

**York University Faculty of Health
Faculty of Graduate Studies, Graduate Program in Health**

**Fall 2023 – GS/HLTH 6210 (3.0)
The Political Economy of Health Inequities**

Professor Dennis Raphael
Wednesdays 8:30 – 11:30 AM
Office Hours: By appointment

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Course Description:

This course considers how political and economic forces that shape the distribution of wealth, influence, and power within wealthy developed nations such as Canada create health inequities. The course focuses on three key areas related to the presence of health inequities: the economic system, the political system, and the ability of citizens to shape public policy.

Course Objectives are to learn about:

1. Basic principles of identifying and studying health inequities.
2. The current state of knowledge and research in the political economy of health inequities.
3. To identify and research an issue, and then publish a paper on the political economy of health inequities.

With the resumption of most campus activities, and an evolving public health landscape, it is important for us to stay connected. The most up-to-date information about how COVID is affecting campus activities, including announcements and changes to university-wide protocols, is available on York's "[Better Together](#)" website.

Academic Honesty

The **Faculty of Graduate Studies Academic Integrity Module** is designed to provide the graduate community with information and resources on the expectations of academic integrity at York University. Community members have an obligation to maintain the highest standards of academic honesty throughout their studies in accordance with the Senate Policy on Academic Honesty. **Upon completion of this module**, students will have a better understanding of what constitutes a scholastic offence, as well as their responsibilities in relation to a variety of academic principles.

Where to look for support and help:

The pandemic can impact students in different ways and we are committed to and focused on providing you with a learning environment that is engaging, supportive, flexible and has academic integrity. We encourage you to connect as early as possible about your learning experience so that we can have a deeper understanding of the challenges you may be facing, and work towards finding possible solutions.

- If you require some advice about **course related matters**, speak to your Course Director Dennis Raphael, draphael@yorku.ca
- If you require **administrative help**, speak with Collette Murray (gradhlth@yorku.ca)
- For **academic advice** about the program, or your progress speak with your supervisors / advisors or the Graduate Program Director farahmad@yorku.ca Fall – Professor Farah Ahmad).
- A list of [important dates](#) at York:

- Information about access to [Wellness Consultation and Counselling Services](#), wellness resources, webinars and workshops

Library Resources

- [Citing Your Work & Academic Integrity - York University Libraries](#)
- [Academic Accommodations](#) through Student Accessibility Services
- [Documents and Forms for the graduate program in Health](#)
- [Centre for Human Rights, Equity and Inclusion](#)

Required Course Text (available from bookstore)

Bryant, T. and Raphael, D. (2020). *The Politics of Health in the Canadian Welfare State*. Canadian Scholars' Press.

Required Additional Readings

Provided to you each week through York University Libraries. The links to these articles or in the case of fair use materials, the materials themselves, are posted at the [E-Class platform](#)

Evaluation

Students will be required to produce three papers focused on some aspect of the political economy of health inequities that will culminate with an article being submitted to a refereed journal. The structure and content of these assignments will be discussed in class over the course of the term. Each student will also be responsible for presenting a critical overview of one week's readings and assessed for class participation.

Class presentation and engagement on issues raised by readings	25%	Over course
Statement of Problem and Literature Review (up to 10 pages)	25%	Due October 18
Completed Paper (up to 15 pages)	25%	Due November 8
Paper Prepared for Journal Submission (4000-8000 words)	25%	Due November 29

Accommodation: Any student who requires accommodation is encouraged to inform me.

Course Assignments Class presentation (15%)

Select one week of readings. This may involve the articles for that week **OR** the bolded chapter for a particular week. For week 1, it may involve just the Wilson readings. **Do not simply summarize the readings. We all will have read them! Prepare no more than a 20 minute in total presentation of:**

- a) key points and issues identified in the readings;
- b) your take on the implications for understanding and researching health policy and equity issues; and
- c) a few questions for the group.

Class engagement (10%) (one page each)

For each set of readings each week, identify:

- a) a point or idea that you think is especially important for understanding and improving health equity. Be prepared to explain why this is the case.
- b) an issue that you would like further elaboration upon during the class.

