

MEDICAL SOCIOLOGY NEWSLETTER

FALL 2011



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NOTES FROM THE NEW CHAIR BY ERIC R. WRIGHT

Dear Colleagues,

What an extraordinary time to be a medical sociologist! The debate over health reform and the Affordable Care Act seems like it will never end. While many states are actively or passively opposing reform, the federal administration, a handful of states, and many healthcare providers are moving forward rapidly to implement a wide variety of reform initiatives. At the same time, the sluggish recovery from the "Great Recession," persistently high unemployment, and the restructuring of our global economy are clearly taking a major toll on people's physical and mental health both in the United States and around the world. And, just a few weeks ago, David Williams eloquently and passionately reminded us in his Reeder Lecture that these trends and social conditions are particularly hard on racial/ethnic minorities and other socioeconomically disadvantaged groups.

While it is easy to get discouraged in times like these, they also constitute a professional "call to arms" for sociology as a field and for medical sociologists in particular. Difficult social conditions invariably

provide important opportunities to better understand the social determinants of health and illness, the strengths and weaknesses of healthcare systems, and how health and illness shape the fabric and functioning of communities and societies. Our professional challenge this year will be to cultivate a better public understanding of the dynamic changes occurring and the impact they are having on people in different walks of life. We also must stand ready to apply what we are learning and contribute new ideas for potential solutions to the problems we face as a society.

The 2012 annual meeting of the ASA will offer another exciting opportunity to share and discuss our collective work. The meetings will be held from August 17th through 20th in Denver, Colorado and will be organized around the general theme of: "Real Utopias: Emancipatory Projects, Institutional Designs, Possible Futures." As you make your travel plans, keep in mind that our official "Section Day" will be on the last day of the meetings: Monday, August 20th. Our annual Business Meeting, Awards Ceremony, and Reeder Lecture as well as the

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REMINDERS

- **MSN Winter deadline**
January 6, 2012
- **2012 ASA Annual Meeting**
August 17-20, Denver,
Colorado
- **2013 ASA Annual Meeting**
August 10-13, New York
City

GOOD NEWS!! We have exceeded our target membership of 1,000, with 1,034 members! Keep signing up students & colleagues!

MEDICAL SOCIOLOGY SECTION 2010 ELECTION RESULTS

Congratulations to our incoming Section Officers and Council members, and thanks again to all who were willing to run for office.

Chair elect: Allan Horwitz, Rutgers University

Council member: Richard Miech, University of Colorado-Denver

Teaching Committee Chair: Kate Strully, SUNY-Albany

Career Committee Chair: William Cockerham, University of Alabama-Birmingham

Publications Committee Chair: Kristin Barker, Oregon State University

Nominations Committee Chair: Laura Carpenter, Vanderbilt University

Nominations Committee Members: Richard Carpiano, University of British Columbia & Michelle Frisco, Pennsylvania State University

Nominations Committee, Student Member: Kathy Lin, University of Michigan

Student Council Representative: Lianna Hart, University of California-Los Angeles

NOTES FROM THE NEW CHAIR

(Continued from page 1)

majority of our sessions will be scheduled for that day.

Thanks to many Section members' suggestions and colleagues willing to serve as session organizers, we have an exciting program planned for Denver. In addition to a special invited panel to highlight "Sociological Perspectives on the Implementation and Impact of the Affordable Care Act," we invite members to submit papers for sessions on: "The Causes and Consequences Illness-Related Stigma"; "Complex Systems in Health and Healthcare Delivery"; "Health Disparities: A Persistent Sociological and Public Health Challenge"; "Social Networks, Social Support, and Health Across the Life Span"; and, "Big Pharma, Big Medicine, and Technoscience in the Twenty-first Century."

Finally, we are planning a lively and robust roundtable session that will offer additional outlets to talk about many other important topics. If you are interested in submitting a paper or participating in the program, I encourage you to contact the organizers of these sessions (see pages 3-4) and check for more details in the official "Call for Papers" that will be distributed by the ASA in October

(online at: <http://www.asanet.org/AM2012/index.cfm>). Most important, be sure to submit your papers through the ASA's online submission system before 3pm EST on January 11th, 2012!

On behalf of the entire Section, I would like to congratulate Stefan Timmermans for his exceptional leadership as Section Chair this past year. I also want to extend special thanks to Carol Boyer who completed her two year term of office as Secretary Treasurer, to Robin Moremen who served the Section for seven years as Newsletter Editor, and to the other Section Council members who completed their service this past August. We are one of the largest and most successful Sections within the ASA because we have such an extensive and vibrant network of truly extraordinary colleagues.

I am deeply honored and humbled to have been elected Section Chair, and I am looking forward to serving you this coming year. In the meantime, we will be in touch through the Section listserv and the newsletter. Feel free to contact me anytime via email: ewright@iupui.edu.

