



Ankara University  
**SCHOOL OF MEDICINE**

*The First Medical School In The Republic of Turkey (1945)*

# *Health Sociology*

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**Ankara University Medical School, Dept. of Public Health**

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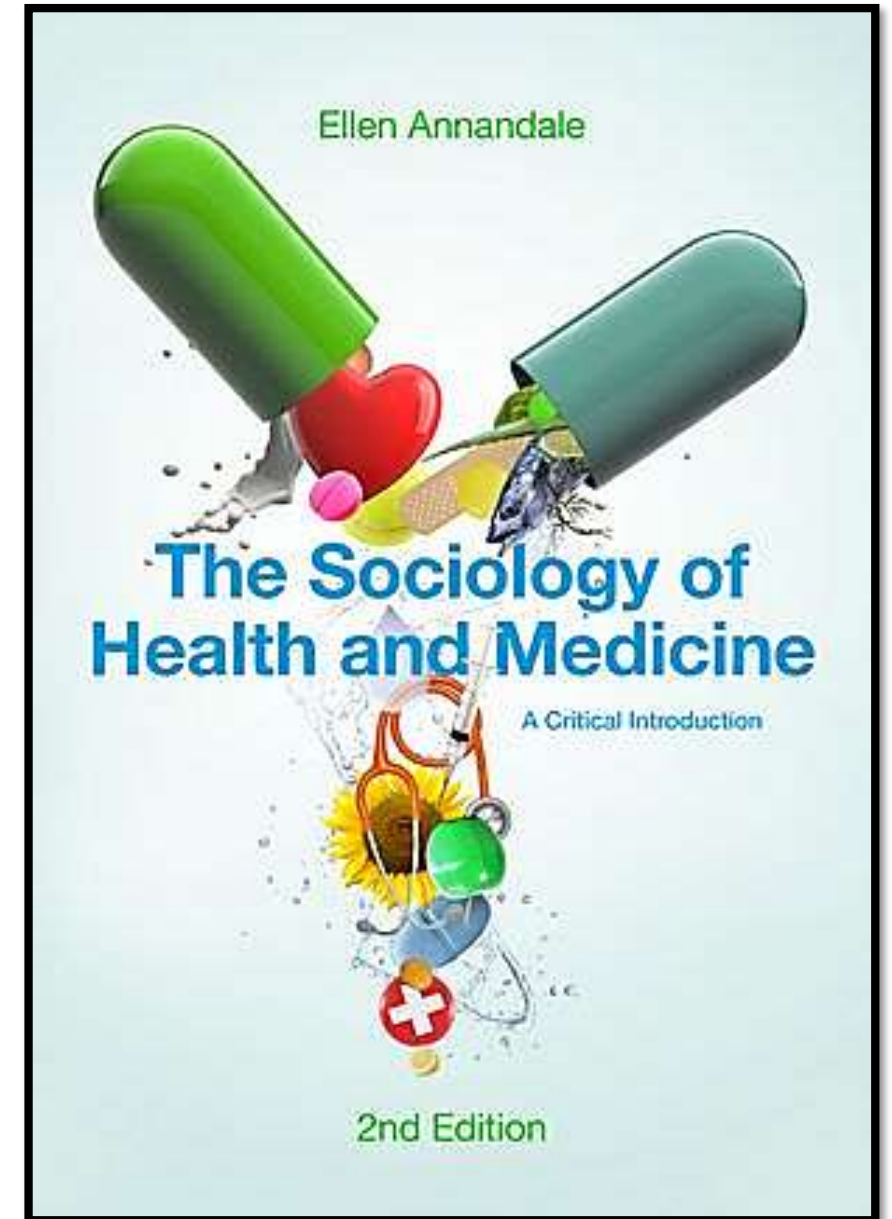
# *Outline of this Lecture*

- General introduction to Sociology
- Introduction to Medical Sociology
- Medical Sociology & Public Health
- Focus on medical sociology topics:
  - Illness behaviour & lay experiences
  - Health and social inequalities
  - Social construction of illness and medical knowledge
  - Social Capital



# SOCIOLOGY...

- **STUDY of SOCIAL CAUSES and CONSEQUENCES of HUMAN BEHAVIOUR.**



# ***Sociology in public health***

- The *sociological analysis of health and illness* can be traced back to the beginnings of sociology as an area of systematic knowledge in the late 1800s.
- Sociology's pioneers in Europe investigated the influence of cultural, socioeconomic, and political conditions in the community on individuals' social action.
- Two of the pioneers were **Emile Durkheim** (1858–1917) in France and **Max Weber** (1864–1920) in Germany.

*(Oxford Textbook of Public Health, p. 695)*

# ***Sociological theories and public health***

- Historically, the twin theoretical roots of sociology are philosophy and science as they developed in the seventeenth and eighteenth centuries in Europe with the writings of thinkers such as *Charles Montesquieu* (1689–1755) and *Jean Jacques Rousseau* (1712–1778) on social forces, power, and **social facts**; *Immanuel Kant* (1724–1804) on the systematic analysis of *cause and effect*, ie **causality relationship**;
- And *Henri de Saint-Simon* (1760–1825) about industry, the need for **social reforms**, and the scientific study of society and social life.
- Philosophers such as *René Descartes* (1596–1650), *Thomas Hobbes* (1588–1679), and *John Locke* (1632–1704) aimed at ‘grand, general, and very abstract systems of ideas that made *rational sense*’.
- **İbn Khaldun** (1332-1406) in fact, is the real founder of **Political Sociology**.



# ***Subjects and Contribution of Sociology to Medicine-1***

- The *potential* of the sociological enterprise for understanding the etiology,
- Diagnosis, and treatment of diseases;
- The ways health care is provided and funded;
- The ***societal and communal commitment*** to the support of health activities; and, indeed,
- The very ***definitions of Health and Illness***'.

## ***Medical sociology***

*is simply the study of the effects of social and cultural factors on **Health** and **Medicine**.*

*Specializing as a **medical sociologist** helps individuals view the healthcare system as a function of the society and serve it by examining and improving all its facets.*

# *Subjects and Contribution of Sociology to Medicine-2*

## ***Medical Sociology***

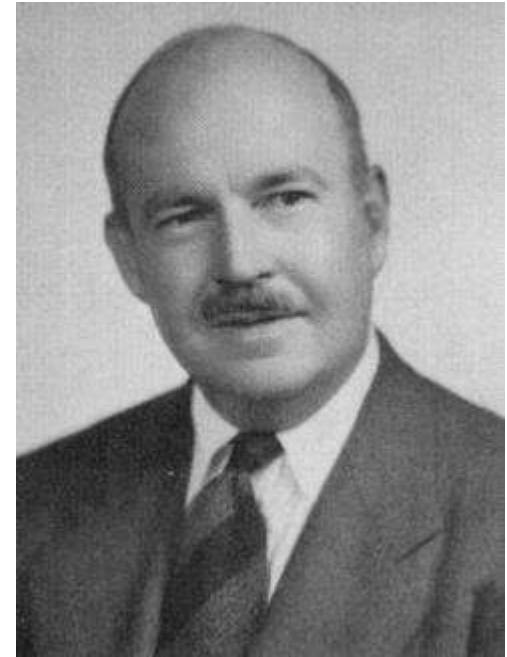
is the **Sociological** analysis of **medical** organizations and institutions; the production of knowledge and selection of methods, the actions and interactions of healthcare professionals, and the social or cultural (rather than clinical or bodily) effects of **medical** practice.

## ***Medical Sociology***

*Medical Sociology*, sometimes referred to as **Health Sociology**, is the study of the social causes and consequences of health and illness. Major areas of investigation include the **social determinants of health and disease**, the social behavior of patients and health care providers, the **social functions** of health organizations and institutions, the social patterns of the utilization of health services, the relationship of health care delivery systems to other **social institutions**, and **social policies** toward health.

# ***Talcott Parsons and his contribution to Medical Sociology***

In 1950, ***Talcott Parsons***, the leading theorist in sociology at that time, introduced his concept of the **sick role** that subsequently attracted other theoretical work and had an important role in the ***emergence of medical sociology*** as an academic field. **Medical Sociology** has evolved to the point today that ***it investigates health and medical problems*** from an independent sociological perspective. Medical sociologists now comprise one of the largest and most active groups doing sociological work in North America and Europe, and the field has expanded to other regions as well. About one of every ten American sociologists is a ***Medical Sociologist***.