You will submit these through Turnitin by noon the day before the class.

All papers use 12 font Times Roman lettering with 1.5 line spacing, and 1" (2.54 cm) page margins.

Course papers

1. Select an issue for your papers. If you have difficulty selecting a topic, approach the professor for assistance.
2. Conduct a literature search of relevant policy documents, reports, or academic and professional journals pertaining to the topic that you have identified in #1. Identify at least 10- 15 relevant sources. An issue can be expressed as a dilemma, conundrum, question or series of questions or simple statement of purpose.
3. Consider preparing your papers by discussing some/all of the following:
 - a. Introduction to the issue (e.g. problem, dilemma, concern); include a thesis statement in your introduction
 - b. Why it is an issue; the history (how the issue evolved); and how it captured your interest.
 - c. What are the implications for the public and policy makers?
 - d. Summary (your conclusions, new insights, pulling the paper together).

All students are expected to identify an issue and be prepared at some point to discuss it and present findings to the class. This should include an analysis of how these findings fit into the course findings to date.

General Note: Assignments are penalized 5% for every day late (including weekends).

Structure for Course Paper Assignments

All papers use 12 font Times Roman lettering with 1.5 line spacing, and 1" (2.54 cm) page margins. Refer to authors (e.g., Rioux, 2002; Government of Canada, 2008, etc.) using APA (2010) referencing. Carefully prepare what you are going to write before you write it. Then edit it. Use spell and grammar check. Insert page numbers and use a stapler.

Evaluation Criteria for Course Paper Assignments

- a) Substance: paper addresses the essential elements related to your topic and issue; ideas are supported by examples where appropriate, course concepts and evidence (i.e., literature) provided; demonstrates critical thinking (i.e., sound conceptualizing, interpreting and analysis- synthesis.
- b) Originality: creative integration of own ideas with those of other authors; unique interpretation of ideas.
- c) Clarity: logical flow of ideas; grammatically correct sentences and paragraph structure, APA format.
- d) Progression of analytic and written literacy skills: constructive use of instructor feedback regarding analyses and format of paper; increased understanding of key course concepts.

Use of Turnitin:

Turnitin is web-based software which scans submitted works for similarity to material in public websites, academic journals, papers purchased from an essay mill, etc., and to essays and assignments concurrently or previously submitted to Turnitin, which are stored in a database. An 'originality report' is then provided to the instructor, who remains responsible for determining any breach of academic honesty.

You are required to submit your essays into Turnitin and you will do through the HLTH6210 EClass webpage.

If you do not wish to use Turnitin, you must let the Course Director know in advance. You will be required to submit written reports on how you completed each of your assignments (required contents below), along with detailed annotated bibliographies. Each report and bibliography must

be submitted with your assignment when it is due. You will also email an electronic copy of each report and bibliography (with hyperlinked URLs in it) to the Course Director. You may be asked to take an oral examination for any or all of your written assignments directed at issues of originality.

The written report must contain the following information, as well as anything else you consider useful to the Course Director on the issue of academic integrity:

- A list of the documents and other sources you consulted to understand your topic, along with the dates you first used each of them;
- An explanation of how those documents and sources led you to the other documents and sources you used;
- An explanation of which of the sources you used had the most influence on your understanding of the topic of your assignment, and how you used them.

PLEASE NOTE

If you have a medical or other compelling reason for not submitting an assignment on time, I must be notified **PRIOR** to the date the assignment is due. If this is not done, then the 5 percentage points a day penalty applies without exceptions.

I will not accept assignments weeks late without prior notification. If you are having significant personal issues, access the [Graduate Wellness appointments and counselling at the Faculty of Graduate Studies](#) and your home Graduate Program Office.

Late Penalty: The assignments received later than the due date will be penalized five points per calendar day. Exceptions to the lateness penalty for valid reasons such as illness, compassionate grounds, etc., may be entertained by the course instructor but will require supporting documentation (e.g., a doctor's or allied health professional's letter).

Recommended Texts (PhD students especially are strongly recommended to eventually obtain these texts).