Warm regards,
Eric R. Wright

2012 ASA PROGRAM: SUBMIT YOUR PAPERS!

1. Sociological Perspectives on the Implementation and Impact of the Affordable Care Act: The Affordable Care Act (ACA) was passed by Congress and signed into law by President Obama in March 2010. Despite vigorous and persistent political debate and even calls for its repeal, federal and state government officials are moving forward with implementing the ACA. The law calls for fundamental structural changes to the U.S. healthcare system that will have a lasting impact, even if key components are changed or repealed. In this session, medical sociologists are invited to offer their critical perspective and analyses of the implementation and/or impact of the ACA. **Session Organizer:** Eric R. Wright, Indiana University-Purdue University Indianapolis, ewright@iupui.edu

2. The Causes and Consequences of Illness-Related Stigma: Illness-related stigma has been the focus of many outstanding theoretical and empirical contributions in medical sociology. In this session, we seek to highlight emerging trends in stigma research and theory and encourage medical sociologists to submit current work on the causes and/or consequences of illness-related stigma. Of particular interest are manuscripts that extend existing theoretical or methodological approaches or highlight innovative applications of stigma theory to new conditions, communities, or populations. **Session Organizer:** Jo Phelan, Columbia University, jcp13@mail.cumc.columbia.edu

3. Complex Systems in Health and Healthcare Delivery: Sociologists have always been aware of the multifaceted forces that shape health, illness, disease and treatment/healing systems. The awareness of how multiple, large systems interact together to affect these outcomes has more recently been taken up across the landscape of the social and medical sciences as well as public health. This session invites papers that bring a sociological approach to understanding and bringing theory/data to bear on the growing recognition that most major threats to health and health care – whether cardiovascular disease, pulmonary disease, cancer,

diabetes, mental health problems, HIV, substance abuse, or issues of access, institutional stigma, reform, the nursing shortage, etc. – arise from an intricate mix of social factors in and of themselves as well as their interaction with other types of factors (e.g., economic, biological, medical). The targeting of “the big picture” combines some aspects of dynamics, mechanisms and context, calling for creative thinking, and design/analysis and drawing the best from qualitative and quantitative methods. Papers are welcome that examine multiple levels of analysis (e.g., from cells to society) and/or the behavior of systems as a whole and/or over time. **Session Organizer:** Bernice Pescosolido, Indiana University, pescosol@indiana.edu

4. Health Disparities: A Persistent Sociological and Public Health Challenge: Health disparities in health status, healthcare utilization, and clinical outcomes have been documented by race, ethnicity, gender, sexual orientation, and social class both in the U.S. and other societies. For this session, papers are sought that extend scientific understanding of the sociological forces that lie behind persistent or emerging disparities as well as research that examines social factors and/or public policy initiatives designed to reduce or eliminate disparities. **Session Organizers:** Christy Erving, Indiana University Bloomington, cerving@indiana.edu & Pamela Jackson, Indiana University Bloomington, pjackson@indiana.edu

5. Social Networks, Social Support, and Health Across the Life Span: We invite submission of papers that examine relationships between health (e.g., physical or mental health outcomes, health behaviors, health beliefs, health care utilization, etc.) and social support, social networks, or social integration, broadly defined. We welcome papers that use quantitative, qualitative, or mixed methods to examine how positive and/or negative social relationships impact health, as well as those investigating the social consequences of illness.

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2012 ASA PROGRAM: SUBMIT YOUR PAPERS!

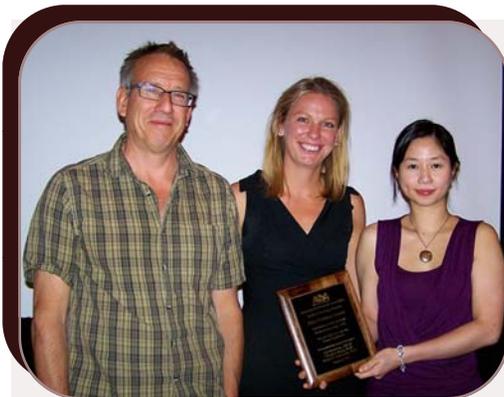
(Continued from page 3)

We are particularly interested in papers that examine social processes longitudinally or from a developmental or life course perspective. **Session Organizer:** Brea Perry, University of Kentucky, breaperry@uky.edu

6. Big Pharma, Big Medicine, and Technoscience in the Twenty-first Century: With few exceptions, sociologists have only recently paid attention to the pharmaceutical industry and its role in the biomedical complex. In the past decade, the concept of pharmaceuticalization began to take shape alongside the development of biomedicalization. Into this second decade of the 21st century, we explore and

highlight the various ways in which medical sociology and science and technology studies examine the role of pharmaceuticalization, biomedicalization and medicalization. In this session, we consider both empirical and theoretical approaches for understanding these dynamics. **Session Organizers:** Anne Figert, Loyola University Chicago, afigert@luc.edu & Susan Bell, Bowdoin College, sbell@bowdoin.edu

7. Medical Sociology Section Roundtables: This session will include small roundtable discussions of papers on a wide-range of topics of interest to the field. **Session Organizer:** Neale Chumbler, Indiana University-Purdue University Indianapolis, nchumble@iupui.edu



Liu, King & Bearman Win 2011 Freidson Award

The Freidson Award is given every other year to an outstanding journal article that has a major impact in the field of medical sociology. Articles published during 2009 and 2010 were considered for this award. The Freidson Award Committee consisted of Stefan Timmermans, Karen Lutfey, Brea Perry, and Peggy Thoits (chair). Seventeen journal articles were nominated and read carefully by the committee. The Freidson Award this year was given to Ka-Yuet Liu, Marissa King, and Peter Bearman, the authors of an article published in 2010, in *AJS*, titled "Social Influence and the Autism Epidemic." In this article, Ka Liu, Marissa

