State University of New York (SUNY) at Albany
School of Public Health, Department of Health Policy, Management and Behavior

HPM 500—
Health Care Organization, Delivery and Financing
Fall 2013

COURSE INFORMATION

Instructor information:
Ricky Leung, Ph.D., Assistant Professor
rleung@albany.edu (email); 518-402-6512 (phone); School of Public Health, Rm. 181 (address)
Office hours: Flexible, by appointment

Course time and location: Wednesdays, 5:30-8:20PM, GE C3 at SPH

Pre-requisites: None.

COURSE DESCRIPTION

This course provides an overview of the distinguishing features of the United States health care system, including organization, financing, and delivery of health care services. The course covers historical, societal, political, and economic forces influencing the accessibility, cost, quality of personal and public health services. Students are exposed to major U.S. health policy issues concerned with health improvement and protection, and the financing, organization, and delivery of health care services.

COURSE LEARNING OBJECTIVES

This course is guided by the following learning objectives. Students will learn how to:
1. Describe major organizational and policy components in US health care system;
2. Develop discussion questions and defend their responses with respect to US health policy and organizations (e.g. Accountable Care Act);
3. Conduct systematic analysis of pertinent topics related to US Health Care System;
4. Present findings clearly by combining theories and available data;
5. Explain US health care system problems in terms of organization, financing, and delivery;
6. Demonstrate the abilities to work individually as well as in group settings.

COURSE COMPETENCIES

This course teaches topics and skills that relate to new competencies considered critical by the Association of Schools of Public Health (ASPH) (http://www.asph.org/document.cfm?page=851). After completion of this course, students should be able to:
1. Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the US.
2. Discuss the policy process for improving the health status of populations.
3. Apply principles of strategic planning and marketing to public health.
4. Apply quality and performance improvement concepts to address organizational performance issues.
5. Apply "systems thinking" for resolving organizational problems.
6. Communicate health policy and management issues using appropriate channels and technologies.

**READINGS**

*Required Text*


*Other Required Readings*

Additional required course readings (i.e., readings outside of the texts) will be assigned throughout the semester. They will be made available through the electronic reserves system. The direct link for the electronic reserves page is http://eres.ulib.albany.edu. Occasionally, some additional readings may be distributed in class.

**GRADES**

*Grade Composition*

<table>
<thead>
<tr>
<th>Component</th>
<th>Weight</th>
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<tbody>
<tr>
<td>Mid-Term Exam</td>
<td>20%</td>
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<tr>
<td>Final Exam</td>
<td>30%</td>
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<tr>
<td>Group Presentation I</td>
<td>10%</td>
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<td>Group Presentation II</td>
<td>15%</td>
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<tr>
<td>Group Paper</td>
<td>15%</td>
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<tr>
<td>Attendance &amp; Class Participation</td>
<td>10%</td>
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*Grading Scale*

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<tr>
<th>Grade</th>
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<tr>
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<td>95 - 100</td>
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<td>A-</td>
<td>90 - 94</td>
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<td>B+</td>
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<td>B</td>
<td>83 – 86</td>
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<td>B-</td>
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<td>C+</td>
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<td>C</td>
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<td>C-</td>
<td>70 – 72</td>
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<td>D+</td>
<td>67 – 69</td>
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<td>D</td>
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<td>D-</td>
<td>60 – 62</td>
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**ASSIGNMENT DESCRIPTIONS**

*Mid-Term Exam (20%)*

The midterm will be an in-class, closed book exam. It will contribute to 20% of your grade. The exams may consist of multiple-choice and short questions. They will test your understanding of the major concepts presented in class. The exam will be on October 23, 2013.
Final Exam (30%)

The final exam will be an in-class, closed book exam. It will take place on December 11, 2013. The exam will be cumulative and will cover material presented during the entire semester. The final exam is intended to be more applied than the midterm, requiring students to use what they have learned and apply it to policy problems. It will contribute to 30% of your grade.

Group Presentations (10% + 15% = 25%)

There will be two group presentations:

1. Historical Evolution of the U.S. Health Care System (10%). Students will be divided into groups and each group will be assigned a historical period regarding the evolution of the U.S. Health Care System. The presentation should be delivered with PowerPoint-type slides. Students are expected to summarize the major developments regarding health care in the assigned historical period. Each group will be given a 15-20 minutes block of time for the presentation, plus 5-10 minutes of Q/A. Each group will submit your PowerPoint file with presenter notes via email one day prior to your group presentation (Assignments due on 09/24/13 at 12 noon).

2. Lessons from other health systems to reform the U.S. (15%). Students will be divided into groups and each group will be assigned a national health system (U.K., Japan, Germany, Taiwan and Switzerland) to compare with the U.S. Health Care System. The presentation should be delivered with PowerPoint-type slides. Students are expected to summarize the major characteristics of the assigned national health system and how they differ from the U.S. Your group should also discuss one peer-reviewed journal article (or credible newspaper/magazine article) that is related to your presentation. Each group will be given a 25-30 minutes block of time for the presentation, plus 5-10 minutes of Q/A. Each group will submit your PowerPoint file with presenter notes via email one day prior to your group presentation (Assignments due on 12/10/13 at 12 noon).

Group paper (15%)

Each group is required to submit a paper based on the 2nd presentation. The paper should summarize the major characteristics of the assigned national health system, how they compare with those in the U.S., and what may be useful lessons for health care reforms in the U.S. The paper should incorporate insights from three to five journal / magazine / newspaper articles, suggestions and feedbacks from students/instructor during the 2nd presentation. Notice that the assigned video(s) in the syllabus, as well as the articles that your group collects, only serves as materials to motivate your thoughts. An excellent group paper should demonstrate serious engagement with these materials (such as critiquing / reinforcing major points in the materials with compelling arguments and/or evidence).

This written assignment should be no longer than 12 pages (excluding references) with 12 point font, double spacing, 1 inch margins, and AMA (or similar) style references. Two points will be deducted if these requirements are not adhered to. The group paper is due at 12 noon one week after your group presentation (Assignments due on 12/11/13 at 12 noon).

Attendance and Class Participation (10%)

A. The majority of the class will consist of approximately one hour and a half of lecture and one hour and 20 minutes of discussion or group presentation. Students are encouraged to actively participate in each session. Participation (i.e., class attendance, asking questions, engaging in each week’s discussion) will contribute 10% toward the final grade.
B. Some classes (Weeks 3 or 4 and 11), students are required to submit to the instructor via email ONE discussion question based on the required readings (articles/chapters) for that week. The question is due at 12 noon on Tuesday one day prior to the class. Submitted questions will be randomly selected for class discussion. Each discussion question will contribute 2.5% toward the final grade.

