

Soc 641S: Health and the Life Course

Fall 2020, M 5:15-7:45, Soc-Psych 248*

Professor: Scott M. Lynch

Office Hours: by appointment (and most likely only via Zoom)

Email: scott.lynch@duke.edu

* Course will be held probably exclusively over Zoom. I will send weekly meeting links. If we have an in-person meeting, I will let you know well beforehand.

Objectives, Format, and Requirements

The quantitative study of health in sociology has evolved substantially over the last half century. Early research in medical sociology focused on the role social and psychological factors play in producing health disparities across different segments of the population. Much of this research involved analyses of cross-sectional data and found large health differentials by sex, race, socioeconomic status, and other socially defined characteristics. These findings led to a huge increase in interest in health research in sociology.

The life course perspective emerged in the 1970s. Although early work in that area focused on general patterns of development and consequences of being born in particular eras, it also laid the groundwork for a temporal perspective on health inequalities. The burgeoning collection of longitudinal (i.e., panel) data in the 1980s facilitated life course analyses of health, but such analyses necessarily couldn't, and didn't, begin in earnest until the 1990s.

By the mid 1990s, the development of life course theory had encouraged scholars in medical sociology to begin to focus on how health inequalities evolve over the adult life course, and by the early 2000s, scholars had begun to recognize that health inequalities in adulthood actually originate in childhood or even before (e.g., *in utero*). Since then, we have come to realize that an understanding of health inequalities must rely on data and methods that incorporate not only early life social conditions, but also biological factors ranging from genetic factors to biomarkers. We now acknowledge that the age-old "nature-nurture" debate was based on a false dichotomy. Biological and social factors both play a role in shaping how health unfolds from birth (or before) to death, and we cannot, as sociologists, ignore the biological contributions to health and expect to be taken seriously when discussing health outcomes.

The goal of this course is to provide an overview of the current state of the field of research in sociology and demography on the origins and intermediaries of health processes that produce disparities in health in adulthood and later life. The readings for the course consist of both summaries/overviews (i.e., handbook chapters) and empirical studies, but with a focus on the former. We will read and discuss at least 30 papers on the topic, ranging from early, seminal studies to contemporary ones. The reading list is only a tiny subset of papers we could read, but I think they cover the (broad) field.

The requirements of the course include (1) weekly class participation, (2) two exams, and (3) (near) weekly assignments. Class will be held over Zoom each week (unless otherwise specified), and real-time participation is required. The semester is 13 weeks long, despite

the fact that the revised academic calendar suggests it is 14 (we will not hold a 14th week session). One week of class will be skipped for the first exam. Currently, there are no readings for the last week; this “empty week” will be filled with additional readings based on class discussion throughout the semester.

Weekly class participation will involve your contributing to the discussion. This is a seminar, not a lecture. This means that you should prepare at least TWO serious questions about the readings that you will raise during each weekly meeting. I will check these off against your name, so perhaps you should prepare three or four in case someone else asks your question/raises your point before you do. You can certainly raise questions “on the fly,” but do not simply be a “fly on the wall” in this class and expect a reasonable grade. Participation is one-third of your grade.

The two exams will involve essay questions involving “big picture” issues about differences between perspectives, limitations of existing studies, and questions that need to be addressed by future studies. The first exam will be due prior to the following week’s meeting. The second exam will be due on the final exam date, by 10 p.m. EST on that day.

The (near) weekly assignments will vary in their focus, and the assignments will be explained each week. Most commonly, in weeks in which we discuss an empirical article, I will ask you to write a “review” of an article we read as if you were a reviewer critiquing it prior to publication. We will discuss how papers are reviewed, and I will provide example reviews prior to the first such assignment.

Grades will be based on successful performance in each of these three areas. This is a graduate level course. Grades will follow a typical graduate course format in Sociology: A, B, C, and F. An A or B is not a cause for alarm; a C suggests you did not do well and is a serious warning if you are a graduate student; an F is just bad news. I will assign a letter grade to each of the three components (participation, exams, assignments), and they will be weighted equally. Within grade components, grades will be averaged. An A is worth 95 points, a B is worth 85, etc., and the average will follow a usual 10 point scale. We can discuss this in further depth if necessary.

Readings

Readings for the course include recent and classical journal articles and book chapters from a variety of journals and handbooks in sociology, gerontology, demography, and epidemiology and related fields. .pdf versions of all readings will be posted on Sakai, or you can download them yourself. Readings should be read **prior** to the class date for which they are listed (see about class participation above).

Because I am providing .pdf versions of all readings on Sakai, the course schedule below does not provide full bibliographic information. Each reading posted on Sakai is named based on the first author and year of publication. The schedule below lists all author names (up to three; et al otherwise) and dates only. The first two weeks involve only two readings each. In those meetings, we will discuss the readings AND cover additional material not discussed in the readings. Subsequent weeks involve reading three papers (four in weeks 8 and 11).

Course Schedule

Week 1 (August 17)

- Overview of course

Week 2 (Aug 24): Life Course Theory

- Ryder, 1965
- Elder and George, 2016
- Layout of field

Week 3 (Aug 31): Life Course Methodology

- Lynch and Taylor, 2016
- Bardo, Lynch, and Land, 2017
- Other methods in the readings (SEM, “causal analysis,” life table and survival methods, etc.)

Week 4 (Sep 7): Biology and Social Processes

- Cary and Vaupel, 2019
- Crimmins and Vasunilashorn, 2016
- Belsky et al, 2016

Week 5 (Sep 14): Fundamental Cause Theory

- Link and Phelan, 1995
- Phelan and Link, 2010
- Luftey and Freese, 2005

Week 6 (Sep 21): Early Life Conditions and Adult Health

- Barker, 1995
- Hayward and Gorman, 2004

- Kuh and Ben-Shlomo, 2016

Week 7 (Sep 28)

- Midterm Exam (no meeting)

Week 8 (Oct 5): “Cumulative” Perspectives on Health

- Lynch, 2003
- Ferraro, Schafer, and Wilkinson, 2016
- Warren, 2009
- Herd et al, 2007

Week 9 (Oct 12): Later Life Perspectives and Mortality Differentials

- Verbrugge and Jette, 1994
- Rogers et al, 2019
- Warner and Hayward, 2019

Week 10 (Oct 19): Race and Health

- Brown, O’Rand, and Adkins 2012
- Boen 2016
- Turra and Goldman, 2007

Week 11 (Oct 26): Stress, Social Support, Integration, and Health

- Pearlin, 2010
- Avison, Ali, and Walters, 2007
- Bowen et al, 2014
- Umberson and Montez, 2010

Week 12 (Nov 2): Geography and Health

- Beckfield and Bambra, 2016
- Montez, Hayward, and Zajacova, 2019
- Lynch et al (TBA)

Week 13 (Nov 9): TBD

- This week is left open for additional reading and discussion, based on students' interests