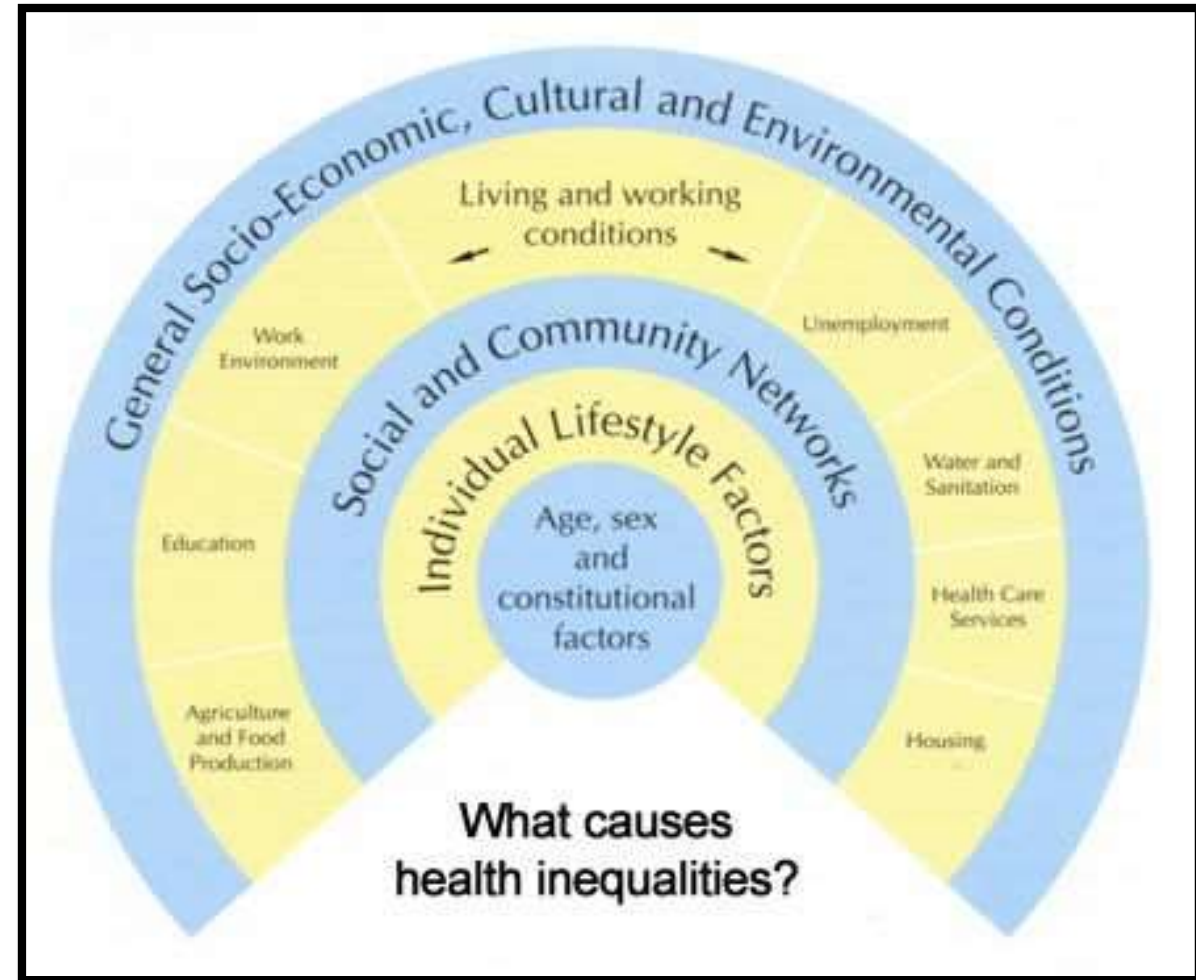
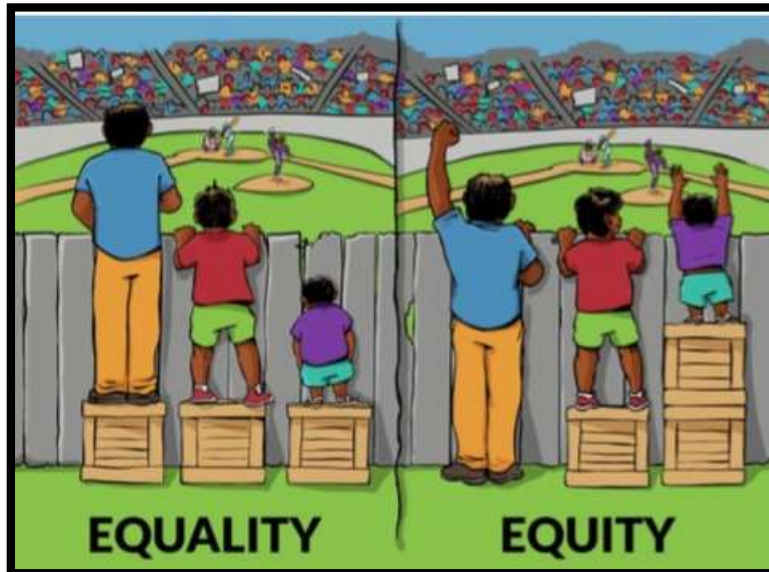
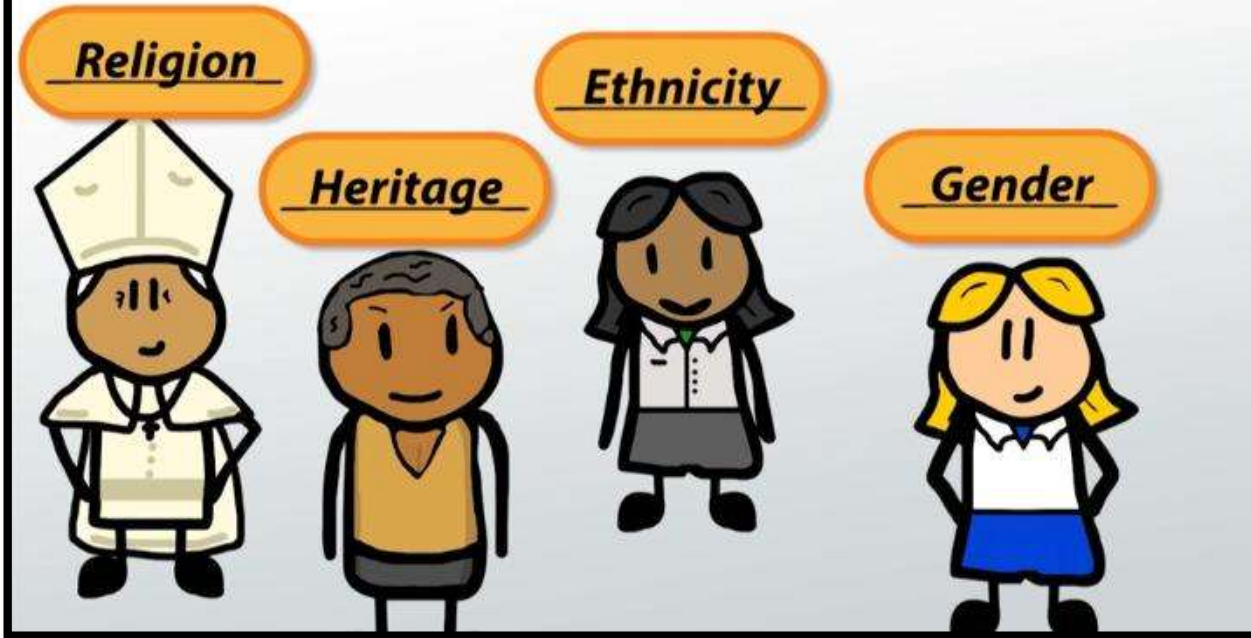
## What do medical sociologists study?

- Social causes and patterns of health and disease
- Social behavior of health care personnel and their patients
- Social functions of health organizations and institutions
- Relationship of health care delivery systems to other social systems

## Important field of study because:

- Recognizes the critical role social factors play in determining or influencing the health of individuals, groups, and the larger society.

## EXAMPLES OF MASTER STATUS



Medical Sociology online

MSo



# Talcott Parsons

- Publishes *The Social System* in 1951
- First major social theorist to deal with issues of health, illness, and the role of medicine
- Structural-functionalist perspective
- Introduced concept of the *sick role*
  - A patterned set of expectations defining the norms and values appropriate to being sick





# What do medical sociologists study?

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# MEDICAL SOCIOLOGY

- ❖ Professional endeavour devoted to **Social Epidemiology**,
- ❖ Study of *Cultural Factors* and *Social relations* in connection with illness
- ❖ And the *Social Principles* in medical organisations & treatment..  
(By Charles McIntire 1894)



## The Right to Health care

Internationally recognized as a human right

State obligations to realize the right to health care progressively

State obligations to ensure access to necessary health care

*Equal* access to necessary health care

Justice as equal treatment 'at the gate'

