SOS4150

Population Health and Health Inequalities

University of Oslo

Fall 2024

COURSE DESCRIPTION

Course content

This course will mainly provide a social science perspective on population health and health inequalities. It surveys social determinants of health and links theoretical work (e.g., material and fundamental cause theories) to empirical analyses of health. The course focuses on recent developments in the field, such as exploring the commercial determinants of health, the links between populism, democracy, and health, and new challenges related to the global pandemic and planetary health.

The course is structured around the following five themes, each providing a comprehensive understanding of health inequalities: *I. rational* – explaining background, the key topics; *II. Theories* – describing the key theoretical explanations of existing health inequalities; *III. Sociological concepts and ascription* – focusing on the conceptualization of health, illness, and disability in sociology and considering inequalities in health based on the key ascriptive characteristics such as gender, race/ethnicity, and genes; *IV. New frontiers* – reviewing the role of political populism, democracy, and commercial determinants of health outcomes internationally; *V. Post-COVID-19 world* – understanding the implication of COVID-19 for health inequalities, revisiting our approach to population health by shifting emphasis on global and planetary health rather than health in individual countries as well as exploring the recent understanding of ways to tackle health inequalities.

The aim of the course is three-fold:

- First, to explain to students a paradox of the persistence of health inequalities in modern welfare states, Norway being one of the unequal societies in Europe regarding differences in health outcomes between advantaged and disadvantaged groups.
- Second, to equip students with an awareness that health care systems account for only
 a part of the variation in health outcomes and that socioeconomic explanations of
 health are of primary importance to understand why health outcomes in some
 societies are better than in others.
- Third, to present to students cutting-edge theoretical and empirical insights on how
 and why health inequalities within societies exist, why they also intensify, in some
 instances, and which policy interventions, if any, effectively tackle health inequalities
 within and across countries.

The course will address these and related questions:

- How did an epidemiological transition from communicable to non-communicable diseases change the patterns of health inequalities?
- Which are the most influential theories explaining social inequalities in health?
- What are potential social determinants of health at the micro-level (e.g., socioeconomic status, health behaviors)?
- How do meso-level institutions and organizations such as social networks and communities influence health?
- How do macro-level environments, institutions, policies, and the mode of radicalized politics shape individuals' health?
- Is there enough evidence to claim that the association between socioeconomic status and health is causal?
- How does health selection (i.e., healthier individuals achieving higher socioeconomic status) explain the observed social gradient in health?
- What are the implications of COVID-19 for health inequalities in communicable diseases?

Throughout the course, we will discuss one of the central questions in this area of research - how population health and health inequalities should be measured. Socioeconomic status and health are associated, but there is no consensus about the causal direction of the association. We aim to make sense of conflicting findings and theories in a causal framework. In recent decades, health inequality researchers have been primarily focusing on noncommunicable diseases that afflict aging and industrialized societies such as Norway, but with COVID-19 and decreasing life expectancies in some countries, this focus can be shifting again by more actively considering inequalities related to communicable diseases such as the SARS-CoV-2 unprecedented global spread of the virus. Health is a contentious public issue, with government and non-government actors being heavily engaged. We will examine commercial determinants of health and the role of populism and democracy in shaping population health.

Learning outcomes

Knowledge

This course will provide students with:

- An analytical perspective on the most widely acknowledged theories in social sciences and social epidemiology;
- A familiarity with novel and ground-breaking empirical studies on health inequalities conducted in recent years;
- Knowledge of how micro-, meso-, and national-level developments complement each other to explain the extent of health inequalities;
- An understanding of difficulties in reducing health inequalities in different historical periods and country contexts;

• An overview of the methods researchers use to answer questions about health inequalities.

