I. COURSE DESCRIPTION

The impact of structured inequalities and related psychosocial and environmental stressors on the health and social status of diverse groups. Analysis of social actions and behavioral interventions that lead to greater equality, as well as mediate stress and optimize health.

II. PREMISE AND GOALS

Premise
Diverse racial and cultural groups that encounter prejudice and structured inequalities experience a form of social injustice that results in triple jeopardy. First, their experiences with prejudice, discrimination, and structured inequalities often result in unequal access to, and ownership of, various resources (e.g., social support, health care, employment and educational opportunities, financial and corporate advancement opportunities). Second, their experiences of inequality are invariably associated with chronic psychosocial and environmental stressors (e.g., social alienation, language barriers, cultural conflicts, violent neighborhoods, exposure to chemical hazards, overcrowded housing) that are often disruptive to a person’s lifestyle and productivity in the work environment. Third, the chronic stressors experienced by racial and cultural groups often result in health-related disorders and/or illnesses.

Goals
Students will study the interrelationship of individuals, racial/ethnic groups, and cultural groups to understand and appreciate issues of diversity, equality, and structured inequalities in the U.S., its institutions, and its culture within the context of stress and health. How one’s identity, behavior, and health are shaped by cultural and social influences in the contexts of equality and inequality will be addressed throughout the course. From both a theoretical and experiential perspective, students will study behavioral interventions, social actions, and positive interactions that: (a) diminish or eliminate inequalities and related stressors; and (b) promote health and social justice. Through cooperative and interactive exercises, students will develop ideas for new legislation and new social actions that promote equality and social justice. Processes (historical, social, economic, and political) that lead to either greater equality or structured inequality will also be analyzed.

Particular attention will be given to examining inequalities that have been interwoven into the fabric of various social institutions (e.g., health care systems, educational institutions, advertising/media agencies, financial and legal systems, business corporations, sport organizations and franchises, religious denominations, government/military institutions) within the context of stress and health.
III. COURSE OBJECTIVES

Upon completion of the course, students will be able to:

(a) recognize and describe structured inequalities and related psychosocial and environmental stressors and health risks prevalent in racial/ethnic groups and cultural groups:
   (1) racial/ethnic groups: African Americans; Hispanics/Latinos; Asian Americans/Pacific Islanders; Native Americans; Multiracial groups; and,
   (2) cultural groups: disability; sexual orientation; gender; age; religion; and class;

   - socioeconomic status and its relationship to inequities, access to resources, and the stress response will be addressed as a sub-goal to this objective;
   - the role of religion in promoting equality and fellowship, as well as prejudice and separatism, will be addressed as a sub-goal to this objective;

(b) describe physiological, psychological, and immune responses to chronic stressors experienced by racial and cultural groups which lead to increase health risks (e.g. ACTH axis, vasopressin axis, thyroxine axis, general adaptation syndrome, and the effects of anger/hostility on the cardiovascular system);

(c) describe how stereotyping, prejudice, and structured inequalities shape the identity, behavior, and health of racial and cultural groups;

(d) describe and apply behavioral and cognitive interventions that reduce/eliminate structured inequalities and prejudice, as well as mediate stress and promote optimal health;

(e) recognize and describe historical, social, economic, and/or political processes that lead to either greater equality or structured inequality in the U.S.; and

(f) describe social actions and positive interactions that have been successful in diminishing/eliminating inequalities for racial and cultural groups, as well as construct new paradigms for reducing structured inequalities and related stressors.

IV. GOALS AND OBJECTIVES FOR SJSU Studies - AREA S
(Self, Society, & Equality In The U.S.)

A. Goals for SJSU Studies – Area S
   “Students will study the interrelationship of individuals, and racial groups, and cultural groups to understand and appreciate issues of diversity, equality, and structured inequality in the U.S., its institutions, and its cultures.”

B. Student Learning Objectives For SJSU Studies – Area S
   - After successfully completing the course, students shall be able to: describe how religious, gender, ethnic, racial, class, sexual orientation, disability, and/or age identity are shaped by cultural and societal influences in contexts of equality and inequality;
   - describe historical, social, political, and economic processes producing diversity, equality, and structured inequalities in the U.S.;

C. Student Learning Objectives For SJSU Studies – Area S (cont.)
   - describe social actions by religious, gender, ethnic, racial, class, sexual orientation, disability, and/or age groups leading to greater equality and social
justice in the U.S.; and
• recognize and appreciate constructive interactions between people from different racial and cultural groups.