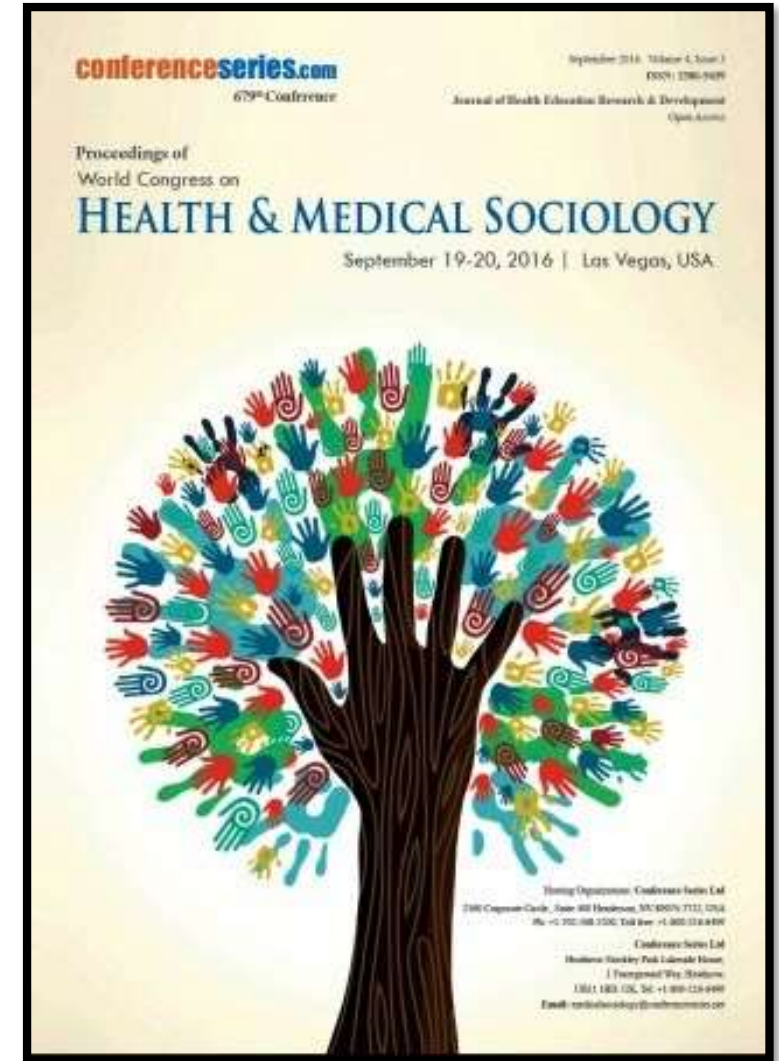
Core content of the right to health care

Justice and collective choices in health care



# MEDICAL SOCIOLOGY

- **Social Epidemiology** to practice **Social Medicine**
- To study cultural factors and social relation
- To study social factors of family, society, and government about health or disease
- To study **social principles in medical organisation and treatment**
- To study **social problems**
- To study social security



## IMPORTANCE OF MEDICAL SOCIOLOGY

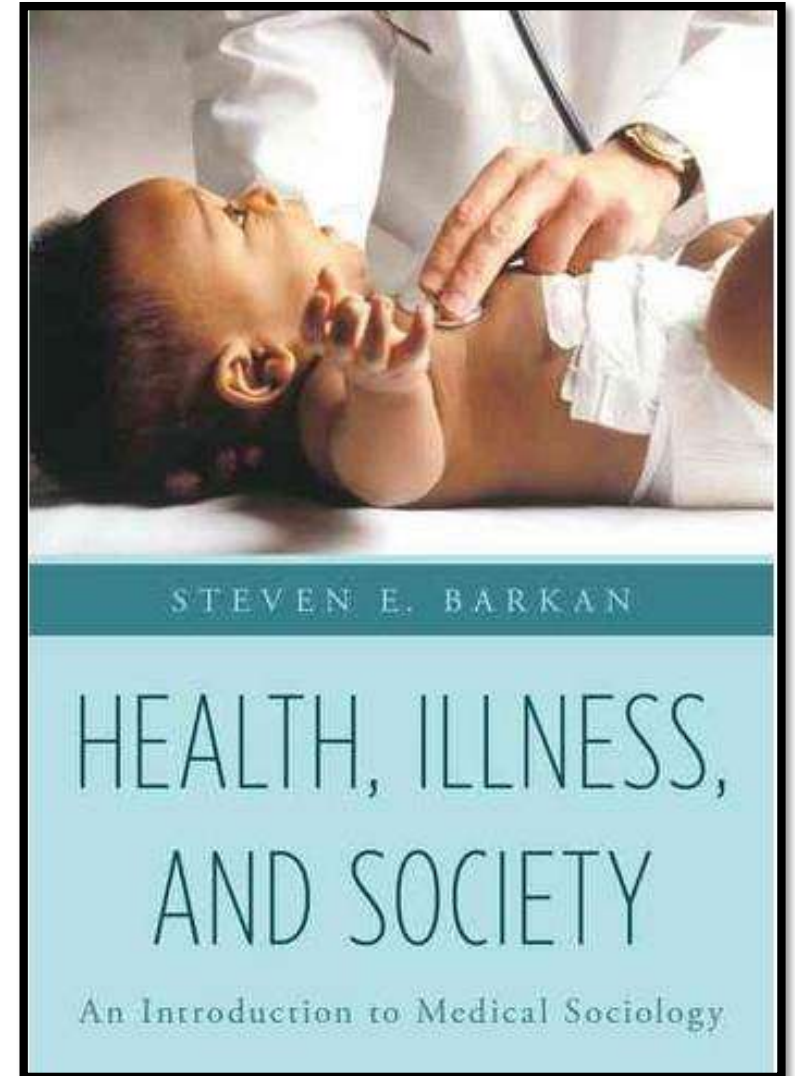
- ◉ **Social behavior** plays a critical role in determining or/and influencing the health of individuals, groups, and the larger society.
- ◉ The most important thing for all specialties in Medicine is the **diagnosis** of disease in **patients** but studying the underlying cause of disease, spread, cultural effects, the ability to control among all family members and friends, neighborhood (**family diagnosis**) is also important for control that disease in the community.

## **Clinical sociology delivers health intervention.**

*This includes: rehabilitation;  
counselling; mediation;  
community services;  
case management;  
social policy research;  
& public health campaigns.*

# ***NEED for the STUDY of SOCIOLOGY / MEDICAL SOCIOLOGY***

- **RAPID TRANSFORMATION (IMPACT of WEST)**
- **JOINT FAMILY DISINTEGRATION**
- **STRENGTH of BOND of MARRIAGE is WANING**
- **BROKEN HOMES**
- **LINGUALISM, CASTEISM, REGIONALISM**
- **LUST for POWER**
- **WIDE CORRUPTION**
- **UNEMPLOYMENT**
- **URBANISATION**
- **CONFUSION in THE SYSTEM of EDUCATION**





# Importance of sociology

1. Sociology makes a Scientific of Society.
2. Sociology studies the role of the institutions in the development of the Individual.
3. The study of Sociology is indispensable for understanding and planning of society.
4. Sociology is of great importance in the solution of social problems.
5. Sociology has drawn our attention to the essential worth and dignity of man.



# S O C I A L M E D I C I N E

- The study of Medical Needs or
- Medical Care of the Society
- with the knowledge of *Social Epidemiology*.

## Social Epidemiology



EQUALHEALTH

- Study of the causes and distribution of health, and disease in a population:
  - **Disease agents** – insects, bacteria, nutrient agents, pollutants, and temperature.
  - **Environment** - physical, biological and social environments.
  - **Human host** -demographic factors such as age, sex, and race/ethnicity.



- **Social epidemiology** is defined as the “*study of the social distribution and social determinants of states of health*”
- The aim of social epidemiology is to identify socio-environmental exposures that may be related to physical and mental health outcomes.
- The principal concern of Social Epidemiology is the study of how society and social organization influence the health and standard of living of individuals and populations.



## Social Medicine

- **Defined as** “The study of man in his social environment and study of social factors affecting health and disease”.
- **Jules Guerin** –first used this term and, importance of social factors in the etiology of disease was stressed.

