

City University of New York (CUNY)

CUNY Academic Works

Publications and Research

CUNY Graduate Center

2012

Digital Video: Engaging Students in Critical Media Literacy and Community Activism

Jessie Daniels
CUNY Graduate Center

[How does access to this work benefit you? Let us know!](#)

More information about this work at: https://academicworks.cuny.edu/gc_pubs/307

Discover additional works at: <https://academicworks.cuny.edu>

This work is made publicly available by the City University of New York (CUNY).
Contact: AcademicWorks@cuny.edu

PRE-PRINT Version: Daniels, Jessie. "Digital video: Engaging students in critical media literacy and community activism." *Explorations in Media Ecology* 10, no. 1-2 (2012): 137-147.

Dated: October, 2011

ABSTRACT: This article presents a strategy for teaching health communication that fosters critical media literacy through the strategic combination of digital video, documentary film, video worksheets, and peer-reviewed journal articles. Given the media-saturated environment in which notions of health are shaped, critical media literacy skills are crucial to students in health-related fields. Cases of key concepts illustrated through documentary films and the peer-reviewed literature are presented. The article then explores how one class took the lead in designing a community event that critically engaged both a YouTube video and a documentary film about police brutality as a public health issue.

Keywords: Health communication, education, media literacy, digital video, YouTube, documentary, police.

Introduction

We live in a media-saturated age in which we are almost constantly surrounded by images and sound created to capture our attention (Gitlin, 2001). Visual media are heavily implicated in the construction health, illness, and the body (Hodgetts & Chamberlain, 2006). Most recently, for example, the American cable television network HBO launched a documentary series called *Addiction*, funded by the National Institutes of Health (NIH) and the National Institute of Drug Addiction (NIDA), which presents a strong and unequivocal message that drug addiction is “a brain disease” (HBO, 2007). Yet, within the series scant discursive space is given any perspective that challenges the location of addiction as situated exclusively within the brain. Given such mass media content about health, illness, and the body, it is increasingly important to foster the development of critical media literacy in teaching health communication. Critical media literacy is the ability to analyze media codes, including the ability to criticize dominant values and ideologies generated by media texts (Kellner & Share, 2005, p. 372). Given the emergence of a digital and multimedia era, teachers of sociology must cultivate “multiple literacies” in these media (Kellner, 2004). This goal can be accomplished, I argue, through a pedagogy that combines the strategic use of documentary films with peer-reviewed journal articles.

Literature Review

Although anthropology has a long history of using ethnographic documentary film in teaching (Grimshaw, 2001), sociologists have mainly employed feature films in the classroom (Demerath, 1981; Hannon & Marullo, 1988; Smith, 1977; Stoll, 1973). At least in part, this has been to the result of distribution networks for feature films produced by Hollywood studios. These conventional distribution networks, such as chain video stores and cable TV channels, made feature films widely available to the general public and thus more accessible for sociologists interested in using films in the classroom. Pescosolido (1990) was among the first to suggest using films to teach health communication and, drawing on the multimedia widely available at the time, she suggested a method that exclusively used feature films. In the 21 years since that article appeared, much has changed.

One significant change has been the explosive growth of the production of documentary films. Today, there are simply more documentary films in existence than ever before owing to the rise in the independent and documentary film industry (Renov, 1993), widespread use of digital video cameras by the general public, and the rise of documentary films in television (Hogarth, 2006). And, due to vastly diversified distribution networks, many of these documentaries are now widely available at relatively low cost. Additionally, literally millions of short documentary films and clips from longer documentaries are available at no cost through online video portals, such as YouTube.com.

Another important transformation has been in information technology. Increasingly, students look for information beginning with an Internet search

engine rather than with a trip to the library (Rheingold, 2006). The pervasiveness of the Internet as a source of information creates new challenges for teaching health communication and for teaching about the relevance of peer-reviewed literature. This new terrain of digital information retrieval requires multiple literacies and for what some have called a “re-visioning” of education (Kellner, 2004; Kellner & Share 2005; Livingstone, 2004). One strategy for doing this, I contend, is by contrasting the source, presentation, and perspective presented in documentary films and peer-reviewed articles on related subject areas.