King, and Peter Bearman address a major epidemiological puzzle: What explains the dramatic rise in incidence rates of autism during the past 20 years? They take advantage of California's careful record keeping on new births in the state and the addresses of children who have been diagnosed with autism. They show that children who live in very close proximity to a child who was previously diagnosed with autism are significantly more likely to be diagnosed with autism than similar children who live further distances away. They argue that this spatial clustering of autism cases could be due to four possible causes: residential sorting, exposure to a common environmental toxin, the diffusion of a virus, or the spread of information about autism through local social networks. With thoughtful, systematic, and highly sophisticated analyses they test and disconfirm the first three causal possibilities and provide strong evidence that the transmission of information through interpersonal networks helped to explain the increasing prevalence, spatial clustering, and decreasing age of autism diagnosis. This is a compelling article that highlights the critical role that social networks play in shaping individuals' health decisions as well as in the emergence of epidemics. Nominators and committee members described it as "innovative," "rigorous," "ground-breaking," "Durkheimian," and "a classical piece of medical sociology...just the kind of article that Eliot Freidson would have liked." Congratulations to Ka, Melissa, and Peter for a fine, fine article! ~Peggy Thoits



Davenport Wins 2011 Simmons Award

Nancy Davenport is this year's winner of the Roberta G. Simmons Outstanding Dissertation in Medical Sociology Award. Nancy's dissertation, written at Columbia University, is entitled, "Medical Residents' Use of Narrative Templates in Storytelling and Diagnosis." The committee found Davenport's analysis to be both deeply engaged with medical sociologists' history of looking at the socialization of medical practitioners, and strikingly innovative in its development of new understandings of narratives, and their consequences. As with other pivotally important work in our field, it offers a "gestalt switch," helping us to realize that what we thought we knew about "problem patients" is not quite right, and providing a solid empirical basis for improved communication between providers, patients, and families.

Adrienne Frech's dissertation, entitled "Pathways to Adulthood and Healthy Behavior Trajectories," was awarded an honorable mention. The committee was impressed by Frech's innovative perspective and insightful use of a life course approach, and its potential to make an impact on how we think about the determinants of health. It was deeply inspiring to read the excellent scholarship being done by new PhDs in our field; it gave me great hope for the future of medical sociology. I thank Kerry Dobransky, Stefan Timmermans, and Dawn Upchurch for serving on the selection committee.

~Sara Shostak



Hernandez is the 2011 Louise Johnson Scholar

Elaine Hernandez is this year's winner of the Louise Johnson Scholar Award, for her paper "The Unintended Consequences of Biomedical Advances: Socioeconomic Gradients in Health Behaviors Among Pregnant Women." Hernandez adds to theoretical conversations by pointing out that social relationships play an integral role in the creation of social gradients in health in the face of technological innovation, providing people with new health information and influencing their adoption of health behaviors— here omega-3 fatty acid supplementation, vitamin D supplementation and H1N1 vaccination among women who were pregnant for the first time. Her mixed method study reveals that social network processes differed by education level, and mediated the association between education and decisions about health behaviors. For example, pregnant women with higher levels of education

were more likely to discuss the H1N1 vaccine with people who agreed that it is acceptable to receive the vaccine during pregnancy, and they were more likely to be vaccinated. Dr. Hernandez completed this work under the guidance of John Robert Warren and others at the University of Minnesota and is now an F32 NICHD Post-doctoral Fellow in the Population Research Center at the University of Texas at Austin. The committee was led by Dawn Upchurch and also benefited from the insights of Stefan Timmermans, Sarah Shostak, and last year's winner, Corinne Reczek.

~ Dawn Upchurch

HONORS FOR SERVICE TO THE ASA MEDICAL SOCIOLOGY SECTION AWARDED AT 2011 ANNUAL MEETING



Janet Hankin

Honored for her exceptional service as the organizer and principal editor of the special issue of JHSB in honor of the 50th anniversary of the Section and for her service, in multiple other roles, to the Medical Sociology Section



Robin Moreman

Honored for her exceptional service as ASA Medical Sociology Section Newsletter Editor for the past seven years

BOOK RAFFLE AT ASA 2011 MEETING RAISES MONEY FOR REEDER AND SIMMONS AWARDS

The Section book raffle raised \$250 for the Leo G. Reeder and Roberta G. Simmons Awards this year. Thirteen individuals and publishers donated thirty-two books which were raffled off at the Medical Sociology Section Business Meeting, August 22, 2011 at the ASA meetings in Las Vegas, Nevada. The success of the raffle was made possible only through the generous donations of the following publishers and individuals: *University of Alberta Press, Springer, National Academies Press, Yale University Press, Ashgate Publishing Limited, Paradigm Publishers, Sinai Urban Health Institute, Sage Publications, Wiley/Jossey-Bass, Corrine Squire, Carol Boyer, Adele E. Clarke, and Allan Horowitz*. A special thank you to Robin Moreman, Sarah Burgard, Robyn Lewis Brown and Christy Erving for their help with selling raffle tickets, and to our donors for making this year's raffle a success. We could not have done it without you and we sincerely hope that you will contribute again next year. I look forward to another successful year ahead!

