GLOBAL PUBLIC HEALTH (DWA & UEP 248), Fall 2018
Tuesday and Thursday 8:30-9:55 am, FOWLER 112

Instructor: Jane Schmitz, Ph.D.
Contact information: email schmitz@oxy.edu
Office hours: Tuesdays & Thursday 11:45 am to 1:00 pm, UEP 104

Course description
The course will examine major global public health problems and the range of responses from international organizations, transnational networks, and domestic and community-based institutions. Despite improvements in the health status of low- and middle-income countries over the last half-century, the challenges to advance global public health remain daunting. What are the sorts of strategies these actors have used in addressing such health issues as HIV/AIDS, malaria, unsafe food and water, tobacco use, and others? Can a dedication to addressing inequity improve our response to ill health? The course will present basic concepts for understanding global public health, including indicators of population health and the political, social and economic determinants of health. We will utilize a case study method to examine successful and less successful efforts to improve global health and to debate enduring political, economic, social and cultural controversies in the arenas of global health. Students can expect to gain knowledge of the major issues and actors in global public health and an introduction to the analytic and quantitative skills needed to be effective.

Course website: Cross-listed moodle site “XLSA1201901 - 1520 / 1822”

Required textbooks

Grading

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<thead>
<tr>
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<th>% of overall grade</th>
<th>Date</th>
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<tr>
<td>Class attendance &amp; participation</td>
<td>10</td>
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<tr>
<td>Together with your news group, you will find global health news items of interest and discuss them. At one session during the course, you and your group will present your news items to the full class. In addition to participation in day-to-day course time, your effort in the debate and Noname Activity will influence your grade.</td>
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<td>Quizzes</td>
<td>20</td>
<td>Q1 9/18 Q2 10/4 Q3 11/6 Q4 11/20</td>
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<td>Quizzes will be administered at the beginning of class and will be composed of no more than 5 questions.</td>
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<tr>
<td>Mid-term paper</td>
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<td>10/4 data</td>
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<td>Present the health situation of a low- or middle-income country of your choice. Collect and present relevant statistics and outline the country’s position in the demographic and epidemiologic transition and describe the overall health profile.</td>
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<td>10/16 final</td>
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<td>Final paper</td>
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<td>This paper will build on the knowledge you gain while developing your mid-term paper. For the country about which you chose to write your mid-term paper, you will assert and defend the top health priority.</td>
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<td>Final exam</td>
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<td>This will be a comprehensive, in-class exam in multiple choice, short answer and essay format.</td>
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<td>Letter grades will be assigned according to the following scale: ≥93 A; 90 to 92 A-; 87 to 89 B+; 83 to 86 B; 80 to 82 B-; 77 to 79 C+; 73 to 76 C; 70 to 72 C-; 67 to 69 D+; 63 to 66 D; 50 to 62 D-; ≤49 F</td>
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<td><strong>I. INTRODUCING GLOBAL HEALTH</strong></td>
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<tr>
<td>Thu</td>
<td>8/30</td>
<td>What is global health?</td>
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<td>Tue</td>
<td>9/4</td>
<td>Milestones in global health: 1918 Flu Outbreak &amp; Smoking &amp; lung cancer</td>
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<tr>
<td>Thu</td>
<td>9/6</td>
<td>Metrics and the Burden of Disease I</td>
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<td>Tues</td>
<td>9/11</td>
<td>Metrics and the Burden of Disease II</td>
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<td>Thu</td>
<td>9/13</td>
<td>Library workshop: Epidemiology I (short intro)</td>
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<td>Tues</td>
<td>9/18</td>
<td>Epidemiology II</td>
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<td><strong>II. ECOLOGICAL DETERMINANTS OF HEALTH: WATER, AIR AND FOOD</strong></td>
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<tr>
<td>Thu</td>
<td>9/20</td>
<td>Water: hygiene, sanitation and drinking water</td>
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<td>Tues</td>
<td>9/25</td>
<td>Air: air quality and health</td>
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<td>Thu</td>
<td>9/27</td>
<td>Food: child undernutrition</td>
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<td>Tues</td>
<td>10/2</td>
<td>Food: overweight in developing countries</td>
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<td><strong>III. SOCIAL DETERMINANTS OF HEALTH</strong></td>
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<tr>
<td>Thu</td>
<td>10/4</td>
<td>Social determinants of health</td>
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<td>Tues</td>
<td>10/9</td>
<td>NO CLASS, Fall Break</td>
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<td>Thu</td>
<td>10/11</td>
<td>Sex and reproduction</td>
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<td><strong>IV. INTERVENTIONS TO IMPROVE HEALTH</strong></td>
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<tr>
<td>Tue</td>
<td>10/16</td>
<td>Introduction to interventions in global health: major institutions and events</td>
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<td>Thu</td>
<td>10/18</td>
<td>History of global health interventions: colonial &amp; missionary medicine</td>
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<td>Tue</td>
<td>10/23</td>
<td>History of global health interventions: smallpox case study</td>
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<td>Thu</td>
<td>10/25</td>
<td>Health systems: cross-national comparisons</td>
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<td>Tue</td>
<td>10/30</td>
<td>Health systems: community health workers</td>
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<td>Thu</td>
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<td>Large-scale interventions: vitamin A, I research to programs</td>
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<td>Tues</td>
<td>11/6</td>
<td>Large-scale interventions: vitamin A, II sustaining, evaluating and phasing-out programs</td>
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<td>Thu</td>
<td>11/8</td>
<td>The Art of Caring: Beyond the Ebola Crisis, <em>Mary Beth Heffernan</em></td>
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<td>Tues</td>
<td>11/13</td>
<td>Health communication: behavior change programs to improve sanitation and hygiene</td>
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<td>Thu</td>
<td>11/15</td>
<td>Global trade and health, <em>Heather Wipflti</em></td>
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<td>Tues</td>
<td>11/20</td>
<td>Funding global health: foreign aid &amp; philanthropy</td>
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<td>Thu</td>
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<td>No class, Thanksgiving break</td>
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<td>Tues</td>
<td>11/27</td>
<td>Debate</td>
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<td>Thu</td>
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<td>Noname activity</td>
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<td>Thu</td>
<td>12/4</td>
<td>Re-cap course &amp; final exam review</td>
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<td>Final exam</td>
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I. INTRODUCING GLOBAL HEALTH