Skills

Students will be able to:

- Understand, explain, discuss, and use core concepts, such as relative vs. absolute measures of inequalities in health, sectoral vs. comprehensive strategies to address health inequalities, planetary health, etc.;
- Link the state of health inequalities in Norway to the most important theoretical explanations and to the state-of-the-art comparative empirical studies on this issue;
- Use acquired knowledge from the course to come up with appropriate theoretical and empirical frameworks to be used in students' own research.

Admission

Standard rules

Teaching

The course will be organized as 12 weekly sessions including lectures and discussions. The lectures will be given in English.

Seminars

There will be two seminars after the 5th and 10th lectures that will serve the purpose of revisiting discussed materials and preparing students for an exam.

Examination

The final exam for the course will include three components 1. multiple choice questions about the course; 2. concept definition from the course; and 3. Essay on a topic related to the course.

Course structure, lecturers, and seminars

Themes and lectures		Date	Topics	Lecturer
I.	1	26.08.24	Introduction to the course	Alexi
Rationale				Gugushvili
II. Theories	2	04.09.24	Welfare state and population health	Elias
				Nosrati
	3	12.09.24	Material and psychological theories	Alexi
				Gugushvili
	4	26.09.24	Behavioral, cultural, and fundamental cause	Alexi
			theories	Gugushvili
III. Sociology	5	19.09.24	Conceptualizations of impairment and disability	Jan Grue
	6	10.10.24	Gender, LGBTQ+ and health inequalities	Alexi
			-	Gugushvili

and	7	17.10.24	Race, migration, and ethnicity	Alexi
ascription				Gugushvili
IV. New	8	24.10.24	Populism, democracy, and health	Alexi
frontiers				Gugushvili
	9	31.10.24	Commercial determinants of health	Alexi
				Gugushvili
V. Post	10	07.11.24	Pandemics and health inequalities	Svenn-Erik
COVID-19				Mamelund
world	11	14.11.24	One health and planetary health	Alexi
				Gugushvili
	12	21.11.24	New perspectives on tackling health inequalities	Alexi
				Gugushvili

Seminar	Date	Topics	Seminar
			leader
1.	28.09.24	Revisiting the course's material and	Alexi
		preparing for an exam	Gugushvili
2.	09.11.24	Revisiting the course's material and	Alexi
		preparing for an exam	Gugushvili

SECTION I: RATIONALE

Lecture 1

Introduction to the course

Lecturer: Alexi Gugushvili

Readings

- Fitzpatrick, R. (2003) 'Society and changing patterns of disease', (chapter 1), in G. Scambler, (ed.) Sociology as applied to medicine, (6th edition), Edinburgh, Saunders.
- Bartley, M. (2017) Chapter 2: What is Health Inequality? In *Health Inequality: An Introduction to Concepts, Theories and Methods*. Second Edi. Cambridge: Polity Press.
- McCartney, G. (2019). Defining health and health inequalities. Public Health, 172, 22-30.
- Colgrove, J. (2002). The McKeown thesis: A historical controversy and its enduring influence, *American Journal of Public Health*, 92(5), pp. 725-729.
- Galobardes, B. (2006) 'Indicators of socioeconomic position (part 1)', *Journal of Epidemiology & Community Health*, 60(1), pp. 7–12. doi: 10.1136/jech.2004.023531.

Additional materials

 Alsvik, B. (2005). "Levekår og helse - Eksemplet Kristiania: Sunnhetspoliti i bolig og på torg.", i Larsen m.fl. (red), Helse og Nasjonsbygging, Gyldendal Akademisk, s.39-80.