- Aggleton, P. (1990). *Health*. Routledge.
- Banting, K. and J. Myles, Eds. (2013). *Inequality and the Fading of Redistributive Politics*. UBC Press.
- Bartley, M. (2016). *Health Inequality: An Introduction to Theories, Concepts, and Methods*, 2nd edition, Polity Press.
- Blaxter, M. (2010). *Health*, 2nd ed.: Policy.
- Bryant, T. (2016). *Health Policy in Canada*. Canadian Scholars' Press.
- Bryant, T., & Raphael, D. (2018). *Welfare States, Public Health and Health Inequalities*. Oxford Bibliographies. Available through YorkU Libraries.
- Chibber, V. (2022). *Confronting Capitalism: How the World Works and How to Change it*. Verso Books.
- Côté, D., & Raynault, M.-F. (2015). *Scandinavian Common Sense: Policies to Tackle Social Inequalities in Health*. Baraka Books.
- Carroll, W., & Sapinski, J. P. (2018). *Organizing the 1%: How Corporate Power Works*. Fernwood Publishing.
- Esping-Andersen, G. (1990). *The Three Worlds of Welfare Capitalism*. Princeton University Press.
- Esping-Andersen, G. (1999). *Social Foundations of Post-Industrial Economies*. Oxford University Press.
- Evans, B. M., & McBride, S. (Eds.). (2018). *The Austerity State*. University of Toronto Press.
- Fafard, P., Cassola, A., & de Leeuw, E. (2022). *Integrating Science and Politics for Public Health*. Springer Nature. Free download at <https://link.springer.com/book/10.1007/978-3-030-98985-9>
- Freudenberg, N. (2021). *At What Cost? Modern Capitalism and the Future of Health*. Oxford University Press.
- Grabb, E. (2007). *Theories of Social Inequality*, 5th edition. Thomson/Nelson.
- Graham, H. (2007). *Unequal Lives: Health and Socioeconomic Inequalities*. Open University Press.
- Greve, B., ed. (2013). *The Routledge Handbook of the Welfare State*. Routledge.
- Harvey, D. (2007). *A Brief History of Neo-liberalism*. Oxford University Press.
- McBride, S. (2022), *Escaping Dystopia*. Policy Press.
- Mills, C. W. (1959/2000). *The Sociological Imagination*. Oxford.
- Raphael, D., Ed. (2016). *Social Determinants of Health: Canadian Perspectives*, 3rd edition. Canadian Scholars' Press.
- Schrecker, T., & Bamba, C. (2015). *How Politics Makes Us Sick: Neoliberal Epidemics*. Palgrave Macmillan.
- Smith, K., C. Bamba, et al., Eds. (2015). *Health Inequalities: Critical Perspectives*. Oxford University Press.
- Springer, S., K. Birch, and J. MacLeavy. (2016). *Handbook of Neoliberalism*. New York: Routledge.
- Townsend, P., N. Davidson, et al., Eds. (1992). *Inequalities in Health: The Black Report and the Health Divide*. Penguin.
- Wilson, J. (1983). *Social Theory*. Prentice Hall.
- Winlow, S., & Hall, S. (2022). *The Death Of The Left: Why We Must Begin From the Beginning Again*. Policy Press.
- Wright, E. O. (2019). *How to be an Anti-Capitalist in The Twenty-First Century*. Verso.

Course Schedule and Required Readings

1. September 6. Researching the Political Economy of Health Inequities: Methodologies Chapter 1. How the Politics of the Welfare State Shapes Our Health.

Bryant, T., Raphael, D. and Rioux, M. (2019). Researching health: Knowledge perspectives, methodologies, and methods. In Bryant, T., Raphael, D. and Rioux, M. (eds.). *Staying Alive: Critical Perspectives on Health, Illness, and Health Care*, 3rd edition. Canadian Scholars Press.

Wilson, J. (1983). Positivism and Idealism. In J. Wilson. *Social Theory*. Prentice Hall.

Azadian, A., Masciangelo, M.C., Mendly-Zambo, Z., Taman, A. and Raphael, D. (2022). Corporate domination of food banks and food diversion schemes. *Capital and Class*.

