

Medical Sociology Newsletter

VOLUME 46, ISSUE 3

SPRING 2010

A Publication of the Medical Sociology Section of the ASA

Notes from the Chair

by William R. Avison

Reminders:

- *MSN Summer Deadline:*
June 4, 2010
- *2010 ASA Annual Meeting*
August 14-17, Atlanta, Georgia
- *2011 ASA Annual Meeting*
August 13-16, Chicago, Illinois
- *2012 ASA Annual Meeting*
August 17-20, Denver, Colorado



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I am very excited by our 2010 Medical Sociology Section program for the Annual Meetings in Atlanta. We have a series of interesting sessions that are filled with outstanding papers. Don Light has organized a very timely session on universal access to health care. Richard Carpiano has selected a set of papers on social disparities in health that should stimulate considerable interest among our members. Tetyana Pudrovskaya has put together a series of papers on health and health care across the life course. Donna McAlpine has organized an important session on sociological insights on health services, systems, and professions. I have put together a panel of papers on the role of medical sociology in the genomics revolution. Krysia Mossakowski has organized a large number of roundtables on a wide variety of issues. In addition, Janet Hankin has created a special session summarizing the articles that will appear in the November 2010 extra issue of the *Journal of Health and Social Behavior*.

One sign of the vitality of our Section is the large number of papers submitted to session organizers. I want to thank all the organizers for their efforts in producing a most interesting program for our meetings in Atlanta.

In addition to these sessions, I also want to encourage you to attend the Medical Sociology Section's Awards Presentations and Business Meeting. Every year, the highlight of this event is the Leo G. Reeder Award lecture. This year, Peggy Thoits will receive the Reeder Award and we eagerly await her lecture.

Please make a special note that Medical Sociology Section Day will be on the second day of the meetings, Sunday, August 15th, **but our reception will be the evening before** (Saturday, August 14th). Be sure to put these dates on your calendars. I look forward to seeing everyone in Atlanta.

In the meantime, please keep in contact with the Section. I'll be contacting you through the Medical Sociology listserv. Feel free to contact me at wavison@uwo.ca.

MEDICAL SOCIOLOGY SECTION

2010 Slate of Candidates

Jeremy Freese, Chair, Nominations Committee (jfreese@northwestern.edu)

Committee Members: Anne Barrett (abarrett@fsu.edu); Mary-Claire Lennon (mlennon@gc.cuny.edu); Nancy Kutner (nkutner@emory.edu); Abigail Sewell (aasewell@indiana.edu)

Section Chair Elect (1 elected):

Ellen Idler, Emory University
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Eric Wright, Indiana University-Purdue
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Secretary-Treasurer Elect (1 elected):

Kristen Springer, Rutgers University
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Mark Tausig, University of Akron
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Chair Elect, Nominations Committee (1 elected):

Rene Anspach, University of Michigan
(ranspach@umich.edu)
Donna McAlpine, University of Minnesota
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Nominations Committee Members (2 elected):

Rene Almeling, Yale University
(rene.almeling@yale.edu)
Brian C. Kelly, Purdue University
(bckelly@purdue.edu)
Molly Martin, Pennsylvania State University
(mmartin@pop.psu.edu)
Brea Perry, University of Kentucky
(breaperry@uky.edu)

Nominations Committee, Student Member (1 elected):

Elaine Hernandez, University of Minnesota
(hern0120@umn.edu)
Miranda Waggoner, Brandeis University
(waggoner@brandeis.edu)

Council Member-at-Large (1 elected):

Sigrun Olafsdottir, Boston University
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Sara Shostak, Brandeis University
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Student Council Member-at-Large (1 elected):

Christy Erving, Indiana University
(cerving@indiana.edu)
Robert Peterson, Case Western University
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Marcus Schafer, Purdue University
(mhschafe@purdue.edu)

Chair, Membership Committee (1 elected):

