



# Healthy Outlook

Division of Health, Health Policy and Health Services of  
the Society for the Study of Social Problems

Fall 2008/Winter 2009

## Statement from the Co-Chair *Edna A. Viruell-Fuentes*

It is with great pleasure that I assume the role of co-chair for the Division of Health, Health Policy, and Health Services. I am honored to follow in the footsteps of past Division co-chairs who have built a strong and committed membership. Thank you!

As our newsletter goes to press, I am hopeful about the possibilities for social change in light of the historic presidential election. At the same time, I am concerned about the ripple effects of the country's economic downturns. The recent hate crime against an Ecuadorian immigrant in Long Island at the hands of high school students who set out to "to beat up some Mexicans" was a stark reminder of the historical trend in which anti-immigrant sentiments rise during economic downturns. Events like these also point to the intersections between immigration, race, and ethnicity, "and the continuing problem of the color line."

As interdisciplinary scholars, our Division members employ multiple lenses in their examination of health, health policy, and health services. The 2009 annual meeting's theme, "Race, Ethnicity, and the Continuing Problem of the Color Line," offers us an opportunity to showcase how our diverse scholarship sheds light on the impact of social inequalities on health and wellbeing. For instance, through the lens of immigration, my work examines the role of social inequalities by race, ethnicity, gender, and class in shaping health outcomes. Sociologist Alejandro Portes' proposition that "the field of immigration represents, in Merton's term, 'a strategic research site' (SRC)—an area where processes of more general import are manifested with unusual clarity"<sup>1(p. 2)</sup>—holds true in that regard. And you, how do you approach your work on health?

We invite you to submit your work to one of the exciting and rich sessions our membership proposed for the 2009 annual meeting in San Francisco. In the words of SSSP President Barkan, the meeting "will be an occasion both to celebrate the racial and ethnic diversity of our society and to reflect soberly on the color line that remains and the work that still needs to be done."

Our Division's sessions include our regular slate of two thematic sessions, and a roundtable discussion as well as 16 co-sponsored sessions and a teaching workshop; some highlights include the following:

- » Theorizing Community-Level Interventions: Towards Eliminating Racial Inequalities in Health (Thematic session)
- » Implicit/Explicit Racism: Understanding the Role of Institutions in Contributing to Health (Care) Disparities (Thematic session)
- » Mental Health Stigma, Labeling, and Access to Care: What's Race Got To Do With It? (Thematic session co-sponsored with Mental Health)
- » Environmental Racism (Thematic session co-sponsored with Community Research and Development, Environment and Technology, and Racial and Ethnic Minorities).

Please note that the deadline for submissions is **January 31, 2009**.

As we move into a time of possibilities and hope, I look forward to learning about the lenses you use in your work, and to putting our minds together as scholars and activists to make health as a human right a reality.

<sup>1</sup> Portes, A. (1995). Economic sociology and the sociology of immigration: A conceptual overview. In A. Portes (Ed.), "The economic sociology of immigration: Essays on networks, ethnicity, and entrepreneurship." New York: Russell Sage.

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## Statement from the Newsletter Editor

I am pleased to serve as the incoming newsletter editor for *Healthy Outlook*. I would like to extend many thanks to Alexis Bender, previous editor, for a smooth transition and for all her hard work over the past three years.

I am a doctoral candidate at Brandeis University in sociology and social policy, and my main focal areas are medical sociology, the

sociology of families, and policy, with a particular interest in theories of risk in conceptions of women's and child health in addition to policies pertaining to the health of women, children, and families. I look forward to meeting many of you, and please do not hesitate to contact me with any questions or news of note for the next newsletter!

All the best,  
Miranda

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## 2009 Conference, San Francisco, August 7-9, 2009

The 59<sup>th</sup> Annual Meeting of SSSP will be held in San Francisco, CA this year at The Stanford Court Hotel. Please see the call for papers on the SSSP website at:

<http://www.sssp1.org/index.cfm/m/349/fuseaction/ssspsession.publicView>

Also, please see the information for the 2009 Student Paper Competitions and Outstanding Scholarship Awards:

<http://www.sssp1.org/index.cfm/m/296>

## Co-sponsored Sessions

Health, Health Policy, and Health Services Division  
Society for the Study of Social Problems  
Proposed Sessions for the 2009 Annual Meeting  
Theme: Race, Ethnicity, and The Continuing Problem Of The Color Line