**CLASS POLICIES**

*Attendance Policy*

Students are expected to attend and participate in each class session. Any class missed without a documented, valid excuse will result in a reduction of the class participation grade. Missing more than two classes in the course, without sufficient explanation, will result in an automatic 0.5/10 participation grade. If a student does miss a class they should ask classmates for notes from that week.

*Late Assignments*

All assignments are to be handed in on time. A minimum of two points will be deducted for late submission of assignments. No make-up opportunities exist.

*Disability*

Any student who is in need of any kind of assistance or consideration should inform the instructor as early in the semester as possible. Students who request accommodation will be asked to provide appropriate documentation, which may be obtained through the Disability Resource Center: http://www.albany.edu/disability/.

**ACADEMIC INTEGRITY STATEMENT**

*Academic Integrity*

Academic dishonesty is not tolerated in this class or at the School of Public Health. Please refer to the booklet: Community Rights and Responsibilities which you were given when you entered the school. If you do not have a copy, please see Ms. Gauvin-McNulty, Assistant to the Department Chair, or go to the following website: http://www.albany.edu/judicial_affairs/standardsofconduct.html

“Every student has the responsibility to become familiar with the standards of academic integrity at the University. Faculty members must specify in their syllabi information about academic integrity, and may refer students to this policy for more information. Nonetheless, student claims of ignorance, unintentional error, or personal or academic pressures cannot be excuses for violation of academic integrity. Students are responsible for familiarizing themselves with the standards and behaving accordingly, and UAlbany faculty are responsible for teaching, modeling and upholding them. Anything less undermines the worth and value of our intellectual work, and the reputation and credibility of the University at Albany degree.” (University’s Standards of Academic Integrity Policy, Fall 2013).

PLEASE ALSO SEE THIS WEBSITE FOR INFORMATION ABOUT ACADEMIC INTEGRITY AT UALBANY: http://www.albany.edu/studentconduct/27179.php

THIS LINK HAS INFORMATION SPECIFIC TO GRADUATE STUDENTS: http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards_integrity
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<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
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<tbody>
<tr>
<td>1</td>
<td>August 28*</td>
<td>Distribute Syllabus / Topic Selection</td>
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<tr>
<td>2</td>
<td>September 4*</td>
<td>Course Overview &amp; US Health Sector</td>
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<td><strong>HEALTH FINANCE</strong></td>
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<tr>
<td>3</td>
<td>September 11</td>
<td>Private Insurance</td>
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<td>4</td>
<td>September 18</td>
<td>Public Insurance</td>
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<td>5</td>
<td>September 25</td>
<td>Historical Evolution of the US Health Care / Catch-up</td>
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<td><strong>ORGANIZATIONS, PEOPLE &amp; DELIVERY</strong></td>
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<tr>
<td>6</td>
<td>October 2</td>
<td>Hospitals &amp; Physicians</td>
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<td>7</td>
<td>October 9</td>
<td>Outpatient Care &amp; Primary Care</td>
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<td>8</td>
<td>October 16</td>
<td>Payments &amp; Reimbursements</td>
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<tr>
<td>9</td>
<td>October 23</td>
<td>Mid-term Exam</td>
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<tr>
<td>10</td>
<td>October 30</td>
<td>Catch-up / Health Policy &amp; Government</td>
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<td>11</td>
<td>November 6</td>
<td>Population Health &amp; Special Population (may be cancelled)</td>
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<td>12</td>
<td>November 13</td>
<td>Technology &amp; Preventive Care</td>
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<td>13</td>
<td>November 20</td>
<td>Long-term Care, Acute Care &amp; Pharmaceuticals</td>
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<td><strong>CHANGES / REFORMS 1</strong></td>
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<tr>
<td>14</td>
<td>November 27</td>
<td>Reforms and US Health Market</td>
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<td>15</td>
<td>December 4</td>
<td>International Health / Catch-up / Optional topics</td>
</tr>
<tr>
<td>16</td>
<td>December 11</td>
<td>Final Exam</td>
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*These classes may be canceled / shortened.

**Syllabus**

This syllabus is a guide and may be modified. If the syllabus is modified, students will be given notice in a timely fashion. Students are responsible to apprise themselves of changes to the syllabus.

Please check blackboard regularly to see if new readings are added to each week’s folder under “Leung’s session”.
INTRODUCTION

08/28/13, 09/04/13 Course Overview and the U.S. Health Sector

Required Readings:
Shi & Singh (2013) – Chapter 1, skim Chapter 12
Kaiser Family Foundation (KFF) (2012) – The Uninsured: A Primer

*Please view the following in the first 2 weeks:
Video(s) + online article(s):
http://video.pbs.org/video/2198039605/
http://www.pbs.org/wgbh/pages/frontline/sickaroundtheworld/countries/

HEALTH FINANCE

09/11/13 Private Health Insurance & Public Health Insurance

Required Readings:
Shi & Singh (2013) – Chapter 6


09/18/13 More on Public Health Insurance: Medicare, Medicaid and S/CHIP

Required Readings:
Shi & Singh (2013) – Chapter 6

Medicaid-General Information, Center for Medicare & Medicaid Services, U.S. Department of Health and Human Services
Videos: http://www.kaiseredu.org/tutorials/medicare101/player.html
Kenneth E. Thorpe and David H. Howard. 2006. The Rise In Spending Among Medicare Beneficiaries: The Role Of Chronic Disease Prevalence And Changes In Treatment Intensity Health Affairs, 25, no.5 (2006):w378-w388
Most Expensive Places for Health Care - Forbes - Aug 09.docx

09/25/13 Catch-up with materials in previous weeks; Historical Evolution of the U.S. Health Care System (Group Presentation 1)

Required Readings:
Shi & Singh (2013) – Chapter 3

Presentations on Historical Development of US Health Care.