SECTION II: THEORIES

Lecture 2

Welfare state and population health

Lecturer: Elias Nosrati

Readings

- IN: Beckfield J et al. 2015. An institutional theory of welfare state effects on the distribution of population health. *Social Theory & Health*. 13(3-4):227-44. (The article summarizes theoretical underpinnings of the welfare state's effect on health)
- IN: Eikemo TA, Bambra C. 2008. The welfare state: a glossary for public health. *Journal of Epidemiology & Community Health*. 62(1): 3-6. (This is an important glossary on the considered topic)
- IN: Azarova et al. 2017. The effect of rapid privatisation on mortality in monoindustrial towns in post-Soviet Russia: a retrospective cohort study. *The Lancet Public Health*. 5(2): E231-E238. (This is one of the most influential studies on the health consequences of privatization in post-communist settings)
- IN: Beckfield J, Bambra C. 2016. Shorter lives in stingier states: social policy shortcomings help explain the US mortality disadvantage. *Social Science & Medicine*. 171: 30-8. (This article explains why the US lags behind other countries in terms of health outcomes)
- IN: Nosrati E, Eikemo T, Marmot M. 2024. Health, wealth, and the Nordic model revisited. Nordic Welfare Research. 9(1). In press. (New insights on the Nordig model of health inequalities)

Additional materials

• IN: Reeves A, Clair A, McKee M, Stuckler D. 2016. Reductions in the United Kingdom's government housing benefit and symptoms of depression in low-income households. American Journal of Epidemiology. 184(6): 421-9.

Material and psychological theories

Lecturer: Alexi Gugushvili

Readings

- Bartley, M. (2017) Chapter 6: Explanatory Models III Materialist explanations, in *Health Inequality: An Introduction to Concepts, Theories and Methods*. Second Edi. Cambridge: Polity Press.
- Bartley, M. (2017) Chapter 5: Explanatory Models II Psycho-Social factors, in *Health Inequality: An Introduction to Concepts, Theories and Methods*. Second Edi. Cambridge: Polity Press.
- John W Lynch et al. (2000). Income inequality and mortality: importance to health of individual income, psychosocial environment, or material conditions. BMJ, 320, pp. 1200-1204.
- Marmot, M. & Wilkinson, R. G. (2001) Psychosocial and material pathways in the relation between income and health: a response to Lynch et al. BMJ, 322, pp. 1233-1236.

- Popay, J. et al. (2003) Beyond 'beer, fags, egg and chips'? Exploring lay understandings of social inequalities in health. Sociology of Health & Illness. Vol. 25, No. 1, pp. 1–23
- Ferlander, S. (2007) 'The Importance of Different Forms of Social Capital for Health', *Acta Sociologica*, 50(2), pp. 115–128. doi: 10.1177/0001699307077654.

Behavioural, cultural and fundamental cause theory

Lecturer: Alexi Gugushvili

Readings

- Bartley, M. (2017) Chapter 4: Explanatory Models I Behavioural and cultural explanations, in *Health Inequality: An Introduction to Concepts, Theories and Methods*. Second Edi. Cambridge: Polity Press.
- Cockerham, W.C. (2005) Health Lifestyle Theory and the Convergence of Agency and Structure. Journal of Health and Social Behavior. 46, 1, pp. 51-67.
- Lutfey, K. and Freese, J. (2005) 'Toward Some Fundamentals of Fundamental Causality: Socioeconomic Status and Health in the Routine Clinic Visit for Diabetes', *American Journal of Sociology*, 110(5), pp. 1326–1372. doi: 10.1086/428914.
- Clouston, S.A.P. and Link, B.G. (2021). A Retrospective on Fundamental Cause Theory: State of the Literature and Goals for the Future. *Annual Review of Sociology* 2021. 47:131–56.

- Phelan, J. C. *et al.* (2010) 'Social Conditions as Fundamental Causes of Health Inequalities: Theory, Evidence, and Policy Implications', *Journal of health and social behavior*, 51(1), pp. S28–S40.
- Mackenbach, J. P. *et al.* (2017) "Fundamental causes" of inequalities in mortality: an empirical test of the theory in 20 European populations', *Sociology of Health and Illness*, 39(7), pp. 1117-1133. doi: 10.1111/1467-9566.12562.