Rachel Kimbro, Rice University
(rtkimbro@rice.edu)
Erma Lawson, University of North Texas
(elawson@pacs.unt.edu)

Chair, Health Policy & Research Committee (1 elected):

Kristin Barker, Oregon State University
(Kristin.Barker@oregonstate.edu)
Sydney Halpern, University of Illinois-Chicago
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LEO G. REEDER AWARD

The Medical Sociology Section invites nominations for the 2011 Leo G. Reeder Award to be awarded at the 2011 meetings of the Medical Sociology Section. This award is given annually for "Distinguished Contribution to Medical Sociology." This award recognizes scholarly contributions, especially a body of work displaying an extended trajectory of productivity and encompassing theory and research. The Reeder Award also acknowledges teaching, mentoring, and training as well as service to the medical sociology community broadly defined. Please submit letter of nomination and the nominee's curriculum vitae to Stefan Timmermans, Chair Elect of the Medical Sociology Section at stefan@soc.ucla.edu. While email is preferred, you may also mail the nomination letter and c.v. to Stefan Timmermans, Department of Sociology, UCLA, 266 Haines Hall, Los Angeles, CA 90095-1551. Deadline is **June 1, 2010**.



**PLEASE
DON'T
FORGET
TO
VOTE!!!**

Career & Employment

by Karen Lutfey

As promised in the last column, I invited a guest columnist, Courtney Jackson, to respond to some of the family-work balance questions I received via email. I am grateful for Courtney's contribution and hope this kind of first-person biographical perspective lends some depth and nuance to these important career and employment issues.

Courtney Jackson is a Research Scientist at New England Research Institutes, where she conducts social science research on non-medical influences in clinical decision making. She received a PhD in 2005 from Rutgers University, with specialization in health professions, health disparities, reproductive health, and the sociology of gender. Courtney welcomes questions at cjackson@neriscience.com.

I am delighted to contribute to the ASA Medical Sociology Career and Employment Column. Karen Lutfey passed along a few questions from readers, several of which had to do with work-family balance and employment at different types of organizations. I thought I would share some of what I have learned during the past decade as I made the transition into parenthood and into (and out of) several different types of organizations. One reader asked:

Do you have a sense of whether careers outside of academia are more or less family-friendly than, say, tenure-track jobs? I know the answer is likely to be "it depends", since both academic departments and non-academic employers vary so much from one another, but I am wondering if any generalizations are possible.

Since having my son in the summer of 2002, I have worked at an applied research center at a state university, taught full-time on a visiting appointment at a small liberal arts college, completed a two-year postdoctoral fellowship, worked for one year at a small non-profit organization, and recently joined a larger research organization that conducts social science and clinical research. Each of these positions has afforded advantages and disadvantages that have enabled and constrained my attempts to juggle parenting and doing/teaching sociology.

Between my son's chronological development and my partner's fluctuating work schedule, my need for flexibility has ebbed and flowed through the years, making it hard to compare, even within my own experience, across these different organizations. So, as lame as this answer sounds, I cannot come up with a better answer than, "it depends." While successfully balancing work and family certainly depends on your organization, it also depends on your child's age, and if you have a partner, on his or her work situation, too. With that caveat in mind, I will provide a few illustrations of the benefits and challenges I have encountered in each type of work environment.

My son was born when I was working at an applied university-based research center. It was much easier for me to take FMLA for 3 months than it would have been had I been in a teaching position at that time. Based on the experiences of graduate school colleagues who have tenure-track positions, my conclusion is that some colleges are far more generous than others in if/how they stop the tenure clock for new parents and how accommodating they

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are of mid-semester births. I've heard encouraging stories of semester's leave granted with minimal hassle, but I also know of nightmare stories of returning to the classroom one week after delivery. This was not an issue when I took time off after the birth of my son. My generous colleagues triaged issues that needed to be immediately addressed and left other issues for me to deal with upon my return. When I returned to work dazed and confused from too much sleep deprivation, I appreciated how short three months really is in the grand scheme of the lifetime of a project.