~Susan Stockdale

Post Notices on the ASA Medical Sociology Section List

<MEDSOC@LISTSERV.BROWN.EDU>

Visit our website at <http://dept.kent.edu/sociology/asamedsoc/>

2012 ELIOT FREIDSON OUTSTANDING PUBLICATION AWARD: SEEKING BOOK NOMINATIONS

Nominations are due by February 15, 2012

The Freidson Award is given in alternate years to a book or journal article published in the preceding two years that has had a major impact on the field of medical sociology. The 2012 award will be given to a scholarly book published in either 2010 or 2011. The book may deal with any topic in medical sociology, broadly defined. Co-authored books are appropriate to nominate; edited volumes are not eligible. Self-nominations are permissible and encouraged. Publishers may not make nominations. When making a nomination, please indicate (however briefly) the reason for the nomination. You do not need to send a copy of the book.

Nomination letters can be sent to: Kristin K. Barker, Associate Professor of Sociology, School of Public Policy, Oregon State University, Fairbanks Hall, Corvallis, Oregon 97330. Alternatively, nomination emails can be sent to Kristin.barker@oregonstate.edu with the subject line: 2012 Freidson Award Nomination.

SEEKING NOMINATIONS FOR 2012 SIMMONS AWARD

Deadline for receipt of all submission materials is March 1, 2012

Nominations are being accepted for the 2012 Roberta G. Simmons Outstanding Dissertation in Medical Sociology Award. The award is given each year by the Medical Sociology section. Self-nominations are acceptable. Eligible candidates must have defended their doctoral dissertations within two academic years prior to the annual meeting at which the award is made. To be considered for the 2012 award, the candidate should submit an article-length paper (sole-authored), not to exceed 35 double-spaced pages (11- or 12-point font), inclusive of references. This paper may have been previously published, or may be in press or under review. A letter of recommendation from a faculty mentor familiar with the candidate's work is also required. Electronic submission of the paper (MS Word or PDF) is required; please include the words "Simmons Award" in the subject heading. The letter of recommendation should be sent directly by the recommender as an email attachment (MS Word or PDF). The awardee will receive a \$750 travel grant to attend the ASA meetings and an award certificate, and will attend the Reeder dinner as a guest of the Medical Sociology section. Please send all materials to: Richard Miech at richard.miech@ucdenver.edu.

POSTDOCTORAL OPPORTUNITY: The Institute for Health, Health Care Policy, and Aging Research, directed by David Mechanic, offers postdoctoral opportunities for research and training in mental health research. The National Institute of Mental Health provides funding for the program. Trainee stipends range from \$38,496 to \$53,112 per year, depending on years since completion of the doctorate. The major foci of the program are mental health services research and psychosocial factors in mental health and illness. Participating disciplines include sociology, psychology, psychiatry, history, economics, anthropology, public policy, and social work. Two-year appointments starting June 2012 are available. Further information on the Institute and training program faculty is available at: <http://www.ihcpar.rutgers.edu>.

The program seeks to promote diverse approaches to mental health research and encourages applicants from backgrounds underrepresented in mental health services research and from persons with disabilities who can bring varying perspectives to mental health issues. Applicants must have a Ph.D. in hand by June 30, 2012 and should send a CV, statement of research interests, and three letters of reference by April 1, 2012.

Only citizens, non-citizen nationals, or persons lawfully admitted for permanent residence are eligible for these positions. For further information, email Allan Horwitz: ahorwitz@sas.rutgers.edu.

IN MEMORIAM: HOWARD B. KAPLAN



Howard B. Kaplan passed away on October 9th, 2011, in Houston, Texas. Howard is survived by his wife, Diane; his son Samuel Kaplan and his wife, Jenny Strimel; his daughter, Rachel Kaplan, and her husband, Jeremy Pienik; and by his grandsons, Calvin and Cormac Kaplan.

At the time of his death, Howard was Distinguished Professor of Sociology at Texas A&M University, the Mary Thomas Marshall Professor of Liberal Arts, a Regents' Professor, the recipient of the Association of Former Students Faculty Distinguished Achievement Award in Research, and the Director of the Laboratory of the Studies of Social Deviance of the Department of Sociology.

For over 50 years, Howard Kaplan's research has had an indelible impact on the field of medical sociology and the sociology of mental health. He was regarded internationally as a leader in the field and as a strong advocate for the importance of sociological research on health issues and social psychological explorations of mental health.

Howard Kaplan's contributions to research in medical sociology are exceptional. His early collaboration with Sam Bloom in the 1960s generated a series of articles that helped to establish a sociological foundation for the study of mental illness. In a series of papers in *Social Forces* and *Psychosomatic Medicine*, Kaplan and his colleagues provided strong theoretical and empirical examples of the ways in which a sociological perspective could

inform our understanding of social processes among individuals with mental illness.

In the 1970s, Howard published a series of articles and a book that in retrospect created the scientific and conceptual foundation for his outstanding career. Kaplan's work on self-attitudes, particularly on self-derogation, opened a new and exciting line of inquiry into social psychological processes that could be used to explain suicide, alcohol use and abuse, substance use, and psychological distress. With the publication of Self-Attitudes and Deviant Behavior, Kaplan's general theory of deviant behavior became widely known as a carefully constructed theoretical perspective supported by strong empirical tests. Over the next two decades, Howard published an astonishing number of papers that demonstrated how broadly one could apply concepts concerning self-attitudes and self-derogation to a host of issues in medical sociology. This work has had a lasting impact on medical sociology.

