

## **SOCI 335: Sociology of Aging and the Life Course**

**Fall 2016  
Tue, Thu  
4:05 p.m. – 5:25 p.m.  
Currie 408/409**

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E-mail: Please see communication policy below  
Office Hours: Thursday 10:00 – 11:30  
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### **Communication policy**

Please use MyCourses for all e-mail communications. E-mails sent to the McGill general e-mail address will not be answered. We will make every attempt to answer e-mail in a timely fashion within 36 hours of receipt. Please see professor during office hours for urgent issues.

### **Overview**

This is a class on life trajectories and the aging process, and their linkage with health. The central premise is that social factors strongly affect one's chances of a healthy and productive old age. In both developed and developing countries, recent decades have seen dramatic enhancements in longevity, and a shift from acute illness followed by death to survival with chronic conditions. Accordingly, the focus in healthcare is turning from treatment to prevention, with increased attention to the social resources that constrain negative behaviors and maintain functionality in the face of health-challenges. In other words, individuals live their lives—and grow old—in social contexts. And events and processes in this “life ecology” affect mental and physical health in late life. As we shall see, they may even affect biological aging.

The most obvious of these contexts is socioeconomic “stratification”—race, class, gender. These broad social positions can affect resources and constraints right through the life trajectory, in turn affecting well being in late life, responses to health-challenges (such as the onset of disease), and perhaps even rates of biological aging. Moreover, these broad categories are also cultural markers for attitudes and behaviors toward health. Similarly, regions and nation-states tend to have their own social, economic and cultural patterns, family structures, as well as sets of policies—all of which influence individual health trajectories. Moving to the “micro” level, we have the family—especially the marital partnership. As we shall see, factors in this “proximal” system—such as spousal loss, caregiving, a spouse's health-related attitudes and behaviors—have perhaps the strongest impact on older adults' health and well being. Between the two, we have a broad range of social settings—from one's larger network of friends and relatives, to neighborhoods, to larger urban environments.

We will begin with some existing theories of aging and the life course. Historical patterns will come next, with an emphasis on key demographic transitions in health and longevity. Then we will move progressively “inward” from the broadest social contexts—i.e., social stratification and national societies—down to marriage and the family. We will conclude with an overview of future directions in the sociology and demography of aging, especially those incorporating biological knowledge and measures.

### **Note on quantitative content**

Many of the readings rely on statistical evidence. These may be hard to decipher. When reading on your own, please focus on the substantive arguments and interpretations contained in the Introduction and Discussion sections of an article. Not on Methods and Results, which will be the quantitatively-dense sections.

All readings will be thoroughly discussed in class, and this discussion-content will be on lecture powerpoints posted on MyCourses. You are expected to read all the assigned material **before** class. You will be called on to demonstrate that you have read this material during class discussion. For the midterm and the final, you will be responsible for the material contained in these readings as well as all information presented in class.

### **Learning outcomes**

1. Basic concepts:
  - a. Major theories of aging and the life trajectory developed in sociology and associated disciplines.
  - b. The difference between age, period, and cohort effects.
2. Historical and cross-national patterns:
  - a. Major historical transitions in life patterns, health, and longevity -
  - b. And potential future patterns, as presented in the literature.
  - c. Cross-national variations in these patterns, historical and current.
3. Social causes of health and aging:
  - a. Basic variations by major socioeconomic groups
  - b. Mechanisms/proximal causes for these variations
  - c. The role of neighborhoods
  - d. Social networks
  - e. Family and marriage
4. Biosociology and biodemography
  - a. Major theories and possible bio-social pathways
  - b. Empirical findings (so far)

### **Readings**

*All assigned readings are hyperlinked in this course outline.* If you are on campus, or otherwise connected to the campus VPN, clicking on a link will take you directly to the reading. When off campus, you will be redirected to the library website, where you’d have to log in to access the article in question.

## Course requirements

This course is discussion-based. All assigned readings must be completed before class. Apart from assignments and exams, participation in classroom discussions will be monitored, and will count toward the final grade.