SECTION III: SOCIOLOGY AND ASCRIPTION

Lecture 5

Sociologies of Illness and Conceptualizations of Impairment and Disability Lecturer: Jan Grue

Readings

- World Report on Disability (2011), Entire Summary (3-23)
 http://www.who.int/disabilities/world-report/2011/report/en/
- Mitra, S., & Shakespeare, T. (2019). Remodeling the ICF. *Disability and health journal*, 12(3), 337-339.
- Thomas, C. (2004). How is disability understood? An examination of sociological approaches. *Disability & society*, *19*(6), 569-583.
- Shakespeare, T. (2006). The social model of disability. In: Davis, L. *The disability studies reader*, (New York: Routledge), 197-204.
- Hughes, B., & Paterson. K. (1997) "The Social Model of Disability and the Disappearing Body: Towards a Sociology of Impairment." Disability & Society 12(3) 325–40.

Gender, LGBTQ+, and health inequalities

Lecturer: Alexi Gugushvili

Readings

- Rieker, P.P., Bird, C.E. and Lang, M.E. (2010). Understanding Gender and Health: Old Patterns, New Trends, and Future Directions. In Bird, C.E., Conrad, P., Fremont, A.M., Timmermans, S. (eds). *Handbook of Medical Sociology*. Vanderbilt University Press, pp. 52-74.
- Heise, L. et al. (2019) Gender inequality and restrictive gender norms: framing the challenges to health. *The Lancet*. Volume 393, Issue 10189, 15–21 June 2019, Pages 2440-2454.
- Homan, P. (2019). Structural Sexism and Health in the United States: A New Perspective on Health Inequality and the Gender System. *American Sociological Review*. Vol 84, Issue 3, 487-516.
- IN: Laetitia Zeeman, et al., A review of lesbian, gay, bisexual, trans and intersex (LGBTI) health and healthcare inequalities, European Journal of Public Health, Volume 29, Issue 5, October 2019, Pages 974–980, https://doi.org/10.1093/eurpub/cky226 (this is an important text on health outcomes with LGBTQ+ community)

- Anna Zajacovaa, A., Huzurbazar, S., & Todd, T. (2017). Gender and the structure of self-rated health across the adult life span. Social Science & Medicine. 187, pp. 58-66.
- Tonia C Poteat, et al. (2021) Advancing LGBTQI health research, Lancet, 397, 10289, P2031-2033. DOI:https://doi.org/10.1016/S0140-6736(21)01057-6 (Short comment on an LGBTQ+ health research).

Race, migration, and ethnicity

Lecturer: Alexi Gugushvili

Readings

- Urquia, M.L. & Gagnon, A.J. (2011). Glossary: migration and health. *Journal of Epidemiology and Community Health*. 65, 5, pp. 467-472.
- Bailey, Z.D. (2017). Structural racism and health inequities in the USA: evidence and interventions. The Lancet. Volume 389, Issue 10077, pp. 1453-1463.
- CJ Mock-Muñoz de Luna (2019). Ethnic inequalities in child and adolescent health in the Scandinavian welfare states: The role of parental socioeconomic status a systematic review. Scandinavian Journal of Public Health, Vol 47, Issue 7,. pp. 679–689.
- Leyland A.H. (2021). Is the study of genetic propensities within the remit of health inequalities research? Volume 31, Issue 3, June 2021, Pages 459–460.
- Davies, N. M. *et al.* (2018) 'The causal effects of education on health outcomes in the UK Biobank', *Nature Human Behaviour*. 2(2), pp. 117–125.

Additional materials

• Rechel, B. et al. (2014). Migration and health in an increasingly diverse Europe. Lancet, 381, 9873, pp. 1235-1245.