Practical Tools: Combining Documentary Films With Peer-Reviewed Literature

In this article, I present only a small sample of the potential pairs of documentary films and peer-reviewed literature for teaching health communication. Here, I focus on four cases that combine documentary films with peer-reviewed articles around key concepts in health communication. There is some overlap between the films and the readings, but this repetition serves to reinforce the material for students, as well as provide opportunities for insights about the connection between the films and the readings. In order to highlight the importance of authorship and credibility, near the beginning of the semester I describe for students the process of peer review for publication and contrast this with the publication process for print-based journalists and for new media journalists, such as bloggers. In lecture and class discussions, I drive home the importance of peer-reviewed literature and emphasize that this is the research

that professionals consult and rely on for their work. I challenge students to master the ability to find and read the peer-reviewed literature as a basic standard for becoming a college-educated and engaged citizen. As I introduce the first documentary to the class, I revisit the issues of authorship and credibility in visual texts. For each film, I provide students with a video worksheet prior to the class the day the film is shown through the campus course management software (e.g., Blackboard); students are required to bring the worksheet with them and to complete the assigned reading before the class. The worksheet includes questions about the key concepts, the content of the film, the connections between the film and the assigned reading, and asks about the mechanisms the filmmaker employs to convey their message. After the film, class discussion—either in small groups or with the class as a whole—focuses on answering the questions on the worksheet. I collect the worksheets and grant participation points based on completion, but do not grade them closely for accuracy; rather I rely on the class discussion following the films to drive home the correct answers. Questions from the worksheets often are adapted as exam and quiz questions.

Case 1: Race, Health, and the Ethics of Medical Experimentation

A key concept in health communication is that race, a socially constructed category, is nevertheless an important determinant of health. This can be a difficult concept for students to understand. Providing some historical context for contemporary health disparities, a deeper understanding of racial discrimination

in the United States, as well as the ethical violations in medical experimentation can be an effective strategy for teaching this concept.

The Deadly Deception (Denisce Di Ianni, writer, producer, and director; Films for the Humanities & Sciences, 1993, 60 minutes), is a documentary that deals with the Tuskegee Syphilis Study conducted by public health officials in the United States from 1932 to 1972. The film features first-person accounts of Black men who were enrolled in the study and a number of doctors who were investigators on the study—some of whom objected to the study and one White doctor who still defends the study as a worthwhile scientific endeavor. Additionally, the film features archival footage, scenes from a play about the study *Miss Evers Boys*, and interviews with experts in health communication. The documentary is quite affecting and holds up well even though it is now nearly 20 years old. For most traditional-aged college students (born between 1984 and 1989) who are unfamiliar with the history of the Tuskegee study, the film is compelling.

For a health communication class, the power of this documentary is further enhanced through the assigned readings and there are a number of articles that work well with this film. For an early undergraduate course, “The Tuskegee Legacy: AIDS and the Black Community” (1992), is a short (three-page) article written in easily accessible language. For health communication classes that are cross-listed with public health courses, Thomas and Quinn’s article, “The Tuskegee Syphilis Study, 1932 to 1972: Implications for HIV Education and AIDS Risk Education Programs in the Black Community” (1991),

works well as a companion reading to the documentary. Both articles provide a connection between the historical background on the Tuskegee study and contemporary distrust of medical intervention on the part of Black Americans. Rather than seeing resistance to medical professionals as an artifact of social isolation, lack of education, or cultural superstition, these readings provide students a way of seeing the deeply rooted, systemic racial oppression that pervades the United States, and the consequences this has for the lives of lack individuals (Feagin, 2006; Kreiger, 1999).

