

Understanding Social Structures

CCSN Research Initiatives were designed to organize faculty into groups addressing similar “big questions.” Faculty within each initiative strive to identify and employ complementary methodologies as well as intellectual opportunities for the creation of new programs of research. These initiatives, however, are necessarily overlapping, a fact that reflects the Center’s commitment to interdisciplinary inquiry as well as the fundamental interconnectedness of cognition.

Social Structures is one of the more abstract sounding Research Initiatives (RI) at the CCSN. What do you mean by that term in the context of this RI?

Hawkey: Social structures refer to broad social categories. Such categories could encompass a social network for a given individual, a religious organization or church, a neighborhood, or a structure imposed by societal norms or cultural norms that differentiate between Western and Eastern cultures, for example. Social roles and statuses, whether ascribed or chosen, are fundamental to social structures and have implications for physical and mental health and well-being. There are many levels at which social structures can operate, and this fact is reflected in the people who are involved in this initiative. For instance, I am working on a project with Linda

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LOUISE HAWKLEY

Waite (Sociology) examining psychosocial factors that might explain why marriage is beneficial and protective for health. Being married is a social role that contributes to the framework in which individuals develop social relationships and thus meet their needs for connection. When people lack or lose social roles, they tend to have fewer social ties, perhaps putting them at risk for loneliness. However, being married may only be protective if the marriage is perceived as contributing to one’s social connection needs. We know, for example, that a spouse who fails to serve as a confidant is no more protective against loneliness than having no spouse at all. Does the same hold true for the health-protective effects of marriage?

CCSN: What are some other examples of projects being pursued under this Research Initiative?

Hawkey: Another example is our collaboration with Carlos Mendes de Leon (Epidemiology, Rush Medical College), who has expertise in examining effects of neighborhood cohesion and disorder on a variety of individual outcomes, including health and physical activity. Together with Carlos, John Cacioppo (Psychology) and I are asking the question, “To the extent that neighborhoods differ in their average level of felt social isolation (loneliness), what are the neighborhood characteristics that exacerbate or alleviate individuals’ risk for loneliness?” Neighborhood poverty, crime, racial/ethnic composition, may contribute, as may individual differences in perceptions of neighborhood characteristics. Of course, all these factors point to other layers of explanation, but these are the kinds of questions we are trying to address.

There are many other questions we can ask at the level of the neighborhood. Kathleen Cagney (Department of Health Studies), another member of this RI, examines the effects of neighborhood factors on health. With

Kathleen Cagney, Linda Waite and Erin York Cornwell (Sociology, Cornell University) are currently working on a project that looks at household disorder, neighborhood disorder, and blood pressure. Chris Masi (Internal Medicine) is part of the Social Structures initiative as well—he’s done some work in the past looking at infant birth weight differences as a function of census tract characteristics. He’s currently exploring demographic, behavioral, and psychosocial sources of racial/ethnic differences in estrogen metabolism, and how estrogen metabolism contributes to racial/ethnic differences in blood pressure.

CCSN: Could we surmise that some types of social structures are better than others for physical and mental health?

Hawkey: When we examine social structural effects, we generally want to know under what circumstances certain structures exert their influence. For example, in this society, societal norms effectively structure living arrangements to permit, if not to encourage, aging adults to live independently of their children. In other societies, or even some cultural sub-groups in our own society, aging adults are expected and encouraged to live with their adult children. The same living arrangement can have very different consequences for health and well-being depending on the social context. So we’re not interested in a simple comparison among effects of different social structures; rather, it’s a question of what types of structure have what effects and under what circumstances.

CCSN: What are the potential next steps for the Social Structures Research Initiative?

Hawkey: There are some interesting possibilities for broadening our perspective. This RI benefits very directly from analytic expertise on strategies for data analysis that combine macro-social structural factors and individual-level psychosocial and health factors. Increasing the kinds of analytic expertise to

BELOW: Louise Hawkley, Associate Director of the Social Neuroscience Laboratory and a Senior Research Scientist with the Center for Cognitive and Social Neuroscience and the Department of Psychology at the University of Chicago.



which we have access would expand the range of research questions we can ask and would strengthen the RI as a whole.

There is potential for greater application of animal research findings to studies of social structural effects in humans. Dario Maestriperi (Psychology) is doing both animal and human research, and animal research affords the opportunity to look at social structural effects in an experimental way. What happens when you alter the social structure of an animal such as the rhesus macaque (e.g., via cross-fostering to a different mother)? What can we learn from these animal models about possible mechanisms for the effects of social structural factors on physical, social, and mental health in humans?

More generally, I anticipate an increase in research collaborations, not only across disciplines within our own institution, but across institutions and nations. It could be particularly informative to bring together researchers from various disciplines to examine social structural effects from the vantage point of very differently structured societies. ■

UPCOMING EVENTS

Upcoming Lectures

Conference: How the social brain experiences empathy

30 September 2009
8:00AM-5:00PM, Gleacher Center, 450 N. Cityfront Plaza Dr.

Hosted by Jean Decety
A one-day conference showcasing some of the most important researchers in empathy today.

Research in Progress Seminars (RIPS)

The Center faculty participate in various workshops, brown bags, and research in progress seminars. To be added to the email list for announcements of talks and events, email Tali Blekhman (tblekhman@uchicago.edu).

2009/2010 CCSN Advanced Study Workshop Speakers

The Center for Cognitive and Social Neuroscience in collaboration with other Departments, Centers, Institutes, and Programs, sponsor talks on a wide range of topics by visiting scholars. Speakers are currently being scheduled, but among those who will be speaking are the following:

5 November 2009
4:00-5:30PM, Stuart 104
Paul Glimcher, New York University, an expert in the neural mechanisms underlying choice behavior.

19 November 2009
12:00-1:30PM, Stuart 104
Betram Gawronski, University of West Ontario, an expert in the psychological mechanisms that underlie spontaneous and deliberate evaluations.