I returned to work fulltime, but eventually reduced my time for about a year and a half so that I could complete my dissertation. Carving out meaningful less-than-fulltime work was possible in my research position. I retained the excellent benefits package offered to full-time employees and was compensated commensurate with my full-time hourly rate. In contrast, I am not aware of part-time faculty opportunities except for adjunct work, which typically lacks adequate pay and benefits. I know that faculty can take course reductions when they have a research grant. But, if the point is to reduce work in order to squeeze in more parenting time, adding the additional work of a grant is not going to accomplish that goal.

It was during my stint on a visiting appointment at a small liberal arts college that I realized how unforgiving the "flexibility" of an academic position can be. One morning my son woke up with a 103 degree fever and couldn't attend daycare. I had to give a lecture at 9am and my partner had a meeting he could not miss. We had very little time to come up with a Plan B. My son's aunt generously took a vacation day from her own job so she could care for our son while we went to work. It certainly can (often) be quite challenging to take time off from a non-academic position when a child is sick, but I would argue that it is generally easier than dealing with canceling class or trying to find a substitute. Academic positions offer incredible flexibility, except when they don't. And then they are incredibly inflexible.

Yes, but what about winter break, summers "off".... I am reminded of the romantic myth of the academic life I was promised when I first imagined pursuing a PhD. When my friends in academic positions email me about their extended summer travels to far-off lands, I will admit to being green with envy. But, then they remind me that they should have been working on revising that manuscript, and the grass seems just as green over here. I have been lucky to work in organizations that offer creative flexibility rivaling any academic position. In one position, I telecommuted after an hour-long commute proved too challenging to manage. In another position, I negotiated a schedule where I worked in the office from 9:00am to 2:30pm, and then worked from home from 3:30-6:30pm.

Organizations in all sectors face increasing pressure to be more "family-friendly" as more and more workers are juggling parenting and work without a full-time primary caregiver in the home. I encourage readers to talk to as many people as possible. Mothers and fathers in all types of organizations are creating innovative solutions to find balance in their lives, and most

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people are more than happy to share their experiences. I remember being told that you should never mention your spouse or children during a job interview. I followed this advice on at least a couple of interviews, but then I noticed that the people interviewing me were bringing up their children as topics of conversation. Maybe they were spies, trying to trick me into revealing my parental status, but more likely I think they were trying to show how family friendly their organization can be.

For additional information on this topic, I refer interested readers to a recent ASA forum on “Motherhood’s Impact on the Academic Sociology Career” at <http://asaresearch.wordpress.com/>. As usual, questions, comments, suggestions, or volunteer contributions (long or short) are welcome at klutfey@neriscience.com (subject line DEAR TURKEY).

MEDICAL SOCIOLOGY BOOK RAFFLE

The time has come, once again, to consider donating a book to the ASA Medical Sociology Section’s Annual Book Raffle. You may contribute your own (people often have extra copies of books they have written) or extra copies of other people’s books that you may have received. **PLEASE, CURRENT TITLES ONLY AND NO TEXTBOOKS.** Remember, these donations are going to a worthy cause – to provide support for the Leo G. Reeder and Roberta G. Simmons Awards.

Please send your donated copies to: Susan E. Stockdale, Raffle Chair, UCLA Semel Institute Health Services Research Center, 10920 Wilshire Blvd. Ste 300, Los Angeles, CA 90024. If you have any questions about potential donations, please contact me at sstockdale@mednet.ucla.edu. Please send books by **August 9, 2010** so that I can transport them to the ASA meeting. Thank you for your generous support!



Teaching Tips

by Teresa Scheid

This is a very general assignment that you can rev up or down for any level class; this spring I have used versions in my graduate level class (with a mix of graduate students from many different health programs) and my undergraduate Sociology of Health and Illness class (with mostly upper-level sociology majors). It can be used as a writing assignment, discussion topic, mid-term, or major semester paper.