The film *The Deadly Deception* provides health communication students with an engaging and critical background to the history of racial discrimination in the United States and its attendant health consequences. The film also raises important questions about the ethics of medical experimentation and about public health research that focuses exclusively on one racial or ethnic group. The peer-reviewed readings take the background provided by the documentary film as a given, and add further complexity by exploring the implications of this history for the health of contemporary Blacks. Without the film, most students unfamiliar with the history of the Tuskegee experiments would have a more difficult time with the peer-reviewed readings; without the peer-reviewed literature, students who only saw the film might erroneously assume that the lessons of Tuskegee were confined to a remote historical period. The video worksheet and class discussion build on these lessons and introduce students to critical media literacy concepts by asking questions about the point of view of the filmmakers

and the way they used particular filmic techniques to construct an argument visually.

Case 2: Medicalization, Corporate Interests, and Gender

Medicalization is a key concept for undergraduate health communication courses and the documentary film *Selling Sickness* (Catherine Scott, director; Pat Fiske, producer; concept, research, and writing, Ray Moynihan, Catherine Scott; First Run/Icarus Films, distributor; 2004, 52 minutes) is a superb resource for teaching this concept. Additionally, this documentary offers a critical examination of efforts by pharmaceutical companies “brand” conditions in order to sell drugs and increase shareholder profits. The film focuses on conditions such as premenstrual dysphoric disorder and social anxiety disorder, and does an excellent job of making the point that corporations are medicalizing particular aspects of normal life for profit. Given the larger body of literature about medicalization, there are many possibilities for peer-review articles to assign. I assign Conrad’s “The Shifting Engines of Medicalization” (2005) because it includes a discussion of corporations as part of what drives the medicalization process, a concept that often is difficult for students. In this case, the documentary *Selling Sickness* brings to life a concept that too often is abstract for many students to understand initially; and, the article by Conrad offers additional complexity to the films’ treatment of medicalization.

A second film that examines the concept of medicalization, although somewhat less critically is *Medicating Kids* (Marcela Gaviria, director; Martin

Smith, writer; 2001; distributed by PBS, 60 minutes). Originally aired as part of the PBS series, *Frontline*, this film explores the diagnosis of attention deficit disorder (ADD) and attention deficit-hyperactivity disorder (ADHD) among children in the United States, and the accompanying rise in prescription of Ritalin and Adderall. Although there is no gender analysis in this film, Singh's article, "Doing Their Jobs: Mothering with Ritalin in a Culture of Mother-Blame" (2004), is a good corrective to this lack. The peer-reviewed article adds a critical, gendered analysis not available through the film; and, the film offers entrée to a subject that, had I assigned only the journal article, would have proven too challenging for most undergraduates. In juxtaposing the documentary film and the peer-reviewed article, students in health communication are learning more about medicalization and gender, as well as developing critical media literacy skills.

However, *Medicating Kids* is a problematic visual text in a number of ways. Yet, it is precisely these shortcomings that provide opportunities for further developing critical thinking about the sociology of health and illness, as well as teaching critical media literacy. Primarily, the film presents a much less critical view of the ADD/ADHD diagnosis than presented in the previous film, which explores social anxiety disorder. However, by showing the film *Selling Sickness* first and working with students to develop their critical media literacy skills, they are able—with some assistance—to offer their own critique of *Medicating Kids*. For example, in the film those who are critical of the ADD/ADHD diagnosis are rather heavy-handedly portrayed as members of fringe religious groups, with a particular emphasis on Scientologists. Visually, the images of those who appear

as critics of the diagnosis are pictured in the film during a street theater protest in which many group members are dressed in outrageous costumes. In contrast to these marginal protestors, the filmmakers highlight the research of brain researchers who claim to be on the verge of locating ADD/ADHD within a precise region of the brain. Absent from this false dichotomy of “fringe protestors” and “real brain scientists” are the voices of credible, health communication critics. Without developing critical media literacy skills, students might accept the framing of ADD/ADHD within the film without any awareness of the filmmakers’ bias. By also assigning the critical reading by Singh and the more critical companion film of *Selling Sickness*, students are better able to apprehend key concepts in health communication and to develop critical media literacy skills.