### Thematic Session:

***Theorizing Community-Level Interventions: Towards Eliminating Racial Inequalities in Health***

Co-Organizers: Amy Schulz, University of Michigan  
Valerie Haines, University of Calgary

Emily S. Ihara  
**Division Co-Chair**  
Department of Social Work  
George Mason University  
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## Co-sponsored Sessions (Continued)

### Thematic Session:

#### ***Implicit/Explicit Racism: Understanding the Role of Institutions in Contributing to Health (Care) Disparities***

Co-Organizers: Abigail A. Sewell, Indiana University  
Debora Paterniti, University of California, Davis

### Roundtables:

#### ***Health, Health Policy, and Health Services Roundtables***

Organizer: Emily S. Ihara, George Mason University

### Panel Sessions:

#### ***Mental Health Stigma, Labeling, and Access to Care: What's Race Got To Do With It?***

##### Thematic

Co-sponsors: Health, Health Policy, and Health Services; Mental Health

Organizer: Martin Jack, Indiana University

#### ***Race, Ethnicity, Migration and Health***

Co-sponsors: Health, Health Policy, and Health Services; Race and Ethnicity

Co-Organizer: Edna A. Viruell-Fuentes, University of Illinois at  
Urbana-Champaign  
Emily Ihara, George Mason University

#### ***The Personal is Political: Health Activism***

Co-sponsors: Health, Health Policy, and Health Services; Conflict, Social Action & Change

Co-Organizers: Laura Lorenz, Brandeis University  
Jean Elson, University of New Hampshire

#### ***Inequality and Struggle: The Health and Well-Being of Workers***

Co-sponsors: Health, Health Policy, and Health Services; Labor Studies

Co-Organizers: Emily S. Ihara, George Mason University  
Corey Dolgon, Worcester State College

#### ***Is Mental Illness a Disability? Issues and Concerns***

Co-sponsors: Health, Health Policy, and Health Services; Disabilities; Mental Health

Co-Organizers: Elizabeth Ettorre, University of Liverpool  
Linda Morrison, Duquesne University

#### ***Theorizing about Chronic Illness and Disability***

Co-sponsors: Health, Health Policy, and Health Services; Disabilities, Social Problems Theory

Organizer: Alexis Bender, Georgia State University

#### ***Gender, Aging, and Medical Technology***

Co-sponsors: Health, Health Policy, and Health Services; Youth, Aging, and the Life Course

Co-Organizers: Cheryl D. Stults, Brandeis University  
Abigail Brooks, Boston College

## Co-sponsored Sessions (Continued)

### ***Adolescent Problem Behavior: Criminological and Health Perspectives***

Co-sponsors: Health, Health Policy, and Health Services; Crime and Juvenile Delinquency

Organizer: Tamara Leech, Indiana University-Purdue University  
at Indianapolis

### ***Innovative Approaches to Elder Care***

Co-sponsors: Health, Health Policy, and Health Services; Youth, Aging, and the Life Course

Organizer: Ronnie J. Steinberg, Vanderbilt University

### ***The Social Organization of Health Care: In Whose Interests?***

Co-sponsors: Health, Health Policy, and Health Services; Institutional Ethnography

Organizer: Janet M. Rankin, University of Calgary

### ***Environmental Racism***

#### Thematic

Co-sponsors: Health, Health Policy, and Health Services; Environment and Technology; Racial  
and Ethnic Minorities

Organizer: Shawn A. Cassiman, University of Dayton

### ***The Synergy of Physical and Mental Health***

Co-sponsors: Health, Health Policy, and Health Services; Mental Health

Organizer: Teresa L. Scheid

### ***Infertility and Alternative Paths to Parenthood***

Co-sponsors: Health, Health Policy, and Health Services; Family

Organizer: Kristin Wilson

### ***The Environment, Health and Justice***

Co-sponsors: Health, Health Policy, and Health Services; Environment & Technology

Organizer: Erin Robinson, Canisius College

### ***Death and Dying (Roundtable)***

Co-sponsors: Health, Health Policy, and Health Services; Youth, Aging, and the Life Course

Organizer: John Baugher, University of Southern Maine

### ***Medical Marijuana***

Co-sponsors: Health, Health Policy, and Health Services; Drinking and Drugs

Organizer: Stephen Sifaneck, Berkeley College

### **Teaching Workshop**

#### ***Teaching about Health and Illness***

Organizer: Mitchell Berbrier,  
University of Alabama at Huntsville

## Medical Marijuana Resolution Passed

A section-sponsored resolution on medical marijuana passed at the annual meeting this year in Boston. The final text (below) was drafted by Professor Wendy Chapkis.