In the 1980s, Howard Kaplan was also responsible for providing the impetus for the explosion of research on the stress process paradigm. As Editor of the *Journal of Health and Social Behavior* from 1979-1981, he was responsible for the publication of a formative series of articles on the stress process model. In 1983, he edited Psychosocial Stress: Trends in Theory and Research which has become a classic book in medical sociology. For many sociologists, this book stimulated their initial interest in stress processes and illness outcomes.

Howard Kaplan's program of research was often at the leading edge of medical sociology. He was one of the first sociologists to begin investigations of immune response and HIV infection. His work over the last 15 years has shifted attention to the value of longitudinal research in medical sociology. His

IN MEMORIUM: HOWARD B. KAPLAN

long-term follow-up studies have generated a wealth of sociological knowledge on life course and developmental issues. His work also demonstrates the important interplay between medical sociology and studies of deviant behavior. It is a model for those who wish to synthesize research in the sociology of health with work on delinquency and drug use.

In recent years, Howard assumed leadership in facilitating the publication of longitudinal research. He was a constant advocate of the value of longitudinal studies that can assist us in understanding how life course and developmental processes influence people's lives and their health. Most recently, he served as General Editor of the Series of Handbooks of Sociology for Springer Press. Howard also had a special role to play in the development of *Society and Mental Health*, the journal of the Section on the Sociology of Mental Health. For more than a decade, Howard advocated that the Section develop its own journal and encouraged many of us to take a leadership role in its creation. These efforts have served to highlight the scientific accomplishments of sociologists in a wide variety of areas of specialization. Howard's unrelenting advocacy for sociological research is a service to us all.

The corpus of Howard Kaplan's work is impressive. He published well over 100 articles in peer-reviewed journals that are central to the sociology of mental health and medical sociology. He authored an additional 35 chapters in books. He was the editor of four influential books – two on psychosocial stress, one on social psychology, and one in delinquency. He also wrote five important books that are central to the study of social psychology and health outcomes. This record speaks to Howard's scientific drive and to his enormous contribution to sociological knowledge over fifty years.

Howard Kaplan also served the discipline well. As Editor of the *JHSB* from 1979-1981, his stewardship is associated with the ascendancy of the journal in terms of its scientific impact (cf. Johnson and Wolinsky, 1990, *JHSB*). He has also served two terms as Associate Editor of *JHSB*, one term on the editorial board of the *Social Psychology Quarterly*, and a term as Associate Editor of *Society and Mental Health*. He was also a frequent member of various NIDA research review committees. In recognition of his many contributions to medical sociology, Howard was awarded the Leo G. Reeder Award in 2006.

Howard was a fine mentor and engaging teacher of sociology. He trained a number of doctoral students who have pursued excellent careers in sociology. His students in graduate school and in his undergraduate courses have often expressed their appreciation of his teaching and his fine mentorship.

For those who were lucky enough to know Howard, there was much more than his outstanding scholarship. Howard was supportive of our careers and an advocate for sociological research. He constantly encouraged us in our programs of research and helped to advance the discipline. We will miss Howard's wry sense of humor and winning smile. He enriched every ASA Annual Meeting with his presence. We have lost a fine scholar and teacher and a very good friend.

William R. Avison

The University of Western Ontario

Carol S. Ansehensel

University of California, Los Angeles

HEALTH POLICY**BY SYDNEY HALPERN****Medicare in the Crosshairs
(As of September 16th)**

Developments in Washington in recent weeks signal that Medicare is soon likely to undergo cuts. The debt-ceiling legislation enacted in early August, mandates an automatic 2% reduction in reimbursements to Medicare providers, in addition to significant reductions in military spending. This will happen unless the House-Senate Committee on Deficit Reduction—the “super committee”—comes up with a politically viable alternative that spares Medicare payments. Pressures on Medicare rose with Obama’s statement, in his September 9th speech for the American’s Job Act, that the Medicare expenditures are unsustainable. In his words, “with an aging population and rising health care costs, we are spending too fast to sustain the program. And if we don’t gradually reform the system while protecting current beneficiaries, it won’t be there when future retirees need it. We have to reform Medicare to strengthen it.”

Precisely what shape will such reforms take? The administration floated one possibility at the end of the deficit-reduction debate: raise the age of Medicare eligibility from 65 to 67. Another approach would target Medicare recipients in high income brackets, requiring affluent Americans to pay more for Medicare benefits. Still another would have recipients from all income brackets pay more

through the imposition of new co-payments or reductions in coverage. Alternatively, policy makers could place a greater burden on Medicare providers by, for example, maintaining the 2% reduction in payments under the deficit–reduction default or by insisting on cuts that are even higher.

