Read This Chapter to Learn About
➤ Elements of Social Interactions
➤ The Demographic Structure of Society

ELEMENTS OF SOCIAL INTERACTIONS

Social interactions are affected by status, as well as by social and cultural roles. How, where, and with whom the interactions occur can communicate culturally-based information before any verbal information is exchanged.

Status

An individual’s status within a culture may affect multiple aspects of social interaction. There are three types of status:

1. **Ascribed status** is the status that is placed upon a person by society (e.g., being born into a royal family).
2. **Achieved status** is status that is conferred because of a person’s accomplishments (e.g., receiving a doctorate degree).
UNIT IV:
Social Structure

3. **Master status** is the overarching status that a person may exercise in society. This kind of status may establish rules about who initiates a conversation. It can affect body language during a conversation (e.g., standing versus sitting).

   In many cultures, status is expressed through clothing or body display and therefore does not need to be explicitly stated. But in cross-cultural interactions, status may not be as evident. This can create difficulties when individuals work from scripts based on their own cultures but those scripts conflict. Cross-cultural status issues can be particularly difficult for younger medical professionals. In some cultures, medical professionals are given the elevated status of “experts” and patient participation in care is expected to be minimal. However, this may conflict with the cultural expectation that a younger person should acquiesce to the direction of older individuals. The result may be status conflicts that young medical professionals should be aware of when working with cross-cultural populations.

### Social and Cultural Roles

**Culturally-delineated roles** can have an important influence on social interactions. Some cultures have more rigid role boundaries, while others have more flexible role boundaries (e.g., can a medical professional have the roles of both “physician” and “friend,” or are those roles kept distinct?). Flexible boundaries may create **role strain**, which occurs when the two roles a person plays are in tension (e.g., sitting with a sick person for a long time may be the role of a friend, but a physician has multiple patients in need of treatment). There may also be **role conflict**, when two roles are diametrically opposed to each other (e.g., listening to someone talk about personal problems may be the role of a friend, but a physician cannot share a litany of personal problems with his/her patient and then expect the patient to have confidence that the physician is providing quality treatment).

**Gender roles** also play a significant part in social interactions, but these vary in importance across cultures. For example, touching members of the opposite sex (including shaking hands with them) or being in a room alone with a member of the opposite sex may adversely affect social interactions with individuals from conservative Christian, Muslim, or Hasidic Jewish groups. Gender roles may also affect what is determined to be a comfortable speaking distance between two individuals.

**Group membership** may also influence culturally-defined roles. Group membership can include those social groups that are selected by the individual (e.g., religious affiliation, professional career), those that are biologically based (e.g., sex, age), and those who are variable depending on life status (e.g., socioeconomic status, geographic location). Group membership may affect both the roles that an individual plays in social interactions as well as the individual’s status within a culture.
Group membership will also define an individual’s **social network**. However, the level of obligation that is entailed by involvement in a social network may change from culture to culture. For example, in Chinese culture, *guanxi* is a social network relationship that implies a strong mutual obligation that overrides social status. In other cultures, a social network may be more of a loose group of acquaintances with limited or no obligations implied.

THE DEMOGRAPHIC STRUCTURE OF SOCIETY

Various factors create the demographic structure of society, such as age, gender and sex, race and ethnicity, and regional subgroups. Most of these demographic factors are emphasized by culturally-defined dress and behavior patterns.

**Age**

Age is a critical factor in determining how someone is treated in a society. In some societies, infants are coddled and closely nurtured until school age. In others, children are largely benevolently ignored until they reach adulthood. The age at which an individual is considered to have reached adulthood differs from society to society. A person may be called an adult upon reaching a certain age (e.g., 18 or 21 years) or only following a demographic transition such as marriage. However, even within a culture this may change. In the United States, some sociologists have proposed a new “transitional age youth” category that ranges from 15 to 30 years old, blurring the transition to adulthood. In some cultures, people are thought to reach a post-adult “age of wisdom” somewhere between 40 and 60 years old; an example of this attitude is the Jewish proscription against studying Kabbalah before the age of 40. Elderly persons may be revered, as in Japanese culture, or less so, as in much of American culture—attitudes that carry over into patient care. An age structure chart is often used in sociology to identify the age demographics of a society. This (usually) pyramid-shaped chart identifies how many individuals in each age category live in the society (see Figure 11-1).