SECTION IV: NEW FRONTIERS

Lecture 8

Populism, democracy, and health

Lecturer: Alexi Gugushvili

Readings

- Falkenbach, M. & Greer, S.L. (2021). Introduction in "The Populist Radical Right and Health: National Policies and Global Trends". Springer. pp. 1-24.
- OUT: Speed, E., & Mannion, R. (2020). Populism and health policy: three international case studies of right-wing populist policy frames. *Sociology of Health & Illness*, 42, 8, pp. 1967-1981. (The reading is redundant)
- OUT: Bor, J. (2017) 'Diverging Life Expectancies and Voting Patterns in the 2016 US Presidential Election', *American Journal of Public Health*, 107(10), pp. 1560–1562. (This is redundant as we already have had two presidential elections in the US)
- McKee, et al. (2021). Are Populist Leaders Creating the Conditions for the Spread of COVID-19? *International Journal of Health Policy and Management*. Volume 10, Issue 8, 511-515.
- Dubé, È., et al. (2021). Vaccine Hesitancy, Acceptance, and Anti-Vaccination: Trends and Future Prospects for Public Health. *Annual Review of Public Health*, 2021. 42:175–91.
- James W. McGuire, J.W. (2020). Democracy and Population Health, Elements in the Politics of Development. Cambridge University Press.
- Reeves, A. & Mackenbach, J.P. (2019). Can inequalities in political participation explain health inequalities? Social Science & Medicine, Volume 234, August 2019, 112371.

- Sarah K. Cowan, S.K. et al. (2021). COVID-19 Vaccine Hesitancy Is the New Terrain for Political Division among Americans. Socius: Sociological Research for a Dynamic World. Volume 7: 1–3.
- Koltai, J. *et al.* (2020) 'Deaths of Despair and Brexit Votes: Cross-Local Authority Statistical Analysis in England and Wales', *American Journal of Public Health*, 110(3), pp. 401–406. doi: 10.2105/AJPH.2019.305488.
- OUT: Gugushvili, A., & Reeves, A. (2021). How democracy alters our view of inequality and what it means for our health, Social Science & Medicine, Volume 283, August 2021, 114190. (This can be moved to additional materials)
- OUT: Karabulut, G. (2021). Democracy and COVID-19 outcomes. Economics Letters, Vol, 203, June 2021, 109840 (This can be moved to additional materials)

Commercial determinants of health

Lecturer: Alexi Gugushvili

Readings

- IN: Lee K, Freudenberg N, Zenone M, et al. Measuring the Commercial Determinants of Health and Disease: A Proposed Framework. *International Journal of Health Services*. 2022;52(1):115-128. doi:10.1177/00207314211044992 (This is a sociological perspective on commercial determinants of health)
- IN: Mialon, M. An overview of the commercial determinants of health. *Global Health* 16, 74 (2020). https://doi.org/10.1186/s12992-020-00607-x (Perspective on the same topic with a global framework)
- IN: Martin McKee, David Stuckler, "Revisiting the Corporate and Commercial Determinants of Health", *American Journal of Public Health* 108, no. 9 (September 1, 2018): pp. 1167-1170. https://doi.org/10.2105/AJPH.2018.304510 (The widely cited article on the topic published in the leading public health journal)
- IN: Gilmore, Anna B., et al. 2023. "Defining and Conceptualising the Commercial Determinants of Health." *The Lancet* 401(10383):1194–1213. doi: 10.1016/S0140-6736(23)00013-2. (this article reviews new insights on the commercial determinants of health)

- IN: Simone McCarthy, Hannah Pitt, Marita Hennessy, Belinda J Njiro, Samantha Thomas, Women and the commercial determinants of health, *Health Promotion International*, Volume 38, Issue 4, August 2023, daad076, https://doi.org/10.1093/heapro/daad076
- IN: Hannah Pitt, Simone McCarthy, Grace Arnot, Children, young people and the Commercial Determinants of Health, *Health Promotion International*, Volume 39, Issue 1, February 2024, daad185, https://doi.org/10.1093/heapro/daad185