In early September, the Democratic staff of the House Ways and Means Committee circulated a list of potential cuts to Medicare to be used for generating internal discussion among Democrats and preparing them for measures that might be introduced by the “super committee.” A rise in the age of Medicare eligibility is high on the list. Other policy options listed include: (1) requiring rebates from pharmaceutical companies for some drugs covered by Medicare; (2) freezing for two years reimbursements rates to providers of skilled nursing, home health care, inpatient rehabilitation and long-term hospital care; (3) requiring patient co-payments for home health care and for the first 20 days of a skilled-nursing stay; and (4) cutting payments to academic medical centers for graduate medical education. And the list goes on.

Policy makers may well extract savings from both Medicare recipients and providers. But no one should be cheered if the brunt of the cuts is carried by providers. Such cuts are bound to have serious consequences for Americans who rely on Medicare services.



Psychiatric Epidemiology Program - Columbia University Psychiatric Epidemiology Training Program announces openings for pre- and postdoctoral fellows beginning September 2012. The program provides social scientists, epidemiologists, psychologists, and psychiatrists with research skills in psychiatric epidemiology. Training involves coursework in substantive issues and research methods, and participation in an affiliated research unit. Postdoctoral stipends range from \$38,496 to \$53,112, depending on years of experience. Predoctoral stipends are \$21,600. Application deadline: December 01, 2011. Contact: Training Coordinator, Columbia University, Mailman School of Public Health, 722 West 168th Street, Room 720-B, New York, NY 10032; e-mail: PET@columbia.edu. Columbia University is an equal opportunity employer.

CAREER & EMPLOYMENT**BY WILLIAM COCKERHAM**

Having just returned from interviewing scores of job applicants at the Las Vegas ASA meeting, I thought I would have an initial column based on that experience and try to offer some helpful tips to people applying for initial positions. Usually more senior applicants ask for private meetings, talk to their friends in the department to get background information, or just send in their CV (associate professors and above is an entirely different job market: fewer jobs, past performance counts more than potential, etc.). So this column is focused on current grad students who are looking for their first job in a sociology department or others seeking junior positions.

Tip #1. Have a personality.

Of course, everybody has a personality even if it is bad. But in an interview, be pleasantly personable. Don't let the conversation lag and force the interviewers to fill in the conversational dead space. This is because the potential employer not only wants to hire someone who makes a colleague (can hold a conversation), but who will be good in the classroom and be liked by their students for their ability to teach sociology. As the conversation goes on, the employer is going to try to ascertain from the candidate's manner of self-presentation, if he or she will be effective in the classroom. If you have an unfortunate personality and a lackluster CV, you won't make it.

What if you have an unfortunate personality and an outstanding CV (great pubs, super references, millions in grant money, your last name is Durkheim who was your great-grandfather, etc.)? That makes the decision to bypass you harder, but don't take a chance. After all, sociology departments are communities of colleagues and, even though they do not always agree or get along well with each other, your potential employer needs to think that you will be a good colleague. My best advice is to relax and enjoy the interview as it is a chance to meet new people and exchange ideas. I enjoyed several of the interviews I had at ASA. By the way, none of you had an unfortunate personality there (in case you think I am speaking of you), but I have

seen it elsewhere and the individuals did not get the job despite their CV.

Tip #2. Know something about the department

Does it help to know something about the Department interviewing you? It does. You should go online and see who is there, what specialties are represented, and know something about their publications and work. It shows you have done your homework on the department, are interested enough in them to know something about them, and can talk about what you bring to them and where you would fit in.

Tip #3. Pay attention to your references

Your references are important. It is assumed that your references will all give you high marks. It then becomes significant with respect to just who your references are. Although grad students often are friendly with assistant professors who are more like them than Professor Grumpy down the hall who is always busy writing his or her magnum opus, the latter may be nationally known for outstanding publications and that person's support is going to be exceedingly more meaningful as a reference. Letters from assistant professors do not mean much: letters from prominent faculty mean a lot. Get letters from the most prominent people in your department. It also helps if we know the person writing the letter.

What about letters from people outside of sociology? One or two are ok, but your sociology employer wants to know what sociologists think of you. A disaster in the making: three letters, all from assistant professors, with two outside of sociology. Do letters of reference count? Yes, they do; we read them and discuss them, and they are critical when deciding on the final short list.

Tip #4. Publish

Back in the days of yore, when people wrote letters to each other and there were dragons and castles, it was rare that grad students published. Today, it is essential in getting a good job. Why? The reason is most grad

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CAREER & EMPLOYMENT**BY WILLIAM COCKERHAM**

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students today have published, so if the competition in your market is publishing, you need to do the same. Where you publish is also relevant, as the quality of the journal can be important just as it is for faculty. But it is better to publish somewhere than nowhere. A good strategy is to team up with a faculty member you are working for and co-author something. A better strategy is to publish something on your own. But, however, you do it, you need to get it done because your potential employer is going to look closely at this and you can be sure other applicants will have done so.

Tip #5. Don't limit yourself to a region

You may want to only work in a particular part of the country, say the South because it is sunny (and

muggy in the summer) and has mild winters. Big mistake. Buy a coat and apply up north. There are not enough jobs in today's market to be so choosy. Apply for everything, as someday you might get the telephone call about a job. You can always turn down North Pole State, but better to have something than nothing and live at home with your parents and the dog. The last two years have been down years in numbers (translation: a lot of post-docs are going to be applying for the job you want) and while there is some improvement this year, the academic job market is still not where it used to be. The good news is that it seems to be getting better, as universities that managed their money better are beginning to make moves to acquire high-quality faculty. Good luck!