# What is Social Medicine?

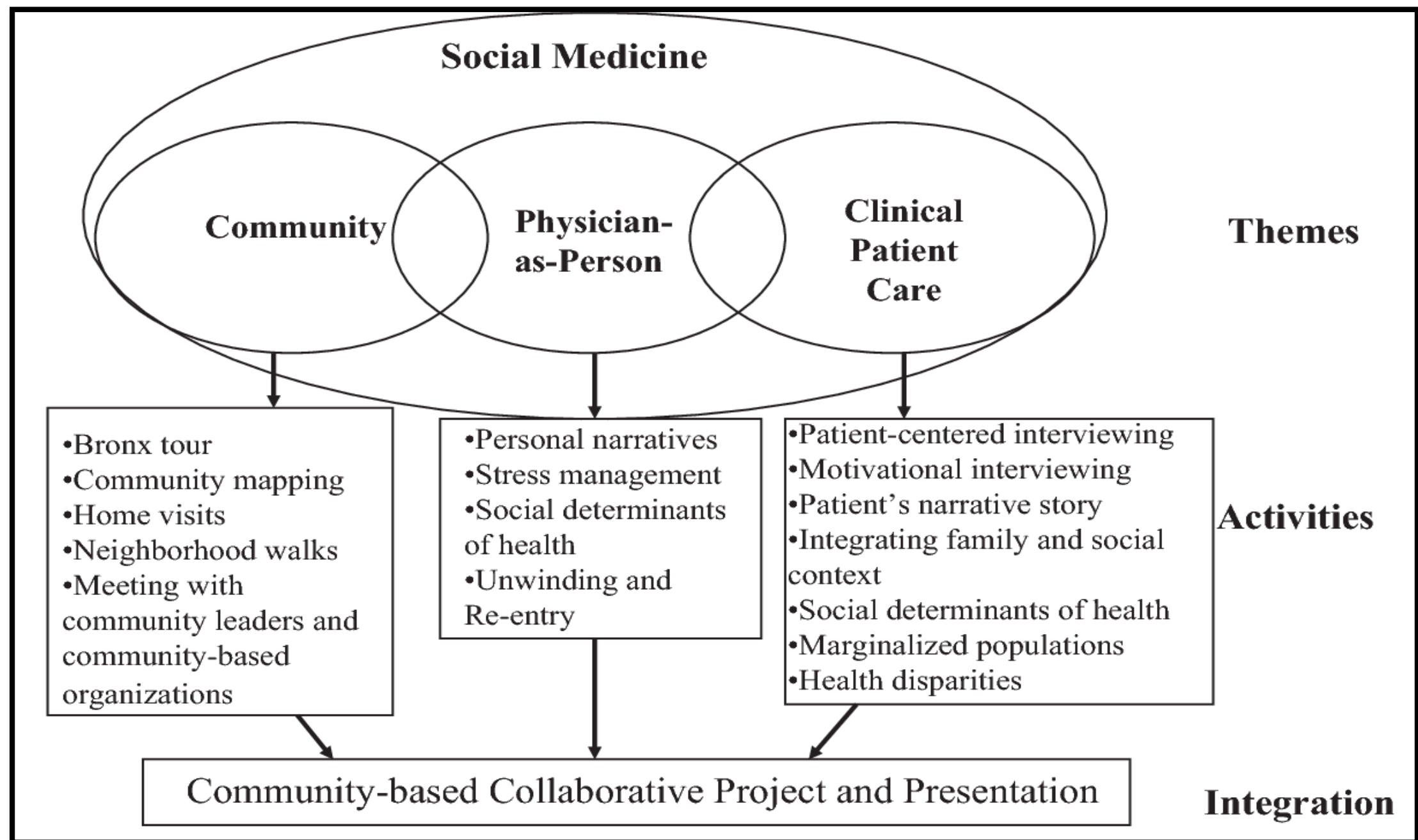
- Social medicine looks at these interactions in a systematic way and seeks to understand how health, disease and social conditions are interrelated. This type of study began in earnest in the early 1800's. It was the time of the Industrial Revolution and it was impossible to ignore the extent to which the factory system impoverished the workers, thus creating poverty and disease.



Founder of modern  
Social Medicine in Turkey..

**Prof. Dr. Nusret H. Fişek**

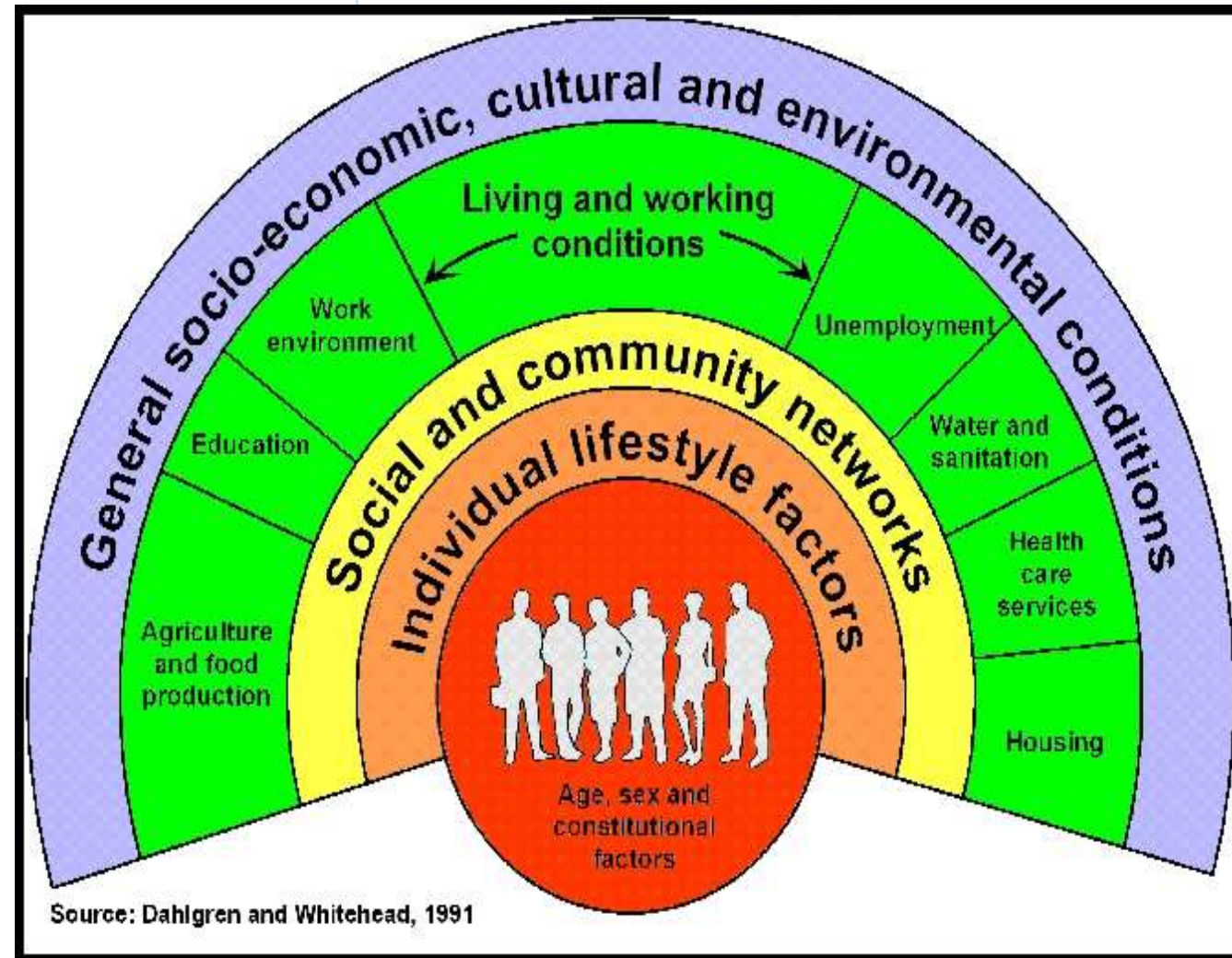
(1914 - 1990)





# Socio-economic Conditions and Health

- ECONOMIC STATUS
- EDUCATION
- OCCUPATION (*decent work!*)
- POLITICAL SYSTEM
- HOUSING
- EMPLOYMENT (*decent work!*)
- POVERTY AND AFFLUENCE
- ILLITERACY AND IGNORENCE
- TRAVEL, jet epidemics
- GLOBALIZATION
- FOOD HABITS
- TOBACCO, ALCOHOL & DRUG ABUSE
- INDUSTRY 4.0.. MER, artificial inteligent, nano materials..



# INDUSTRIALISATION..

- **PER CAPITA INCOME** and fair share
- **ECONOMIC PROGRESS** and welfare
- **STANDARD of LIVING**
- **URBAN SLUM**
- **OVER CROWDING** (*family planning*)
- **ENVIRONMENT POLLUTION**
- **SOCIAL PROBLEMS** (*Poverty!*)
- **ELIMINATE CASTE DISTINCTION**





# SERVICE

## ■ CAPITALIST COUNTRY

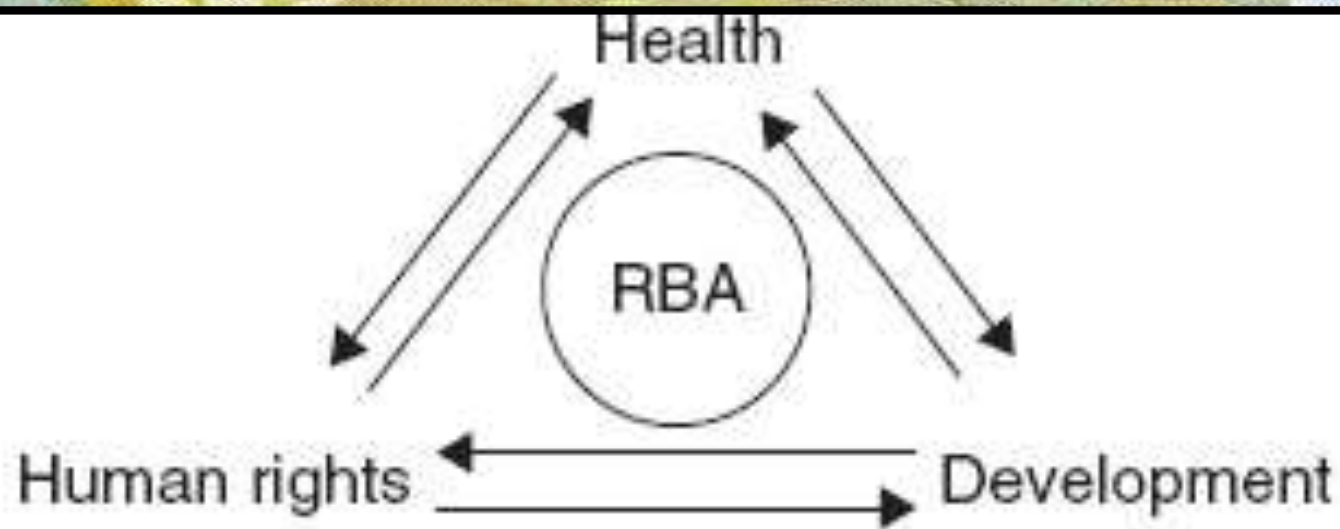
1. *State Medicine (limited)*
2. *Insurance Medicine (Premium?!)*
3. *Charity Medicine (shame!)*
4. *Private Medicine (for profit!)*

## ■ SOCIALIST COUNTRY

1. *Socialized medicine for people*
2. *Responsibility of Government*

## SOCIO-ECONOMIC CONDITIONS

- It consist of education, occupation and income.
- The world map of illiteracy closely coincides with the maps of poverty, malnutrition, ill health, high infant and child mortality rates.
- The very state of being employed in productive work promotes health, because the unemployed usually show a higher incidence of ill-health and deaths.
- There can be no doubt that economic progress has positive impact factor in reducing morbidity, increasing life expectancy and improving the quality of life.



