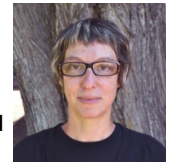


Medical Sociology Newsletter

NOTES FROM THE NEW CHAIR

By Kristin K. Barker kbarker@unm.edu



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I am honored to serve as Chair of the Medical Sociology section for 2015-2016. The section is known for being a vibrant space for sociologists from a variety of professional settings, collectively pursuing a broad range of research agendas. I am proud to be aligned with our section's ecumenical scholarly commitments.

Thanks to the ongoing service of many of our members, the Medical Sociology section is in very good standing. I would like to thank outgoing Chair Anne Figert and Past-Chair Susan Bell for their prudent but fearless leadership over the last few years. I would also like to acknowledge and thank outgoing Secretary-Treasurer Karen Lutfey, and outgoing Council members Kathy Charmaz, Brea Louise Perry, Jennifer Reich, Patricia P. Rieker, Sara Shostak and Mieke Beth Thomeer. As these members step down from leadership, we congratulate the section's Chair-Elect Debra Umberson, incoming Secretary-Treasurer Janet Shim, and incoming Council members Rene Almeling, Rachel Best, Tony N. Brown, William Cockerham, Taylor Hargrove, and Laura Senier. I look forward to working with this impressive collection of talent over the course of the year.

One of the clearest indicators of the health of our section is our membership numbers. According to the latest counts, we have 1025 members. This makes us the third largest section in the ASA. Roughly one third of our members are graduate students, a fact that bodes well for our future. When the New Year rolls around please remember to renew your section membership. Faculty members please encourage your graduate students to join. You can even buy section membership for graduate students at <http://asa.enoah.com/>

[Home/My-ASA/Gift-Section](#). We need to be sure that we hold onto the coveted 1000 member threshold. Because we currently have over 1000 members, we are entitled to sponsor six sessions at the 2016 ASA meetings in Seattle, August 20-23. We have been awarded an additional session because the Medical Sociology section day is the final day of the conference, Tuesday, August 23. The section is also jointly sponsoring a session in tandem with the sections on Disabilities and Aging and the Life Course. It is never ideal when many of our section's events fall on the final day of the conference, but we will make up for it with a slate of exciting and timely sessions, several of which are in dialogue with the Annual Meetings Theme, *Rethinking Social Movements: Can Changing the Conversation Change the World?* Although many of our events will take place on the final day, some of our sessions, including the Reception (held jointly with the Mental Health section), will be on Monday, August 22.

Thanks to everyone who sent me ideas and proposals for possible sessions. I received so many thoughtful suggestions that we could have put forward dozens of sessions, save for ASA rules. In the end, I hope that many of you will find a natural home to submit a paper. Do consider submitting to a roundtable if you cannot find a niche on one of the sessions. All of the sessions are open submission, which was a priority in our scheduling. The 2016 ASA Medical Sociology Section Call for Papers appears later in this newsletter.

August is still a long ways away. In the meantime, there are many ways to keep in touch and share information with your fellow "med heads". This Newsletter is one key mode of information distribution, and we all

have Ann Bell and Barret Michalec (our co-Newsletter Editors) to thank for that. In addition, there is the ASA-sponsored medical sociology section listserv, [MEDICAL SOCIOLOGY-ANNOUNCE@LISTSERV.ASANET.ORG](mailto:MEDICAL_SOCIOLOGY-ANNOUNCE@LISTSERV.ASANET.ORG). If you are a section member, you are automatically put on this listserv. Once a week I will distribute announcements via this listserv. If you have an announcement to share with section members please send it me at kbarker@unm.edu. Phil Brown hosts and Dave Bott manages a medical sociology listserv based at Northeastern University. Because this listserv is not sponsored by the ASA, it can distribute some types of information that cannot circulate on ASANET. Moreover, anyone can join this listserv and post announcements, request information, share resources and create collaborations. Thank you to our colleagues at Northeastern for their continued support of the unfettered listserv, MED-SOC@LISTSERV.NEU.EDU. The Section website (<http://www.asanet.org/medicalsociology/>) is also a fount of information thanks to hard work of webmaster Simon Geletta. You can also check out and contribute to the medical sociology Facebook page (<https://www.facebook.com/MedicalSociologyASA>); and, even though I don't know exactly what it means, you can also follow us on Twitter (@MedicalSocASA).

I look forward to seeing most of you in Seattle this August. In the meantime, I look forward to communicating and collaborating with you. Please do not hesitate to me send me your ideas for expanding the section's influence and improving how the section operates and serves its members.

Kristin Barker

Special points of interest:

- Interview with Simmons Award winner!
- Guest column—Review of Sociology of Reproduction
- Check out the new officers' columns

2015 ASA Award Winners!



Leo G. Reeder Award Winner: Adele Clarke

From left: Anne Figert, Adele Clarke, Janet Shim, and Sara Shostak

Below: Kathy Charmaz with Freidson Award Winners, Seth Abrutyn and Anna Mueller

Seth Abrutyn and Anna Mueller Win Freidson Award!

