

## TOPIC: THEORETICAL PERSPECTIVES ON HEALTH & MEDICINE

### Functionalist Perspective on Health & Medicine

◆ *Recall:* Functionalist perspective focuses on how different structures allow society to function.

- Illness is considered \_\_\_\_\_ → prevents people from fulfilling their roles.

#### Sick Role

◆ **Talcott Parsons** (1902 - 1979): Society allows people who are ill to adopt a *sick role*.

- **Sick Role:** \_\_\_\_\_ role assumed during acute illness with unique rights & responsibility.

##### Rights

- \_\_\_\_\_ from normal social roles (ex: school or work).

##### Responsibilities

- \_\_\_\_\_ to get better.
- \_\_\_\_\_ medical help.

**Legitimized through interactions with a physician.**



- ◆ Doesn't address \_\_\_\_\_ conditions or inequality.

### EXAMPLE

Determine if the statements below are true or false according to Parsons' explanation of the sick role.

|   |   |  |
|---|---|--|
| 1 | If a person is in the sick role, they are excused from their typical role in society.         |  |
| 2 | Illness is considered a functional part of a society.   |  |
| 3 | When someone assumes a sick role, there is an expectation that they are trying to get better. |  |

### PRACTICE

Tatianna comes down with mono during her first year of college. Which of the following is *not* part of the expectations for the sick role?

- Tatianna can email her professor with a doctor's note and ask for an extension on her paper.
- Tatianna's friends bring her soup.
- Tatianna is allowed to miss club meetings to rest.
- Tatianna is given extra responsibilities as treasurer of the running club.

## TOPIC: THEORETICAL PERSPECTIVES ON HEALTH & MEDICINE

### Conflict Perspective on Health & Medicine

◆ *Recall:* Conflict perspectives look at how social structures create and perpetuate inequality.

#### Economic & Class Disparities

- ◆ Focus on how problems with healthcare system are linked to capitalism.
  - **Commodification:** Viewing healthcare as a \_\_\_\_\_ rather than a public good or human right.
  - \_\_\_\_\_ to care depends on wealth/ power:
    - ↑ SES = \_\_\_\_ quality care.
    - ↓ SES = \_\_\_\_ quality care.
  - **Profit Motive:** Doctors are \_\_\_\_\_ to prescribe more/ perform more procedures.
  - Tendency to treat *individuals* rather than target \_\_\_\_\_ determinants of health (ex: poverty).



#### Racial & Gender Disparities

- ◆ Historically, medicine played a role in \_\_\_\_\_ inequality.
  - Ex: Diagnosing women with “hysteria” (“hyster” is from the Greek for uterus).
  - Ex: Lack of training to detect skin conditions in POC.

### EXAMPLE

GLP-1 inhibitors are a class of weight-loss drug that promise great results for individuals looking to lose weight. Using the ideas discussed in the lesson, what are two issues a conflict theorist may have with this?

1. \_\_\_\_\_
2. \_\_\_\_\_

## **TOPIC: THEORETICAL PERSPECTIVES ON HEALTH & MEDICINE**

### **PRACTICE**

Which of the following statements is most in line with conflict theory?

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- a) In capitalist systems, all people have equal access to quality care.
- b) Individuals with fewer resources have access to the best quality care due to social welfare programs.
- c) Social welfare programs around healthcare are unimportant because business owners will provide for their workers.
- d) In capitalist systems, access to care is dependent on socioeconomic status.

### **PRACTICE**

Imagine you are a social conflict theorist. Which of the following would you be **most likely** to investigate as a cause of poor health?

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- a) How air quality in a poor neighborhood is related to asthma morbidity.
- b) How a patient's feelings about their illness influence their outcomes.
- c) How an individual's economic productivity changes after a diagnosis.
- d) How a patient's comfort level with a doctor influences their outcome.

## TOPIC: THEORETICAL PERSPECTIVES ON HEALTH & MEDICINE

### Symbolic Interactionist Perspective on Health & Medicine

◆ *Recall:* Symbolic interactionists look at how interactions shape and create reality.

#### Social Construction of Reality

◆ **Social Construction of Illness:** \_\_\_\_\_ people attach to health & illness.

▸ Health is influenced by our \_\_\_\_\_ experience.

##### *How do I feel about it?*

- Mindset.
- Beliefs.
- \_\_\_\_\_ experiences.
- Temperament.

##### *How do others feel about it?*

- \_\_\_\_\_
- Biases.

◆ **Social Construction of Treatment:** \_\_\_\_\_ is defined by social meanings and interactions.

▸ Erving Goffman's dramaturgical approach.

▸ Doctor: Knowledgeable.

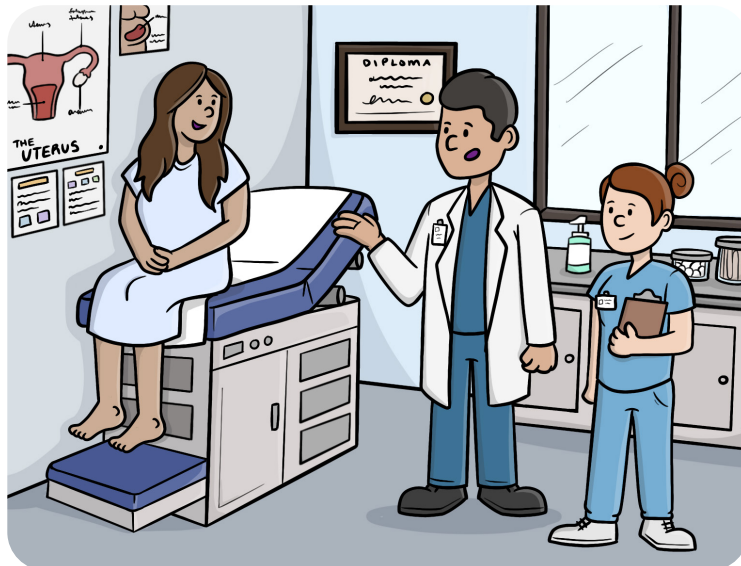
▸ Patient: Cooperative.

▸ Clean room w/ tools.

▸ Diplomas.

▸ Technical terminology.

▸ Formal language.



## **TOPIC: THEORETICAL PERSPECTIVES ON HEALTH & MEDICINE**

### **EXAMPLE**

According to symbolic interactionists, which of the following could influence how a person experiences illness?

- I. Stigma against certain conditions.
- II. A person's temperament.
- III. Belief that a medical intervention won't work.

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- |            |             |              |                  |
|------------|-------------|--------------|------------------|
| a) I & II. | b) I & III. | c) II & III. | d) I, II, & III. |
|------------|-------------|--------------|------------------|

### **PRACTICE**

During a sensitive medical procedure, a doctor uses technical language, avoids eye contact, and maintains a brisk, professional manner. A symbolic interactionist would interpret this as:

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- a) Poor medical ethics.
  - b) An attempt to give the patient anonymity.
  - c) An attempt to manage social expectations and keep the interaction professional.
  - d) Evidence of how doctors operate under a profit motive.