ORGANIZATIONS, PEOPLE, AND DELIVERY

10/02/13 Hospitals, Physicians and Health Care Delivery

Required Readings:
Shi & Singh (2013) – Chapter 8, Chapter 4 (p. 79-88)
http://www.pbs.org/newshour/rundown/2013/06/hospital-readmissions-a-primer.html

10/09/13 Outpatient Services and Primary Care; More on Payment and Reimbursement Methods

Required Readings:
Shi & Singh (2013) – Chapter 7, Chapter 6
American Hospital Association (AHA) Fast Facts - DL Nov 11

10/16/13 Managed Care and Coordinated Care

Required Readings:
Shi & Singh (2013) – Chapter 9

10/23/13    Mid-Term Exam

CHANGES / REFORMS 1

10/30/13    Health Policy and Process

Required Readings:
Shi & Singh (2013) – Chapter 13

Videos:
Time Magazine: Video The Obama Health Care Speech in Three Minutes
http://www.time.com/time/video/player/0,32068,38333399001_1921453,00.html
Time Magazine Special Report
http://www.time.com/time/video/player/0,32068,2178453595001_2136781,00.html

11/06/13    Population Health & Population with Special Needs

Required Readings:
Shi & Singh (2013) – Chapter 11
Gawande A. The Hot Spotters: Can we lower Medical Costs by Giving the Neediest Patients Better Care? The New Yorker, MedicalReport January 24, 2011.
http://www.newyorker.com/reporting/2011/01/24/110124fa_fact_gawande

11/13/13    Technology & Preventive Care

Required Readings:
Shi & Singh (2013) – Chapter 5


11/20/13 Long-Term Care

**Required Readings:**
Shi & Singh (2013) – Chapter 10
Kaplan RL. Financing Long-Term Care After Health Care Reform. Journal of Retirement Planning. 2010 (July-August); pp 7-15, 43.

**Optional: Acute Care and Pharmaceuticals**

**Required Readings:**
Shi & Singh (2013) – Chapter 4 (91-99)

**CHANGES / REFORMS 2**

11/27/13 Reforms and Health Market

**Required Readings:**
Shi & Singh (2013) – Chapter 14

12/04/13 International Health Care Systems Comparisons

**Required Readings:**
Shi & Singh (2013) – Chapter 14 (pp. 347-348)

Videos: http://www.pbs.org/wgbh/pages/frontline/sickaroundtheworld/countries/

12/11/13    Catch-up / Optional topics / Group Presentation 2 / Final Exam
Overview

This course introduces students to the fundamentals of health policy analysis and public policy-making. During the semester students will learn about the public policy making process and the factors (e.g., economic, social, political) that influence policy formulation, implementation, and modification. Although this class focuses on public policy, students should recognize that policies are made and implemented in the private sector and that private organizations are affected by public policy.

Goals

At the end of this course, students should be able to:

- Appreciate the complexity of policy development and implementation due to the interrelationship between political, social, legal, ethical, and economic goals.
  - Identify factors that can influence health policy and the health status of individuals and populations
  - Identify influences on the policy-making process (e.g., interest groups) and identify different mechanisms for bringing about changes in policy

- Take a health policy problem, understand its origins and limitations and propose and evaluate policy options for consideration, including recommending a specific action, and communicating these analyses both verbally and written.
Specific Course Competencies

1. To provide students with an understanding of the public policy cycle in the U.S., from problem identification to policy modification.

2. Introduce students to the techniques of health policy analysis, including how to analyze and synthesize information about a problem, develop alternative solutions, and recommend a course of action.

3. To provide students with an opportunity to develop skills in preparing written policy documents and giving policy-relevant presentations.

Methods/Course Structure

The course will consist of some lectures, but the majority of the course will be based on discussions and in-class exercises. Policy analysis is a very applied field. Therefore, this class is structured to simulate activities policy analysts would be doing in a typical “policy shop.”

Throughout the semester students will have the opportunity to actively engage in the steps of the public policy making cycle and the policy analysis process. Class discussions and in-class exercises will be used to help students better understand and apply policy analysis concepts.

Students are expected to come to class prepared to engage in discussions and to complete in-class exercises. This means completing all assigned reading and assignments PRIOR to class and actively participating during class discussions and exercises.

Required Texts and Course Materials

The following text is available at the University Bookstore. You may be able to find the text for a lower price either on-line or from a former student.


Daily Health Policy Report: Prior to each class period, students should regularly read the Daily Health Policy report on the Kaiser Health News website (http://www.kaiserhealthnews.org/) and come to class prepared to discuss health policy issues that were recently in the news during. We will discuss current health policy issues during the first 20-30 minutes of class.

Required Readings Outside the Text

Required course readings not in the text will be available through the Blackboard Learning System. The direct link to UAlbany’s Blackboard is https://blackboard.albany.edu. You can also access Blackboard through MyUAlbany. Note that if the MyUAlbany site is down, you should still be able to access Blackboard through the direct Blackboard link. The Blackboard site for this class is arranged by weekly folders. Any non-text readings for the week are located in that week’s folder.
On-line Tutorials

In preparation for some class sessions, students will be required to view on-line tutorials/webcasts from the Henry J. Kaiser Family Foundation. These tutorials feature well-known policy experts and cover topics such as the legislative process, the federal budget, and other policy relevant issues. Rather than repeating the material covered by these tutorials in class, students are expected to come to class prepared to ask questions and discuss the tutorial.

Tutorials will be available through Blackboard.

Overheads/Slides

Lecture slides can be accessed through Blackboard.

Some lectures will be posted at the beginning of the semester. However, the instructor reserves the right to make changes to the slides prior to class. If changes are made to lecture slides, the instructor will make every attempt to post these changes least one day before the lecture (ie, by Tuesday). In some cases, this may not be possible. Therefore students will to need to take notes, but will have access to the revised slides after that week’s class.

Slides that have recently been revised will include the term “revised” in their filename on e-reserve (ie, if there are multiple files with slides for a given class on e-reserve, the file with “revised” is the most recent version).

Graduate Level Writing and Performance

Writing well is extremely important in policy analysis. Writing must be clear and concise and should not be marred by grammatical or typographical mistakes. This means complete sentences, well-developed arguments, proper grammar and spelling, accurate citations to the literature, and all the other characteristics of professional level composition.

Students whose papers do not meet this standard will not do well in the class.

Additional guidance for good policy writing will be given in class. Students should also refer to the following for tips on policy writing:

- Plain Language Action and Information Network (PLAIN). Go to: http://www.plainlanguage.gov/index.cfm. Click on Examples, then Before and After Comparisons, the Government Letters, then Medicare Fraud Letter and browse the rest of the site.