Case 3: Transgendered Health, Illness, and the Body

Most health communication courses include some discussion of gender, and indeed, there are entire books devoted to gender and health communication (e.g., Lorber & Moore, 2002). However, the traditional understanding of gender as a binary system (which is the way gender has been incorporated into most health communication texts) has come under criticism by scholars who have written about the experience of transgendered people that calls into question such boundaries (Bornstein, 1994; Butler, 2004; Fausto-Sterling, 2000; Kessler, 1998). For health communication students, the experience of transgendered individuals raises interesting questions about health, illness, and the body. An

award-winning film that tackles many of these issues is, "*Southern Comfort* (Kate Davis, producer director; HBO Documentary, distributor; 2001; 90 minutes). This film follows Robert Eads, a female-to-male transgendered man who is diagnosed with ovarian cancer. Eads is denied treatment by more than two-dozen doctors because he is transgendered; the doctors say that they "do not want to offend" their other patients by having Eads in their waiting rooms. I pair this documentary with Schrock, Reid, and Boyd's article, "Transsexuals' Embodiment of Womanhood" (2005), which explores the experience of male-to-female transgendered women. The documentary film offers an engrossing narrative and an introduction to thinking about discrimination in health care based on gender identity, as well as some of the potential health consequences of living transgendered identity; and, the peer-reviewed builds on these insights offered by the film and brings additional insight and complexity by introducing the concept of transgendered embodiment. Both the film and the article are more suitable for advanced undergraduates, and I tend to assign these materials later in the semester. Depending on the level of conservatism on campus and the students' experience or familiarity with transgendered communities, this material may take some time to explain prior to screening. The film includes many of Eads' friends and chosen family, many of whom are transgendered, and this often is confusing for students who are first-time viewers of the film or new to thinking about transgender issues; thus, I include a list of who is in the film along with their gender identity. The Schrock et al. article is challenging for the undergraduates I teach at a public, urban, liberal arts college. However, with

some class time devoted to providing an introduction to the sociology of the body, and with a close, in-class reading of the article, students are able to grasp the main arguments of the article. In this case, the strategic use of a documentary film introduces students to the quotidian existence of transgendered people. And, especially relevant for health communication classes, the documentary provides a glimpse into the way gender-identity discrimination by health care providers can negatively affect transgendered people. The peer-reviewed journal article offers a more nuanced, complex, and sophisticated understanding of trans experience and the sociology of the body. Together, the documentary film and the peer-reviewed article provide students with an insight into health communication through a much-needed lens of critical media literacy.

Case 4: Immigrant Communities, Cross-Cultural Communication, and Health

Many of the students in health communication classes are enrolled in more applied fields, such as health communication or community health. For these students, particularly those going to work in community-based organizations that serve immigrant populations, issues of cross-cultural communication as it relates to health are especially important.

The documentary film *The Split Horn: Life of a Hmong Shaman in America* (directed by Taggart Siegel, produced by Jim McSilver, PBS, 2001, 58 minutes) illustrates many issues related to immigrant communities living in the United States and contrasting views of health, health care, and illness. This film

chronicles 17 years in the life of Paja Thao, a Hmong shaman, who has migrated from the mountains of Laos to a small town in Wisconsin. As his American-born children embrace video games, television, and Christianity, Thao strives to keep the family together and connected to Hmong traditions. When an uncle in the family has a stroke, the family gathers in his hospital room in attempt to heal him. The juxtaposition of the high-tech intervention of Western medicine with the community-focused and spirituality-driven approach of the Hmong shaman offers a powerful example of the difficulties inherent in cross-cultural communication around matters of health.

I pair this documentary with two readings. One a peer-reviewed article from the *Journal of the American Medical Association (JAMA)*, by Loudon, Anderson, Gill, and Greenfield (1999) about the lack of cross-cultural training in medical education curricula (“Educating Medical Students for Work in Culturally Diverse Societies”); and, the second is a monograph by Anne Fadiman, *When the Spirit Catches You, You Fall Down* (1997). Although the Fadiman text is not a peer-reviewed article (and, indeed, written by a journalist rather than an academic), it provides a valuable link to the film and an important resource for thinking critically about immigrant health and cross-cultural communication. Fadiman’s book follows the story of a Hmong family whose daughter is diagnosed with, in Western terms, *epilepsy*. Through a Hmong lens, the daughter has a spiritual affliction in which she is “caught up” by spirits and then falls down as a result. The different cultural epistemologies of brain chemistry and spirituality make the communication across language even more complex. The

parents find it difficult to comply with Western medical advice, and their failure to comply brands them as “unfit” parents in the view of social service agencies. The combination of the documentary film, the peer-reviewed article, and the book offer students a powerful glimpse into the challenges of cross-cultural communications and immigrant health.