V. PREREQUISITES
• Passage of the Writing Skills Test (WST)
• Upper Division Standing (56 units)
• Completion of CORE GE
• Courses to meet Areas R, S, and V of SJSU Studies must be taken from three different departments, or distinct academic units.

VI. COURSE CONTENT
A. Structured Inequities and Related Psychosocial Stressors and Health Consequences for Racial and Cultural Groups

This course will identify and analyze structured inequities and related psychosocial stressors and health behaviors experienced by diverse cultural groups in U.S. The origin and historical patterns of structured inequities and their political, social, and economic processes will also be addressed. Social and individual actions that have led to greater equality will be disclosed through lectures, interactive learning, and critical thinking assignments. The diverse groups discussed will include:
- Ethnicity
- Race
- Class
- Age
- Sexual Orientation
- Disability
- Gender
- Religion

B. Chronic Stress: Physiological Consequences
- ACTH axis
- Thyroxine axis
- Anger/Heart Disease
- Vasopressin Axis
- General Adaptation Syndrome

C. The Role of Perception on Stress and Prejudice
- Importance of the perceptual process
- The link between perception and culture
- How values and beliefs influence perception and shape behavior

D. Racial/Ethnic Groups: Inequities and Related Stressors

1. Racial/ethnic groups:
- African American
- Hispanic/Latino
- Asian American/Pacific Islander
- Native American
- Multiracial groups

2. Equity issues & stressors: ethnic differences and similarities
- Stressors associated with acculturation: challenges and obstacles
- Racial biases and their effect on employment and educational opportunities
- Predisposition to particular diseases and/or health problems/disorders
- Psychophysiological effects of discrimination and prejudice
- Ethnic diversity and stressors in the academic environment
- Socioeconomic outcomes of prejudice
- Ethnicity and politics: causes and mediators of stress
- Acceptance and integration into social, political, and business environments
• Maintenance of cultural heritage and identity
• Communication barriers

E. Racial/Ethnic Groups: Inequities and Related Stressors

*Americans of European decent will also be discussed as a cultural group. The resources and privileges of this group will be discussed as a comparative measure in terms of the structured inequities experienced by other racial and cultural groups. Ways in which persons of privilege can diminish oppression and social injustice will be examined. Inclusion versus exclusion will be discussed as an essential process for reducing structured inequalities and related psychosocial stressors. Stratification and oppression within this cultural group will also be examined.

F. Cultural Groups: Inequities and Related Stressors

1. Gender
   • Gender-specific health risk factors
   • Male gender role stress: emotional inexpressiveness, restricted socially acceptable roles, and masculine ideology that promotes maladaptive behaviors
   • Gender bias in the workplace and its effect on health
   • Stress and health risks within single-parent households
   • Feminine ideology that promotes the need “to be all things to all people” resulting in health related problems and maladaptive coping strategies
   • Monolithic and public view of the female body resulting in eating disorders and various surgical procedures
   • Treatment & recovery from breast cancer and prostate cancer
   • Issues related to domestic violence, sexual and verbal assault, and rape

2. The Role of Religion in Promoting Equality and Social Justice, as well as Discrimination and Separatism
   • Framework for coping with personal loss, illness, death, and uncertainty
   • Achieving spirituality, social support, and a sense of connectedness
   • Social integration, fellowship, and cohesiveness
   • Bias within religions; prejudice between religions
   • Stress and inequalities resulting from religious beliefs and discrimination
   • Hate crimes against religions

3. Sexual Orientation
   • Self-perception of sexual identity and sexual orientation
   • Societal and family acceptance/rejection of divergent orientations
   • High incidence of teenage suicide among gay, lesbian, bisexual, and transgender groups
   • The impact of socioeconomic status on acceptance of diverse groups
   • Social and military discrimination
   • Issues for HIV-positive individuals, families, and communities
   • Gay, lesbian, bisexual, and transgender discrimination

4. Disability, Functional Impairment, and Psychosocial Stress
   • Self and societal perceptions of disability
   • Coping positively with consequences of disability
   • Successful cognitive functioning
   • Socioeconomic status and access to resources

5. Issues of Age and Health
   • Negative stereotyping; optimizing cognitive functioning and reversing disability
   • Biases of health care professionals toward older adults resulting in inequities
   • Physical disease, functional impairment, and depression in older adults
• Inadequate research involving seniors that are healthy and in the upper SES
• Alienation from the mainstream; age discrimination in the work environment
• Mismanagement of pain in infants and children; pharmacological interventions
• Childhood and adolescent stress in the context of violence, drugs, peer pressure
• Morbidity and mortality in children and adolescents: risk behaviors and violence
• Mentorship’s and apprenticeships for supporting positive interests and abilities