I thank the members of the Publications Committee, Elaine Draper, Nancy Kutner, and Dena T. Smith, who have served diligently on this committee for the past two years. The members of the Publications Committee gave careful attention to our main task, selection of the 2015 winner of the Eliot Freidson award, and I am grateful for their participation.

This year we had the privilege of reviewing an outstanding set of articles published during the 2013-2014 two-year cycle. We were fascinated by the authors' range of topics as well as the diverse journals within and beyond sociology, in which they have published. The authors' scholarship demonstrates how significant medical sociology has become within the larger discipline and across many fields. The diversity of the topics and the excellence of the articles testify to the outstanding scholarship in the section.

After a careful review, we chose Seth Abrutyn and Anna Mueller's co-authored *American Sociological Review* article, "Are Suicidal Behaviors Contagious? Using Longitudinal Data to Examine Suicide Suggestion" (2014) for the 2015 **Eliot Freidson Outstanding Publication Award**.

The committee was particularly impressed by Abrutyn and Mueller's article for three reasons. First, the authors conducted a careful re-examination of Emile Durkheim's classical treatise on suicide in light of contemporary trends and evidence. Their treatment of Durkheim is sophisticated and provocative. Rather than simply applying Durkheim's concepts and logic as many other researchers have done, the authors expanded on Durkheim by accounting for social contagion, which Durkheim famously discounted. However, during the past 50 years, a body of evidence has been amassed that strongly supports the significance of contagion. Second, Abrutyn and Mueller's study is both longitudinal and alert to gender issues as it followed a representative sample over time and shows gender differences among youth. The authors found that exposure to a friend or family member's suicidal behavior could result in developing suicidal attitudes. They also found that girls were more likely to attempt suicide than boys when a friend had exhibited suicidal behavior. However, the authors found no gender differences between suicidal attitudes or ideation when young people had a friend involved in suicidal behavior. Third, we view the significance of Abrutyn and Mueller's research as extending beyond its contributions to our discipline. Their study speaks to other current findings and supports drawing important policy implications. Committee member Nancy Kutner notes:

According to the latest CDC information, 20% of middle school or high school students in Georgia made suicide attempts or plans over the past 12 months. The state is now one of six that requires annual suicide awareness training for public school personnel, and it is recognized that "friends of a person lost to suicide may be at increased risk of suicide themselves" (The Atlanta Journal Constitution, May 16, 2015)

On behalf of the Medical Sociology Section, the Publications Committee congratulates Seth Abrutyn and Anna Mueller for winning the 2015 Freidson award.

Kathy Charmaz, Chair
2013-2015 Publications Committee





Left: Bridget Gorman with Simmons Award Winner, Jamie Chang

Jamie Chang Wins Simmons Award!

Jamie Chang (2013 PhD from the University of California, San Francisco, and currently a postdoctoral fellow at UCSF in the school of medicine) is the 2015 recipient of the Roberta G. Simmons Outstanding Dissertation in Medical Sociology Award. Jamie's dissertation, titled "Health in the Tenderloin: A Resident-Guided Study of Substance Use, Treatment, and Housing", is a creative piece of scholarship that the award selection committee believes will be of interest to a wide range of researchers and policy makers. Her project investigated the pathways leading to substance use treatment for homeless women living in the Tenderloin neighborhood of San Francisco, and she did so by combining historical and archival research with ethnographic methods and in-depth interviews to detail how marginalized women with substance use issues are impacted by health, social inequality, and the characteristics of their neighborhood communities. Particularly impressive was her development of a novel place-based methodology, docent-tour interviews, as it allowed her to richly capture the impact of neighborhoods on health from the point of view of community residents.

~Bridget Gorman

Right: Brea Perry with Louise Johnson Scholar, Tania Jenkins

Tania Jenkins is the Louise Johnson Scholar!

The recipient of the 2015 Louise Johnson Scholar Award is Tania Jenkins from Brown University. Her paper is entitled, "It's Time She Stopped Torturing Herself: Structural Constraints to Decision-Making about Life-Sustaining Treatment by Medical Trainees." This research, based on ethnographic work related to Tania's dissertation, focuses on the constraints faced by medical residents caused by the organization of medical training and the medical system. These structural constraints sometimes interfere with patient autonomy and decision-making about their own end-of-life care, including whether and when to limit or terminate treatment.

This excellent paper continues the classical tradition of rich hospital ethnography in medical sociology, while simultaneously bringing to light the unique experiences of junior medical trainees. Tania presented the paper in a regular session, and it has also recently been accepted for publication in *Social Science and Medicine*. The committee was very impressed with Tania's work, and we look forward to following the career of this promising young medical sociologist.

~Brea Perry



William R. McConnell wins the Howard B. Kaplan Memorial Award!

The Howard B. Kaplan award was established to support graduate students doing research in one of the substantive areas that defined the distinguished academic career of Howard B. Kaplan, namely mental health, self concept and health, or deviance.

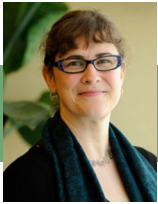
This year's selection committee included Mairead Moloney of the University of Kentucky and Daniel Menchik of Michigan State University and myself.