Summary

There are a number of benefits to this method of teaching health communication. The use of class time to show films, along with the video worksheets to guide class discussion afterward, are important elements in building the culture of the class. For students who are hesitant about reading peer-reviewed literature, the films offer an easily accessible introduction to the material covered in the articles using a more analytically complex approach. By combining different approaches to the same, or similar, material this method of teaching health communication also develops critical media literacy.

I have used this technique in a number of liberal arts settings, one at a private, suburban college, and the other at a public, urban college. Although class sizes at both institutions are relatively small, no more than 40, I believe this technique could be used effectively in large lecture sections of health communication. I have used this strategy effectively across disciplines (urban public health, women’s studies, and sociology) and in a range of courses. Additionally, the growing number, wide availability, and relatively low cost of documentary films, means that there are a range of titles to choose from that

make this technique applicable to other content areas for courses in sociology of culture, social movements, criminology, race/ethnicity, gender, sexuality, and even research methodology. The documentary films I use in teaching health communication provide a compelling visual introduction to core themes in the course, including the ethics of medical experimentation, racial/ethnic health disparities, medicalization, gender, mothering, transgendered health and illness, and the sociology of the body. The accompanying video worksheets and class discussions help students develop critical media literacy skills by getting them to ask questions about the filmmakers' point of view and the strategies the filmmakers use to construct their argument visually. The assigned peer-reviewed journal articles offer students a more nuanced, complex, and sophisticated understanding of the content areas introduced in the documentary films. For students pursuing a degree in community health education, the more pertinent benefit may be in the tools that documentary film affords them in engaging various publics in thinking about health and illness.

Out of the Classroom and into the Community

At the end of one such class at Hunter College (spring 2008) organized around documentary film and peer-reviewed articles (as just described), students were given the option of designing their own final project. The students in this class decided to create an event to engage their campus community created around police brutality, which they viewed as both a social justice and a community health issue. This topic was especially pertinent to students at this

time because Sean Bell, a young Black man, was shot 41 times by police after leaving a late-night celebration at a local bar. Bell was not under arrest at the time of the shooting and his death was all the more poignant because it came on the same day that he was to be married. During this semester, there were a number of street protests throughout the city, calling for the police involved to be brought to justice. Undergraduate students in the Community Health Education program at Hunter College are overwhelmingly drawn from neighborhoods that are most affected by police brutality, and indeed, students traveling to and from Hunter College often are harassed by police, so this issue is one that is integral to students' health and well-being.

On their own, they reached out to filmmakers and faculty in the Media Department on campus, Tami Gold and Kelly Anderson, who created *Every Mother's Son* (2004), a documentary film about police brutality in New York City. The filmmakers generously agreed to allow a free public screening and the students began to put into practice the lessons they had learned in another class about community organizing. They set a date and time, reserved a room, and began to advertise the event. With no budget from the department or the college, they managed to produce fliers about the event and to serve refreshments. And, on a Friday afternoon of final exam week, they were able to gather a crowd of approximately 50 people for the screening and discussion.

