comunidades autónomas en la red</p> <p>http://www.msssi.gob.es/estadEstudios/estadisticas/encuestaNacional/encuestasCCAA.htm Encuesta Europea de salud en España 2014: Estado de salud. Distribución porcentual</p> <p>http://www.msssi.gob.es/estadEstudios/estadisticas/EncuestaEuropea/pdf/MODULO1RELATIVOweb.pdf Determinantes de Salud. Distribución porcentual</p> <p>http://www.msssi.gob.es/estadEstudios/estadisticas/EncuestaEuropea/pdf/MODULO3RELATIVOweb.pdf Documentación normativa Comisión de las Comunidades Europeas: Libro Blanco. Juntos por la Salud: un planteamiento estratégico para la UE (2008-2013). COM (2007) 630 final. Bruselas, 23.10.2007 DOUE L 86/11-13, 21.3.2014 ES. Anexo 1. Prioridades Temáticas [en Salud] Ley General 33/2011, de 4 de octubre, de Salud Pública. RD Ley 16/2012, de 20 de abril, de medidas urgentes para garantizar la sostenibilidad del Sistema Nacional de Salud y mejorar la calidad y la seguridad de las prestaciones.</p> |
| <p>Complementary</p> | |

Recommendations

Subjects that it is recommended to have taken before



Sociological Theory 1/615G01110

Sociological Theory 2/615G01203

Multivariate Analysis of Social Data/615G01206

Subjects that are recommended to be taken simultaneously

Subjects that continue the syllabus

Other comments

(*)The teaching guide is the document in which the URV publishes the information about all its courses. It is a public document and cannot be modified. Only in exceptional cases can it be revised by the competent agent or duly revised so that it is in line with current legislation.