The 2015 recipient of the Kaplan Award is **William R. McConnell**, Ph.D. candidate at Indiana University, Bloomington. McConnell's research places him squarely in the field of mental health, social psychology and social network analysis. He has two peer-reviewed co-authored publications, no less than five manuscripts under review and was the recent recipient of the Graduate Student Paper Award from the North Central Sociological Association and numerous conference presentations - including 2 here in Chicago at this year's conference.

~Anne Figert



Left: Anne Figert with Kaplan Memorial Award Winner, William McConnell



Teaching

Laura Senier l.senier@neu.edu

I was lecturing to my students this week about social determinants of health, and I showed them some conventional health promotion messages, along with alternatives that are formulated to highlight health inequalities. (There are many such examples out there, see e.g., <https://healthpolicysocialjustice.wordpress.com/links/articles/tips-for-better-health/>). The alternative tips for better health are delivered satirically, in order to demonstrate how little control we have over the major determinants of health, such as poverty and neighborhood economic and social environments.

The last item on the alternative list I used in class was, "If you must live in a poor neighborhood or one with a high proportion of African-Americans, don't read any advertisements, particularly if you are a kid." This generated some skepticism among my students, who certainly understood the power of advertising, but who genuinely doubted that African-American or poor neighborhoods are especially targeted with ads for unhealthy products. I realized that this generation of students is too young to remember Joe Camel, or the Tobacco Master Settlement Agreement, which was formulated with the intent of

curbing problematic marketing practices by the tobacco companies.

To follow up, I posted a link to this 1997 article from the Los Angeles Times, which quotes activists who were angry about the way the tobacco industry had not only aggressively marketed menthol formulations of the product in their communities, but changed the way Joe Camel was depicted in African-American neighborhoods, i.e., making him appear darker than in the billboards used in white communities:

http://articles.latimes.com/1997-03-16/news/mn-39052_1_african-americans. I'm also trying to emphasize for my students that despite the protections that were put in place to prevent such marketing practices, we've seen very little progress in the past 15 years. A systematic review that was published in the American Journal of Public Health in May found wide disparities in retailer practices.¹ African-American communities continue to be targeted with advertising for mentholated products; rural communities are besieged with ads for smokeless tobacco products; and poor communities have an overabundance of ads for all types of tobacco products. The AJPH authors (based at the UNC Gillings School of Global Public Health) have launched a website with a wealth of re-

sources to monitor tobacco point-of-sale practices (<http://countertobacco.org>). It is a gold mine of resources, including tools that communities can use to inventory their exposure (many of the tools are appropriate for teens and youth); model policies that communities can explore to fight back (e.g., zoning restrictions, point-of-sale health messages), and a Trend Watch section (which identifies new and devious ways that tobacco companies are trying to circumvent public health policies). I assign a term paper in my class, and I'm going to suggest this as a topic for further exploration.

In closing, I want to express my appreciation to Jennifer Reich for her previous effort as the Teaching & Learning doyenne of the section. If any of you have ideas for topics I could explore in the column, or topics you would like to see addressed, please send them my way!

¹Joseph G. L. Lee, Lisa Henriksen, Shyanika W. Rose, Sarah Moreland-Russell, and Kurt M. Ribisl. A Systematic Review of Neighborhood Disparities in Point-of-Sale Tobacco Marketing. American Journal of Public Health: September 2015, Vol. 105, No. 9, pp. e8-e18. doi: 10.2105/AJPH.2015.302777

Health Policy

Sigrun Olafsdottir sigrun@bu.edu

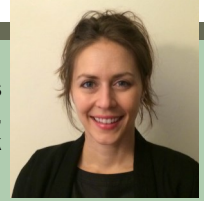


The International Social Survey Programme (ISSP) offers high quality cross-national data for medical sociologists that are interested in health policy. This program is collaboration between social scientists in over 40 countries that field a methodologically coordinated nationally representative survey annually. The topics rotate on regular basis, and many of the surveys include items that would be of interest to medical sociologists (e.g. the *Role of Government* module includes questions about public attitudes toward the appropriate role of the government in health care). However, the *2011 Health module* is likely of greatest interest to health scholars. This survey was fielded in over 30 countries, including Australia, Chile, France, Japan, Poland, Russia, South Africa, and the United States. The questions relate to various topics that are relevant for health policy. For example, whether it is appropriate to spend public funding on preventive medical checkups, treatment of HIV/AIDS, to prevent obesity and for organ transplants, as well as whether publicly funded health care should be limited to either citizens or those who take care of their health. This is a great data source for sociologists interested in cross-national survey work, but can also be used in classes on health policy to show students the different kind of pressures policy makers across contexts are under from the public. The impact of public opinion on actual policy is of course debatable and varies cross-nationally, but understanding public attitudes is important as they provide us with an insight into the national cultural and political landscape that health policy is made within.