2. September 13. Scanning the Landscape: Perspectives on the SDOH

Link, B. G., & Phelan, J. (1995). Social conditions as fundamental causes of disease. *Journal of Health and Social Behavior*, Extra Issue, 80-94.

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(1_suppl), S28-S40.

Kawachi, I., S. V. Subramanian, et al. (2002). A glossary for health inequalities. *Journal of Epidemiology and Community Health* 56(9): 647-652.

Mantoura, P., & Morrison, V. (2016). *Policy Approaches to Reducing Health Inequalities*.

Montreal: National Collaborating Centre for Health Public Policy. Retrieved May 1, 2019

Raphael, D. (2011). A discourse analysis of the social determinants of health. *Critical PublicHealth*, 21, 221-226.

Raphael, D., & Bryant, T. (2023). Socialism as the way forward: updating a discourse analysis of the social determinants of health. *Critical Public Health*, 1-8.

Bryant, T., Raphael, D., Schrecker, T., and Labonte, R. (2011). Canada: A land of missed opportunities for addressing the social determinants of health. *Health Policy*. 101, (1), 44-58.

3. September 20. Defining and Assessing Health Inequities

Raphael, D. The Importance of Tackling Health Inequalities. (provided by instructor)

Whitehead, M. (1990). *The Concepts and Principles of Equity and Health*. World Health Organization, Regional Office for Europe.

Dahlgren, G. and M. Whitehead (1991/2007). *Policies and Strategies to Promote Equity in Health*. World Health Organization, Regional Office for Europe.

Braveman, P. and S. Gruskin (2003). Defining equity in health. *Journal of Epidemiology and Community Health* 57: 254-258.

Tjepkema, M., Wilkins, R., & Long, A. (2013). Cause-specific mortality by income adequacy in Canada: A 16-year follow-up study. *Health Reports*, 24 (7), 14-22.

4. September 27. Defining Political Economy

Coburn, D. (2010). Health and health care: A political economy perspective. In D. Raphael, T. Bryant and M. Rioux (eds.) *Staying Alive: Critical Perspectives on Health, Illness, and Health Care*, 2nd edition. Canadian Scholars Press.

Bambra, C., Fox, D., & Scott-Samuel, A. (2005). Towards a politics of health. *Health Promotion International*, 20(2), 187-193.

Brady, D. (2003). The politics of poverty: Left political institutions, the welfare state, and poverty. *Social Forces*, 82, 557-588.

Hofrichter, R. (2003). [The politics of health inequities: Contested terrain](#). In *Health and Social Justice: A Reader on Ideology, and Inequity in the Distribution of Disease* (pp. 1-56). Jossey Bass.

5. October 4. Social Structures and Social Processes

Mills, C.W. (1959/2000). [The Promise](#). In C.W. Mills, *The Sociological Imagination*. Oxford.

Coburn, D. (2000). Income inequality, social cohesion and the health status of populations: The role of neo-liberalism. *Social Science & Medicine*, 51(1), 135-146.

Coburn, D. (2004). Beyond the income inequality hypothesis: Globalization, neo-liberalism, and health inequalities. *Social Science & Medicine*, 58, 41-56.

Schrecker, T. (2017). Was Mackenbach right? Towards a practical political science of redistribution and health inequalities. *Health & Place*, 46, 293-299.

Schrecker, T. (2016). Neoliberal epidemics' and public health: Sometimes the world is less complicated than it appears. *Critical Public Health*, 26(5), 477-480.

Lynch, J. (2017). Reframing inequality? The health inequalities turn as a dangerous frame shift. *Journal of Public Health*, 39(4), 653-660.

Labonte, R. and Stuckler, D. (2016). The rise of neoliberalism: How bad economics imperils health and what to do about it. *Journal of Epidemiology and Community Health*, 70, 312- 318.

6. October 18. Social Inequality

Chapter 2. The Canadian Welfare State and Public Policy

Grabb, E. (2007). Theories of Social Inequality: An Introduction and Theories of Social Inequality: An Overview and Evaluation. In E. Grabb, *Theories of Social Inequality*, 5th edition. Thomson/Nelson.

Raphael, D. and Bryant, T. (2015). Power, intersectionality and the lifecourse: Identifying the political and economic structures of welfare states that support or threaten health. *Social Theory and Health*, 13, 245-266.