**Gender and Sex**

Gender is different from biological sex. **Sex** is a biological construct that is genetically determined. Most humans are either XX-female or XY-male, though there are genetic anomalies that result in XXY or XYY sex genotypes. **Gender**, on the other hand, is a sociological construct that is often reflected in the phenotype of sexual organs (though this is not universal). Gender identity tends to occur at a fairly young age, though
estimates range from age 2 to age 10. Gender in Western culture is primarily reflected in the terms *man* and *woman*. Sandra Bem introduced the idea of **gender schema theory** to describe how gender is developed in Western society. In her research she identified four gender categories:

1. **sex-typed** (gender matches biological sex)
2. **cross-sex typed** (gender is aligned with the opposite sex)
3. **androgy nous** (gender identity includes both sexes)
4. **undifferentiated** (limited processing of sex-typed information on gender)
Other cultures may include multiple genders such as the third gender in Indian culture, the “Hijras.” One sociologist (Gopi Shankar) has identified up to 20 different categories of gender. His work highlighted the importance of language and culture in gender identification and gender identity.

**Sexual orientation** describes an individual’s preferred sexual partner. Sexual orientation may not be identified until the individual reaches puberty or early adolescence. Gender identity in the context of culture is tied to sexual orientation (fewer recognized gender identities in a culture may result in fewer options of sexual orientation). In Western culture sexual orientation is most widely categorized as a tri-part structure (heterosexual, homosexual, bisexual), though these three categories may not capture the full diversity of sexual orientation. Sociologist Shankar has identified 10 different sexual orientations, again highlighting the role of culture and language in the social process of defining sexual orientation (though not necessarily orientation itself).

**Race and Ethnicity**

Similar to sex and gender, race and ethnicity are different. **Race** is determined by biological, genetic factors, though these are obviously even more complex than sex. An individual’s skin tone, bone structure, eye color, and hair color are phenotypes of genetic racial characteristics. Some phenotypic differences exist between the races, though both the genetic and phenotypic lines differentiating the groups may not be clear. **Ethnicity** is a social construct that includes cultural factors. While race may be one aspect of ethnicity, it is not the defining factor. For example, an individual’s race may be Caucasian, but ethnicity could include French, English, or Nordic.

**Regional Subgroups**

Geographic location is also an artificial construct that is frequently used to describe cultural or socioeconomic status similarities. In the United States, terms such as “Appalachian region,” “Plains states,” or “Deep South” are frequently used to identify subgroups. However, as the population becomes increasingly mobile, the geographic groups are less likely to be coherent uniform groups and may provide less reliable information.
17 Questions

This minitest is designed to assess your mastery of the content in Chapters 10 and 11 of this volume. The questions have been designed to simulate actual MCAT questions in terms of format and degree of difficulty. They are based on the content categories associated with the foundational concept that is the theme of this unit. They are also designed to test the scientific inquiry and reasoning skills that the test makers have identified as essential for success in medical school.

In this test, most of the questions are based on short passages that typically describe a research study or some similar process. There are also some questions that are not based on passages.

Use this test to measure your readiness for the actual MCAT. Try to answer all of the questions within the specified time limit. If you run out of time, you will know that you need to work on improving your pacing.

Complete answer explanations are provided at the end of the minitest. Pay particular attention to the answers for questions you got wrong or skipped. If necessary, go back and review the corresponding chapters or text sections in this unit.

Now turn the page and begin the Unit IV Minitest.
Directions: Choose the best answer to each of the following questions. Questions 1–2 are not based on a passage.

1. Mental health hospitals and prisons are forms of:
   A. agencies
   B. institutions
   C. functionalism
   D. social cohesion

2. Separate the following into ascribed and achieved status.
   1. woman
   2. Olympic athlete
   3. mayor
   4. parent
   5. Christian
   6. rabbi
   7. 45 years old
   8. physician
   A. Ascribed: 1, 2, 3, 4; Achieved: 5, 6, 7, 8
   B. Ascribed: 1, 4, 5, 7; Achieved: 2, 3, 6, 8
   C. Ascribed: 4, 5, 6, 8; Achieved: 1, 2, 3, 7
   D. Ascribed: 1, 3, 7, 8; Achieved: 2, 4, 5, 6

Questions 3–6 are based on the following passage.

Passage I

Significant changes took place in the United States over the past century regarding how and when U.S. citizens were institutionalized. The accompanying graph tracks the rate of adults’ institutionalization in mental hospitals and prisons in the period 1928–2000.

Source: Based on statistics from the federal Census Bureau, Department of Health and Human Services, and Bureau of Justice Statistics.
3. What was the rate of institutionalization in mental hospitals and prisons for U.S. adults in 1994?
   A. 0.5% in mental hospitals; 0.04% in prison
   B. 0.04% in mental hospitals; 0.05% in prison
   C. 0.02% in mental hospitals; 0.04% in prison
   D. 0.05% in mental hospitals; 0.4% in prison

4. Which of the following can you conclude from the graph?
   A. The rate of mental health hospitalization decreased in the period during which the imprisonment rate increased.
   B. The decrease in the mental health hospitalization rate caused the increase in the imprisonment rate.
   C. There is a relationship between the number of individuals in prison and the number of individuals in mental health institutions.
   D. The increase in the imprisonment rate caused a decrease in the mental health hospitalization rate.