There will be two exams: a mid-term (short essays), and a final (multiple choice). In addition, there will be several in-class exercises as well as an intergenerational “role play.” Specifics to be discussed in class. Part of each session will be devoted to these in-class exercises. Note that these exercises are informal. I.e., this component of your grade will be based on diligence and enthusiasm – not quality of performance or “getting it right.” The point is to move beyond scholarly abstractions and make the social dimensions of aging “real.” For the role play, students must sign up on MyCourses for a role by the end of the add/drop period: [MyCourses](#) > [Groups](#) > [Role play](#) > [Role](#). Those without a role by [September 22](#) will be randomly assigned to one. Sign up sheets for group exercises are set up here: [MyCourses](#) > [Groups](#) > [Class exercises: groups](#) (deadline: [September 29](#)).

Finally, each student will be assigned to a group that will write a formal grant proposal to the Institute of Aging at the Canadian Institutes of Health Research (CIHR) or to the U.S. National Institute on Aging (part of NIH), requesting funding for a research project on aging. (Volunteering for a group is acceptable and encouraged. The deadline for signing up is [September 29](#): [MyCourses](#) > [Groups](#) > [Final project groups](#). These groups can be the same as those for in-class exercises.) The final group decision on topics is due by [October 27](#), at the latest. Group representative(s) should either meet with the instructor during office hours \*before\* Oct 27, to discuss their topic—or do so by e-mail (through MyCourses). **Specifics for this assignment, including sections and format, will be discussed in class.**

## Evaluation

### Participation

• In-class / online	10%	
• Group exercises	10%	
• Role play	10%	September 27-October 11
Mid-term	25%	October 25
Grant proposal	15%	December 1
Final exam	30%	During exam period in December

## Policy on late submissions

Late submissions of the grant proposal will incur a penalty of 20% of the assignment’s grade. Each additional 24-hour delay (including over the week-end) will incur an extra 20%. Please e-mail any late submissions through MyCourses to the professor as soon as possible.

Please advise the professor two weeks before the midterm if you are unable to attend, so that we may make alternative arrangements.

## *“Students’ rights and responsibilities”*

### Attendance and participation in class discussions.

You are responsible for all announcements made in class and on MyCourses, as well as for all course materials given out in class. You should also check for new announcements or material on MyCourses at least weekly.

### Policy Concerning the Rights of Students with Disabilities

If you have a disability please contact the instructor to arrange a time to discuss your situation. It would be helpful if you contact the Office for Students with Disabilities at 398-6009 before you do this.

### Remise des travaux en français

Conformément à la Charte des droits de l’étudiant de l’Université McGill, chaque étudiant a le droit de soumettre en français ou en anglais tout travail écrit devant être noté (sauf dans le cas des cours dont l’un des objets est la maîtrise d’une langue).

Les étudiants de ce cours peuvent rédiger tous leurs travaux (incluant les examens) en français, mais doivent pour ce faire obtenir la **permission préalable** de la professeure. **Aucune permission rétroactive ne sera accordée.**

### Policy for the Accommodation of Religious Holy Days

1. Students will not be penalized if they cannot write examinations or be otherwise evaluated on their religious holy days where such activities conflict with their religious observances.
2. Students who because of religious commitment cannot meet academic obligations, other than final examinations, on certain holy days are **responsible for informing their instructor, with two weeks’ notice of each conflict.**
3. When the requested accommodation concerns a **final examination, students are responsible for advising their faculty office as soon as possible and not later than the deadline for reporting conflicts.** Additional documentation confirming their religious affiliation may be requested.

### Statement on academic integrity at McGill

“McGill University values academic integrity. Therefore all students must understand the meaning and consequences of cheating, plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures (see [www.mcgill.ca/integrity](http://www.mcgill.ca/integrity) for more information).”