Work and Occupations Call for Papers

Work and Occupations publishes sociological and social scientific research on work, occupations, employment, and labor themes. Articles promote new theoretical insights and theoretically important research findings conducted with qualitative and quantitative methods. Our publications focus substantively on social relationships, identities, culture, power, community, careers, inequality, and labor market outcomes among employees of large organizational workplaces, freelance and self-employed workers, and knowledge and artistic workers in the globalizing new economy. Recent articles and special issues have examined these topics in relation to diverse themes, including entrepreneurship, family, gender, healthcare, immigration, income inequality, labor unions, the professions, public sociology, race and ethnic relations, service workers, and social justice.

Recent special issues:

- The Public Sociology of Labor: International and Historical Perspectives, May 2009, guest edited by Michael Burawoy, University of California-Berkeley
- Workers, Managers, and Customers: Triangles of Power in Work Communities, August 2010, guest edited by Steven Henry Lopez, Ohio State University
- Transformations in Professional and Expert Work: Broadening Horizons and Bridging Divides, August 2011, guest edited by Elizabeth H. Gorman, University of Virginia, and Rebecca L. Sandefur, American Bar Foundation and University of Illinois at Urbana

Prospective authors and reviewers: in order to submit manuscripts for possible publication and to serve as a manuscript reviewer, please "create an account" in the new on-line peer review system at this Work and Occupations website: <https://mc.manuscriptcentral.com/wox>

Dan Cornfield — Editor, Work and Occupations—Professor of Sociology, Vanderbilt University
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TEACHING TIPS

BY KATE STRULLY



“Medical Sociology” Books by Non-Sociologists: Trans-disciplinary Course Readings

One of the great things about Medical Sociology is the breadth of our topic area and the fact that we can demonstrate medical sociological ideas with a range of materials. In the interests of inclusivity and building trans-disciplinary perspectives, I (with the help of several friends and colleagues) have compiled the following list of 10 “medical sociology-esque” books by non-sociologists. These books demonstrate key concepts or issues from Medical Sociology, but are written from outside the standard perspective of the sociology discipline. These readings should be appropriate for an undergraduate course, but will likely also be of interest to graduate students.

Marcia Angell. (2004). *The Truth About Drug Companies: How They Deceive Us and What to Do About It*. New York: Random House.

In this book, Angell (a physician) helps explain why drugs have become so expensive and how “Big Pharma” has grown so large. In the discussion, she illuminates the complex ties between markets, governments, and science.

Allan Brandt. (2007) *Cigarette Century: The Rise, Fall, and Deadly Persistence of the Product That Defined America*. New York: Basic Books.

Brandt (a medical historian) situates individual “choices” about smoking within a deep historical context that takes into account cultural, economic, scientific, and legal struggles.

Steven Johnson. (2006) *The Ghost Map: The Story of London’s Most Terrifying Epidemic and How it Changed Science, Cities, and the Modern World*. New York: Riverhead Books.

Touching on issues of ecology, urban planning, and even the sociology of science, Johnson (a journalist) paints a vivid picture of life and infectious disease in London in the mid-1800s.

Anne Fadiman. (1998) *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and Collision of Two Cultures*. New York: Farrar, Straus and Giroux.

Fadiman (a journalist) chronicles the story of Lia Lee (a young Hmong girl with epilepsy) and the clash between Western and Hmong medical epistemologies. This book helps demonstrate the social and cultural construction of disease.

Rebecca Skloot. (2010) *The Immortal Life of Henrietta Lacks*. New York: Crown Publishers.

This book about remarkable biological specimens used for research purposes without the patient’s consent illustrates institutional racism and discrimination within medical care and research. (Skloot is a journalist.)

Joan Jacobs Brumberg. (1998) *The Body Project: An Intimate History of American Girls*. New York: Vintage Books.

Using a range of sources, including diary excerpts and photos, Brumberg (a social historian) documents historical changes in notions of body, health, and selfhood among American girls. This book introduces several concepts related to bio-social interactions and sociology of the body.

Robert Sapolsky. (2004) *Why Zebras Don’t Get Ulcers: The Acclaimed Guide to Stress, Stress-Related Disease, and Coping*. New York: Henry Holt and Company.

In this book, Sapolsky (a biologist and neurologist) provides a compelling and very-readable discussion of

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TEACHING TIPS**BY KATE STRULLY***(Continued from page 13)*

physiological responses to stress and their links to disease. (I particularly like chapter 17 in which he compares status hierarchies and health gradients in human and non-human primates.)

Paul Farmer. (2001) *Infections and Inequalities: The Modern Plagues*. Berkeley: University of California Press.

Farmer (an anthropologist and physician) writes about disparities in infectious disease between industrialized and non-industrialized nations. He offers important critiques of social science theories and global policies related to public health.

Howard Markel. (1999). *Quarantine! East European Jewish Immigrants and the New York City Epidemics of 1892*. Baltimore: Johns Hopkins Paperbacks.

Markel (a historian) shows how class bias and anti-immigrant sentiment shaped public health responses to epidemics in New York in the late-1800s. He

discusses the dangers of discrimination and stigma when quarantines are used as responses to disease outbreak.