Resolution: Medical Marijuana

From: Health, Health Policy, and Health Services Division

WHEREAS the Society for the Study of Social Problems find the following:

1. Federal drug policy on marijuana threatens the health and well being of thousands of Americans by prohibiting even the medicinal use of cannabis under physician supervision in states with medical marijuana laws. The federal government has actively impeded research on the medical use of marijuana despite patient and physician reports that it may help to relieve such debilitating symptoms as nausea, pain, and loss of appetite associated with serious illnesses.
2. In February of this year, the American College of Physicians -- representing 124,000 oncologists, neurologists and other doctors of internal medicine -- released a position paper declaring that the scientific evidence "supports the use of medical marijuana in certain conditions" and calling on the federal government to reclassify marijuana to permit medical use. In addition, the American Nurses Association, American Public Health Association, American Academy of HIV Medicine, and many other national organizations are on record supporting safe and legal access to medical marijuana for patients whose doctors recommend it.
3. The American public, too, overwhelmingly supports patients' rights to use medical marijuana; national polls show that more than three out of four Americans favor its legal use. Already twelve states -- Alaska, California, Colorado, Hawaii, Maine, Montana, Nevada, New Mexico, Oregon, Vermont, Rhode Island, and Washington -- have enacted medical marijuana laws.
4. However, until there are changes in federal drug policy, the threat to patients and caregivers of arrest by federal agents continues.

There are now two pieces of federal legislation pending that would help to alleviate this threat:

A. The Hinchey-Rohrabacher medical marijuana amendment

The DEA has conducted dozens of raids on legal and registered medical marijuana patient collectives and dispensaries in states such as California where the medical use of cannabis is legal under state law; the Department of Justice (DOJ) is currently prosecuting more than three-dozen licensed medical cannabis patients and care providers. The Hinchey-Rohrabacher Amendment would limit the ability of DOJ to arrest and prosecute patients and providers who are acting within the limits of their state law by prohibiting the DEA from using any funds to interfere with state medical marijuana laws. The amendment, which has been proposed in each of the past several sessions, will once again be voted on this summer.

2. The Medical Marijuana Patient Protection Act. H.R. 5842 would end marijuana's classification as a Schedule I drug to allow doctors to prescribe it for medical use. Additionally, this bill would protect medical marijuana patients who use marijuana legally under state law from arrest and jail.

NOW, THEREFORE, BE IT RESOLVED that the SSSP supports both the Hinchey-Rohrabacher medical marijuana amendment and the Medical Marijuana Patient Protection Act.

The SSSP membership directs that copies of this resolution be sent to all federal legislators and the administrative offices of the DEA and DOJ.

## News of Note!

- ✓ J. Steven Picou, University of South Alabama, was the recipient of the 2008 William Foote Whyte Distinguished Career Award given by the American Sociological Association Section on Sociological Practice.
- ✓ Shari Dworkin started a new position of Associate Professor at UCSF in the Department of Social and Behavioral Sciences. She will also be affiliated with the Center for AIDS Prevention Studies (UCSF).
- ✓ David Schleifer, PhD Candidate in the Department of Sociology, New York University has just started a year-long fellowship at the Chemical Heritage Foundation to finish his dissertation about how food companies "cleaned up" trans fats. To find out more about the Chemical Heritage Foundation's intellectual atmosphere, see <http://www.chemheritage.org/>

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CONGRATULATIONS!

