

PREFACE

True/False and Multiple Choice Questions

1. The sociology of medicine is concerned with:
 - a. The generation of “knowledge” that can be used by physicians and others to improve the delivery of health care.
 - b. The generation of “knowledge” that can be used by patients to better navigate the health care system.
 - c. ***The critical study of medicine as a social organization.**
 - d. The epistemological perspective of medicine.

2. One of the major differences between medical sociology and the sociology of health is that:
 - a. Physicians tend to favour medical sociology over the sociology of health.
 - b. Medical sociology focuses on general populations whereas the sociology of health focuses on patient populations.
 - c. Medical sociology focuses generally the study of health, not the practice of medicine.
 - d. ***The sociology of health focuses on both good health and illness.**

3. Which of the following is not a factor that contributed to the emergence of the sociology of health?
 - a. Changes in the conceptual framework of the study of health leading to the questioning of held assumptions about the benefits of modern medicine.
 - b. ***Refinements in sociological frameworks to better understand the diseased person and illness behaviour.**
 - c. Improvements in methodological techniques for the analysis of population health.
 - d. Changes in the delivery of health care services to include disease prevention and health maintenance.

4. According to the World Health Organization, health is more than just the absence of disease.
***True**
False

5. Which of the following is one of the criticisms of the biomedical perspective.
 - a. ***It takes an individualist approach, treating disease as an individual problem.**
 - b. It takes a biological approach, treating and curing most diseases.
 - c. It takes a structural approach, moving from personal troubles to social problems.
 - d. It takes a historical approach, moving through time to gauge how personal problems are rooted in the past.

6. Sociology is the ONLY social scientific discipline to focus on health and illness as social phenomena.
True
***False**

Essay and Short-Answer Questions

1. Health is generally considered to be a multidimensional concept that includes at least the following four interrelated dimensions:

1) _____; 2) _____; 3) _____; 4)

***Answers can include: physical, social, spiritual, mental, cultural, environmental, lifestyle**

CHAPTER 1: THEORETICAL TOOLS FOR A SOCIOLOGICAL ANALYSIS OF HEALTH AND HEALTH CARE

True/False and Multiple Choice Questions

1. Which of the following is NOT one of the dominant issues in medical sociology identified in the textbook?
 - a. The study of the differential distribution of disease across different populations.
 - b. The study of the social institutions for treating disease.
 - c. ***The study of the interaction between genetics and social factors in the etiology of illness.**
 - d. The study of the social patterning of illness and health care seeking behaviour.

2. Which following factor initially led to the development of medical sociology?
 - a. ***The epidemiological transition (i.e., changes in disease patterns in the population).**
 - b. The fact that medical schools made the study of social sciences mandatory during the first half of the 20th century.
 - c. Increasing awareness by physicians of the importance of social inequality in the etiology of illness and disease.
 - d. The discovery of miracle cures for diseases such as leprosy that could not be attributed to medical science.

3. The various sociological paradigms (models, theories) make implicit assumptions about the basic interaction between the genetic make-up of an individual and their society.
True
***False**

4. One cannot be both healthy and have a chronic disease.
True
***False**

5. What is one of the difficulties encountered in deriving a clear definition of health?
 - a. ***People who have diagnosed chronic diseases can still consider themselves to be healthy.**
 - b. Men are much more likely to rate themselves as being healthy compared to women.
 - c. Children are incapable of grasping the concept of health.
 - d. Health is a biomedical term that refers to the absence of a condition or disease.

6. Which of the following is a central critique of the definition of health by the World Health Organization in the 1986 *Ottawa Charter*?
 - a. ***It is too idealistic.**
 - b. Its inability to account for social aspects of health.
 - c. Its refusal to acknowledge a physical component of health.
 - d. It is too vague to be of any value.

7. According to the text, the difference between having a disease and having a sickness is having knowledge of the disease.
***True**
False