Late Assignments

As graduate students, you should approach written assignments professionally – present them as you would to an employer. This includes **handing all assignments in on time (would you tell your boss that you couldn’t finish a project because you had too many other things going on??)**.

*Three points will be deducted for each day an assignment is late. Papers are due at the beginning of class. Any papers handed in after class will be considered late.*

Evaluation

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<thead>
<tr>
<th>Assignment</th>
<th>Description</th>
<th>Due Date</th>
<th>Points</th>
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<tbody>
<tr>
<td>1.</td>
<td>Finding Information Assignment</td>
<td>October 9</td>
<td>10</td>
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<tr>
<td>2.</td>
<td>Anti-Gun Violence Memo</td>
<td>October 30</td>
<td>20</td>
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<tr>
<td>3.</td>
<td>Problem Statement Memo</td>
<td>November 6</td>
<td>20</td>
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<tr>
<td>4.</td>
<td>Final Policy Analysis Paper</td>
<td>December 4</td>
<td>30</td>
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<td>5.</td>
<td>Final Presentation*</td>
<td>November 20</td>
<td>10</td>
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<tr>
<td>6.</td>
<td>Class exercises and participation</td>
<td>Semester Long</td>
<td>10</td>
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*Whether or not there will be final presentations depends on final enrollment in the course. If there are more then 10 students in the class we will not do final presentations and the total points for the problem statement memo and the final paper will increase by 5 points.*

Course Requirements:

Specific guidelines for all written assignments will be distributed and discussed prior to the due date of the assignment. All students are expected to follow assignment guidelines.

1. **Finding Information for Health Policy Analysis**

Health policy analysis often requires you to be able to find and synthesize information quickly. Policy analysts often rely on the “grey-literature” (e.g., policy papers from think-tanks, information briefs), government documents, etc in addition to peer-reviewed journal articles. This assignment will help familiarize you with finding information for policy analysis.

2. **Anti-Gun Violence “Task Force”**

Gun violence in the U.S. has been an ongoing problem. However, policy makers have historically been reluctant to take on this issue for multiple reasons, including the strength of the gun lobbies. Recent mass shootings have resulted in renewed attention and action on this issue. For example, the New York State Legislature recently passed new gun control laws and President Obama used executive orders to enacted several policies to try and curb gun violence. Prior to issuing the executive orders, President Obama appointed Vice President Biden to meet with stakeholders and develop recommendations for ways to reduce gun violence.
This semester we will form the HPM 501 Task Force on Anti-Gun Violence. Each student will take on the role of an individual or group with a stake in any policies to curb gun violence. The group will be modeled after Vice-President Biden’s efforts.

Students will write a memo (4-5 pages maximum) on gun violence and gun control and engage in a class discussion from the perspective of the task force member they are representing. At the end of the discussion, the class will develop a list of recommended policies.

a. **Anti-Gun Violence Memo**: The memo will outline major gun violence issues, the current context of policy efforts, a description of previous attempts at gun control, and provide background information on the task force member they are representing.

The memo will also outline at least three policy options for reducing gun violence in the U.S. and recommend a specific option(s) based on the perspective of the task force member they are representing.

b. **Anti-Gun Violence Task Force -- Class Discussion**: We will have a class discussion on ways to reduce gun violence. During the discussion, students will discuss the problem and solutions from the perspective of the stakeholder they were assigned. At the end of the class discussion we will develop recommendations for reducing gun violence.

3. **Policy Analysis Paper**

   Students will conduct an in-depth analysis of a single health policy issue of their choice and present the results in a final, written policy memo (10-12 pages in length plus appendices). This final assignment will allow students to engage in each step in the policy analysis process (i.e., problem statement, stakeholder analysis, etc).

   Prior to completing any assignments students will submit a one-paragraph description of the health policy issue/problem they will be addressing and the policy setting they where they will be “working”.

   A brief problem statement memo outlining parts of the final paper will be submitted and graded prior to submission of the final paper. Specifications for these assignments will be discussed in class.

a. **Problem Statement Memo**: Students will submit a 2-page memo that provides background on the problem they are addressing and major stakeholders and their views.

b. **Final Policy Analysis Paper**: Students will submit a 10-12 page policy analysis of their issue (definition of the problem, options for addressing the problem, analysis of each option, recommended option, and implementation plan). The main text of the paper will concisely present the major points of your analysis. Additional information to support your analysis will be included in appendices (e.g., full stakeholder/political analysis, cost analysis, etc).

c. **Final Policy Analysis Presentation**: Students will present the results of their final analysis to the class at the end of the semester. The PowerPoint presentations will be no longer than 10 minutes with up to an additional 10 minutes for discussion. All students must submit both a hard copy and electronic copy of their presentation.
4. **Class Participation**

Class participation is measured not by who talks the most. Rather, it is a function of the quality of what is said relevant to the given discussion. Demonstration of critical thinking and analysis of issues is particularly important. Policy analysts need to be able to communicate succinctly and thoughtfully. Comments that are supported by evidence will be graded highest.

Students are expected to attend and participate in each class session. **Missing one or two classes without an adequate explanation will hurt the student’s participation grade. Missing more than two classes without adequate explanation will result in a participation grade of 0 out of 10 points.** If a student does miss a class they should ask classmates for notes from that week.

**Academic Integrity**

Please refer to the University at Albany Graduate Bulletin and the pledge you signed when becoming a student in this school for academic dishonesty, course withdrawal, etc. **Please note that academic dishonesty, in any form, will not be tolerated in this class or at the School of Public Health. Any student engaging in academic dishonesty will receive a final grade of F in the course. Note that instructors are also required to report academic dishonesty to the School.**

Please refer to the booklet: **Community Rights and Responsibilities** which you were given when you entered the school. If you do not have a copy, please see Ms. Caitlin Reid or refer to the following website: [http://www.albany.edu/studentconduct/introduction.shtml](http://www.albany.edu/studentconduct/introduction.shtml)

Examples of academic dishonesty most relevant to this class are listed and defined below.

**Examples of Academic Dishonesty**

**Plagiarism:** Presenting as one's own work, the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else). Plagiarism includes paraphrasing or summarizing without acknowledgment, submission of another student's work as one's own, the purchase of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. The student is responsible for understanding the legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness, and the consequences for violating University regulations.