8/30, What is global health?

Learning goals
1. Become comfortable with the definition of health, public health and global health; distinguish between population vs. individual health.
2. Appreciate the range of disciplines that connect with global health.
3. Explore the work of health statistician Hans Rosling and GapMinder as way to approach large movements in health and wealth over time.

Brown & Closser
Part 1 Introducing Global Health p. 2-12

9/4, Milestones in global health: 1918 Flu Outbreak & Smoking & lung cancer

Learning goals
1. Appreciate how infectious disease has influenced world events and seek to identify lessons from the 1918 Flu Outbreak to prevent future pandemics.
2. Introduce the model of “epidemiological transition” and grasp how important public health science and data are to advancing health
3. Recognize the role that tobacco companies played in delaying a strong response to tobacco-related disease

Brown & Closser

9/6, Metrics and burden of disease, I

Learning goals
1. Introduce and work with examples of the demographic and epidemiologic transition models

Brown & Closser
Section 3 p. 86-91

9/11, Metrics and burden of disease, II

Learning goals
1. Understand the concept of “burden of disease” as a way to count morbidity and mortality and to classify ill health into major categories (infectious, chronic, injuries, mental health)
2. Introduce important metrics of the Burden of Disease: the DALY and YLL
3. Appreciate the process of evaluating “cost effectiveness” of certain health programs as one way to prioritize what we do (and don’t do) in global health