Bambra, C. (2021). Levelling up: Global examples of reducing health inequalities. *Scandinavian Journal of Public Health*, 14034948211022428.

Blair-Hamilton, A., & Raphael, D. (2023). A critical analysis of the Finnish Baby Box's journey into the liberal welfare state: Implications for progressive public policymaking. *Children and Youth Services Review*, 149, 106926.

7. October 25. Welfare States I: Research Addressing Health Inequities

Chapter 3. The Canadian Welfare State and the Health of Canadians.

Raphael, D. (2013). The political economy of health promotion: Part 1, national commitments to provision of the prerequisites of health. *Health Promotion International*, 28, 95-111.

Raphael, D. (2013). The political economy of health promotion: Part 2, national provision of the prerequisites of health. *Health Promotion International*, 28, 112-132.

Eikemo, T. A., & Bambra, C. (2008). The welfare state: a glossary for public health. *Journal of Epidemiology and Community Health*, 62(1), 3-6.

Bambra, C., Smith, K. E., & Pearce, J. (2019). Scaling up: The politics of health and place. *Social Science & Medicine*, 232, 36-42.

Schrecker, T. (2019). Globalization and health: political grand challenges. *Review of International Political Economy*, 1-22.

Swank, D. (2005). Globalisation, domestic politics, and welfare state retrenchment in capitalist democracies. *Social Policy & Society* 4:2, 183-195.

8. November 1. Welfare States II: Political Traditions and Health Inequities
Chapter 4. Promoting the Health of Canadians within the Liberal Welfare State.

- Esping-Andersen, G. (1990). The three political economies of the welfare state and Decommodification in social policy. In G. Esping-Andersen, *The Three Worlds of Welfare Capitalism*. Princeton University Press.
- Esping-Andersen, G. (1999). The democratic class struggle revisited and Social risks and welfare states. In G. Esping-Andersen, *Social Foundations of Post-Industrial Economies*. Oxford.
- Navarro, V. (2009). What we mean by social determinants of health. *International Journal of Health Services*, 39, 423–441, 2009
- Saint-Arnaud, S., & Bernard, P. (2003). Convergence or resilience? A hierarchical cluster analysis of the welfare regimes in advanced countries. *Current Sociology*, 51(5), 499-527.

9. November 8. Welfare States III: Implications for Addressing Health Inequities
Raphael, D. An Analysis of International Experiences in Tackling Health Inequalities
(provided by instructor)

- Bernard, P., & Saint-Arnaud, S. (2004). More of the Same: The Position of the Four Largest Canadian Provinces in the World of Welfare Regimes. Canadian Policy Research Networks.
- Grover, C. (2019). Violent proletarianisation: Social murder, the reserve army of labour and social security 'austerity' in Britain. *Critical Social Policy*, 39(3), 335-355.
- Raphael, D. (2015). The political economy of health: A research agenda into means of addressing health inequalities in Canada. *Canadian Public Policy*, 41, Supplement 2, S17- S25.
- Bambra, C. (2007). Going beyond the three worlds of welfare capitalism: Regime theory and public health research. *Journal of Epidemiology and Community Health*, 61(12), 1098- 1102

10. November 15. Canada I: Health Inequities

Bryant, T. Applying the Lessons from International Experiences. (provided by instructor)

- Garthwaite, K., Smith, K. E., Bambra, C., & Pearce, J. (2016). Desperately seeking reductions in health inequalities: Perspectives of UK researchers on past, present and future directions in health inequalities research. *Sociology of Health & Illness*, 38(3), 459-478.
- Butler-Jones, D. (2008). *Report on the State of Public Health in Canada 2008*. Public Health Agency of Canada. (read executive summary)
- Health Council of Canada (2010). *Stepping it up: Moving the focus from health care in Canada to a healthier Canada*. Author.
- King, A. (2011). *Health, Not Health Care – Changing the Conversation*. Ontario Ministry of Health and Long-Term Care.
- Canadian Medical Association (2013). *Health Care in Canada, What Makes Us Sick?* Canadian Medical Association.
- Bryant, T., Aquanno, S., & Raphael, D. (2020). Unequal impact of covid-19: Emergency neoliberalism and welfare policy in Canada. *Critical Studies: An International and Interdisciplinary Journal*, 15(1), 22-39.