### Rights-based approaches:

- Are based on international HR standards and principles
- Recognise right-holders and duty-bearers
- Focus on discriminated and marginalised groups
- Aim for the progressive achievement of all human rights
- Give equal importance to the outcome and the process of development
- Uphold principles of: *Indivisibility and interrelatedness of rights, Non-discrimination, Participation, and Accountability*

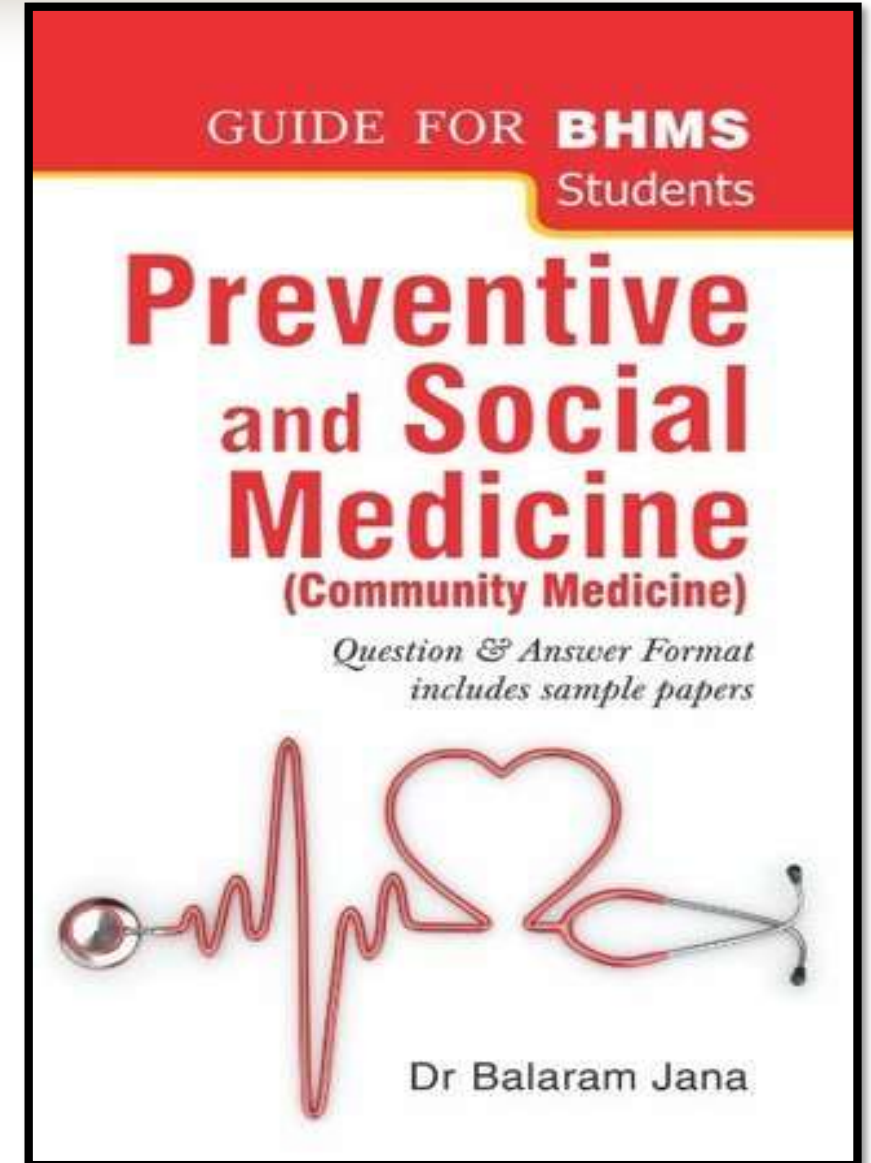
**SOCIAL AND  
BEHAVIORAL SCIENCE  
FOR HEALTH  
PROFESSIONALS**

*Brian P. Hinote  
Jason Adam Wasserman*



# COMMUNITY

- **Community is a human population living within a limited geographic area and carrying on a common inter-dependent life.**



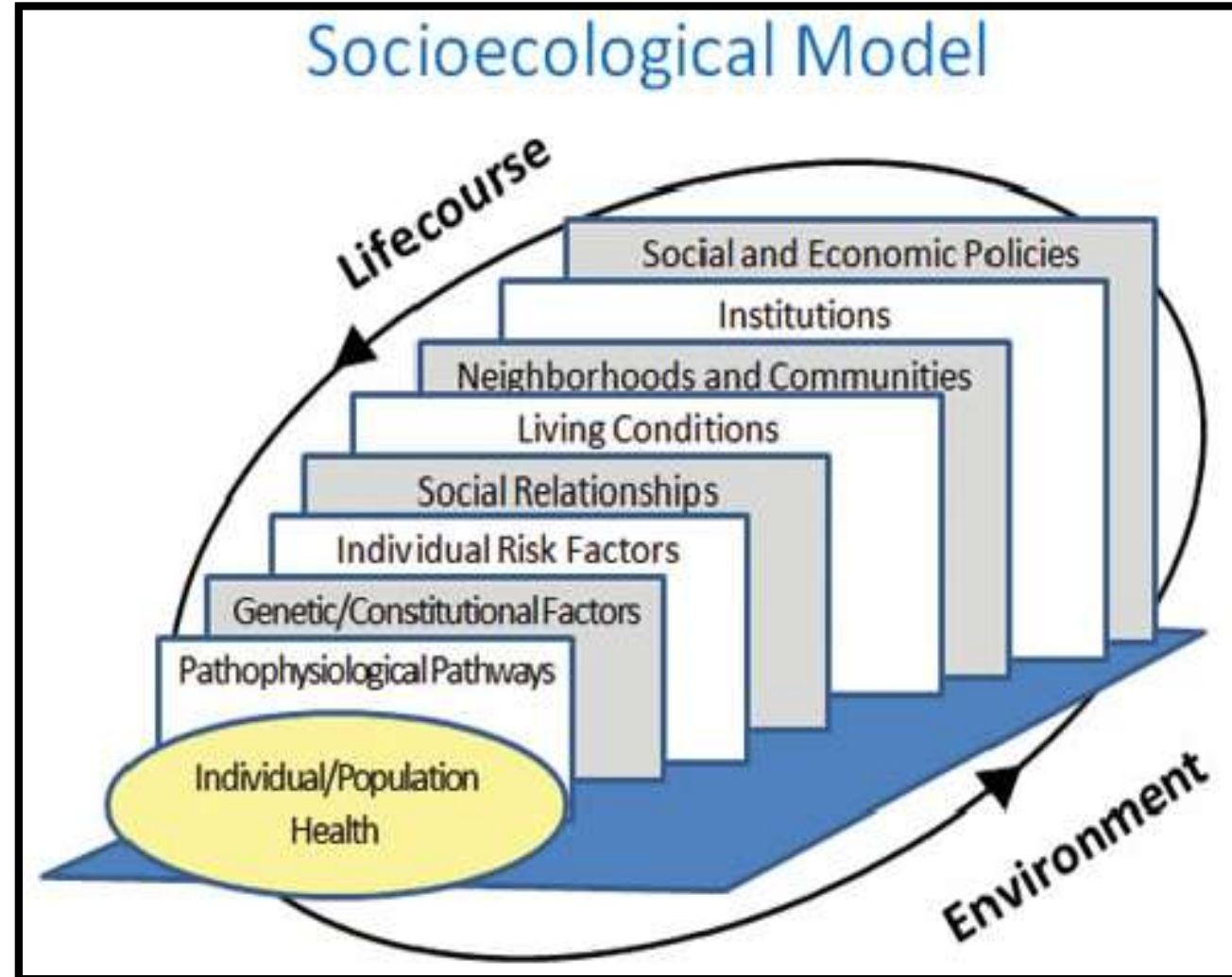
# U R B A N C O M M U N I T Y

- **Namelessness**  
*(being anonymous and ordinary)*
- **Homelessness**
- **Class extreme**
- **Social heterogeneity**
- **Social distance and *alienation***
- **Emotional tension and insecurity**
- **Isolation, unemployment, joblessness..**