Examples of plagiarism include: failure to acknowledge the source(s) of even a few phrases, sentences, or paragraphs; failure to acknowledge a quotation or paraphrase of paragraph-length sections of a paper; failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle central to the paper's or project's structure; failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project; the unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method; submitting as one's own work, work borrowed, stolen, or purchased from someone else.
Multiple Submission: Submitting substantial portions of the same work for credit more than once without receiving the prior explicit consent of the instructor to whom the material is being submitted the second or subsequent time.
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<th>Week</th>
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<th>Topic</th>
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| 1.   | August 28  | Course Introduction  
Overview of the Policy Cycle and Health Policy Analysis               |
| 2.   | September 4| **NO CLASS – Rosh Hashanah**                                         |
| 3.   | September 11| Why Public Policy?  
The Political Framework of Public Policy  
Class Discussion: The Politics of Obesity |
| 4.   | September 18| Policy Making Phase I: Policy Formulation  
Agenda Setting and Legislative Development  
Effective Policy Writing |
| 5.   | September 25| The Legislative and Budget Processes  
Video: Frontline – “Obama’s Deal”  
**Class Discussion of Obama’s Deal Video** |
| 6.   | October 2   | Policy Analysis: Defining the Problem  
Searching for and Using Health Policy Information  
**Discuss “Finding Information” Assignment** |
| 7.   | October 9   | Policy Analysis: Selecting Evaluation Criteria and Developing Policy Options  
Evaluation Criteria: Political Feasibility  
**FINDING POLICY INFORMATION ASSIGNMENT DUE** |
| 8.   | October 16  | Evaluation Criteria: Cost and Economic Efficiency  
Anti-Gun Violence Task Force Activities Discussed/Roles Assigned  
**SUBMIT FINAL PAPER TOPIC FOR REVIEW** |
| 9.   | October 23  | Other Evaluation Criteria Used in Policy Analysis  
Evaluating and Choosing Between Options |
| 10.  | October 30  | **ANTI-GUN VIOLENCE TASK FORCE DISCUSSION**  
**ANTI-GUN VIOLENCE MEMO DUE** |
## Course Calendar Overview
### Introduction to Health Policy Analysis

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<th>Week</th>
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<th>Topic</th>
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| 11.  | November 6 | Policy Making Phase II: Issues in the Adoption and Implementation of Health Policy  
               Case Study: Implementation Issues in Health Care Reform  
               **POLICY ANALYSIS PROBLEM STATEMENT MEMO DUE**                  |
               Monitoring and Evaluating Health Policy                          |
| 13.  | November 20| **STUDENT PRESENTATIONS**                                            |
| 14.  | November 27| **NO CLASS -- Thanksgiving**                                         |
| 15.  | December 4 | **STUDENT PRESENTATIONS**                                            
               **FINAL POLICY ANALYSIS PAPER DUE**                              |
Introduction to Health Policy Analysis and Management

Required Readings

Week 1: August 28
Course Introduction
Overview of the Policy Cycle and the Health Policy Analysis Process
Hand out Weissert and Weissert reading

Required Readings:

Skim the following:

Longest – Chapters 1


Week 2: September 4
NO CLASS

Week 3: September 11
Why Public Policy?
The Context and Process of Health Policymaking
Class Discussion/Exercise: The Politics of Obesity

Required Readings:

Longest – Chapters 2


Reading for In-Class Discussion / Exercise:


Also review discussion questions for above article on e-reserve. The class will break into groups to discuss.
Week 4: September 18  
**Policy Making Phase I:**  
Policy Formulation: Agenda Setting and Legislative Development  
Effective Policy Writing

**Required Readings:**

*Note: These readings will cover in-class material discussed during both Weeks 3 and 4.*

Longest – Chapters 3 and 4

Week 5: September 25  
The Legislative and Budget Processes  
Video and Discussion: Frontline – “Obama’s Deal”  
Effective Policy Writing

Come to class prepared to discuss the content of the following web-based “tutorials” from the Kaiser Family Foundation (all available at KaiserEDU, an affiliated Kaiser Family Foundation site).

**Required Viewing**


**Optional Viewing**


Week 6: October 2  
**Policy Analysis: Defining the Problem**  
Searching for and Using Health Policy Information  
Discuss “Finding Information” Assignment

**Required Readings**

Bardach, Part I, 1 and 2 (pp. 1-12) (note that Bardach is used for several of the class sessions on policy analysis – the full text of the book is on e-reserve; it is not broken into chapters on e-reserve)

Kraft and Furlong – Chapter 5, pp. 125-138 (To be distributed in class)

View the following KaiserEDU web-based tutorials:


**Week 7: October 9**  
**Policy Analysis: Developing Policy Options and Evaluation Criteria**  
**Evaluation Criteria: Political Feasibility**  
**FINDING POLICY INFORMATION ASSIGNMENT DUE**

**Required Readings**

Bardach – Part I, 3 and 4 (pp. 12-27)


**Brief Background Reading for Anti-Gun Violence Activities:**  
(NOTE: This reading is meant as a brief overview of the topic and includes several different viewpoints. Students will have to do additional, independent research to develop a better understanding of the topic and the issues surrounding it. The readings below are assigned for Week 7, but can be read anytime between Week 7 and Week 9)


Week 8: October 16

Evaluating Criteria: Cost and Economic Efficiency
Using Economic Evaluations in Policy Making
Discuss Anti-Gun Violence Activities/Assign Roles
Submit Final Paper Topic for Instructor Review

Required Readings


To access the first tutorial (Intro to Economic Evaluation) go to http://www.cdc.gov/owcd/eet/SeriesIntroduction/1.html.

Note: There are several exercises/examples associated with the CDC tutorial. Try one or two of these examples to get a better appreciation for economic evaluation.

Reading for In-Class Discussion


Week 9: October 23

Other Evaluation Criteria Used in Policy Analysis
Evaluating and Choosing between Options

Required Readings

Bardach, Part I, 5-7, (pp. 27-41)

Week 10: October 30

ANTI-GUN VIOLENCE MEMO DUE
ANTI-GUN VIOLENCE TASK FORCE DISCUSSION

Required Readings

No Readings – Come prepared to discuss anti-gun violence from the perspective of your organization.

