

Syllabus HS-4220
Health Issues Among Marginalized Populations
Dr. Treena Orchard
Winter 2018

Syllabus for HS 4220: Health Issues Among Marginalized Populations

Instructor: Dr. Treena Orchard
Class: Monday- 2.30-5.30
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Course Description

This is an advanced undergraduate course in health sciences that examines from critical perspectives, namely medical anthropology, feminism, and political-economy theory, a series of health issues that are experienced by a diverse array of marginalized populations. One of the primary objectives of this class is for students to develop an understanding of how macro (i.e., gender, political-economy, race, poverty) and micro (i.e., individual factors within the context of people's daily lives) forces intersect to produce both marginality and particular health issues/experiences for people who are relegated to, or find themselves on, the margins of society. The course is structured topically, with different populations and issues explored weekly, including: the social geography of mental health; everyday suffering among drug users; youth 'at risk'; motherhood and surveillance among poor women; the unfortunate legacy of the "elephant man"; the violence of "starlight tours" for Aboriginal people in Saskatoon, Saskatchewan; immigrant and working class women's ideology regarding cancer; a social portrait of a British neurosurgeon who devotes his time to working in impoverished hospitals in the Ukraine; the lived experience of HIV care practitioners; and violence and barriers to existence among lesbian women. The focus is primarily on the North American context, however, the concepts and ideas employed in the class can also be applied in socio-economic, political, and gendered settings globally.

Class Schedule and Format

The basic format for each class will be as follows: an overview of class objectives, interactive lecture by myself, a break, group work, and class discussion. Although I am going to lecture and lead the discussions of the assigned readings and some additional contextual information, students are *strongly* encouraged to participate and share their perspectives on the respective themes as much as possible.

Evaluation

Class Attendance	5%
Detailed Outline for Research Paper	15%
Annotated Bibliography for Research Paper	30%
Research Paper	50%

Details

Class Attendance (5%)

Given the relatively small size of the class, the focus on group work and discussion, along with the marks allotted to attendance you must take part in every class. Regular, punctual class attendance is critical and any absence, along with repeatedly late arrivals to class, will affect your mark. Everyone is expected to have the readings done *before* class.

Detailed Outline for Research Paper (15%)

The evaluation for this class is built around the research paper, which is due at the end of the course. To that end, each student will begin by preparing an outline for the paper that features a detailed description of the following: **introduction (2pts, 1 pg)**; **statement of objectives (1pt, ½ pg)**; **methodology (1pt; ½ pg)** to be used to gather your information (i.e., search engines to be used, key words, basic disciplines from which the data will be sought); a brief **overview of the literature (3pts, 1.5 pgs)** that identifies the main research approaches (qualitative, quantitative, historical, ethnographic) and focus of the literature broadly; the main **themes (6pts, 1.5 pgs)** or issues to be explored in your paper (½ pg discussion per theme); concluding discussion regarding the **significance (2 pts; ½ pg)** of the proposed subject matter. The outline should be 5.5-6 double-spaced pages.

Annotated Bibliography for Research Paper (30%)

An annotated bibliography gives an account of the research that has been done on a given topic. Like any bibliography, an annotated bibliography is an alphabetical list of research sources. In addition to bibliographic data, an annotated bibliography provides a concise summary of each source and some assessment of its value or relevance. In many ways, it's like the abstract that prefaces a published academic article. An annotation of an academic source, for example, typically identifies **its thesis** (or research question, or hypothesis), its major **methods** of investigation, and its main **conclusions**. This exercise is intended to help students prepare for their research paper and develop a strong sense of the main issues/arguments within the published literature that pertains to the subject matter of the final paper. Each student must prepare an annotated bibliography of 10 academic sources, and the annotations for each of the 10 sources should be 1 double-spaced paragraph (5-7 sentences each).

Research Paper (50%)

The final research paper constitutes a very important part of the course and the subject matter is entirely up to the students' discretion. However, it is wise to arrange a meeting with me to discuss your ideas in order to ensure that the topic(s) are in line with my expectations and that they are also feasible. The research paper should feature discussions and analysis of the headings contained in the outline: **Introduction (2-3pgs)**, **Statement of objectives (1/2 pg)**; **Methodology (1/2pg -1pg)**; **Overview of the literature (3 pgs)**; the main **Themes/Findings (5-6 pgs)**; and a **Conclusion (1.5 pgs)**, which reiterates the focus of the paper and includes a discussion of the significance of the subject matter related to your understanding of marginalization. The papers should be 12-14 double-spaced pages of text + 1-2 pgs for references. Use standard APA format; cite 15-20 academic references (in-text); should be organized by clearly identifiable headings; and can feature the use of "I" or the "active voice."