# RURAL COMMUNITY

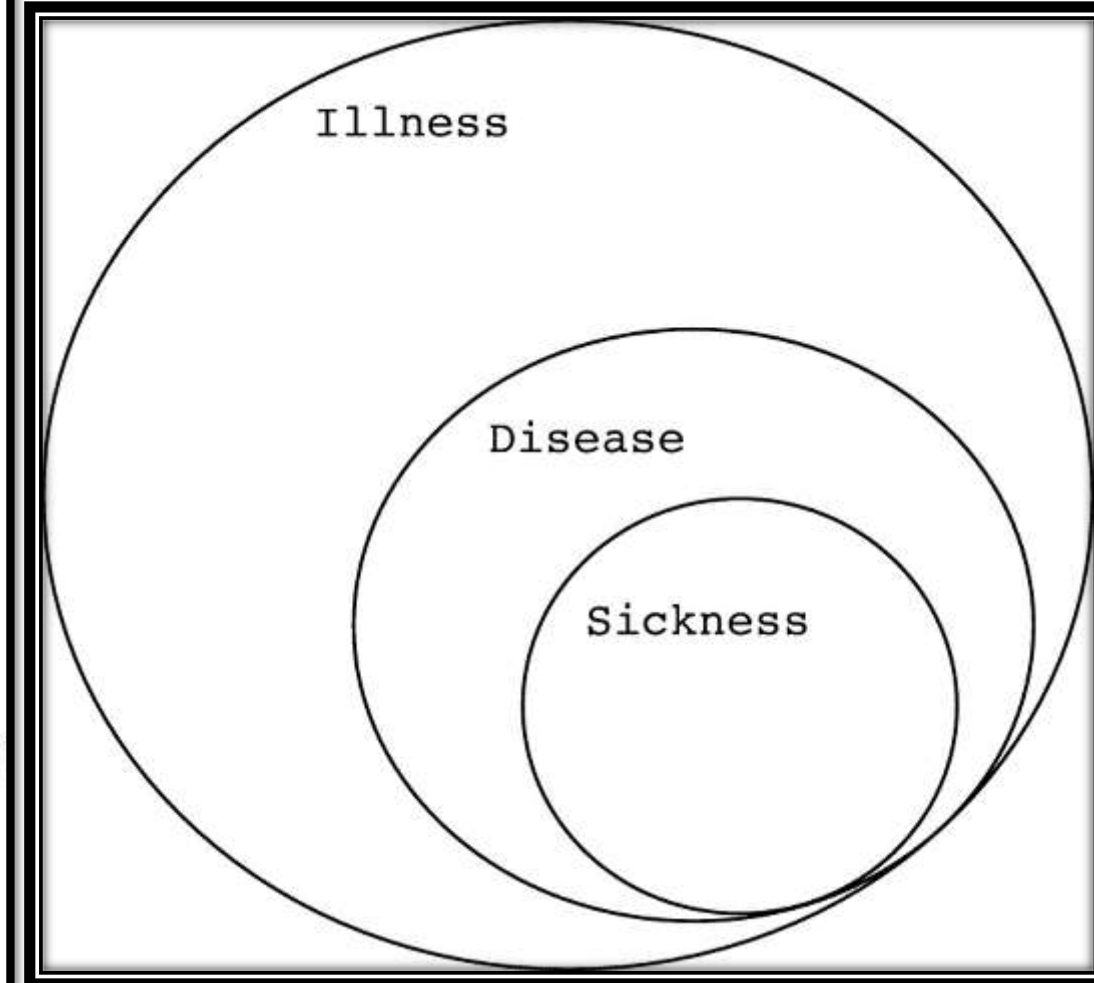
- **Community consciousness**
- **Role of neighboured**
- **Joint family**
- **Faith in religion**
- **Simplicity (*pastoral life*)**
- **Indispensable solidarity**

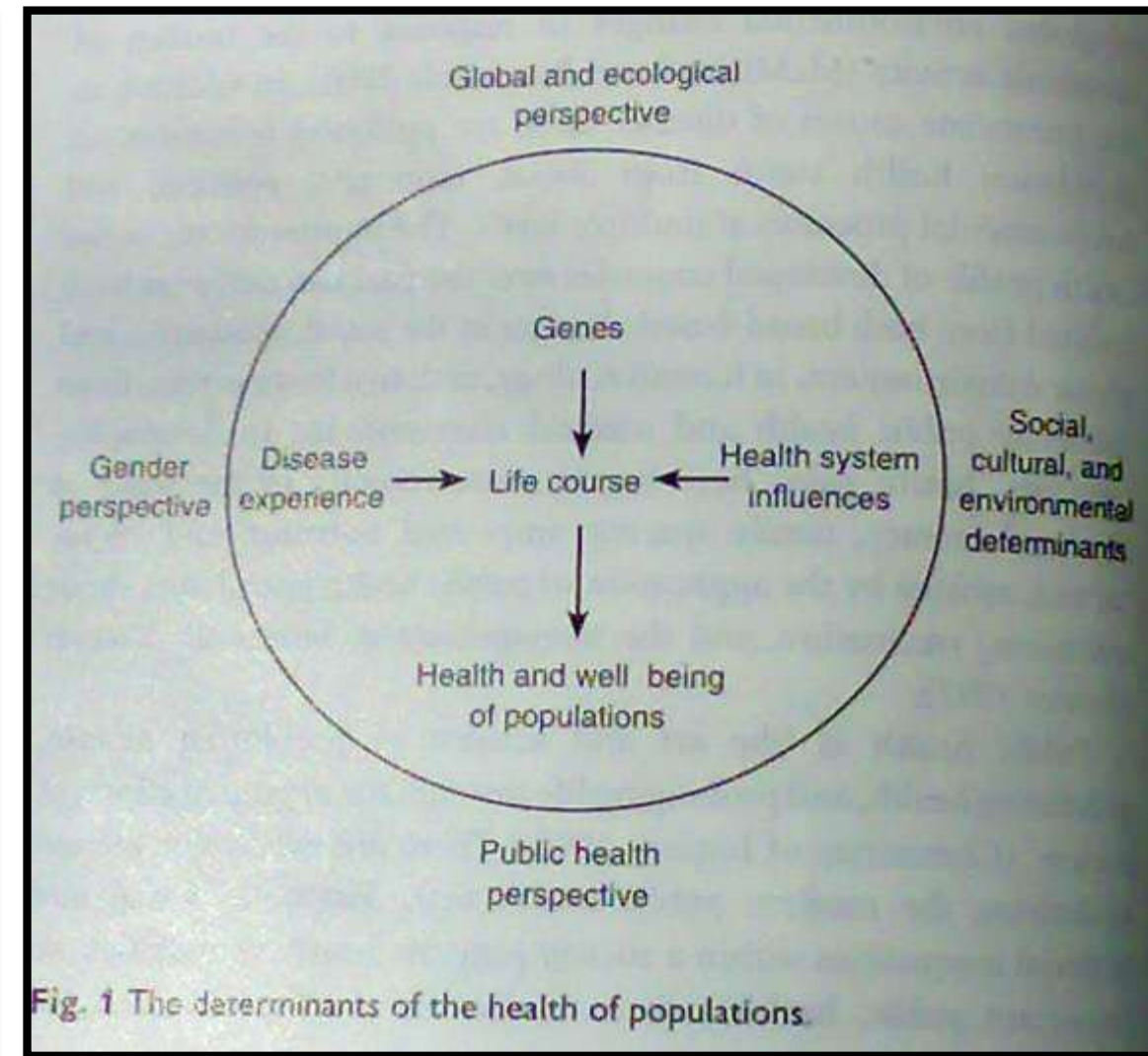
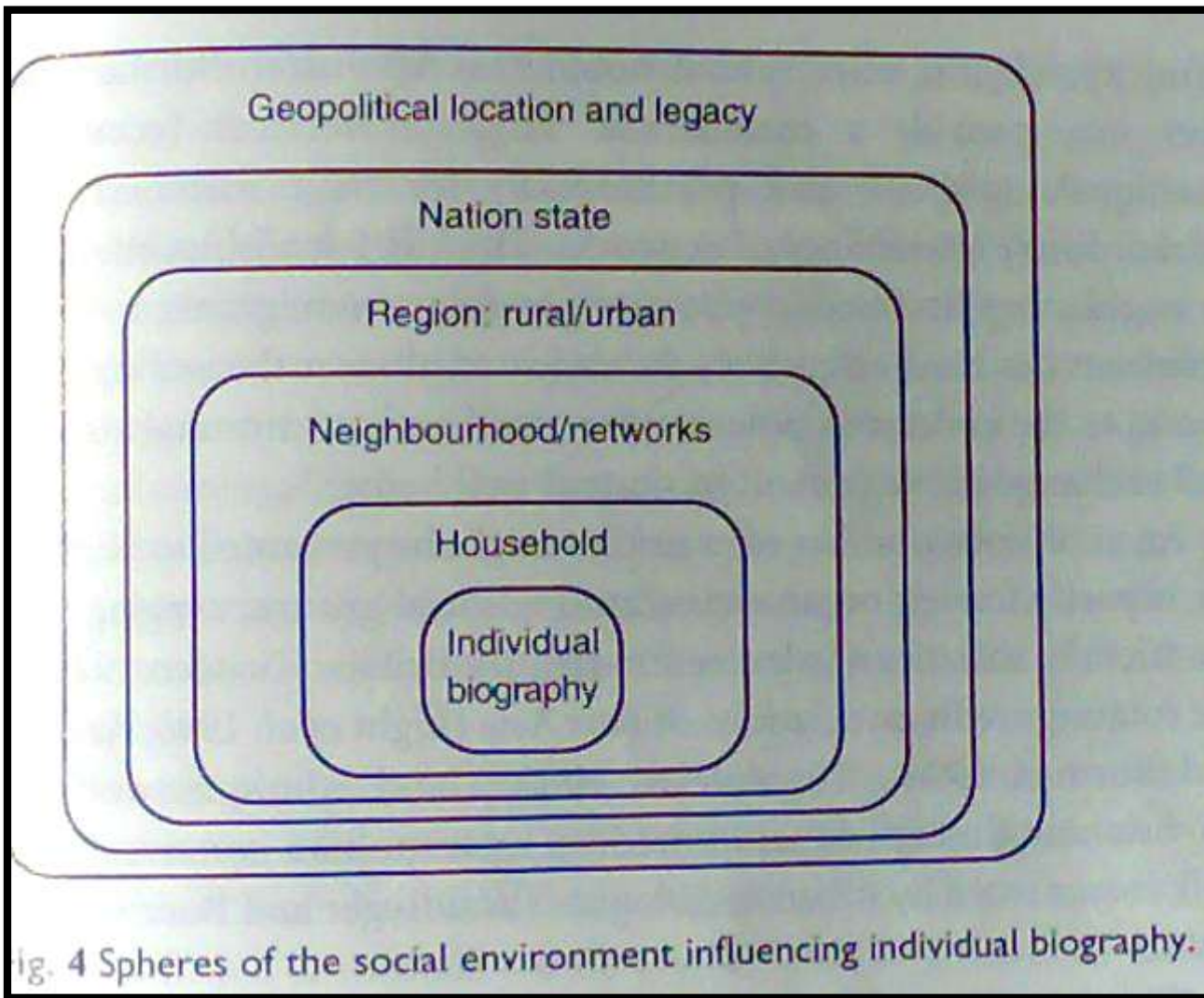