Week 11: November 6

Policy Making Phase II:
Issues in the Adoption and Implementation of Health Policy
Policy Analysis Problem Statement Memo Due

Required Readings

Longest – Chapters 5 and 6


Explore New York’s Health Exchange website to understand a.) how New York is implementing its exchange and b.) how New York is providing information to consumers. [http://healthbenefitexchange.ny.gov/](http://healthbenefitexchange.ny.gov/)

**Week 12: April 15**

Policy Making Phase III: Monitoring and Evaluating Health Policy

*Required Readings*

Longest – Chapter 7

Patton and Sawicki – Chapter 9

**Week 13: April 22**

*FINAL PRESENTATIONS*

**Week 14: November 27**

NO CLASS – Thanksgiving

**Week 15: December 4**

*FINAL PRESENTATIONS*

FINAL POLICY ANALYSIS PAPER DUE
Recommended Websites

Federal Government - Congress

Legislative Information: http://thomas.loc.gov
House of Representatives: http://www.house.gov
U.S. Senate: http://www.senate.gov
"Roll Call": http://www.rollcall.com
Congressional Budget Office: http://www.cbo.gov
"Federal Register": http://www.gpoaccess.gov/fr/index.html

Federal Government Agencies - Executive

The White House: http://www.whitehouse.gov
Office of Management and Budget (OMB): http://www.whitehouse.gov/omb/
U.S. Department of Health and Human Services: http://www.hhs.gov
Centers for Medicare and Medicaid Services: http://www.cms.hhs.gov/
Centers for Disease Control: http://www.cdc.gov
Health Resources and Services Administration: http://www.hrsa.gov/
National Institutes of Health: http://www.nih.gov
National Center for Health Statistics: http://www.cdc.gov/nchs/
National Technical Information Service: http://www.ntis.gov/
Substance Abuse and Mental Health Services Administration: http://www.samhsa.gov
Agency for Health Care Research and Quality: http://www.ahrq.gov
Medicare Payment Advisory Commission: http://www.medpac.gov
U.S. Office of Rural Health Policy: http://ruralhealth.hrsa.gov/
Bureau of Health Professions: http://bhpr.hrsa.gov/
Agency for International Development: http://www.usaid.gov/
U.S. Census Bureau: http://www.census.gov/hhes/www/hlthsns.html
U.S. Food and Drug Administration: http://www.fda.gov
U.S. Department of Labor: http://www.dol.gov/
U.S. Department of Veterans Affairs: http://www.va.gov/

State and Local Government

State health departments: http://www.cdc.gov/mmwr/international/relres.html
National Conference of State Legislatures: http://www.ncsl.org
National Governors Association: http://www.nga.org
National Academy for State Health Policy: http://www.nashp.org
Information for State Health Policy: http://www2.umdnj.edu/shpp/homepage.htm
State Coverage Initiatives: http://www.statecoverage.net
National Council of State Boards of Nursing: http://www.ncsbn.org
Federation of State Medical Boards: http://www.fsmb.org
Association of State and Territorial Health Officials - http://www.astho.org

**Health Care Professional and Advocacy Organizations**

Academy Health http://www.academyhealth.org
Alliance for Health Reform http://www.allhealth.org
American Enterprise Institute http://www.aei.org
American Association of Health Plans (managed care plans): http://www.aahp.org
American Psychiatric Association: http://www.psych.org
American Psychological Association: http://www.apa.org
Catholic Health Association of the United States: http://www.chausa.org
Families USA: http://www.familiesusa.org
National Coalition on Health Care: http://www.americashealth.org
National Health Council: http://www.nhcouncil.org
Center for Medicare Advocacy: http://www.medicareadvocacy.org
Center for Medicare Education: http://www.medicareed.org
Medicare Rights Center: http://www.medicarerights.org
Health Care Leadership Council: http://www.hlc.org
Health Insurance Association of America: http://www.hiaa.org
Health Research and Education Trust: http://www.hret.org
American Association of Retired Persons: http://www.aarp.org
World Health Organization: http://www.who.org
American Public Health Association: http://www.apha.org
American Nurses Association: http://www.ana.org
National Rural Health Association: http://www.NRHA.org
National Association of Community Health Centers: http://www.nachc.org
National Association of Public Hospitals and Health Systems: http://www.naph.org
American Academy of Nurse Practitioners: http://www.aanp.org
American Association of Colleges of Nursing: http://www.aacn.nche.edu
American College of Nurse Midwives: http://www.acnm.org
American College of Nurse Practitioners: http://www.nurse.org/acnp
American Academy of Physician Assistants: http://www.aapa.org
Association of American Medical Colleges: http://www.aamc.org
American Medical Association: http://www.ama-assn.org
American Hospital Association: http://www.aha.org
American Dental Association: http://www.ada.org
American Dental Education Association: http://www.adea.org
Joint Commission on Accreditation of Healthcare Organizations: http://www.jcaho.org
National Committee for Quality Assurance: http://www.ncqa.org
American Quality Health Association: http://www.ahqa.org
Pan American Health Organization: http://www.paho.org

**Health Care Resource Centers and Think Tanks**

Center for Health Care Strategies: http://www.chcs.org  
Center for Budget and Policy Priorities: http://www.cbpp.org  
Center for Studying Health System Change: http://www.hschange.org  
California Healthcare Foundation: http://www.chcf.org  
The Urban Institute: http://www.urban.org  
The Heritage Foundation: http://www.heritage.org  
The Institute of Medicine: http://www.iom.edu  
The Institute for Health Policy Solutions: http://www.ihps.org  
Health Affairs Journal: http://www.healthaffairs.org  
The Kaiser Family Foundation: http://www.kff.org  
The Kaiser Family Foundation, State Health Facts Online: http://www.statehealthfacts.kff.org  
The National Academy of State Health Policy: http://www.nashp.org/index.cfm  
The National Health Information Resource Center: http://www.nhirc.org  
Policy News and Information Service: http://www.policy.com  
Employee Benefits Research Institute: http://www.ebri.org  
The Social Statistics Briefing Room: http://www.whitehouse.gov/fsbr/ssbr.html  
The University of Maine: http://www.muskie.usm.maine.edu/research  
The Project Hope: http://www.projhope.org  
The National Health Policy Forum: http://www.nhpf.org  
The North Carolina Rural Health Research and Policy Analysis Program: http://www.schsr.unc.edu  
The Association for the Care of Children’s Health: http://www.acch.org  
The National Clearinghouse for Alcohol and Drug Information: http://www.health.org  
The University of California, San Francisco Center for the Health Professions: http://futurehealth.ucsf.edu  
The Public Broadcasting Service: http://www.pbs.org  
The Rural Information Clearinghouse: http://www.nal.usda.gov/ric/richs  
The Commonwealth Fund: http://www.cmwf.org  
The Center for Clinical Quality Evaluation: http://www.ccqe.com