“L’université McGill attache une haute importance à l’honnêteté académique. Il incombe par conséquent à tous les étudiants de comprendre ce que l’on entend par tricherie, plagiat et autres infractions académiques, ainsi que les conséquences que peuvent avoir de telles actions, selon le Code de conduite de l’étudiant et des procédures disciplinaires (pour de plus amples renseignements, veuillez consulter le site [www.mcgill.ca/integrity](http://www.mcgill.ca/integrity)).”

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***“In the event of extraordinary circumstances beyond the University’s control, the content and/or evaluation scheme in this course is subject to change.”***

## **SCHEDULE**

### **Course overview, expectations**

SEPTEMBER 6

### **Sociological theories of aging, the life course, and health**

#### **Readings:**

SEPTEMBER 8-13

1. Riley, M.W. (1987). [On the significance of age in sociology](#). *American Sociological Review*, 52, 1-14.
2. Elder Jr., G.H. (1994). [Time, human agency, and social change: Perspectives on the life course](#). *Social Psychology Quarterly* 57 (1), pp. 4-15.
3. Ryder, N. B. (1965). [The cohort as a concept in the study of social change](#). *American Sociological Review* 30 (6), pp. 843-861.
4. Crosnoe, R., Elder Jr., G.H. (2004). [From childhood to the later years: Pathways of human development](#). *Research on Aging* 26 (6), pp. 623-654.

### **Age, period, or cohort?**

#### **Readings:**

SEPTEMBER 15-20

1. Yang, Y. (2008). [Social inequalities in happiness in the U.S. 1972-2004: An age-period-cohort analysis](#). *American Sociological Review*, 73, 204-226.
2. Chen, F., Yang, Y., Liu, G. (2010). [Social change and socioeconomic disparities in health over the life course in China: A cohort analysis](#). *American Sociological Review* 75 (1), pp. 126-150.

SEPTEMBER 20: Movies: Global Aging

### **Historical trends – key transitions in health and longevity.**

#### **Readings:**

SEPTEMBER 22-29

1. Lee, R. (2003). [The demographic transition: Three centuries of fundamental change](#). *Journal of Economic Perspectives* 17 (4), pp. 167-190.
2. Fogel, R.W., Costa, D.L. (1997). [A theory of technophysio evolution, with some implications for forecasting population, health care costs, and pension costs](#). *Demography* 34 (1), pp. 49-66.
3. Vaupel, J.W. (2010). [Biodemography of human ageing](#). *Nature* 464 (7288), pp. 536-542.
4. Olshansky, S. J., & Ault, A.B. (1986). [The fourth stage of the epidemiologic transition: The age of delayed degenerative disease](#). *The Milbank Quarterly*, 64, 355–91.

## **OCTOBER 4: PROPOSAL FORMAT**

### **Stratification: race, class, gender**

#### **Readings:**

OCTOBER 6

1. Phelan, J. C., Link, B. G., & Tehranifar, P. (2010). [Social conditions as fundamental causes of health inequalities: Theory, evidence, and policy implications](#). *Journal of Health and Social Behavior*, 51, S28-S40.
2. House, J.S., Lepkowski, J.M., Kinney, A.M., Mero, R.P., Kessler, R.C., Herzog, A.R. (1994). [The social stratification of aging and health](#). *Journal of Health and Social Behavior* 35 (3), pp. 213-234.

### **Mechanisms and triggers: Childhood adversities, cumulative disadvantage**

#### Readings:

OCTOBER 11-13

1. Crosnoe, R., Elder Jr., G.H. (2002). [Successful adaptation in the later years: A life course approach to aging](#). *Social Psychology Quarterly* 65 (4), pp. 309-328
2. Hayward, Mark D. and Bridget K. Gorman. 2004. [The Long Arm of Childhood: The Influence of Early-Life Social Conditions on Men's Mortality](#). *Demography*, 41, 87-107.
3. Willson, A. E., Shuey, K. M., Elder Jr., G. H. (2007). [Cumulative advantage processes as mechanisms of inequality in life course health](#). *American Journal of Sociology* 112 (6), pp. 1886-1924.