Grading scheme:

I use the format provided below for grading, which is the university-wide scale that has been approved by the UWO Senate:

A+	90-100	Exceptional
A	80-89	Superior work, above average
B	70-79	Good work, meeting all requirements, and eminently satisfactory
C	60-69	Competent work, meeting requirements
D	50-59	Fair work, minimally acceptable
F	below 50	Fail

Policies

Late assignments

All assignments must be turned in on time and only hard copies will be accepted. If you have a medical reason for not being able to complete an assignment or an examination a note from your Physician indicating the severity of your condition must be submitted to the Faculty of Health Sciences Dean's office. You may visit Western's Policy on Accommodation for Medical Illness at: <https://studentservices.uwo.ca/secure/index.cfm> for further details. If you have a non-medical reason for handing in a late assignment 3% will be deducted per day, including week-ends.

Electronic devices

Cellular phones must be turned off during class and lap-top computers will only be allowed to be open if your work on them pertains to class. You will learn more if you are fully engaged in the materials presented and the discussions.

Plagiarism

The research paper may be subject to submission for textual similarity review to the 'commercial plagiarism detection software under license to the University for the detection of plagiarism. All assignments submitted for such checking will be included as source documents in the reference database for the purpose of detecting plagiarism of papers subsequently submitted to the system. Use of the service is subject to the licensing agreement, currently between The University of Western Ontario and Turnitin.com. See the following site for more details: <http://www.turnitin.com>.

Student Inquiries

If you have any questions or comments regarding the class you may raise them during class or privately through e-mail. If you require information regarding Student Support Services or the Student Development Services, see their Web site: <http://www4.registrar.uwo.ca>.

Creating a "healthy" classroom

Teaching and learning is a two-way process and to ensure the best and most productive experience for us all I ask that we all be considerate of the following: arrive on time, do not be disruptive, respect one another, and be willing to challenge yourself.

Information about communication

I'm a peasant when it comes to tech. and being connected. In fact, I don't want to be linked up and available all the time. I do a ton of work as it is and we all need our down time and space to not only work

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on our respective projects but also just to 'be.' With that in mind, I would like us to keep our communications to day-time (i.e., 8 am- 5pm), as I'm typically up and working early and I retire from work early, shutting down my computer around 6 pm each day. And, brace yourselves (!), I don't do any email or electronic work on my phone--so if you email me after 6pm, you won't hear back until the following morning. Also, let's stick to Monday-Friday versus week-ends. I share this information with you guys, not to restrict your access to me in any way, just to let you know what my preferred boundaries or parameters are.

REQUIRED Materials: available in the UWO Bookstore
1 Reading Package + some materials also available on OWL (see below).

First Class- January 8, 2017

Introduction to the course and ideas about marginalization in relation to health

Viewing of the film: Maquilaopolis: City of Factories

Topic 1- January 15, 2017

Bio-Social Perspectives on Health Inequalities and Disease Distribution

Paul Farmer (1999). *Infections and Inequalities: The Modern Plagues*. Berkeley: University of California Press, pp.1-17 & 59-93 (Available on WebCT).

Topic 2- January 22, 2017

A Different Approach to Mental Health: The Importance of Place and Space

Brenda Gleeson, Chris Hay and Robin Law (1998). The geography of mental health in Dunedin, New Zealand, *Health & Place*, 4(1), 1-14.

Hester Parr (2000). Interpreting the 'hidden social geographies' of mental health: ethnographies of inclusion and exclusion in semi-institutional places, *Health & Place*, 6, 225-237.

Chris Philo (1997). Across the water: reviewing geographical studies of asylums and other mental health facilities, *Health & Place*, 3(2), 73-89 * a little tricky

Topic 3- January 29, 2017

Righteous Dopefiends: Structural Forces and Everyday Suffering Among Drug Users

Philippe Bourgois and Jeff Schonberg (2009). *Righteous Dopefiend*, Berkeley: University of California Press, pp.1-24 & 79-116 (Available on WebCT).