<http://issp.org>

Career & Employment

Miranda Waggoner mwaggoner@fsu.edu

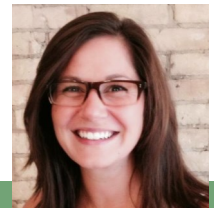


I am excited to begin my tenure as Career & Employment Chair, and I want to begin by expressing many thanks to Patricia Rieker for her service and very helpful columns over the past two years! As the job market season is again in full swing, many medical sociologists may be looking for general advice regarding the process, from choosing where to apply to negotiating an offer. With this timing in mind, I focus in this first post on online sources that are pertinent to any job market candidate – and for all varieties of positions, tenure-track and beyond. Usual places to seek perspectives on academic employment are The Chronicle of Higher Education or Inside Higher Ed. In particular, the Chronicle Vitae, through the “Get News & Advice” link, has a number of broadly beneficial advice pieces: <https://chroniclevitae.com/news>

Looking beyond these more typical outlets, I would like to highlight a blog that peers and I have found exceedingly useful, called *Tenure, She Wrote* <https://tenureshewrote.wordpress.com> (also on Twitter, @TenureSheWrote). A set group of contributors makes up the blog’s writers, stemming from a mix of academic disciplines and backgrounds. This assemblage is comprised of postdocs, faculty members at all career stages, doctoral students, and aspiring academics. There are frequent posts, and columns span topics relevant to any stage of the professional trajectory. Recent examples include advice on networking and using social media, overturning misconceptions about community college careers, maintaining self confidence in publishing, overcoming “imposter syndrome,” teaching while dissertating, hunting for academic jobs, and tips and tricks for the academic interview. While geared toward women and minority scholars, the blog’s discussions are valuable for any academic. I would encourage medical sociologists to check it out. And I wish all medical sociology candidates the best of luck on the job market this year!

Student News & Views

Rachel Cusatis rcusatis@uwm.edu



Firstly, I am so excited to serve as a liaison to the medical sociology community through Student News and Views column! My name is Rachel Cusatis and I have the pleasure of being your graduate student editor this academic year. I am currently in my third year of the PhD program at the University of Wisconsin-Milwaukee.

I hope to utilize this column as a common ground for ongoing dialogue between graduate students and senior scholars discovering what is happening with research, teaching, and academic life in the medical sociology community. Past editors of this column have thoughtfully and successfully investigated useful online sources for medical sociologists and focused on how scholars communicate through social media and other online platforms. This year, I wish to take these inquiries and discoveries into fruition and incorporate media into the column. As previous editors before me have recognized, integrating media makes content more digestible, approachable, and engaging. That is my goal, beginning with the fall issue and its discussion of useful online tools and in addition to our Interview with a Scholar Column.

Juggling several research projects and corresponding logistics, communications, and deadlines can be daunting and become an entire task in and of themselves. One online tool I have found to ease this frustration is Basecamp.com, a web-based project-management tool. When working collaboratively on research projects, Basecamp allows you to share documents, spreadsheets, to-do lists (including deadlines), important emails, and several other features. I, personally, have benefited from Basecamp particularly with its email reminder feature for deadlines you set yourself, as well as sharing out literature review, planning, and result write-up documents with fellow researchers on projects. For more information, visit their site: <https://basecamp.com/about> . Or listen to the full podcast for the Student News and Views column here: <http://tinyurl.com/newsviewspodcast>

For future columns I’m interested in hearing from you about the following topics:

- Have you recently completed your PhD and started a new job?
- Do you use open educational resources? In the classroom? To connect with other scholars?
- Do you use online sources to help manage your schedules? Research projects? Which ones have worked best for you?

If so, I’d like to hear from you. To share your experiences with me through the Student News and Views column, or if you have ideas about interviewees for this column, please contact me at: rcusatis@uwm.edu

Visit our website at <http://www2.asanet.org/medicalsociology/>

Guest Column: Conceptualizing Reproduction

By Rene Almeling, Yale University

This article consists of excerpts from a review I published in this year's Annual Review of Sociology on reproduction. The first part of the review (not included here) describes recent research on pregnancy, birth, abortion, contraception, infertility, and assisted reproduction. In what follows, I argue that reproduction has been conceptualized as a series of events (e.g., pregnancy, birth, abortion) that occur primarily in women's bodies. I discuss two consequences that flow from this conceptualization. First, the social science of reproduction has developed more as a collection of related topics than as a cohesive theoretical endeavor. Second, men are almost completely absent in research on reproduction, reinforcing the notion that this is a "women's issue." Building on recent research, I offer a new theoretical framework for studying reproduction, conceptualizing it as a biological and social process that occurs on multiple levels, from individual embodiment to state policy.

In reviewing research published in the last two decades, I was surprised to see that few scholars offer an explicit definition of what they mean by "reproduction." Perhaps this is because it appears to be a rather straightforward term referring to biological events associated with pregnancy and birth. However, mapping the constellation of topics that constitute this field reveals that scholars are studying both the process of having children, from conception through pregnancy and birth, and the obverse: the process of not having children. This occurs when individuals use contraception, have an abortion, undergo sterilization, experience infertility, decide to remain childfree, and/or go through menopause.