David Mechanic, Lynn B. Rogut, David C. Colby, and James R. Knickman. (eds.) (2005). *Policy Challenges in Modern Health Care*. Piscataway, NJ: Rutgers University Press.

Contributors to this edited volume come from a range to disciplinary backgrounds. This book provides useful framings for interventions and strategies related to a range of issues including socioeconomic disadvantage, obesity, tobacco policy, and insurance gaps.



Send your suggestions for future teaching tips columns to: kstrully@albany.edu

STUDENT NEWS AND VIEWS**BY SONIA BETTEZ AND TENNILLE MARLEY**

We welcome you to a new year of Student News & Views. On a whim we decided to attend the medical sociology business meeting at the ASA in Las Vegas and lo and behold, we are now writing this column! In this issue we want to introduce ourselves and share information that may be useful for medical sociology students.

Our focus for the four columns this year centers on sharing perspectives from students and faculty about how they decided to pursue a PhD in medical sociology, and the rewards and challenges of carry-

ing out that decision. Today we start with our stories and we invite you to help us by sending us yours to: medsocstudentviews@gmail.com.

Sonia's Story

I, Sonia, born in Colombia, South America, came to this country as a young adult. I spent over 20 years working with Latinos and other members of underrepresented populations as a vocational counselor, community organizer, social worker and administrator of social service programs. While the work was rewarding, as time went on it became clear that

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STUDENT NEWS AND VIEWS BY SONIA BETTEZ AND TENNILLE MARLEY

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I wanted to expand my sphere of influence. One day I heard something like this on the radio: “If you are Latino or Native American and are interested in health policy, call this number. The University of New Mexico (UNM) has a program for you.” I wrote the number down and kept thinking about the ad. A couple of days later my partner told me about an ad on the radio that had my name written all over it and gave me the number to call.

The program turned out to be the Robert Wood Johnson Foundation (RWJF) Center for Health Policy at the University of New Mexico. Three years later, I am working on my dissertation. My research focuses on the individuals and systems that have the power to influence the social determinants of health. I look forward to being at the policy table in the near future.

Tennille’s Story

I, Tennille, am a PhD candidate in the department of Sociology and a RWJF Center for Health Policy dissertation fellow. I grew up on the Fort Apache Indian Reservation and I am White Mountain Apache. I have a bachelor of arts in Elementary Education and a Master of Public Health from the University of Arizona. I have worked as an elementary school teacher and worked on public health projects in Native communities. I decided to pursue a PhD because I realized that as long as I didn’t have a more advanced degree, I would be doing work and research determined by someone else. My goal is to conduct research with Native communities that is meaningful, respectful, and community driven. For my dissertation I will examine the relationships among indigenous knowledge, land, local history/historical trauma, and diabetes in a Native American community, using “place” as an anchoring concept.

The Robert Wood Johnson Foundation Fellowship Program

The RWJF Center for Health Policy at UNM was set up in 2007 as a collaboration between the Robert Wood Johnson Foundation and the University of New Mexico. The Center’s mission is to increase the diversity of those with formal training in the fields of economics, political science and sociology who engage in health services and health policy research. Particularly, the Center seeks to become a nationally recognized locus for health policy research that will support work to inform debates at multiple levels.

The Center is dedicated to increasing the diversity of health policy leaders in the social, behavioral and health sciences and nursing. The RWJF Center’s goal is to increase the number of social and health scientists from Latino, American Indian and other racial and ethnic communities underrepresented in these fields. Our nation’s health policy can only be improved through insightful identification of issues, innovative interdisciplinary analysis of solutions and careful evaluation of policy implementation.

Center scholars are trained to help decision-makers develop more effective health policies by offering a broader view of critical issues and expanding the knowledge base for potential solutions. Scholars from underrepresented communities will provide unique observations on our increasingly multicultural society that will enrich analytic frameworks, redefine issues and offer different perspectives. We continue to focus on:

- Conducting research that addresses the many social, political and economic factors that contribute to the inequities we observe in health and health care in our society;

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A PUBLICATION OF THE MEDICAL SOCIOLOGY SECTION OF THE ASA

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STUDENT NEWS AND VIEWS**BY SONIA BETTEZ AND TENNILLE MARLEY**

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- Supporting leadership development activities that encourage interdisciplinary collaboration among scholars in the social, behavioral and health sciences; and
- Building stronger and richer connections with our communities so that they can share their knowledge and teach us how best to improve the health and well being of the individuals living in their environment.

If interested in applying for a fellowship, go to <http://healthpolicy.unm.edu/> and/or call (505) 277-0130, for more information.

Please feel free to contact us if you want more information from two "RWJF veterans". If you know of other programs or opportunities for medical sociologist students please send us the information and we will publish it in this space. And please send your stories to: medsocstudentviews@gmail.com

**SEEKING YOUR
INPUT!****LOOKING TO INTERVIEW
MEDICAL SOCIOLOGISTS**

- ◆ **Whose career do you wish you knew more about?**
- ◆ **Whose new research do you want to hear about before it appears in the journals?**

We are interested in interviewing a variety of prominent and up-and-coming scholars from our discipline. If you have ideas about interviewees for the *Student News and Views*

Column, please contact us at:

medsocstudentviews@gmail.com