Brown & Closser
Section 3 p.86-102

9/13, Library workshop & Short intro to Epidemiology

Learning goals
1. Define epidemiology and appreciate its importance to public health
2. Explore surveillance as the cornerstone of effective public health infrastructure
3. Discern the difference between prevalence and incidence of disease
4. Epidemiological reasoning and the 2x2 table

Brown & Closser
Section 2 pages 56-85
9/18 Epidemiology: John Snow and outbreak investigations

Learning goals
1. Apply epidemiological reasoning to the cholera outbreak examples of 19th London

Brown & Closser
Section 1, Chapter 2 Broad Street Pump p. 16-22

II. ECOLOGICAL DETERMINANTS OF HEALTH: WATER, AIR AND FOOD

9/20, Water: hygiene, sanitation and drinking water

Learning goals
1. Introduce concepts of environmental health and environmental justice
2. Describe the fecal-oral transmission of disease, the four F’s of transmission; examine the patterns of poor sanitation and open defecation.
3. Appreciate that both water quality and water quantity are important to preventing disease.

Brown & Closser
Section 4, Introduction p.123-127; Chapter 14

9/25, Air: harmful air pollution from the megacity to the hearth

Learning goals
1. Introduce the four major ways that air quality affects our health

Brown & Closser
Section 5: Air, Introduction p.153-158; Chapters 17, 18 and 19

9/27, Food: child undernutrition

Learning goals
1. Define concepts such as food insecurity, hunger, undernutrition
2. Understand how poor child nutrition is measured and tracked
3. Examine the consequences of undernutrition in childhood; appreciate the dangerous synergy between infectious disease and undernutrition

Brown & Closser
Section 6 Introduction p.188-194; Chapter 21 Nature of Child Malnutrition; Chapter 22 Statement to the UN

10/2, Food: overweight in developing countries

Learning goals
1. Delve into the scope of the problem of overnutrition in developing countries
2. Appreciate the role of Big Food in driving this new epidemic

Brown & Closser
Chapter 24 Nutrition Paradox p.221-224

III. SOCIAL DETERMINANTS OF HEALTH

10/4, Social determinants of health

Learning goals
1. Explore how both absolute and relative poverty impact health
2. Gain comfort with the concept of “socioeconomic gradient in health”
3. Explore how racism negatively impacts health

Brown & Closser
Section 7 Introduction p.229-236; Chapter 25 Social Determinants of Health p.237-244; Chapter 26 Disease and Dying while Black p.245-251

10/11, Sex and reproduction

Learning goals
1. Introduce sex as playing a positive and negative role in health
2. Explore the reasons for increased female vulnerability to negative health effects of sex
3. Present a case study in reproductive health: fistula & maternal morbidity

Brown & Closser
Section 8 Introduction p.254-259

IV. INTERVENTIONS TO IMPROVE HEALTH

10/16, Introduction to interventions in global health

Learning goals
1. Acknowledge the long history of programs funded and designed in high income countries and implemented in low income countries
2. Rely on history as a way to understand modern global health approaches and strategies
3. Become fluent in the major players in global health

Brown & Closser
Section 10 History of Health Institutions and Programs p.337-343

10/18, History of global health interventions

Learning goals
1. Explore the four root “cultures” of global health
2. Introduce major features of the colonial and missionary medicine eras in global health
3. Follow the beginnings of the major global health institutions

Brown & Closser
Ch 35 Four 19th Century Cultural Roots of International and Global Health p.344-354

10/23, History of global health interventions: smallpox case study

Learning goals
1. Introduce the only successful disease eradication effort in history
2. Explore contrasting viewpoints in the ethics of some campaign tactics

Brown & Closser
Ch 4 House on Fire: the fight to eradicate smallpox p.30-35; Ch 36 Coercion and consent in smallpox eradication p. 355-367