This leads to a simple yet crucial question: What exactly is reproduction? More specifically, how do social scientists who study reproduction understand this term? In this section, I analyze the few definitions that have been offered and build upon them to develop a conceptual framework for studying reproduction as a biological and social process.

For its use in contemporary social science research, we turn to Faye Ginsburg & Rayna Rapp's influential article "The Politics of Reproduction" (1991), which offers one of the few explicit definitions in the literature. While noting the "complexity" of the term reproduction, Gins-

burg & Rapp define their "working focus" as "the specific subject of human reproduction, which encompasses events throughout the human and especially female life-cycle related to ideas and practices surrounding fertility, birth, and childcare, including the ways these figure into understandings of social and cultural renewal" (p. 311).

To evaluate how this definition was taken up by subsequent researchers, I offer the following observations drawn from the brief reviews in the previous section, as well as my experiences as an active researcher in this field for the past 15 years. First, even though Ginsburg & Rapp reference both "events" and ongoing processes (e.g., the "life-cycle"), the social scientific literature on reproduction has developed around particular reproductive events, such as pregnancy, birth, abortion, contraception, infertility, and assisted reproduction. There has been relatively little attention to reproduction as a process that spans the life course and can involve both having children and not having children at different points.

Second, the focus on particular reproductive events is exacerbated by a lack of comparative research; most studies focus on one reproductive event or another. One result is that the literature on pregnancy and birth is somewhat distinct from the literature on abortion and contraception, which is somewhat distinct from the literature on infertility and assisted reproduction. Although scholars who study these various reproductive events certainly recognize one another as engaged in research on related topics, the topics are studied separately.

Third, Ginsburg & Rapp's definition references the "human" life cycle but emphasizes the "female" life cycle. As discussed in more detail below, they are not alone in focusing on women's bodies and women's experiences in the realm of reproduction. In the hundreds of social scientific studies on pregnancy, birth, abortion, contraception, infertility, and assisted reproduction that have been published, a tiny fraction focus on men's reproductive bodies and experiences. Taking these three points together, one can construct the dominant, if somewhat implicit, definition operating in the social scientific literature: *Reproduction is a series of events that occur primarily within women's bodies.*

Michelle Murphy is one of the few other scholars to offer an explicit definition of the term reproduction, and it both echoes and challenges what has come before. In a recent and important book about 1970s-era feminist attempts to "seize the means of reproduction," Murphy (2012) historicizes the women's health movement as a "biopolitical project." She defines reproduction in terms of what it is and is not: "Reproduction was not a biological thing with clear bounds, but a multifaceted and distributed effect in time and space, a problem both material and political to which questions of state, race, freedom, individuality, and economic prosperity were bound in ways that connected the micrological with the transnational via embodiment." (p. 6)

Like Ginsburg & Rapp, Murphy is focused on women's experiences of reproduction in that she studies how women's groups used medical implements like the speculum to learn about their bodies. She also echoes Ginsburg & Rapp in defining reproduction as both material and political (a.k.a. biological and social) and as an issue that can be studied on multiple levels, from individual embodiment to state policy. However, there is one crucial distinction: Whereas Ginsburg & Rapp emphasize reproductive "events" (p. 311) and "phenomena" (p. 330), Murphy instead defines reproduction as a "process." She writes, "Reproduction is not so much a 'thing' as an overdetermined and distributed process that divergently brings individual lives, kinship, laboratories, race, nations, biotechnologies, time, and affects into confluence" (p. 8).

In my view, conceptualizing reproduction as a process offers a new way of thinking about the object of study in this subfield. In contrast to the implicit understanding of reproduction as a series of events inside women's bodies, theorizing reproduction as a process requires that scholars define just what that process is and specify what is (and is not) common to such disparate events as conception and contraception, pregnancy and abortion, and birth and infertility. Moreover, conceptualizing reproduction as a process broadens the scope beyond women, making it possible to explicitly include men's bodies and men's experiences, as well as the wide array of biological and social processes that have been of great *(con't on page 10)*

Interview with a Scholar: Jamie Chang, 2015 Simmons Award Winner

By Rachel Cusatis

This past week, I had the privilege of speaking with this year's recipient of the Roberta G. Simmons Outstanding Dissertation in Medical Sociology Award, Jamie Chang, about her successful dissertation and how current graduate students might navigate their graduate programs, produce valuable dissertations, and how to best embrace the journey towards the PhD. Here are highlights. Want to listen to the full interview? Check out the podcast here: <http://tinyurl.com/medsocpodcast>

What would you attribute most to producing such a successful dissertation?

Having supportive committee members who, in a compassionate way, challenged me to keep pushing my limits analytically.

What are 3 tips you would give junior graduate students for completing a dissertation?

To borrow from the wise and true words of Adele Clarke, research is messy. Instead of fighting the mess, I try to accept it. Go Historical: Every medical sociology project is situated in a historical context that will inform your analysis. Meditation/mindfulness, or the practice of being in the present moment. It can help us focus and maybe even provide perspective, which will no doubt help us think about our research questions.