## MEMBER PUBLICATIONS

- ✓ Stephen J. Morewitz has written a new book, DEATH THREATS AND VIOLENCE. NEW RESEARCH AND CLINICAL PERSPECTIVES (New York: Springer Science+Business Media, LLC, 2008).
- ✓ Jaffe, D.J. and C. Wellin. (2008) "June's Troubled Transition: Adjustment to Residential Care For Older Adults with Dementia." Care Management Journals, Vol. 9, No. 3: 128-137.
- ✓ Wellin, C. (2007). "Paid Caregiving for Older Adults with Serious or Chronic Illness: Ethnographic Perspectives, Evidence, and Implications for Training." Paper Commissioned by the National Academies Center for Education on Research Evidence Related to Future Skill Demands. Washington, DC. [http://www7.nationalacademies.org/cfe/Future\\_Skill\\_Demands.html](http://www7.nationalacademies.org/cfe/Future_Skill_Demands.html)

## Call for Encyclopedia Entries

The editor of the Encyclopedia of the History of Invention and Technology is looking for authors for a few remaining topics. Please contact Editor David Staley for more information:  
[technology\\_encyclopedia@hotmail.com](mailto:technology_encyclopedia@hotmail.com)



## NALBOH's 2009 Call for Presentations is now available!

National Association of Local Boards of Health - 17<sup>th</sup> Annual Conference  
July 1-3, 2009  
Philadelphia, PA

“Improving Public Health through Leadership and Knowledge”

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Please visit [www.nalboh.org](http://www.nalboh.org) to complete the online submission form or download a printable form. Submissions are due **December 19, 2008**. To learn more about the conference, please visit the NALBOH web site at [www.nalboh.org](http://www.nalboh.org) or contact Tracy Schupp at (419) 353-7714 or [tracy@nalboh.org](mailto:tracy@nalboh.org).

**Don't miss your opportunity to take part in one of the most significant public health conferences in 2009. Submit an abstract today!**

We apologize for cross posting and any duplication.

**N A L B O H**

National Association of Local Boards of Health

**Call for Papers: 9<sup>th</sup> Conference of the European Sociological Association  
European Society or European Societies?  
Lisbon, 2-5 September 2009**

European Sociology Association Research Network 16 'Sociology of Health & Illness'

Transformations and Challenges in health and health care across Europe's borders

European health and health care systems are experiencing complex transformations and in some countries, these health care systems have undergone extensive and varied reforms. Some of these reforms have created greater social inequalities and generated controversy among government officials, policy makers, health care workers and citizens. With increasing economic insecurity and the growth of 'disaster capitalism', health is a sought after commodity. A sociological analysis in this area explores the impact of current social changes on European health and healthcare and recent developments in health care policy. This sort of analysis addresses the implications for those living in European countries and offers new approaches to understanding the transformations and challenges in health and health care. The task of the sociologist is to bear witness to these complexities and to document them critically.

Our Research Network invites papers that deal with the following themes and we particularly welcome papers offering a comparative perspective:

- \* Politics of health care in Europe
- \* Health and migration in a European context
- \* Disasters in the context of health and illness in Europe
- \* Challenges in reproductive health
- \* Mental health issues in Europe
- \* Patterning of health and disease in Europe
- \* Social aspects of death and dying
- \* Emotions and health
- \* The body in health and illness
- \* Inequalities and social divisions in European health: class, race, ethnicity and gender
- \* Formal health care organisation and delivery of health care in Europe
- \* Complementary and alternative medicine
- \* Biomedicine and ethics
- \* Public and environmental health risks
- \* Development of new medical technologies in European health care
- \* Disabilities in the context of health and health care
- \* Substance abuse and addictions in a European context
- \* Upsetting the health professional workforce: collaborative care and professional boundaries – joint session with RN19 "Sociology of Professions"

We invite papers addressing these and other issues related to sociology of health and illness. We especially encourage submissions from PhD students.

The deadline for submitting an abstract of no more than 250 words is 31 January 2009. If your abstract is accepted, full papers must be submitted by 15 August 2009 at the latest. Please visit the ESA website <http://www.europeansociology.org> where information on the 9th ESA Conference is available, including further instructions on abstract submission. (Please do not submit abstracts to RN Co-ordinator.) RN Co-ordinator: Elizabeth Ettore Email: [E.Ettore@liverpool.ac.uk](mailto:E.Ettore@liverpool.ac.uk)



## Some additional items that might be of interest to our Division members:

### National Institutes of Health

Loan Repayment Programs (Clinical Research, Pediatric Research, Health Disparities Research, Contraception and Infertility Research and Clinical Requirements)