6. Socioeconomic Status and Health Risk Factors
• Impact of poverty on physical, mental, and emotional health
• Economic status and HIV risk
• Access to technology, and impact on mobility and personal advancement
• Relationship between variable-income occupations, stress, and health
• Socioeconomic outcomes of prejudice

G. Identity, Behavior, and Health of Racial and Cultural Groups are Shaped by Societal and Cultural Influences in the Contexts of Equality and Inequality

1. Application: The role of societal and cultural forces in shaping identity, behavior, and health in the contexts of equality and inequality will be examined throughout the course as related to racial and cultural groups.
2. Application: Identity and behavior as dynamic constructs are affected by social, cultural, and environmental influences. For example, individuals who are socioeconomically disadvantaged with respect to both income and job status may generate perceptions that not only indicate they have less financial resources than others but, also that they are moderate or poor providers for their families. They may further perceive that they are socioeconomically oppressed because of their race. If they have been unable to achieve social support or social integration in the work environment or feel a lack of respect from their work supervisors, other self-perceptions will evolve. Collectively, these perceptions will play a significant role in shaping identities. These individuals are also likely to report exposure to a greater number of stressors and less availability of individual and social resources. Health consequences will follow, if interventions are not employed to manage the stressors.
3. Application: In the U.S., sexual orientation identity is strongly shaped by cultural and societal influences. In a society marked by homophobia and heterosexism, lesbian and gay youth are particularly at risk. Media images rarely offer positive comprehensive depictions of gay life, legislative acts are often aimed at excluding gays/lesbians from policies and protections (i.e. Prop. 22), homophobic jokes and insults frequently go uncontested in high school cultures, and many health care workers are unaware of or insensitive to the specific needs of their gay/lesbian patients encounter the same types of discrimination from their family members as they do in the wider society. These daily realities might result in higher levels of stress, lower self-esteem, lower self-efficacy, internalized homophobia, and closeted behavior (which leads to more stress) for gay and lesbian youth, and significantly rob them of the psychological, emotional, and social resources necessary to flourish in early adulthood.

H. Recognition and Description of Historical, Social, Economic, and Political Processes that led to greater equality or structured inequality in the U.S.

1. Application: Examples of topics discussed are: (a) social constructions of race, ethnicity, gender, sexual orientation, disability, age, class, and religion; (b) dominate ideologies related to race, ethnicity, gender, sexual orientation, disability, age, class, and religion; (c) how ideologies have shifted during the 20th century concerning racial
groups, gender, age, disability, sexual orientation, and religion; (d) how the various shifts in ideologies have shaped the identity and behavior of racial/cultural groups; and (e) SES stratification in relation to the above racial/cultural groups.

I. Social Actions, Constructive Interactions, and New Models Promoting Equality
1. Analysis of local, state, and federal legislation that has led to greater equality and social justice
2. Description of various outreach programs, support groups, organizations, mentorships, and community programs leading to greater equality and social justice for both racial and cultural groups
3. Creation of new social action models and ideas for new legislation by students for the purpose of creating greater equality
4. Consciousness raising through art, advertising, and the media

J. Laboratory Assignments: Developing Internal & Social Resources
1. Laboratory exercises involving behavioral, cognitive, and social interventions will be interwoven into the curriculum throughout the semester.
2. Interventions will be selected from, but not limited to, the following:
   • progressive neuromuscular reeducation and autogenic training;
   • peer-conflict mediation; anger-control training;
   • biofeedback training for chronic pain and stress-related disorders
   • cognitive restructuring; negotiating and problem solving methods;
   • strategies for developing advocacy and support groups;
   • culturally sensitive interventions; health promotion strategies.

VII. REQUIRED TEXT AND READING:

KIN/HS 169 Course Reader. Available at Maple Press 481 E San Carlos St. (408) 297-1000
You are strongly encouraged to bring the reader to class each day.

VIII. COURSE ASSIGNMENTS:

Writing Assignments: Students will complete both in-class and out-of-class writing.