**Additional Resource**

There is a glossary of frequently used health system/policy terms that can be downloaded from on the Academy Health website: http://www.academyhealth.org/publications/glossary.htm
Instructor
Feng (Johnson) Qian, MD, PhD           Tel: 518-402-0325
Assistant Professor, HPMB                   Email: fqian@albany.edu
Room 169, School of Public Health       Office hours: Thursday 2-4PM
& other times by appointment

Course prerequisite: None

Course Description

This course is an introduction to the field of health economics. Health economics is an active field of microeconomics with a large and growing literature. This course will combine economic theory, recent research, and current health policy and management problems into a comprehensive overview of the field. We will cover key concepts that health economists use to analyze health care markets and we will discuss the application of these concepts to current important issues in health policy and reform (e.g., Patient Protection and Affordable Care Act, Accountable Care Organizations). In this course, role of uncertainty and information asymmetry in economic analysis for health policy and management will be emphasized.

Course Learning Objectives and Competencies

By the end of the course, students will be able to:

1. Apply economic way of thinking about health and medical care, utility and health, transformation of medical care to health, the demand for medical care, and the empirical studies of medical care demand and applications

2. Use economic analysis for the physician and the physician-firm in the marketplace, the hospital as a supplier of medical care in the marketplace, the demand for health insurance, and health insurance supply and managed care

3. Demonstrate understanding of the economic impact of the government provision of health insurance programs, medical malpractice, externalities in health and medical care, and government regulation, quality certification, and technical change
4. Demonstrate understanding of how health care delivery systems are organized and financed in the United States and current important issues in health policy and reform such as *Patient Protection and Affordable Care Act*, *Accountable Care Organizations*

5. Compare contemporary health care systems across countries and discuss general considerations for a national health policy and goals of reform

This course teaches topics and skills that relate to Health Policy and Management competencies considered critical by the Association of Schools of Public Health (ASPH):

- Identify the main components and issues of the organization, financing, and delivery of health services in the US
- Use quality and performance improvement concepts to address organizational performance issues
- Utilize “systems thinking” for resolving organizational problems as well as community and public health issues
- Apply the principles of program planning, development, budgeting, management, and evaluation to organizational and community initiatives
- Effectively communicate health policy and management issues using media, advanced technologies and community networks

**Blackboard**

This course has an associated Blackboard page, which can be accessed through MyUAlbany. All handouts, assignments, power point slides and required readings will be available on the Blackboard site. Any announcements that I want you to be aware of will also be posted on the Blackboard system.

**Readings**

*Required Textbook*


**Recommended Book**  

**Required Readings**  
There are readings assigned for each class. They are available via the Blackboard site. All readings should be completed before the class session for which they are listed on the reading list.

**Evaluation**

Class participation (20%) – This includes attending class, arriving on time at the beginning of class and after breaks, completing required readings before class, and contributing thoughtfully to class discussions, in particular, the assigned class projects.

Homework (20%) – This includes 10 homework assignments. Each homework assignment involves answering several short questions. Students need to submit their homework by the due date and time.

Midterm examination (30%) – This is a 3-hour closed book written examination on October 16, 2013.

Final examination (30%) – This is a 3-hour closed book written examination on December 18, 2013.

**General Course Policies**

If students need to miss class, please inform the instructor ahead of time. It is student’s responsibility to find out what you missed in class and to make arrangements for any assignments due. More than 3 missed classes during the semester will automatically result in loss of half of the total class participation points for the semester, in addition to any points lost as a result of late assignments not arranged with the instructor (see below).

Homework assignments submitted any time after the specified due date and time will result in 5 points deducted from the assignment/paper grade for each day it is late, unless previous arrangements are made with the instructor. (i.e., any homework assignment submitted within 24 hours of its due day and time will receive -5 points, between 24 and 48 hours, -10 points, etc.). If an extenuating circumstance arises and students think that they might not be able to meet a
deadline, it is student’s responsibility to contact the instructor ahead of time to discuss possible alternatives.

**Academic Dishonesty**

As stated in the University’s Community Rights and Responsibilities (http://www.albany.edu/studentconduct/assets/Community_Rights_FINAL_10-28-11.pdf), the following forms of conduct are deemed as academically dishonest acts and will not be tolerated: plagiarism (http://library.albany.edu/usered/plagiarism/index.html), cheating on exams, multiple submission of the same work, forgery, sabotage, unauthorized collaboration with other students, falsification of work, bribery or use of purchased research service reports without appropriate notation; and theft, damage or misuse of library or computer resources. Attempts to commit such acts shall also constitute academic dishonesty. Students assume full responsibility for honesty in academic exercises. In accordance with University policy, any instance of academic dishonesty will result in an automatic failing grade for the course and potential sanctions by the school and university. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. There will be no exceptions.
Class Schedule

Session 1 (Aug 28): Course Overview / Introduction to Economic Analysis for Health Policy & Management (1:00-3:50pm)

Objectives:
(1) To introduce course content, expectations, and evaluations
(2) To provide an overview of economic analysis for health policy & management
(3) To introduce the important aspects of health economics

Readings:
Phelps book: Chapter 1
Folland book: Chapter 1

Session 2 (Sep 4): Utility and Health (1:00-3:50pm)

Objectives:
(1) To provide a basis for basic economic concepts of health and health care
(2) To introduce the production function of health, health through life cycle
(3) To review a model of consumption and health

Readings:
Phelps book: Chapter 2
Folland book: Chapter 2

*Class suspended 2:35pm on 9/4/2013 Rosh Hashanah Begins at Sundown

Session 3 (Sep 11): Transformation of Medical Care to Health (1:00-3:50pm)

Objectives:
(1) To understand the productivity of medical care
(2) To introduce physician-specific variations (medical practice styles)
(3) To distinguish extensive and intensive margin differences

Readings:
Phelps book: Chapter 3
Folland book: Chapter 5
Session 4 (Sep 18): The Demand for Medical Care/Empirical Studies of Medical Care Demand and Applications (1:00-3:50pm)

Objectives:
(1) To introduce demand curves for medical services
(2) To discuss how health insurance affects a demand curve for medical care
(3) To introduce time costs, travel costs, role of quality in the demand for care
(4) To provide empirical studies on applications and extensions of demand theory