Prior to screening the documentary film, students screened a short (3-minute) user-created video on YouTube of a very young, White boy responding to the Sean Bell shooting. At first, this seemed an odd choice. Then,

several of the students from the class sitting throughout the room started reacting to the video in rather unexpected ways. One student, challenged the White narrator in the YouTube video, asking “What does he know about Black people...?!” The comments became increasingly hostile to the idea that police brutality exists; some views expressed overt racism. These kinds of views stood in stark contrast to the views students had expressed in previous classes. Additionally, the comments seemed jarringly out of context in an event designed to raise awareness about police brutality, thus the room became increasingly tense. Finally, after a tense few minutes, the student leading the event said, “All these comments are actual comments to this video posted on YouTube.” What the students did was to use both a user-generated video and the comments posted in response to the video on YouTube to stage a form of documentary theater before the main event of the feature-length documentary film. The effect was dramatic and engaging. The students used comments on YouTube, which are not infrequently racist, and subverted them by placing them in another context. Reading YouTube comments aloud in a public, performative way, and then critiquing those comments, demonstrated both a facility with critical media literacy and a creative strategy for community engagement beyond the classroom.

The students requested that someone from the film’s production team come to a question-and-answer session following the film, and one of the associate producers attended. The students led the discussion following the film

and many people there shared stories of not being able to get to class because the police were holding them (for no cause) except that they “fit the profile.”

Cautions

There are also a number of issues to be cautious about before implementing this teaching method. As Pippert and Moore (1999) noted, the introduction of multimedia elements in the classroom may encourage more passive learning for those who have grown up as part of the “MTV generation.” My experience has been quite the opposite of this and I find that the films energize students. That said, I think there are ways to ensure that this passivity does not disrupt the learning environment when using this method. At the beginning of the semester, I include in my syllabus and reinforce verbally the idea that the films for this class are considered *visual texts* and that students are expected to stay awake, lean forward, and pay full attention when films are screened. I remind them that all material in the films is potential exam material, and I encourage them to take notes and answer the questions on the video worksheets as the film is being shown. I also keep the lights on in part of the classroom.

Budget also is a consideration for implementing this teaching method. At an institution with a limited budget for film and video, the cost of purchasing some videos may be prohibitive (some cost \$200 to \$400). Some sociology instructors may want to invest in their own copies of widely available and inexpensive

documentaries (some cost as little as \$20 to \$40). Of course, this raises the issue of whether or not to make films available to students who miss class for whatever reason. My policy has been to not allow the films that I own out of my possession and to require that students attend the class when the films are screened. This has the added benefit of increasing attendance. Costs also include copyrights, and this is an additional concern. However, showing most documentaries to health communication classes as part of required and relevant course material and without charging students an additional fee, is allowed under the educational exception to the copyright law.

Recently, many short videos have become available online. This type of distribution has the advantage of low to no cost, but also raises issues of access. Viewing online video requires broadband access on an audio-enabled computer. Given that some students do not have broadband access, but rely on dialup, this could prove a barrier. Additionally, for students who may wish to view online videos on a computer in a setting where other people are working (e.g., library or dorm room), the audio portion of online videos may prove disruptive to others, but this is easily solved with the use of headphones.

Conclusion

In this article, I have argued that combining documentary films paired with peer-reviewed journal articles is an effective pedagogical strategy for teaching health communication. I explored a number of cases to illustrate this method, highlighting race and medical experimentation, medicalization, corporate

interests and gender, transgendered health and the sociology of the body, and finally, immigrant health and cross-cultural communication.

This method has the additional benefit of developing critical media literacy skills, which are increasingly important within a media-saturated age and as mainstream media outlets, such as HBO, frame popular understandings of health, illness, and the body.

References

- Benson, D.E., Haney, W., Ore, T.E., Persell, C.H., & Schulte, A. (2002). Digital teaching. *Teaching Sociology*, 30,140-157.
- Bornstein, K. (1994). *Gender outlaw: Men, women, and the rest of us*. New York: Routledge.
- Butler, J. (2004). *Undoing gender*. New York: Routledge.
- Conrad, P. (2005). The shifting engines of medicalization. *Journal of Health and Social Behavior*, 46, 3-14.
- Demerath, N.J. III. (1981). Through a double-crossed eye: sociology and the movies. *Teaching Sociology*, 9, 69-82.
- Fails, E.V. (1988). Teaching sociological theory through the development of an experimental strategy. *Teaching Sociology*, 16, 256-262.
- Fadiman, A. (1997). *When the spirit catches you, you fall down: A Hmong child, her American doctors, and the collision of two cultures*. New York: Farrar, Straus, & Giroux.
- Fausto-Sterling, A. (2000). *Sexing the body: Gender politics and the construction of sexuality*. New York: Basic Books.
- Gitlin, T. (2001). *Media unlimited: How the torrent of images and sounds overwhelms our lives*. New York: Henry Holt.
- Godmilow, J., & Shapiro, A. (1997). How real is the reality in documentary film? *History and Theory*, 36, 80-101.
- Grimshaw, A. (2001). Teaching visual anthropology: Notes from the field. *Ethnos*, 66, 237-258.