(Just be aware these exist!)

Canadian Population Health Initiative. (2008). *Reducing Gaps in Health: A Focus on Socio-Economic Status in Urban Canada*. Canadian Population Health Initiative.

Senate of Canada (2007-2008) Series of Reports on the Social Determinants of Health. Available at [House of Commons report](#) and [Senate Canada report](#)

First Report: Population Health Policy: International Perspectives

Second Report: Maternal Health and Early Childhood Development in Cuba

Third Report: Population Health Policy: Federal, Provincial and Territorial Perspectives

Fourth Report: Population Health Policy: Issues and Options

Fifth Report: A Healthy, Productive Canada: A Determinant of Health Approach

11. November 22. Canada II: Barriers to Addressing Health Inequities

Chapter 5: Moving Towards the Future

- Raphael, D. & Bryant, T. (2022). Emerging themes in social determinants of health theory and research. *International Journal of Health Services*, 52 (4), 428-432.
- Brassolotto, J., Raphael, D. and Baldeo, N. (2014). Epistemological barriers to addressing the social determinants of health among public health professionals in Ontario, Canada. *Critical Public Health*, 23, 321-336.
- Langille, D. (2016). Follow the money: How business and politics shape our health. In D. Raphael (Ed.), *Social Determinants of Health: Canadian Perspectives* (3rd ed., pp. 305-317). Canadian Scholars' Press.
- Raphael, D. (2015). Beyond policy analysis: The raw politics behind opposition to healthy public policy. *Health Promotion International*, 30(2):380-96.
- Harris, P., Baum, F., Friel, S., Mackean, T., Schram, A., & Townsend, B. (2020). A glossary of theories for understanding power and policy for health equity. *Journal of Epidemiology and Community Health*, 74(6), 548-552.
- Friel, S., Townsend, B., Fisher, M., Harris, P., Freeman, T., & Baum, F. (2021). Power and the people's health. *Social Science & Medicine*, 114173.

Recommended

- Scott-Samuel, A., & Smith, K. (2015). Fantasy paradigms of health inequalities: Utopian thinking? *Social Theory and Health*, 13, (3), 418-436.
- Kirkland, R., & Raphael, D. (2018). Perpetuating the utopia of health behaviourism: A case study of the Canadian Men's Health Foundation's Don't Change Much initiative. *Social Theory & Health*, 16(1), 1-19.
- Gasher, M., et al. (2007). Spreading the news: social determinants of health reportage in Canadian daily newspapers. *Canadian Journal of Communication*, 32(3), 557-574.
- Hayes, M., Ross, I., Gasher, M., Gutstein, D., Dunn, J., & Hackett, R. (2007). Telling stories: News media, health literacy and public policy in Canada. *Social Science and Medicine*, 54, 445-457.

12. November 29. Researching the Political Economy of Health Inequities: Issues

- Dutescu, I. A. (2020). The antimicrobial resistance crisis: How neoliberalism helps microbes dodge our drugs. *International Journal of Health Services*, 0020731420949823.
- Mendly-Zambo, Z. and Raphael, D. (2019). Competing discourses of household food insecurity in Canada. *Social Policy and Society* 18 (4), 535-554.
- Mendly-Zambo, Z., Raphael, D., and Taman, A. (2021). Take the money and run: How food banks became complicit with Walmart's hunger producing employment practices. *Critical Public Health*.
- Muller, J. and Raphael, D. (2021). Does unionization and working under collective agreements promote health? *Health Promotion International*.
- Medvedyuk, S. Govender, P., and Raphael, D. (2021). The reemergence of Engels' concept of social murder in response to growing social and health inequalities. *Social Science and Medicine*.
- Govender, P., Medvedyuk, S., & Raphael, D. (2023). 1845 or 2023? Friedrich Engels's insights into the health effects of Victorian-era and contemporary Canadian capitalism. *Sociology of Health & Illness*.