10/25, Health systems in under-resourced countries

Learning goals
1. Introduce the six building blocks of a health system
2. Explore the challenge of maintaining a sufficient health workforce
3. Provide Malawi as a case study of a national health system
Brown & Closser  
Ch 38 A Heart for the Work p. 385-396; Ch 41 Are NGOs undermining health systems in Mozambique? p.409-418

10/30, Health systems: community health workers

Learning goals
1. Explore the examples from Pakistan, Nepal, Haiti and Rwanda of community health workers in action
2. Understand the promise and pitfalls of ‘task shifting’ as way to relieve pressure on under-resourced health systems

Brown & Closser  
Ch 40 Pakistan’s Female Frontline Health Workers p.401-408

11/1, Large-scale interventions: vitamin A, from research to program

Learning goals
1. Appreciate how basic research and epidemiology provide the jumping board for well-designed community-based trials
2. Explore how the Nepal Nutrition Intervention Project-Sarlahi was designed and implemented

Brown & Closser  
Ch 46 Managing rumors & limits of correcting misinformation p. 453-459

11/5, Global trade and health, Heather Wipfli

11/20, Funding global health: foreign aid and philanthropy

Learning goals
1. Explore sources of funding for health in under-resourced countries; reveal the trends in funding for health
2. Describe the important role of the Bill and Melinda Gates Foundation in funding global health efforts

Brown & Closser  
Section 11 Health systems and Aid p.379-384; Ch 39 Turning the World Upside Down p.397-400; Ch 42 The vital case for global health investments p.419-423
11/27 Debate

Learning goals
1. Delve into a contentious current issue in global health
2. Work in teams to summarize information, craft arguments and respond to critiques

11/29, Noname Activity

Learning goals
1. Through this simulation activity, approach the complexities of designing and implementing health programs in an under-resourced setting

12/4, Re-cap course and final exam review
The Writing Center (located on the Ground Floor of the Academic Commons) offers students from all disciplines two types of support to work on their writing: peer-to-peer, drop-in consultations with knowledgeable Writing Advisers, Sunday through Thursday from 7:00-11:00 p.m., and appointments with Faculty Writing Specialists from the Writing and Rhetoric department. Information about the Writing Center and a link to the appointment system is on the WC website: https://www.oxy.edu/writing-center.

From the Student Handbook, Occidental College
(http://www.oxy.edu/student-handbook/academic-ethics/academic-ethics)

Cheating Defined
Cheating occurs when a student attempts to complete or take credit for work by any dishonest means or assists another in doing so. Some examples of cheating include lying; copying from another’s exam or assignment or collaborating on an exam or assignment, unless specifically allowed by the instructor; submitting the same work in more than one course without instructor permission; falsifying data collected in research or laboratory courses; taking or receiving copies of an exam without the permission of the instructor; and using notes or other information devices inappropriate to the test conditions.

Plagiarism Defined
Plagiarism occurs when the ideas, organization, or language of another are incorporated into one’s work without properly crediting the original source with a citation or other disclosure. It includes re-writing or re-formatting material without acknowledging the original source of the ideas. Even if the language and organization are in the student’s own words, any ideas or information that is not common knowledge must be acknowledged in a reference.

Students are responsible for knowing and using the correct procedures for acknowledging and identifying sources of borrowed material. Failure to properly credit sources in all or part of work presented in draft or final form to anyone is plagiarism, regardless of whether it occurs as a result of dishonest intent or carelessness and regardless of the course credit attached to it. As a student scholar, if you:

- Quote directly from a source: you must enclose the quoted material, even if it is no more than a phrase or a single distinctive word (such as a neologism), within quotation marks, and provide a reference.
- Paraphrase, i.e., restate the material in your own words: (a) the paraphrasing must represent a substantial change from the original, not just the changing of occasional words and phrases, and (b) you must provide a reference.
- Present material that is common knowledge, but borrow someone else’s organizational pattern: you must acknowledge that borrowing in a reference.