In-Class Writing:

Students will use introspective, problem solving, and critical thinking techniques for in-class writing assignments by: (a) addressing stressors and risk behaviors unique to diverse populations; (b) identifying innovative ideas or models for eliminating inequalities; (c) identifying health-promoting behaviors and programs for specific diverse populations; and (d) identifying social and cultural influences that have played a role in shaping students’ perceptions of people and events in their environment. Students will be evaluated on the following criteria: ability to write in a clear, coherent, and concise manner including proper grammar and syntax; ability to critically analyze and synthesize material from class lectures; and, ability to generate and express alternative ideas for health promotion and equality. (The in-class assignments comprise at minimum 2 double-spaced pages of writing in the form of quizzes, in-class reflections, and critical thinking exercises)
Out-of-Class Writing

- **Personal Inequality Assignment:**
  Students will engage in reflection to disclose a personal inequality previously experienced that involved psychosocial stressors and health issues. After completing the reflective process, student should complete a written analysis of their personal inequality by addressing the following components: (a) the origin of the structured inequity; (b) historical, social, political, or economic processes associated with the inequity; (c) description of stressor and its impact on personal health; (d) a behavioral, cognitive, or social intervention that was used (or could have been used) to reduce/eliminate the stressor; (e) a personal or social action that was taken (or could have been taken) to diminish/eliminate the inequality, as well as create greater equality.

  In addition, students will interview someone from a diverse group who has experienced a structured inequality and discuss in writing: (a) identification of ethnic or cultural group represented; (b) the origin and nature of the inequality; (c) historical, social, political and/or economic processes involved; (d) description of the stressor and its impact on the individual’s health and lifestyle; (e) an intervention that was used (or could have been used) to reduce/eliminate the stressor; (f) a personal or social action that was taken (or could have been taken) to reduce/eliminate the inequality leading to greater equality.

  The paper (4-6 pages, double spaced) should integrate and synthesize information from at least two academic peer-reviewed journals that relate to one or more components that are addressed in the assignment (e.g., social or cultural context of the inequality, appropriateness of chosen intervention, social action or strategies for diminishing the inequality, impact of stressor on personal health). Reference citations must be in the format and style recommended by the American Psychological Association (APA) manual (5th edition) unless otherwise specified by the course instructor. Papers will be evaluated on the following criteria: (a) content and organization including synthesis of primary references; (b) adherence to the assignment guidelines; (c) citations, references, and format; (d) syntax, grammar, and spelling; and (e) creativity and insight expressed through the integration of all components of the assignment.

- **Research Paper**
  Students will synthesize current research related to structured inequalities experienced by a particular diverse group in the U.S. Students will also describe stressors and health consequences related to the inequalities identified. The group selected should represent one or more of the following characteristics: race, ethnicity, gender, religion, disability, sexual orientation, socioeconomic status, and age. Students will discuss important research findings and the implications of these findings in a review paper (5-7 pages, double-spaced), citing a minimum of five academic peer-reviewed journals. Papers should include a synopsis, analysis, and application of current research as reported in the literature. In addition, papers should address the impact of inequities/stressors from a physiological, psychological, or emotional perspective. Social actions and behavioral interventions for reducing/eliminating inequities and related stressors and health consequences must also be addressed. Evaluation criteria include the following: (a) identification of ethnic/cultural group, structured inequalities association with selected ethnic/cultural group, political, historical, economic, and/or social processes that have produced diversity, equality and/or structured inequality, related stressors and health consequences, and constructive individual/social action(s) that have led to greater equality and social injustice; (b) synthesis, critical analysis and application of the literature; (c) adherence to the assignment guidelines; (d) citations, references, and format; (e) syntax, grammar, and spelling; (f) originality and creativity.
In-Class Presentation

- **Social Action Model and Small Group Presentation**
  In teams of no more than four, students will be required to investigate and present a practical social action/intervention model for reducing or eliminating inequalities and related psychosocial and environmental stressors. The team will be required to hand in a two page typed outline/resource guide in addition to a 15 minute oral presentation. It will be important to 1) identify a particular inequality, including a brief overview of the issue, 2) focus on practical rather than ideal action strategies, 3) identify resources, both on and off campus, that can be utilized by classmates, and 4) articulate exactly how the intervention strategy will help to reduce or help to eliminate the inequality itself or the related stressors associated with the inequality.

Other Participation

- **Active Student Participation: Oral communication, reflective and critical analysis skills**
  Students are required to actively participate in laboratory exercises by analyzing and applying behavioral, social, and cognitive interventions for the purpose of diminishing structured inequalities, as well as related psychosocial/environmental stressors and health consequences. Some laboratory assignments will also include reflective exercises to determine the effectiveness of the interventions and the degree to which individual resources have been enhanced.