Select a disease (such as a specific type of cancer) or health condition (such as obesity) or health care outcome (eyesight or mortality). Examine racial and/or gender differences in the distribution of this health condition by collecting data from governmental sources such as the Centers for Disease Control, US Department of Health and Human Services, National Center for Health Statistics, National Institutes of Health, Kaiser Family Foundation, or academic sources (I sometimes provide a list of sources if I want them to focus on either governmental data, other types of secondary data, or secondary academic sources). Analyze these differences in terms of fundamental and proximate causes of health (i.e., assess why these differences exist).

In terms of identifying fundamental or proximate causes you can refer to whatever references/readings/models you are using in your classes. Page Length: 3-5 pages (not including tables or figures), 12 pt. font, double spaced. Be sure and list your sources of data.

Student News & Views

by Shiri Noy, M.A.

The first day of the semester: the anticipation, the potential, the sheer eagerness of new student faces. I find teaching, and in particular teaching medical sociology, to be an immensely gratifying endeavor. I am in the camp that believes that if you can teach at your doctoral institution, then you absolutely should try it at least once. I think there are several tangible benefits to doing so, such as the addition to your CV; but more importantly, there is the ability to think about your future and how teaching fits into it. While teaching is useful in developing public speaking skills and figuring out how to explain concepts, it is obviously most relevant to those who plan on staying in academia. Given the nature of academia in the U.S. (and many other countries), I think it is really important to figure out how much you enjoy and want to focus on teaching *before* going on the market. On a more personal level, teaching has been good for my emotional well-being while in graduate school. In addition to allowing me to focus on someone else's learning and progress (we all know that graduate school is often a solitary and self-involved endeavor), it is really a place where I get to do *my* sociology, the way I think it should be done. It gets me excited about sociology in general, and about my research in particular.

While I find teaching gratifying and challenging, teaching medical sociology truly has been a rewarding and unique experience. I think it is because all of my students have come into contact with the medical system, of course to varying degrees and extent, and with different experiences and assessments. In addition, medical sociology seems to draw students from several different disciplines: sociology majors or minors, but also students from a variety of health-related fields. While the events related to the health care overhaul bill have been complex and confusing, I think many of us relish having discussions with our students about such matters. While teaching during a time of change, reform, and confusion is challenging (so much to keep up with, so many moving parts!), doing so can be invigorating and topical for students.

Each of us has our own priorities and preferences in terms of graduate school and beyond. Some want more time to focus on research, others love teaching, others focus on activism, community involvement, and other service projects, and some enjoy and manage to invest in all three. If you have an opportunity to teach, or assist in a medical sociology course, or give a guest lecture on your research, then I strongly recommend that you do so. In addition to offering you some experience and help in figuring out how much you enjoy and are committed to teaching, it is a really rewarding experience in its own right.

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AcademyHealth Annual Research Meeting

June 27-29, 2010 - Hynes Convention Center, Boston. The Annual Research Meeting (ARM) program is designed for health services researchers, providers, clinicians, students, and research analysts who want to:

- Examine emerging research issues critical to the organization, financing, and management of health services;
- Get updates on the latest research studies and current health policy issues; and
- Explore the impact of health services research on improving access and quality of care.

Early registration discounts are available. The preliminary agenda, travel details, and registration rates are online at www.academyhealth.org/arm.

SMH Society and Mental Health**The Journal of the ASA Section on the Sociology of Mental Health**

Editor: William R. Avison, The University of Western Ontario

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Editorial Scope of SMH:

Society and Mental Health publishes original articles that apply sociological concepts and methods to the understanding of the social origins of mental health and illness, the social consequences for persons with mental illness, and the organization and financing of mental health services and care. Its editorial policy favors manuscripts that advance the sociology of mental health and illness, stimulate further research, inform treatments and policy and reflect the diversity of interests of its readership. Manuscripts must be submitted electronically at <http://mc.manuscriptcentral.com/smh>.

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