# ***Illness, disease, sickness, the sick role***

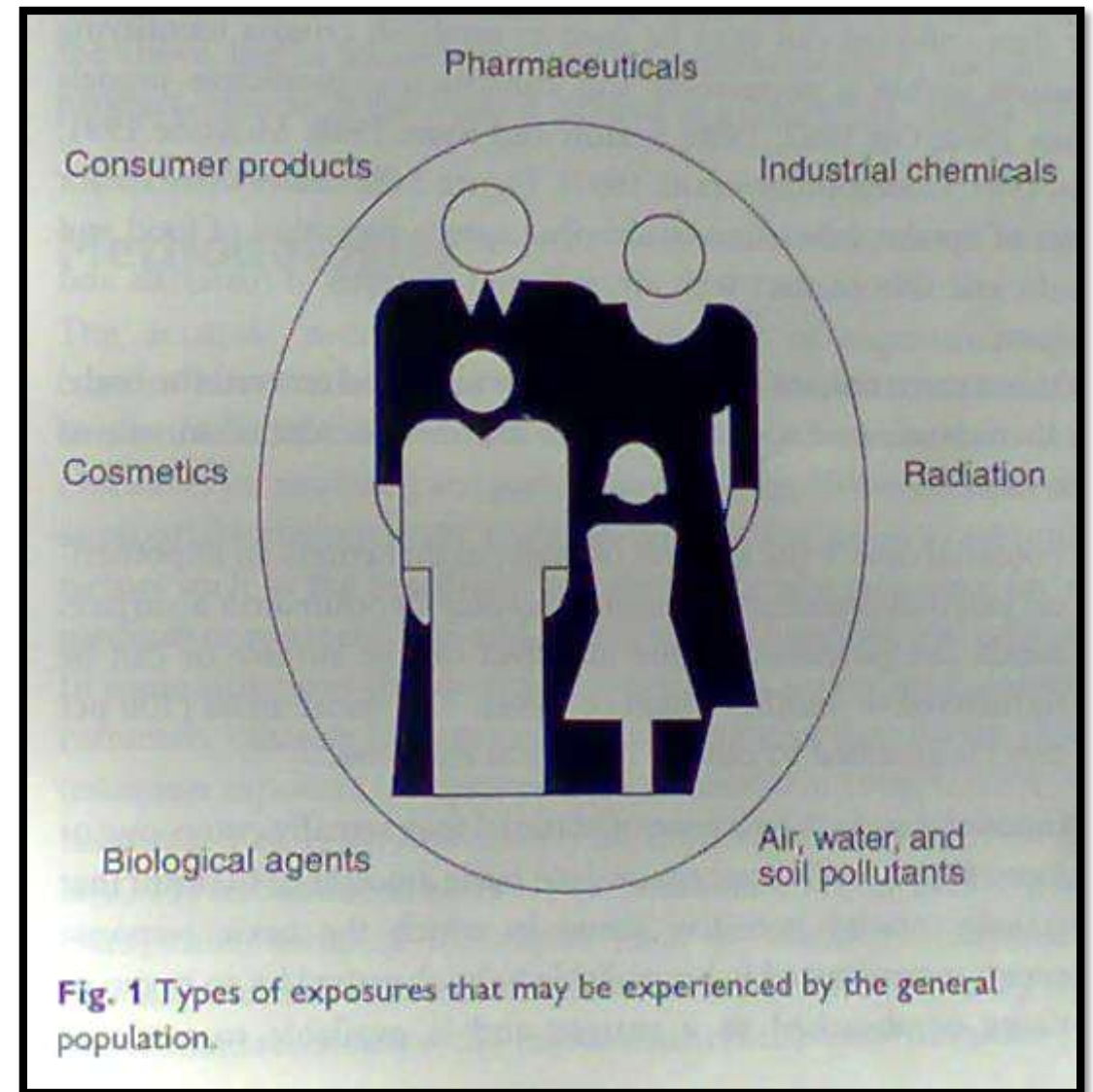
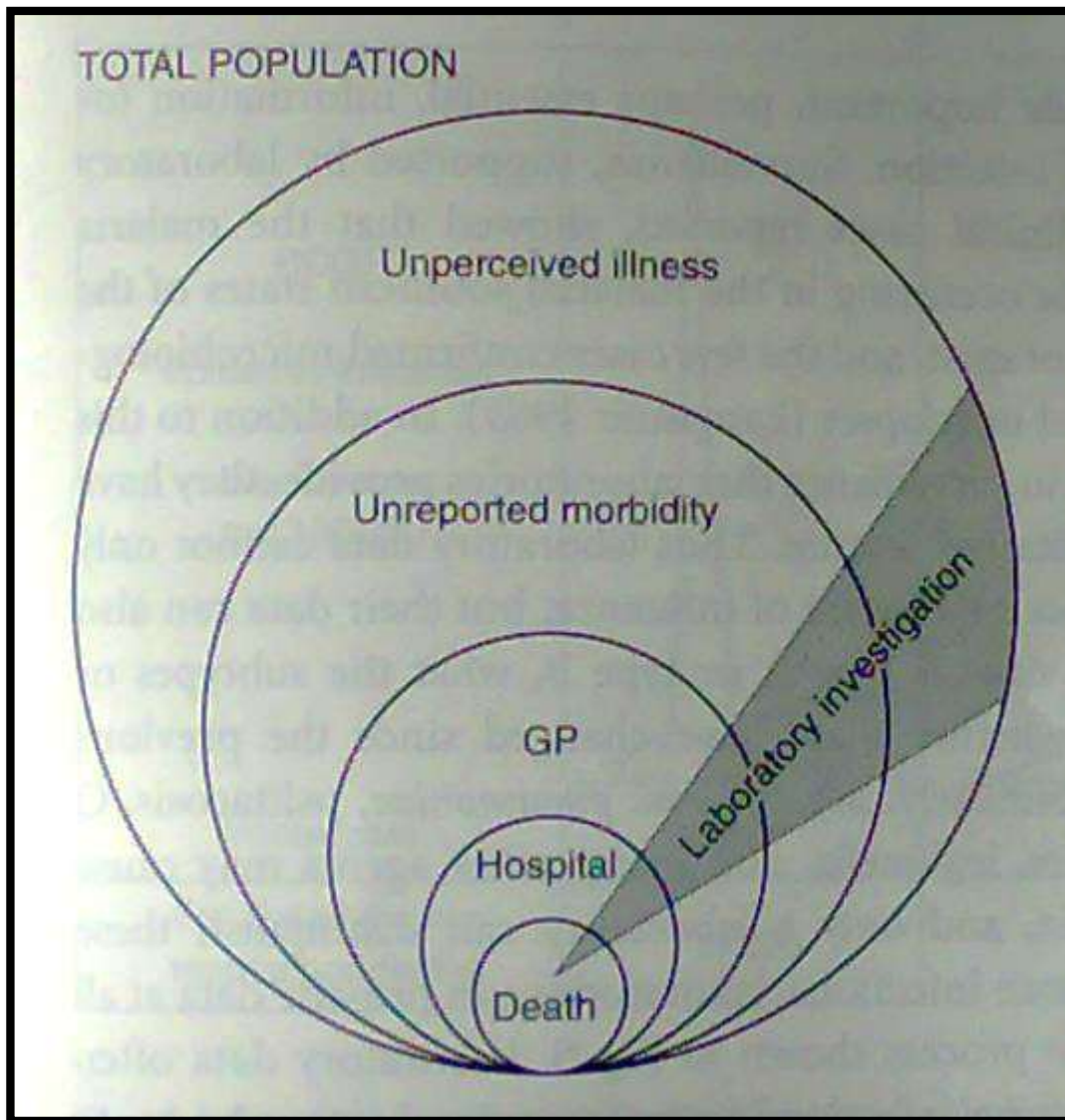
- ***illness*** is the subjective experience of ill health
- ***disease*** is the medically defined pathology
- ***sickness*** is the social role of those defined as diseased or ill
- ***the sick role*** refers to the set of rights and obligations that surround illness and shape the behaviour of doctors and patients