Students will participate in critical analysis by: (a) describing how identity, behavior, and personal health are shaped by cultural and societal influences in the contexts of equality and inequality; (b) identifying historical, social, political, and economic processes that produce structured inequality and equality in the U.S.; and (c) recognizing and/or developing social actions and positive interactions that lead to greater equality, diminish related stressors, and promote optimal health.

Evaluation of oral communication skills will be based upon the following criteria: (a) ability to communicate ideas in a clear and concise manner; (b) ability to apply critical analysis to issues related to diversity; (c) accuracy of material presented; and (d) ability to respond to questions relative to subject area.

IX. **GRADING**

- **Examinations:**
  Examinations (midterm and final) and quizzes will be administered throughout the semester. The examinations and/or quizzes will include both objective and essay questions; essay questions will be required on examinations and/or quizzes.

- **In-class and Out-of-class Writing:**
  The in-class and out-of-class writing assignments (previously described) exceed the minimum SJSU Studies requirement of 3000 words. The American Psychological Association (APA) manual (5th edition) will be required for out-of-class assignments unless otherwise specified by the course instructor.

- **Social Action Model and Small Group Presentation:**
  Oral presentation and resource guide outlining a practical social action model.

- **Laboratory assignments: Internal and Social Resources:**
  Laboratory and interactive assignments designed primarily to increase students’ internal resources and, secondarily and to make students more aware of available social resources will include: problem solving and cooperative learning exercises for managing prejudice and structured inequalities; critical thinking assignments involving the creation...
of new social action models for reducing/eliminating inequalities and related psychosocial and environmental stressors; and behavioral and cognitive interventions for mediating stress and health risks associated with prejudice, discrimination and structured inequalities.

X. GRADING MODEL

The above content and assignments will be evaluated as follows:

Assessment

(a) Midterm Examination.................................................................20%

(b) Final Examination.........................................................................20%

(c) Laboratory Assignments............................................................30%
   • Quizzes/In-class assignments ............................................. (5%)
   • Social action model/presentation & outline ....................... (25%)

(d) Out-of-Class Assignments.........................................................30%
   • Personal inequality/interview paper ................................... (15%)
   • Final research paper .......................................................... (15%)

XI. ACCOMMODATIONS FOR THOSE WITH DISABILITIES:

“If you need course adaptations or accommodations because of a disability, or if you have emergency medical information to share with me, or if you need to make special arrangements in case the building must be evacuated, please make an appointment with me as soon as possible, or see me during office hours. Presidential Directive 97-03 requires that students with disabilities register with the Disability Resource Center to establish a record of their disability (924-6000).”

XII. PLAGIARISM:

Plagiarism is the use of someone else’s language, images, data, or ideas without proper attribution. It is a very serious offense in both academic and professional environments. In essence, plagiarism is both theft and lying: you have stolen someone else’s ideas, and then lied by implying that they are your own.

Learning when to cite a source, and when not to, is an art, not a science. However, here are some examples of plagiarism that you should be careful to avoid:

• If you use a sentence (or even a part of a sentence) that someone else wrote and do not reference the source, you have committed plagiarism.
• If you paraphrase somebody else’s theory or idea and do not reference the source, you have committed plagiarism.
• If you use a picture or table from a web page or book and do not reference the source, you have committed plagiarism.
• If your paper incorporates data someone else has collected and you do not reference the source, you have committed plagiarism.