8. According to the text, which of the following is NOT part of the concept of wellness?
- Being healthy
 - *Having no disease**
 - Life satisfaction
 - All of these are part of the concept of wellness
9. The definition of health by Rootman and Raeburn (1994) does NOT include which of the following components?
- Environmental
 - Cultural
 - Lifestyle
 - *Disease**
10. According to the text, which of the following statements about illness, disease, and sickness is true?
- One can have both the disease and the sickness but not the illness.
 - One can have both the illness and the sickness but not the disease.
 - One can have both the disease and the illness but not the sickness.
 - *One can have the disease, the illness, and the sickness.**
11. Which of the following is the most correct? [note: "<" means "less than"; ">" means "greater than"; "=" means "equal to"]
- *Absence of Disease < Good Health < Wellness**
 - Absence of Disease = Good Health = Wellness
 - Absence of Disease > Good Health < Wellness
 - Absence of Disease = Good Health < Wellness
12. Which of the following statements is the most correct?
- Sickness is to illness as health is to wellness.
 - Sickness is to illness as disease is to wellness.
 - Wellness is to sickness as health is to disease.
 - *Wellness is to health as health is to disease.**
13. According to your textbook, which of the following dimensions is NOT a part of well-being?
- Fitness
 - Sense of healthiness
 - *Absence of disease**
 - Life satisfaction
14. The concept of wellness is:
- Synonymous with good health.
 - One component of good health.
 - *More than good health.**
 - The opposite of sickness.
15. Which of the following is NOT a macro-level theory?
- Materialism

- b. Feminism
 - c. Postcolonialism
 - d. ***Postmodernism**
16. Positivism, the philosophical basis for structural functionalism is based on:
- a. The school of thought that sees social life as only comprehensible through understanding the meaning that people attach to it.
 - b. The school of thought that perceives that social reality is constructed by individuals and that their experiences are shaped by social structure.
 - c. The school of thought that believes that it is impossible to grasp the existence of social reality independently of the subjective influence of the observant and/or researcher.
 - d. ***The school of thought that the study of society that relies specifically on scientific evidence, such as experiments and statistics, to reveal a true nature of how society operates.**
17. The school of thought that believes that it is impossible to grasp the existence of social reality independently of the subjective influence of the observant and/or researcher is the philosophical basis for which social perspective?
- a. Structural functionalism
 - b. Materialism
 - c. Feminism
 - d. ***Postmodernism**
18. The school of thought that perceives that the social reality exists independently from individuals and that their experiences are shaped by social structure is the philosophical basis for which social perspective?
- a. Structural functionalism
 - b. ***Materialism**
 - c. Symbolic interactionism
 - d. Postmodernism
19. Which of the following is one of the key components of structural functionalism?
- a. ***Consensus**
 - b. Conflict
 - c. Interaction
 - d. Relativism
20. A social role, as a key concept for structural functionalism to understand how individuals participate within a society, is:
- a. A behaviour pattern that one continuously exhibits across all contexts of one's life.
 - b. ***A behaviour pattern attached to a specific social position.**
 - c. A pattern of behaviour that provides others with a chance to intercede to assess the sincerity of a social position.
 - d. A pattern of how one behaves when sick.
21. The social role is a key component in which social theory of health?
- a. ***Structural functionalism**
 - b. Materialism

- c. Symbolic interactionism
 - d. Postmodernism
22. Purposeful and meaningful action by the individual is a key component in which social theory of health?
- a. Structural functionalism
 - b. Materialism
 - c. ***Symbolic interactionism**
 - d. Postmodernism
23. Culture is a key component in which social theory of health?
- a. ***Structural functionalism**
 - b. Materialism
 - c. Symbolic interactionism
 - d. Postmodernism
24. Power is a key component in which social theory of health?
- a. Structural functionalism
 - b. ***Materialism**
 - c. Symbolic interactionism
 - d. Postmodernism
25. Patriarchy is a key component in which social theory of health?
- a. Structural functionalism
 - b. Materialism
 - c. ***Feminism**
 - d. Postmodernism
26. Which of the following is one of the key components of materialism?
- a. Consensus
 - b. ***Conflict**
 - c. Interaction
 - d. Relativism
27. Which of the following is one of the key components of Feminism?
- a. Consensus
 - b. ***Conflict**
 - c. Interaction
 - d. Relativism
28. Which of the following is one of the key components of postmodernism?
- a. Consensus
 - b. Conflict
 - c. Interaction
 - d. ***Relativism**
29. The ability to fulfill one's social roles is a component of which theoretical perspective?
- a. Materialism

- b. Feminism
 - c. Antiracism
 - d. *Structural functionalism**
 - e. Symbolic interactionism
30. The authority of physicians to validate an illness as legitimate to avoid fulfilling one's responsibilities is a component of which theoretical perspective?
- a. *Materialism**
 - b. Feminism
 - c. Antiracism
 - d. Structural functionalism
 - e. Symbolic interactionism
31. The defining of some health behaviours as bad and stigmatizing people who engage in these behaviours is a component of which theoretical perspective?
- a. Materialism
 - b. Feminism
 - c. Antiracism
 - d. Structural functionalism
 - e. *Symbolic interactionism**

Essay and Short-Answer Questions

1. Discuss the differences between structural functionalism and symbolic interactionism based on their specific philosophical perspectives of positivism and idealism.
***Answers will vary.**