If you were to provide advice to graduate students within medical sociology on navigating their graduate programs, what would your advice be?

Enlist the support of as many people as possible. Share your drafts frequently. And keep your eyes on the prize.

Are there any things you would tell your younger graduate student self, about the journey towards a PhD?

Everything will be OK. Really it will. Let yourself enjoy the experience.

In your opinion, where are place-based research methodologies in the field of medical sociology and where do you see them going?

Place-based research methods are going to be very important in medical sociology. There has been recognition in the field that health doesn't occur in hospitals, it occurs in communities and homes, the place we live out our lives. We sociologists and researchers are tasked to find ways to examine, measure, and critique the concept of "health in place". There has been a lot of innovation lately, both for quant and qual place-based methods.

Has life changed much after dissertation defense?

I get to speak to a larger audience about my research, which is great fun. But on a practical day-to-day level, things honestly haven't changed much. I'm still hustling!

Anything you can tell us about your upcoming academic projects?

I am looking at how substance use stigma shapes the clinical interactions and treatment options for people who use drugs and alcohol. This is particularly important today since the ACA called for substance use (and mental health) to be considered "at parity" with other health conditions.

Get Connected

Simon Geletta & Natalie Ingraham

simon.geletta@dmu.edu natalie.ingraham@ucsf.edu



Over the first half of 2015 the web traffic to the medical sociology suffered significant drop due to the fact that at the end of the previous year the server was moved to a new site location of the ASA's main website server. After we raised member awareness to this move and advised our readers to adjust bookmarks in this newsletter the traffic is gradually moving up to its normal quarterly average. Between the beginning of March 2015 and the end of May 2015 there were 1,359 individual user visits and 1,682 page views. The web traffic from June to August further rose to 1,832 unique visits or users and 2,057 page views.

The charts below show some distinct characteristics of visitors during the last quarter of 2015. The charts show some repeating patterns (e.g., most visitors are from the US, are female and of a younger age group), and some new

patters (e.g., the number of visitors from Asia and the far east is becoming more noticeable).

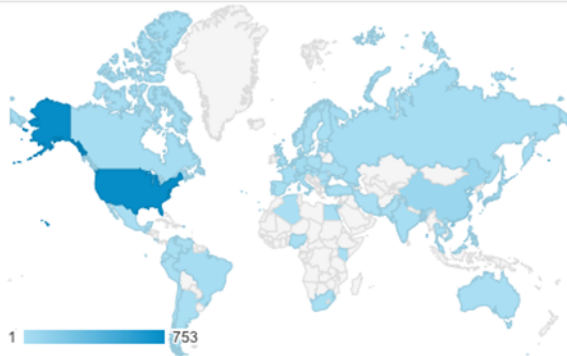
Our [Facebook page](#) continues to grow and we're currently at 1,157 "likes" or followers (a 35% jump from 750 "likes" in the Spring). We also maintain consistent "reach" or the number of people seeing our page activity with a great boost during the ASA conference in August. We average about one "like" and "share" per post with our most popular posts (generally job announcements or new book announcements) reaching an average of around 120 people. The balance between the narrowed gender categories of Facebook insights indicate that our page fans are identified as women (50%), men (47%) and another gender (3%). Most followers continued to be between ages 25-34 (40%) and reside in the US (42%) followed by India, Pakistan and Egypt.

Our [Twitter](#) currently has 708 followers (a gain of 87 since March) and we average 5 tweets per week, with a bump before the ASA annual meeting. Our most popular tweets this quarter were announcements about the ASA conference meeting in Chicago and job announcements.

Our [LinkedIn](#) group has grown as well from 287 members to 360 since last quarter (gain of 73). This is a private group for Med Soc section members to network created in 2012.

Please contact Natalie (natalie.ingraham@ucsf.edu) if you have anything you'd like to post on our social media accounts!

Visits

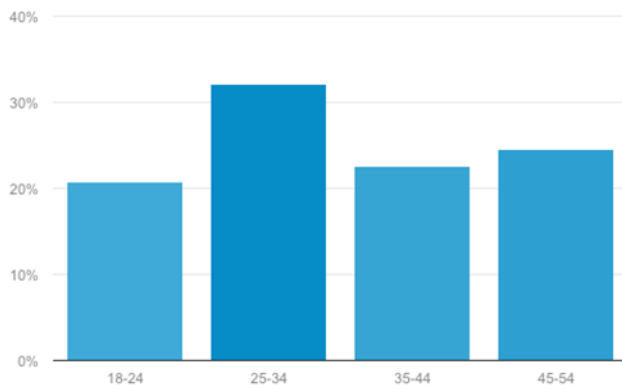


Visits by Country / Territory

Country	Sessions
United States	753
(not set)	243
China	72
Japan	35
Germany	33
United Kingdom	23