The SJSU library has a tutorial that explains how to identify and avoid plagiarism, available at: http://tutorials.sjlibrary.org/plagiarism/index.htm.
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<th>Week</th>
<th>Date</th>
<th>Topics, Readings, Assignments, Deadlines</th>
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<tbody>
<tr>
<td>1</td>
<td>8/25 T</td>
<td>Introduction: Responsibilities, expectations, and course objectives.</td>
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<td>8/27 TR</td>
<td><strong>Diversity issues in health and wellness: What's at issue?</strong></td>
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<td>Defining diversity. (Nakamura - “Health and wellness: A multicultural perspective”) - Notes</td>
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<td>9/03 TR</td>
<td><strong>Psychophysiology of stress &amp; Coping</strong></td>
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<td>Stress model(s) and theories</td>
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<td>Reader: Greenberg (2008) <em>Comprehensive Stress Management</em> Chapters 1 &amp; 2. (PS)</td>
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<td>3</td>
<td>9/08 T</td>
<td><strong>Gender</strong></td>
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<td></td>
<td>9/10 TR</td>
<td>Reader: “Why do we need a health psychology of gender and sexual orientation?” – T. Mann (G). Reader: “Seeing the Unexpected…” – L. Klein &amp; E. Corwin (G)</td>
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<td>Video: <em>Killing us softly 3</em></td>
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<td>9/17 TR</td>
<td><strong>Sexual Orientation</strong></td>
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<td>6</td>
<td>9/29 T</td>
<td><strong>Diversity, stress, stereotypes and the media</strong></td>
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<td>Video: <em>Playing unfair: The media image of the female athlete</em></td>
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|      |          | Reader: “Critical Race Media Literacy: Challenging Deficit Discourse about *
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<tr>
<td>7</td>
<td>10/06 T</td>
<td><strong>In Class Assignment-Quiz</strong> Media Analysis Project: Bring in media content for review and analysis</td>
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<td>10/08 TR</td>
<td><strong>Personal Inequality Paper due</strong> Presentation: “The Identity Wars: Media Representation of Italian/Americans and the Intricate Negotiation of Identity” – M. Masucci</td>
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<td>8</td>
<td>10/13 T</td>
<td>Midterm Review</td>
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<td>10/15 TR</td>
<td><strong>Midterm Exam</strong></td>
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<td>9</td>
<td>10/20 T</td>
<td><strong>Race, ethnicity, &amp; culture</strong> Reader: “Glossary of Terms (pp.141-157)” from – Critical Race Theory: An Introduction. R. Delgado &amp; J. Stefancic. This is a useful resource for the entire section on race, ethnicity, and multiculturalism.</td>
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<td>10/22 TR</td>
<td>Reader: “Race as Biology is Fiction, Racism as a social problem is real” Smedley &amp; Smedley (REC)</td>
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<td>Reader: “White Privilege and Male Privilege” - P. McIntosh (REC)</td>
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<td>Reader: “Telling tales: What stories can teach us about racism” - L. Bell (REC)</td>
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<td>Video: <strong>Race: The Power of an Illusion: The Story We Tell</strong></td>
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<td>10/27 T</td>
<td>Reader: “Race, ethnicity, culture, and disparities in health care” Egede (REC)</td>
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<td>10/29 TU</td>
<td>Reader: “Racial Identity and the State: The Dilemmas of Classification” – M. Omi (REC)</td>
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<td>Reader: “Research and Clinical Perspectives on Mexican Migration: Those who go, those who stay” – V. Salgado de Snyder (REC)</td>
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<td>Reader: “The Latino Health Research Agenda for the Twenty-first Century” - D. Hayes-Bautista (REC)</td>
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<td>Reader: Asian Pacific Americans and Critical Race Theory – Teranishi (REC)</td>
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<td>Reader: “Understanding tobacco use among Filipino American men” Maxwell, Garcia, &amp; Berman (REC)</td>
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<td>12</td>
<td>11/10 T</td>
<td><strong>Social Action</strong></td>
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<td>11/12 TR</td>
<td>{Presentations} Social Action Model and Small Group Presentation</td>
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<td>13</td>
<td>11/17 T</td>
<td>Reader: “Socioeconomic status and health in minority populations” (SES)</td>
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<td>11/19 TR</td>
<td>Reader: Who are the poor? – Lott &amp; Bullock (SES)</td>
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<td><strong>NO CLASS – Furlough Day</strong></td>
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<td>14</td>
<td>11/24 T</td>
<td>Reader: Media images of the poor – Bullock, Wyche, &amp; Williams. (SES)</td>
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<td>11/26 TR</td>
<td>Video: <em>In Service to America</em></td>
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<td><strong>NO CLASS – Thanksgiving Holiday</strong></td>
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<td>12/01 T</td>
<td><strong>Disability</strong></td>
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<td>12/03 TR</td>
<td>Reader: “Fact Sheet on the Americans with Disabilities Act of 1990”</td>
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<td>Reader: “The meaning of health for women with physical disabilities: A qualitative analysis” – M. Nosek (et al.)</td>
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<td>Reader: Social-Cultural Context of Disability” – K. DePauw</td>
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<td><strong><strong>Research Paper Due</strong></strong></td>
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<td>Reader: “Breaking down the myths of aging” Rowe, J. &amp; Kahn, R.</td>
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<td>Reader: “Reversing disability in old age”</td>
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