5. What possible hypothesis might be extrapolated from this graph?
   A. Some individuals with severe mental illness need to be institutionalized in prison or mental health hospitals.
   B. Prisons provide good mental health treatment similar to mental health hospitals.
   C. Without sufficient treatment in mental health hospitals, some severely mentally ill people may commit crime and face imprisonment.
   D. Prisons are cheaper than mental health hospitals and can treat people more efficiently.

6. Which of the following options is the BEST way to test the hypothesis suggested by the data in the graph?
   A. by comparing which provided the best treatment option, imprisonment or mental health hospitalization
   B. by tracking individuals released from mental health institutions to assess their imprisonment status longitudinally
   C. by identifying the percentage of prison inmates who have mental health needs
   D. by comparing recidivism rates between prison and mental health hospitals
Questions 7–8 are not based on a passage.

7. Health care is an example of which level of economic production?
   A. primary
   B. secondary
   C. tertiary
   D. quaternary

8. What is the difference between race and ethnicity?
   A. Race is primarily genetically determined; ethnicity is primarily determined by social characteristics.
   B. Race is identified by skin color; ethnicity is identified by geographic region.
   C. Race determines sexual orientation; ethnicity determines the term used to describe sexual orientation.
   D. Race determines family; ethnicity determines marriage relationships.

Questions 9–12 are based on the following passage.

Passage II

Every year, the U.S. Department of Education records how many degrees are awarded based on demographic factors. The following graph shows bachelor's degrees awarded to U.S. students during the school year 2009–2010, categorized by race, ethnicity, and gender.

[U.S. bachelor's degrees awarded by race/ethnicity and gender graph]

Source: Adapted from U.S. Dept. of Education, National Education Statistics 2011.
9. According to the graph, in 2009–2010 which racial/ethnic group(s) earned a higher percentage of bachelor's degrees than their percentage in the U.S. population?
   A. black, Latino/a
   B. American Indian, black
   C. white, Asian
   D. only whites

10. According to the graph, during 2009–2010 in which ethnic or racial group(s) did women earn more bachelor's degrees than men?
   A. none of the racial or ethnic groups
   B. every racial or ethnic group except whites
   C. only whites
   D. every racial or ethnic group

11. What can be concluded from the data in the graph?
   A. Women are more interested than men in pursuing higher educational opportunities.
   B. Financial aid is being offered to greater numbers of women to pursue their education.
   C. Women are completing bachelor's degrees more often than men.
   D. More women than men are pursuing higher-paid careers.

12. Despite their increased education levels, women earn less money than their male counterparts. What sociological phenomenon might explain this?
   A. In the United States, ascribed statuses influence women's master status more strongly than achieved statuses.
   B. Women are more likely to experience sociological role strain because they have more flexible boundaries, which negatively affect their intelligence.
   C. Social functionalism explains the difference because the careers chosen by women tend to be less critical to the functioning of society compared to the careers chosen by men.
   D. More women live in geographic locations that offer lower pay (e.g., rural areas), whereas men tend to live in geographic areas that offer higher pay (e.g., cities).
Questions 13–15 are not based on a passage.

13. Which of the following is characteristic of a totalitarian government?
   A. active participation in government by the population being governed and periodic election of officials
   B. a government headed by a single executive whose powers are limited by a written or unwritten constitution
   C. a government dominated by an elite who obtain membership in the ruling class based on birth, property ownership, or some other criterion
   D. a government that exercises power arbitrarily and without limits and that seeks to control every sphere of activity including citizens’ actions and even thoughts

14. Which of the following is NOT necessarily an aspect of culture?
   A. shared language
   B. shared customs
   C. shared race
   D. shared institutions

15. Which of the following statements is TRUE about gender?
   A. Gender is a sociological concept.
   B. All cultures subdivide into two genders.
   C. Gender identity in the context of culture is tied to sexual orientation.
   D. Gender is biologically determined.

Questions 16–17 are not associated with any passage.

16. Which theoretical paradigm sees aspects of society as separate but interrelated, with each component acting separately but critical to the functioning of the whole?
   A. functionalism
   B. conflict theory
   C. symbolic interactionism
   D. societal relativism

17. According to sociological research, which of the following is true about increased mobility and globalization in society?
   A. As mobility has increased, more subcultures have developed because people are exposed to a greater number of diverse cultural influences.
   B. Mobility has had no impact on how people relate to their birth culture.
   C. As mobility has increased, residents of a particular area are less likely to retain traditional norms and customs that historically characterized the area.
   D. As mobility has increased, local residents are likely to become more intent on retaining traditional norms and customs to protect from external influences.