SECTION V: POST COVID WORLD

Lecture 10

Pandemics and health inequalities

Lecturer: Svenn-Erik Mamelund

Readings

- Mamelund, S.E. & Dimka, J. (2021). 'Social inequalities in infectious diseases', *Scandinavian Journal of Public Health*.
- Mamelund, S.E. & Dimka, J. (2021). Not the great equalizers: Covid-19, 1918–20 influenza, and the need for a paradigm shift in pandemic preparedness. Population Studies, Volume 75, Issue sup1, pp. 179-199.
- Mamelund, S.E., Dimka, J. & Bakkeli, N.Z. (2021). Social Disparities in Adopting Non-pharmaceutical Interventions During COVID-19 in Norway. Journal of Developing Societies, Vol 37, Issue 3, pp. 302-328.
- Svenn-Erik Mamelund, S.E. et al. (2021). The association between socioeconomic status and pandemic influenza: Systematic review and meta-analysis. PLOS One. https://doi.org/10.1371/journal.pone.0244346
- Klüwer, B. et al. (2021). Influenza risk groups in Norway by education and employment status. Scandinavian Journal of Public Health. doi: https://doi.org/10.1177/14034948211060635.

- Mamelund, S.E. (2018) 1918 pandemic morbidity: The first wave hits the poor, the second wave hits the rich. Influenza and Other Respiratory Viruses. 12:307–313. doi: https://doi.org/10.1111/irv.12541
- Mamelund, S.E. (2017). Social inequality a forgotten factor in pandemic influenza preparedness. Tidsskr Nor Legeforen. doi: https://doi.org/10.4045/tidsskr.17.0273

Week 11

One health and planetary health

Lecturer: Alexi Gugushvili

Readings

- IN: Sabiha Y Essack (2018). Environment: the neglected component of the One Health triad. Lancet Planetary Health, V2, 6, E238-E239. DOI: https://doi.org/10.1016/S2542-5196(18)30124-4 (This article introduces to students the notion of ONE health).
- Horton et al. (2014). From public to planetary health: a manifesto. Lancet.
- Myers, Samuel (2017). Planetary health: protecting human health on a rapidly changing planet. Lancet. Volume 390, Issue 10114, 23 December 2017–5 January 2018, Pages 2860-2868. https://doi.org/10.1016/S0140-6736(17)32846-5
- Chen, K. (2020). Air pollution reduction and mortality benefit during the COVID-19 outbreak in China. The Lancet Planetary Health, Vol. 4, Issue 6, E210-E212.
- Arcaya, M., Raker, E.J, & Waters, M.C. (2020). The Social Consequences of Disasters: Individual and Community Change. Annual Review of Sociology. 46:671–91.

Additional materials

• Krange, O., Kaltenborn, B.P., & Hultman, M. (2019). Cool dudes in Norway: climate change denial among conservative Norwegian men, Environmental Sociology, 5:1, pp. 1-11.

Week 12

New perspectives on tackling health inequalities

Lecturer: Alexi Gugushvili

- Mackenbach, J. P. (2019) 'Policy implications', in *Health inequalities*. Oxford University Press, pp. 163–182. doi: 10.1093/0s0/9780198831419.003.0006.
- Marteau, T.M, Rutter, H. & Marmot, M. (2021). Changing behaviour: an essential component of tackling health inequalities. BMJ 2021; 372.
- Forster, T., Kentikelenis, A. & Bambra, C. (2018). Part C: The Impact of Health Inequalities, Conclusion and Policy Recommendations, in Health Inequalities in Europe: Setting the Stage for Progressive Policy Action. Foundation for European Progressive Studies.
- van der Wel, K.A., Dahl, E., & Bergsli, H. (2016). The Norwegian policy to reduce health inequalities: key challenges. Nordic Welfare Research. NR. 1-2016, S. 19–29.

Additional materials

• Mackenbach JP (2011). Can we reduce health inequalities? An analysis of the English strategy (1997–2010). Journal of Epidemiology & Community Health 2011;65:568-575.