***Social, economic, cultural; biological, ecological, genetic, geographical..  
determinants of individual and public health within the contextual framework of social network.  
Health system is within this context a quite multifactorial system which is second to none.***





**Fig. 1** Types of exposures that may be experienced by the general population.

*Social, economic, cultural; biological, ecological, genetic, geographical..  
determinants of individual and public health within the contextual framework of **social network**.  
Health system is within this context a quite multifactorial system which is second to none.*



### **Sociological factors**

Socioeconomic status

Housing

Residency

Marital status/children

Erronous belief and food faddism

Season

### **Psychological factors**

Ethics/ cultural factors

Cognitive functioning

Sense of control and health - related behaviour

Hypochondraisis and perceived intolerance

Food preferences

### **Physiological factors**

Health

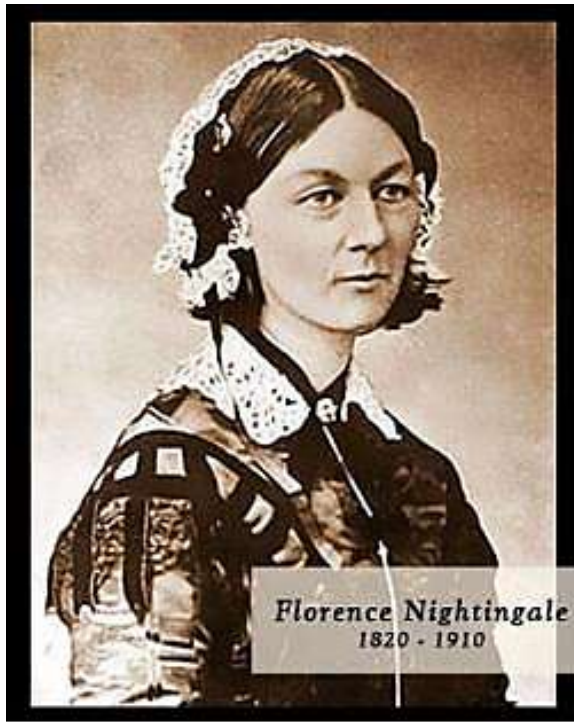
Motor performance and mobility

Senses

Dental status

Chronic disease

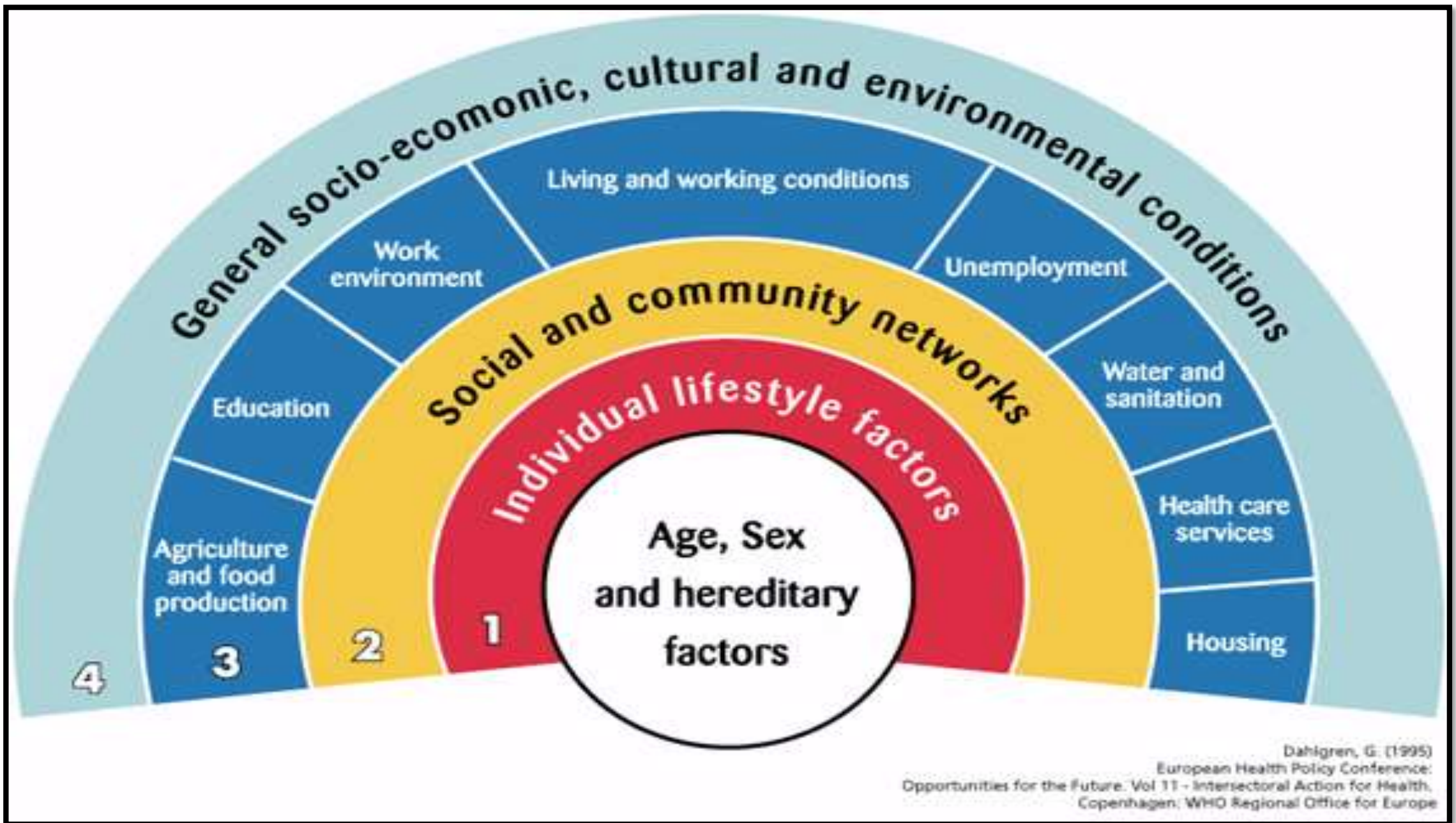
Drugs



***“The secret of Health  
lies in the homes  
of the people.”***

**Florence Nightingale**







<b>Economic Stability</b>	<b>Neighborhood and Physical Environment</b>	<b>Education</b>	<b>Food</b>	<b>Community and Social Context</b>	<b>Health Care System</b>
Employment Income Expenses Debt Medical bills Support	Housing Transportation Safety Parks Playgrounds Walkability Zip code / geography	Literacy Language Early childhood education Vocational training Higher education	Hunger Access to healthy options	Social integration Support systems Community engagement Discrimination Stress	Health coverage Provider availability Provider linguistic and cultural competency Quality of care
<b>Health Outcomes</b>					

During the last few decades, inordinate attention has been paid to the promotion of '**healthy living**'.

*This has come from governmental, academic, commercial and popular sources.*

Few people today can be unaware of the espoused merits of such a lifestyle.

Anyone who has visited a supermarket recently, turned on the TV, listened to the radio or read a magazine must have noticed that awareness of health issues is growing.

➤ ***Health is clearly a topical issue at both political and cultural levels.***



## DEFINITION

- It is the study of man as a social being in his total environment.
- It stands on two pillars
- Medicine & sociology
- Laboratory--- community
- Tools --- epidemiology & Biostatistics
- Treatment – Social therapy

## THE RIGHT TO HEALTH MEANS...

Ending discrimination in all healthcare settings





*Honor killings, child brides, «berdel» and so on..  
are of typical samples for Cultural templates ...*

***Justice is the revenge form  
of ritual in the countries  
where Democracy is rudimentary.***

STEPHEN HECQUET

"The darkest places of the Hell  
have been allocated to whom  
remain neutral/silent/passive  
in the crisis periods.. There is no  
greater sin for them not moving  
in dangerous times."

**Dante ALIGHIERI**



**Dante Alighieri**

Florence, 1265 - 1321



***Thank you  
for sincere  
cooperation..***

**Sociology  
expands our  
knowledge  
of the  
world.**



Buzzle.com

**Never forget; *Health is an essential human right and gained at birth for everyone without any pre-condition..***  
**And Medicine, in essence is a social science..**