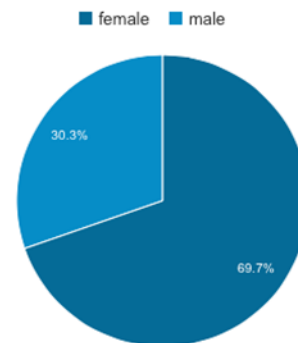
Age

2.86% of total sessions



Gender

3.56% of total sessions



Plans for 2016 ASA Meeting:

1.) *Roundtables* (open submission)-- Megan Reynolds megan.reynolds@soc.utah.edu

2.) *Awards Session and Reeder Award Address* - Kristin Barker, kbarker@unm.edu

3.) *Health and the Carceral State* (open submission) - Paul Draus draus@umich.edu and Jason Schnittker jschnitt@ssc.upenn.edu

Incarceration has a multitude of health impacts. Mental health may be negatively affected by imprisonment, especially when solitary confinement or administrative segregation are extensively employed. For some people, however, prison may provide respite and resources they would not otherwise be able to access. Likewise, the post-incarceration process of returning to home communities, or entering into new communities, brings health risks that may vary significantly from one group or setting to another. Finally, incarceration has lasting impact on home communities and families, especially children. In this vein, policing can reduce crime, but a strong police presence might also increase anxiety. This session will bridge research in urban sociology and criminology with research on the social determinants of health in medical sociology and public health, gathering together quantitative, qualitative and mixed methods papers that explore the intersections of health and incarceration.

4.) *Health, Biomedicine and Social Movements* (open submission) - Natalie Boero, natalie.boero@sjsu.edu and Julia McReynolds-Perez jmcreynolds-perez@uwlax.edu

This session solicits submissions about the place of health and biomedicine in contemporary and historical social movements. Following the theme of the 2016 meetings, "Rethinking Social Movements", we are looking for submissions that theoretically and empirically explore a number of topics including- but not limited to - movements focused on specific issues in health and biomedicine, movements addressing health inequalities and the social distribution of health and illness, rethinking the role of health in broader movements, and tensions around the de-politicization of health and biomedicine as the result of processes of medicalization. Papers utilizing qualitative, quantitative, and mixed methodologies are welcome.

5.) *Technology, Health and Medicine* (open submission) - Celeste Campos-Castillo camposca@uwm.edu and Kelly Joyce kaj68@drexel.edu

This session investigates the social dimensions of technology within medicine. Social dimensions may include the interpersonal, organizations, cultural contexts and/or policy. Technology is broadly defined and may include the design, use, or implementation of health information technology (e.g., electronic health records, clinical decision support systems, patient portals), consumer-facing information or communication technologies (e.g., internet support groups, self-tracking mobile devices), imaging technologies (e.g., magnetic resonance imaging, X-rays), and laboratory testing (e.g., genetic testing). Papers should highlight sociological contributions to the study of technology in medical knowledge, health, illness, or health care.

6.) *Health Inequalities: Local, National, and Global Perspectives* (open submission) - Jessica Goodkind jgoodkin@unm.edu and Kimberly R. Huyser khuyser@unm.edu

Within the current context of rapidly increasing worldwide migration, local and national social upheaval, and growing economic inequalities, it is particularly important to understand the influence of rapid social change on health and disease. This session will focus on the ways in which health inequalities are created, experienced, and/or addressed at local, national, and/or global levels. Papers may utilize quantitative, qualitative, or mixed methods approaches. We invite papers that make innovative theoretical, methodological, empirical, and/or practical contributions to the study of health in society and contribute to increasing health equity and justice.

7.) *Patient, Stakeholder and Community Engagement in Health Research* (open submission)-- Dmitry Khodyakov dkhodyak@rand.org and Susan Stockdale Susan.Stockdale@va.gov

There is increasing recognition of the importance of conducting research that is useful and meaningful to patients and communities, that builds on the expertise of relevant stakeholders, and that is conducted in genuine partnership with them. Engaging in partnered research projects frequently requires clarifications of scientists' roles and methods, the meaning of "valid" knowledge, and the definition of "community." The focus of this session is on understanding multiple ways in which researchers collaborate with a broad range of stakeholders in conducting research that leads to organizational, community, or policy change, as well as improvements in health and health equity. This session explores sociological research on patient-centered care, stakeholder engagement in health research, and community-based participatory research on health related topics. Although theoretical/conceptual papers are welcome, we are particularly interested in theoretically-informed empirical research that uses quantitative, qualitative, or mixed methods.

8.) *Rethinking Social Movements in Relationship to Disability, Health, and Aging* (open submission) - Robyn Brown robyn.brown@uky.edu

In honor of the 2016 Meeting theme on "Rethinking Social Movements" this session invites papers that address a number of social movement topics of interest to the three co-sponsoring sections (Disability and Society; Medical Sociology; and Aging and the Life Course). This includes papers with substantive and/or theoretical foci on social movements in relationship to disability, health, and aging issues and politics. Papers that examine how social movements more broadly have been impacted by the inclusion or exclusion of the disabled, older people and people facing health problems are also encouraged. Finally, papers that explore how intersectional factors (e.g., gender, sexuality, race/ethnicity) influence social movements that advocate for these marginalized groups, and influence the participation of individuals from these marginalized groups in social movements more broadly, are also welcome.