This is the end of the Unit IV Minitest.
1. **The correct answer is B.** Both mental health hospitals and prisons are institutions.

2. **The correct answer is B.** Labels (1) woman, (4) parent, (5) Christian, and (7) 45 years old are given to a person based on the person's demographic information or group membership. By contrast, labels (2) Olympic athlete, (3) mayor, (6) rabbi, and (8) physician describe achieved statuses that require specific study, effort, or directed energy to obtain.

3. **The correct answer is D.** According to the graph, in 1994, 50 out of every 100,000 U.S. adults were in mental hospitals (0.05%), and 400 out of every 100,000 U.S. adults were in prison (0.4%).

4. **The correct answer is A.** This graph does not provide sufficient information to imply a causal or any other type of relationship between the two rates of institutionalization. While other research has expanded people's understanding of this relationship, the only definitive statement about these two rates that can be made based on the graph is choice A.

5. **The correct answer is C.** According to the graph, there was an initial decrease in the rate of mental health hospitalizations, followed (after a lag of a few years) by an increase in the rate of imprisonment. This data could suggest that some individuals who were prematurely discharged from mental health hospitals due to a policy change later committed crimes that required imprisonment.

6. **The correct answer is B.** The hypothesis is that some individuals who were prematurely discharged from mental health hospitals due to a policy change later committed crimes that required imprisonment. By tracking individuals released from mental health hospitals, a researcher might be able to see if individuals who were prematurely released later committed crimes requiring imprisonment. This would be one of the few ways to establish this kind of cause-effect relationship for the data in the graph. Choice C would not be the best answer, because not all mental health needs require hospital-level care.

7. **The correct answer is C.** Health care is part of the service sector, which is the tertiary level of production in an economy.

8. **The correct answer is A.** Race is determined by genetic characteristics that may have similar phenotypes, but not necessarily (e.g., an individual who is of African heritage but has albinism may appear white but still be genetically African/black). Ethnicity, by contrast, is determined by social characteristics such as language, religion, and cultural values.

9. **The correct answer is C.** Within each group of three vertical bars, the bar on the left represents the percentage of the U.S. population that identifies as that racial/ethnic group, and the bar in the middle represents the percentage of bachelor's degrees earned by that racial or ethnic group. The bar in the middle is higher than the bar on the left only for the Asian and white populations.
10. **The correct answer is D.** In the graph, the third vertical bar in each group represents the percentage of women earning more BAs than men within that racial or ethnic group. In every case, the presence of the bar indicates that women earn more than 50 percent of the BAs. If the women in a group were earning fewer BAs than men, there would be no vertical bar in that position.

11. **The correct answer is C.** While choices A, B, and D may be true, interest levels, financial aid, or career choice cannot be extrapolated from this graph. The only conclusion is that women are more successful than men at completing bachelor’s degrees.

12. **The correct answer is A.** Research suggests that a woman’s ascribed status (mother, wife) may have a greater influence on her overall status in U.S. society than her personal and educational accomplishments. Women's ascribed statuses may also have greater role demands than men’s (e.g., for a woman in the United States, being a “parent” and “wife” usually still requires assuming more than 50 percent of child care and household responsibilities, as compared to a man’s role demands as a “parent” and “husband”).

13. **The correct answer is D.** A totalitarian government is one that exercises power arbitrarily and without limits and that seeks to control every sphere of activity, including citizen’s actions and even thoughts. The term was applied to both the Nazi and the Soviet governments in the mid-20th century.

14. **The correct answer is C.** Culture is a complex phenomenon that includes beliefs, customs, language, and the institutions that make up a community. While race overlaps this concept, it is not necessary for race to be homogenous across a culture.

15. **The correct answer is A.** Gender is a sociological construct. By contrast, sex is a biological construct that is genetically determined. Gender is often reflected in the genetic phenotype of sexual organs, but this categorization is not universal. Some cultures divide gender into multiple types of identities, and gender is not necessarily linked to sexual orientation.

16. **The correct answer is A.** Functionalism sees aspects of society as separate but interrelated. Society as a whole is likened to a human body, in which each component acts separately but is critical to the functioning as a whole. In this view, a disruption to one area can disrupt the entire system. This view supports the status quo and attempts to avoid any disruptions to the system.

17. **The correct answer is C.** As mobility has increased, residents of a particular area are less likely to retain traditional norms and customs that historically characterized the area. As mobility increases, the population of an area is more likely to change, and this will lead to less uniform culture and the potential loss of local customs and traditions.