**Deadline: December 1, 2008 (online, 8:00 p.m.)**

The National Institutes of Health (NIH) will repay your outstanding student loans through its extramural Loan Repayment Programs (LRPs) if you are or will be conducting nonprofit biomedical or behavioral research and meet eligibility requirements. The application cycle for the extramural LRPs opened September 1 and includes programs for Clinical Research, Pediatric Research, Health Disparities Research, Contraception and Infertility Research, and Clinical Research for Individuals from Disadvantaged Backgrounds. Applications will be accepted online until 8:00 PM on December 1, 2008 at [www.lrp.nih.gov](http://www.lrp.nih.gov).

**BENEFITS:** New LRP contracts are awarded for a two-year period and repay up to \$35,000 of qualified educational debt annually. Tax offsets also are provided as an additional benefit. Participants may apply for competitive renewals which are issued for one or two years. Undergraduate, graduate, medical school, and other health professional school loans qualify for repayment. An NIH grant or other NIH funding is not required to apply for or participate in the LRPs.

**ELIGIBILITY:** Applicants must possess a doctoral-level degree (except for the Contraception and Infertility Research LRP); be a U.S. citizen or permanent resident; devote 20 hours or more per week to conducting qualified research funded by a university, nonprofit organization, or federal, state, or local government entity; and have qualified educational loan debt equal to or exceeding 20 percent of their institutional base salary. **AWARDS:** Each year, some 1,600 research scientists benefit from the more than \$70 million NIH invests in their careers through the extramural LRPs. Twenty-six percent of awards are made to individuals within one to five years after receiving their doctoral degree. More than 75 percent of awards go to individuals within 10 years after receiving their doctoral degree. Approximately 40 percent of new applications and 70 percent of renewal applications are funded.

**QUESTIONS?** Visit the LRP website at [www.lrp.nih.gov](http://www.lrp.nih.gov) for more information and to access the online application. For additional assistance, call or e-mail the DLR Information Center at [\(866\) 849-4047](tel:8668494047) or [lrp@nih.gov](mailto:lrp@nih.gov).

### Families USA Minority Health Initiatives

Unequal Burden: The True Cost of High-Deductible Health Plans for Communities of Color

Some policymakers are touting high-deductible health plans (HDHPs) as a strategy for reducing the number of uninsured. But little is known about how these plans will affect pervasive racial and ethnic health disparities. This brief discusses the full costs associated with HDHPs plans and why these expenses are disproportionately unaffordable for many communities of color. It also examines several myths about health savings accounts (HSAs), which are often coupled with such health plans. In particular, the issue brief discusses three serious concerns that make high-deductible health plans less helpful—or even potentially harmful—for racial and ethnic minorities:

- \* High out-of-pocket costs;
- \* Incentives to delay or avoid necessary care; and
- \* Barriers that will widen the health disparities gap.

As the debate around health care reform continues, it is critically important to raise the visibility of issues that impact communities of color and find solutions that work for everyone. We hope you find this resource useful in your work to achieve health equity.

## Call for Nominations

We are currently soliciting nominations for the position of Co-Chair for the Health, Health Services and Health Policy Division.

Co-Chairs serve overlapping two year terms, and are jointly responsible for: developing the Division program (identifying sessions and organizers) for the annual meeting; running the Division business meeting at the annual meeting; working with the newsletter editor to assure publication of the annual newsletter; and other Division business.

If you are interested in learning more or in nominating yourself or another individual for this rewarding position, please contact Emily Ihara at [eihara@gmu.edu](mailto:eihara@gmu.edu) for further information.

## Information about Division Elections:

Chairpersons are elected for two years. No Division Chairperson can serve for more than three consecutive years. Note, self nominations are acceptable. If you are nominated, the Executive Office will contact you to request your biographical information and statement prior to the elections. Names of nominees must be submitted to the Executive Office no later than June 1, so please contact us soon if you wish to nominate someone, or to nominate yourself.

The election process is handled by the Executive Office. Election procedures will insure to all members of the Division an opportunity to vote in the election. A majority of votes cast will be necessary to elect any Division Officer. If there are more nominees for an office and there is not a clear majority, a run-off election will be held between the two candidates receiving the most votes. The same election procedures described above will be followed for the run-off election.