- Hannon, J. T., & Marullo, S. (1988). Education for survival: Using films to teach war as a social problem. *Teaching Sociology*, 16, 245-255.
- Hastings Center. (1992). The Tuskegee legacy: AIDS and the black community. 22, 38-41.
- HBO. (2007). What is addiction? <http://www.hbo.com/addiction/>. Accessed
- Hodgetts, D., & Chamberlain, K. (2006). Developing a critical media research agenda for health psychology. *Journal of Health Psychology*, 11, 217-327.
- Hogarth, D. (2006). *Realer than reel: Global directions in documentary*. Austin: University of Texas Press.
- Holtman, J. (2002). Documentary prison films and the production of disciplinary institutional "truth." *Postmodern Culture*, 13,1. http://muse.jhu.edu/journals/postmodern_culture/toc/pmc13.1.html. Accessed
- Kahn, R., & Kellner, D. (2005). Reconstructing technoliteracy: A multiple literacies approach. *International Journal on E-Learning*, 2, 238-251.
- Kellner, D. (2004). Technological transformation, multiple literacies and the re-visioning of education. *International Journal on E-Learning*, 1, 9-37.
- Kellner, D., & Share, J. (2005). Toward critical media literacy: Core concepts, debates, organizations, and policy. *Discourse: Studies in the Cultural Politics of Education*, 26, 369-386.
- Kessler, S. (1998). *Lessons of the intersexed*. New Brunswick, NJ: Rutgers University Press.
- Krieger, N. (1999). Embodying inequality: A review of concepts, measures, and methods for studying health consequences of discrimination. *International*

- Journal of Health Services* 29, 295-352.
- Livingstone, S. (2004). Media literacy and the challenges of new information and communication technologies. *The Communication Review*, 7, 3-14.
- Lorber, J., & Moore, L.J. (2002). *Gender and the social construction of illness*. Walnut Creek, CA: Altamira Press.
- Loudon, R.F., Anderson, P.M., Gill, P.S., & Greenfield, S.M. (1999). Educating medical students for work in culturally diverse societies. *JAMA*, 282, 875-880.
- Pippert, T.D., & Moore, H.A. (1999). Multiple perspectives on multimedia in the large lecture. *Teaching Sociology*, 27, 92-109.
- Pescosolido, B.A. (1990). Teaching health communication through film: Theoretical perspectives and practical tools. *Teaching Sociology*, 18, 337-346.
- Renov, M. (Ed.). (1993). *Theorizing documentary*. New York: Routledge.
- Rheingold, H. (2006). Keynote speech. In *Digital Media & Learning Conference*. Online NMC.
- Schrock, D., Reid, L., & Boyd, E.M. (2005). Transsexuals' embodiment of womanhood. *Gender & Society*, 19, 317-335.
- Singh, I. (2004). Doing their jobs: Mothering with Ritalin in a culture of mother-blame. *Social Science & Medicine*, 59, 1193-1205.
- Smith, D. (1977). Teaching undergraduate sociology through feature films. *Teaching Sociology*, 10, 98-101.

Stoll, C.S. (1973). Videotape as an aid in sociology instruction. *Teaching Sociology*, 2, 38-47.

Thomas, S.B., & Quinn, S.C. (1991). The Tuskegee syphilis study, 1932 to 1972: Implications for HIV education and aids risk education programs in the Black community. *American Journal of Public Health*, 81,1498-1505.