OUTLINES FOR RESEARCH PAPER DUE

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Topic 4- February 5, 2017

From “Flying Signs” to Flying High: Youth ‘At Risk’

R. Kevin Grigsby (1992). Mental Health Consultation at a Youth Shelter: An Ethnographic Approach, *Child & Youth Care Forum*, 21(4), 247-261.

Hazel Kemshall (2008). Risks, Rights and Justice: Understanding and Responding to Youth Risk, *Youth Justice*, 8(1), 21-37.

Viewing the Film: Invisible City

Topic 5- February 12, 2017

Behind the 8 Ball: Motherhood, Surveillance, and Drug Use Among Poor Women

Kimber Richter and Gabriele Bammer (2000). A hierarchy of strategies heroin-using mothers employ to reduce harm to their children, *Journal of Substance Abuse Treatment*, 19, 403-413.

Tanya Telfair Sharpe (2001). Sex-for-Crack-Cocaine Exchange, Poor Black Women, and Pregnancy, *Qualitative Health Research*, 11(5), 612-630.

NO CLASS FEB 19TH : READING WEEK

Topic 6- February 26, 2017

The Legacy of “The Elephant Man”: An Unfortunate(?) Intersection of Science, Stigma, and Sordid Fascination

Y. Michael Barilan (2005). The story of the body and the story of the person: Towards and ethics of representing human bodies and body-parts, *Medicine, Health Care and Philosophy*, 8, 193-205.

Joyce Turner, Barbara Biesecker, Jennifer Leib, Leslie Biesecker, and Kathryn Peters (2007). Parenting Children with Proteus Syndrome: Experiences With, and Adaptation to, Courtesy Stigma, *American Journal of Medical Genetics Part A*, 143A, 2089-2097.

Theodore Wilkie and J. Milton Rabson (1979). The Elephant Man- A Tragic Syndrome, *Aesthetic Plastic Surgery*, 3, 327-337.

ANNOTATED BIBLIOGRAPHIES DUE

Topic 7- March 5, 2017

You Can Check Out Any Time You Like, But You Can Never Leave: Social Injustice, Racism, and the Violence of “Starlight Tours”

Susanne Reber and Robert Renaud (2006). *Starlight Tour. The Last, Lonely Night of Neil Stonechild*, Toronto: Vintage Canada, pp. 1-77 (Available on WebCT).

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Topic 8- March 12, 2017

Cancer as a Resistance and Cancer as an Idiom of Distress: Views from Working Class and Immigrant Women

Martha Balslem (1991). Cancer, control, and causality: talking about cancer in a working-class community, *American Ethnologist*, 18(1), 152-172.

Sandra Gifford (1994). The change of life, the sorrow of life: Menopause, bad blood, and cancer among Italian-Australian working class women, *Culture, Medicine and Psychiatry*, 18, 299-319.

Topic 9- March 19, 2017

The Other Side of the Gurney: The Lived Experience of Health Care Providers

Orchard, T., Salters, K., Michelow, W., Lepik, K., Palmer, A. & Hogg, R. (2015). "My job is to deal with what I can": HIV care providers' perspectives on adherence to HAART, addictions, and comprehensive care delivery in Vancouver, British Columbia, Canada, *Critical Public Health*, 26(5): 542-553.

Viewing of the Film: The English Surgeon

Topic 10- March 26, 2017

A Silence That Often Rears Its Head: Violence and Barriers to Existence Among Lesbian Women

D.J. Aaron, Y-F Change, N. Markovic, and R.E. LaPorte (2003). Estimating the lesbian population: A capture-recapture approach, *Journal of Epidemiology and Community Health*, 57, 207-209.

Sharron Hinchliff, Merryn Gott, and Elisabeth Galena (2005). 'I daresay I might find it embarrassing': General practitioners' perspectives on discussing sexual health issues with lesbian and gay patients, *Health and Social Care in the Community*, 13(4), 345-353.

Ruthann Robson (1990).Lavender Bruises: Intra-Lesbian Violence, Law and Lesbian Legal Theory, *Golden Gate University Law Review*, 20(3), 567-591.

RESEARCH PAPERS DUE

Final Class- April 2, 2017---Film & Discussion