(*con't from page 6*) interest to reproduction scholars, from bodies and kinship to laws and markets. Thus, building on previous research, I suggest the following provisional definition as a guide for future research in this area: Reproduction is the biological and social process of having or not having children.

How might the study of reproduction look different if it were conceptualized less as a series of related events and more as a biological and social process that spans individual lives and historical time?

First, in reviewing the somewhat discrete literatures that have developed around different reproductive events, it becomes clear that particular topics have become associated with particular levels of analysis. Scholars studying pregnancy and birth tend to focus on embodiment, those studying contraception and abortion tend to focus on social movements and state policy, and those studying assisted reproduction tend to focus on kinship. Simply flipping these standard approaches produces fascinating new questions about, say, the comparative politics of pregnancy, the embodiment of abortion, and kinship in contraception (e.g., Who do people not want to reproduce with and why)?

Moreover, comparative research can be useful for specifying the elements of a process and how that process unfolds. Because there are already many, many studies that can be summarized as “women's experiences of X reproductive event,” scholars who are beginning new research projects on reproduction may wish to construct comparative research designs.

Throughout the life course and at all analytical levels, reproductive events cannot be isolated from one another. Conceptualizing reproduction as a process focuses attention not on the particularities of X or Y reproductive event, but instead on the commonalities and differences across events, stages in the life course, analytical levels, social locations, social groups, and historical periods, contributing to a fuller understanding and theorization of reproduction as a multilayered biological and social process that occurs over time.

The full review can be accessed at <http://www.annualreviews.org/doi/abs/10.1146/annurev-soc-073014-112258>. If you do not have free access, please email rene.almeling@yale.edu for an electronic copy.

Book Raffle at 2015 ASA Meeting

The Section book raffle raised \$320 for the Roberta G. Simmons Award this year. Fifteen individuals and publishers donated twenty-nine books which were raffled off at the Medical Sociology Section Business Meeting, August 24, 2015 at the ASA meetings in Chicago, IL. The success of the raffle was made possible only through the generous donations of the following publishers and individuals: Springer, Emerald Group Publishing, Rutgers University Press, Temple University Press, University of North Carolina Press, Ellen Idler, Kathy Charmaz, Janet Shim, Abigail Saguy, Danielle Bessett, Rosalyn Darling, Owen Whooley, Deborah Carr, Anne Figert, and Susan Bell. We also introduced t-shirts to the raffle this year; we thank Bernice Pescosolido, Anne Figert, Susan Bell, and Janet Hankin. (A few of you seem to have snuck t-shirts into the raffle without letting us know who you are; thank you, anonymous donors!) We could not have done it without each of you, and we sincerely hope that you will contribute again next year. A special thank you to Aalap Bommaraju for his help with the raffle. As always, thank you to our donors and our raffle participants for making the fundraiser such a success!
~Danielle Bessett



Post Notices on the ASA Medical Sociology Section List

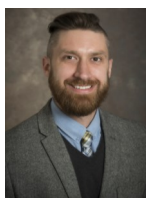
<MEDSOC@LISTSERV.NEU.EDU>

Notes from the Newsletter Editors

Welcome to the first issue of the 2015-2016 Medical Sociology Newsletter! We thoroughly enjoyed putting together our inaugural volume last year. We received positive feedback about the changes and hope to continue keeping the section informed and involved.

The newsletter relies on its contributors. In particular, we thank last year's columnists, Jennifer Reich, Patricia Rieker, Anna Neller, and Anne Figert. We are thrilled to have Sigrun Olafsdottir, Simon Geletta, and Natalie Ingraham returning and look forward to the contributions of our new columnists, Miranda Waggoner, Laura Senier, Kristin Barker, and Rachel Cusatis. As always, we welcome your comments and feedback on the newsletter and look forward to the upcoming issues!

—Ann Bell (avbell@udel.edu) & Barret Michalec (bmichal@udel.edu)



ISA Call for Papers

Dear Colleagues,

I am writing to encourage you to join us for 2016 ISA Forum meeting held July 10-14 in Vienna, Austria, under the theme "The Futures We Want: Global Sociology and the Struggles for a Better World". Vice-President Guido Giarelli and myself are co-organizing the program for the Research Committee 15 on the Sociology of Health, which features 15 sessions covering both longstanding topics of interest as well as more cutting-edge developments in this field.

Our sessions are listed [here](http://www.isa-sociology.org/forum-2016/rc/rc.php?n=RC15), (<http://www.isa-sociology.org/forum-2016/rc/rc.php?n=RC15>) where you can also **submit your 300 word abstract until September 30th**.

In order to keep up to date on all the exciting activities we have planned for Vienna and beyond, you can join the RC15 [here](http://www.isa-sociology.org/memb_i/index.htm) (http://www.isa-sociology.org/memb_i/index.htm), as well as follow our group on [LinkedIn](#). I look forward to seeing you in great numbers in Vienna!

Amélie Quesnel-Vallée, President, RC15 Sociology of Health, International Sociological Association

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