Sociology of Health General Exam

Answer one question in each of the three sections.

Section I

1. Summarize the major racial/and ethnic differences in patterns of morbidity and mortality. What are some of the possible explanations that have been offered for any observable differences? Do SES-related factors, including education, explain all of the gross difference in morbidity and mortality between African-Americans and non-Hispanic whites?

2. Much has been made of race-related paradoxes and crossovers in the health literature. List and explain some of the more important of these issues (list at least two)? For each issue listed, explain whether you believe the observed patterns are real or the result of some statistical/methodological artifact. Finally, if we assume that the patterns are real, what are the most likely explanations for each?

Section II

3. Much health-related research in the social sciences, including sociology, employs survey methodology. Summarize some of the major data collection efforts related to health and health care use that have been sponsored by the Federal government. Briefly outline the major strengths and weaknesses of survey methodology for assessing the prevalence and incidence of diseases in populations.

4. Perhaps the most commonly used health status measure in survey research asks the respondent to rate his or her “overall health” on the basis of some version of a response scale that ranges from “excellent” to “poor”. What does the literature reveal concerning the association between such self-assessed health and various outcomes, including medical care use and mortality? What aspects of health might such general probes reveal? What are the weaknesses and strengths of such a measure?

Section III

5. Discuss socioeconomic status differences in mental health or physical health. (Choose ONE focus). What are the patterns of socioeconomic status and physical/mental health? What aspects of socioeconomic status (education, earnings, family income, and various aspects of jobs) are associated with psychological or physical well-being? What types of psychological problems (depression, anxiety, schizophrenia, etc.) is socioeconomic status associated with? What types of physical problems (chronic, acute, infectious, noninfectious disease) is socioeconomic status associated with? What are the explanations for these patterns? Discuss possible explanations of the effects of SES on mental health or physical health, including but not limited to the sense of control versus powerlessness (also called internal vs. external locus of control, fatalism vs. instrumentalism, mastery vs. helplessness); social support; economic hardship in the
family, or characteristics of jobs.

6. Is there a “dose-response” effect of education on health? Does the average level of health improve progressively as education increases? Or is there a critical level of education above which more schooling makes little or no difference in health? Review the findings that suggest a continuous “dose-response” relationship (a.k.a. “graded” relationship or “spectrum”). Review the findings that suggest a critical cut-point (a.k.a. “threshold”). Does the answer depend on the type of health outcome that is studied? Does it depend on whether the cases are individuals or whole populations? What is your best guess about whether education has a continuous dose-response effect or a critical cut-point? Why? What difference might this make to social policy?