### **Mechanisms and triggers: The stress process**

#### Readings:

OCTOBER 18

1. Wheaton, B. (1990). [Life transitions, role histories, and mental health](#). *American Sociological Review* 55 (2), pp. 209-22.
2. Thoits, P.A. (2010). [Stress and health: major findings and policy implications](#). *Journal of health and social behavior* 51 Suppl, pp. S41-53.

**MID-TERM REVIEW: OCTOBER 20: REGULAR CLASS TIME**

**MID-TERM EXAM: OCTOBER 25: IN-CLASS, REGULAR CLASS TIME**

### **Local context: neighborhoods**

#### Readings:

OCTOBER 27-NOVEMBER 3

1. Sampson, R.J. (2003). [The neighborhood context of well-being](#). *Perspectives in Biology and Medicine* 46 (3 SUPPL.), pp. S53-S64.
2. Cagney, K.A., Browning, C.R., Wen, M. (2005). [Racial disparities in self-rated health at older ages: What difference does the neighborhood make?](#) *Journals of Gerontology - Series B Psychological Sciences and Social Sciences* 60 (4), pp. S181-S190.
3. Boardman, J.D. (2004). [Stress and physical health: The role of neighborhoods as mediating and moderating mechanisms](#). *Social Science and Medicine* 58 (12), pp. 2473-2483.

### **Social networks and connections**

#### Readings:

NOVEMBER 8

1. Smith, K.P., Christakis, N.A. (2008). [Social networks and health](#). *Annual Review of Sociology* 34, pp. 405-429.

## **Family and marriage**

### Readings:

#### NOVEMBER 10-15

1. Lindau, S.T., Laumann, E.O., Levinson, W., Waite, L.J. (2003). [Synthesis of scientific disciplines in pursuit of health: The Interactive Biopsychosocial Model](#). *Perspectives in Biology and Medicine* 46 (3 SUPPL.), pp. S74-S86.
2. Manzoli, L., Villari, P., M Pirone, G., Boccia, A. (2007). [Marital status and mortality in the elderly: A systematic review and meta-analysis](#). *Social Science and Medicine* 64 (1), pp. 77-94.
3. Hughes, M.E., Waite, L.J., LaPierre, T.A., Luo, Y. (2007). [All in the family: The impact of caring for grandchildren on grandparents' health](#). *Journals of Gerontology - Series B Psychological Sciences and Social Sciences* 62 (2), pp. S108-S119.

## **Future directions: biodemography and biosociology**

### Readings:

#### NOVEMBER 17-29

1. Shanahan, M.J., Hofer, S.M. (2005). [Social context in gene-environment interactions: Retrospect and prospect](#). *Journals of Gerontology - Series B Psychological Sciences and Social Sciences* 60 (SPEC. ISS.), pp. 65-76.
2. Pescosolido, B.A., Perry, B.L., Long, J.S., Martin, J.K., Nurnberger Jr., J.I., Hesseibrock, V. (2008). [Under the influence of genetics: How transdisciplinarity leads us to rethink social pathways to illness](#). *American Journal of Sociology* 114 (SUPPL. 1), pp. S171-S201.
4. McEwen, B.S., Seeman, T. (1999). [Protective and damaging effects of mediators of stress. Elaborating and testing the concepts of allostasis and allostatic load](#). *Annals of the New York Academy of Sciences* 896, pp. 30-47.
5. Geronimus, A.T., Hicken, M.T., Pearson, J.A., Seashols, S.J., Brown, K.L., Cruz, T.D. (2010). [Do US black women experience stress-related accelerated biological aging?: A novel theory and first population-based test of black-white differences in telomere length](#). *Human Nature* 21 (1), pp. 19-38.

#### **DECEMBER 1:**

- **REVIEW SESSION FOR FINAL.**
- **GRANT PROPOSAL DUE.**

#### **FINAL EXAM: DURING EXAM PERIOD (TBA).**