Hello all,

If you were unable to make the session today, here is the info you need to access the video we watched. Additionally, if you liked this video, you can access other episodes from this 7-episode series “Unnatural Causes”:

Watch Unnatural Causes Episode 1: In Sickness and in Wealth. Three ways to watch (choose one):

* 1. Go to <https://search.library.wisc.edu/database/UWI60043> and click “access database” (right side of screen), then log in using your NetID
	2. Go to <https://wisc.kanopy.com> and log in or sign up using your wisc.edu email account
		1. Search for “In Sickness and in Wealth” in the search box (from the Unnatural Causes Series by California Newsreel)
		2. Watch the video (running time is 57:44)
		3. If you see an alert that our library does not subscribe to California Newsreel—it does!  Try clicking on the video image anyways to get it to play.
	3. Go to <https://ezproxy.library.wisc.edu/login?url=https://video.alexanderstreet.com/watch/unnatural-causes>
		1. Log in using your NetID
		2. Select your institution
		3. Select “clips”
		4. Select “Unnatural Causes- Episode 1: In Sickness and in Wealth (running time 57:15)

We will discuss this video in our next session (along with some other activities). I have listed the discussion questions below in case you want to consider while it is still fresh in your mind:

* 1. Dr. Adewale Troutman says that he promotes individual responsibility, but always within the context of social determinants. Why does he link the two? What is missing if we focus exclusively on individual responsibility? How does this affect possibilities for change? In healthcare, how do you see a focus on individual responsibility over social determinants play out in patient encounters?
	2. Dr. Troutman says: “There’s almost a cultural demarcation in the city where on one side of this particular street, Ninth Street, there’s a tremendous amount of new development going on, condos rising up….And right across the street is where the public housing projects begin…. Every city has a Ninth Street.” Where is the Ninth Street, the dividing line, in Madison? How would you characterize either side of the line? List and compare the health promoters and health threats. Who lives there and who doesn’t? Why? Were these areas different in the past? What government, land use, development and other investment decisions changed them?
	3. Whitehall study director Sir Michael Marmot says, “If inequalities in health were a fixed property of society, then you’d say, ‘We can’t do anything about it.’ But that’s not the case. The magnitude of inequalities in health changes over time. It can get rapidly worse, and if it can get rapidly worse, it ought to be possible to make it rapidly better.” What social policies have historically promoted better health for everyone?  What potential future policies could make things better?