Readings:
Phelps book: Chapter 4-5
Folland book: Chapter 7

Session 5 (Sep 25): The Physician and the Physician-Firm/Physicians in the Marketplace (1:00-3:50pm)

Objectives:
(1) To introduce the physician-firm and its production function
(2) To introduce practice ownership patterns and the aggregate supply curve
(3) To discuss the induced demand, consumer search and market equilibrium

Readings:
Phelps book: Chapter 6-7
Folland book: Chapter 15-16

Session 6 (Oct 2): The Hospital as a Supplier of Medical Care/Hospitals in the Marketplace (1:00-3:50pm)

Objectives:
(1) To introduce the hospital organization and hospital utility function
(2) To discuss hospital’s cost curve and long-run versus short-run costs
(3) To review a model of equilibrium quality and price
(4) To discuss the interaction of doctors and hospitals

Readings:
Phelps book: Chapter 8-9
Folland book: Chapter 14
Session 7 (Oct 9): The Demand for Health Insurance (1:00-3:50pm)

Objectives:
(1) To understand choice of the insurance policy
(2) To introduce the Patient Protection and Affordable Care Act (PPACA)
(3) To discuss self-selection and optimal insurance

Readings:
Phelps book: Chapter 10
Folland book: Chapter 8, 23

#Review for Midterm Exam (2:45-3:50pm)

Midterm Exam (Oct 16): 3-hour closed book written examination

Session 9 (Oct 23): Health Insurance Supply and Managed Care (1:00-3:50pm)

Objectives:
(1) To introduce supply of insurance, insurance exchanges in the PPACA
(2) To discuss the need for managed care and market share trends
(3) To discuss which interventions work best for managed care

Readings:
Phelps book: Chapter 11
Folland book: Chapter 9

Session 10 (Oct 30): Government Provision of Health Insurance (1:00-3:50pm)

Objectives:
(1) To review the Medicare and the Medicaid programs
(2) To introduce Medicare Advantage and operational changes in Medicare

Readings:
Phelps book: Chapter 12
Folland book: Chapter 21
Session 11 (Nov 6): Medical Malpractice (1:00-3:30pm)

Objectives:
(1) To introduce the economic logic of Negligence Law
(2) To discuss defensive medicine, medical malpractice insurance
(3) To introduce Tort Reform and HMO liability

Readings:
Phelps book: Chapter 13
Folland book: Chapter 15

Session 12 (Nov 13): Externalities in Health and Medical Care (1:00-3:30pm)

Objectives:
(1) To introduce externalities, property rights, and the control of externalities
(2) To discuss international issues – expanding the scope of the externality
(3) To introduce empirical studies on externalities in health and medical care

Readings:
Phelps book: Chapter 14
Folland book: Chapter 19

Session 13 (Nov 20): Regulation, Quality Certification, and Technical Change (1:00-3:30pm)

Objectives:
(1) To introduce licensure, measuring quality
(2) To discuss paying for outcomes: Accountable Care Organizations in PPACA
(3) To review price controls, new drugs and devices, and new wave of medical care

Readings:
Phelps book: Chapter 15
Folland book: Chapter 20

*Nov 27 NO CLASS Thanksgiving Break!
Session 14 (Dec 4): Health System Reform/Comparative Health Care Systems (1:00-3:30pm)

Objectives:
(1) To discuss general considerations for a national health policy and goals of reform
(2) To compare contemporary health care systems: UK, Canada, Japan, Singapore
(3) To review the Patient and Affordable Care Act (PPACA) of 2010

Readings:
Phelps book: Chapter 16
Folland book: Chapter 23

#Review for Final Exam (2:45-3:50pm)

Final Exam (Dec 18): 3-hour closed book written examination
HPM 525: Social and Behavioral Aspects of Public Health
Online

Jennifer Manganello, PhD, MPH
jmanganello@albany.edu
518-402-0304

COURSE DESCRIPTION

This course provides an introductory analysis of the contribution of behavioral, psychological, social, organizational, community, and policy level factors in determining the health of populations. The course will provide students with an overview of important concepts, theories, and methods from the social and behavioral sciences in order to expand their ability to understand, analyze, and effectively address public health problems.

COMPETENCIES

The course will allow students to meet all 10 of the ASPH Social and Behavioral Science Competencies:

- Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.

- Identify the causes of social and behavioral factors that affect health of individuals and populations.

- Identify individual, organizational and community concerns, assets, resources and deficits for social and behavioral science interventions.

- Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.

- Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.

- Describe the role of social and community factors in both the onset and solution of public health problems.

- Describe the merits of social and behavioral science interventions and policies.
Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.

Apply ethical principles to public health program planning, implementation and evaluation.

Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.

Students will also meet this ASPH Professionalism competency:

Analyze determinants of health and disease using an ecological framework

Students will also meet these UAlbany SBCH competencies:

Analyze the role social and behavioral determinants of health and develop strategies for addressing them to solve public health problems

Analyze specific highly prevalent health problems/conditions to determine social, community, and behavioral risk factors that are key to target in an intervention

### READINGS


In addition to the required textbook, there are a number of required articles and chapter readings. These articles/chapters are available on the course Blackboard site.

### GRADES

Course grades will be determined as follows (assignments are described below). I typically use a traditional grading scale when providing assignment and course grades.

- **Quizzes**: 45% (3 at 15% each)
- **Learning activities**: 25% (5 at 5% each)
- **Small group discussions**: 30% (6 at 5% each)
ASSIGNMENTS

Quizzes (45% total; 15% each)
There will be 3 quizzes during the semester. The quiz will ask questions about the materials covered during the previous 4 modules including the readings. While you will be able to use your books and notes, this will be a timed quiz. More information and instructions are provided on the course site.

Learning Activities (25% total; 5% each)
These activities are designed to help you achieve the learning objectives by applying the knowledge gained to specific health topics or participating in specific activities. More information and instructions are provided on the course site.

Small group discussions (30% total; 5% each)
In order to facilitate discussion and shared learning students will be randomly assigned to a group discussion for 6 modules. Initial student discussion posts are due by Tuesday, and you must respond to two other student posts by Friday and maintain your own thread. More information and instructions are provided on the course site.

High Quality Discussions
1. Are posted early enough in the module to give others time to respond.
2. Are thought provoking, original, and add substantively to the discussion by providing a thorough analysis of key concepts learned in class. Statements that simply agree with another’s comments do not add to a discussion.
3. Introduce outside information or ideas that are not available in the readings and relate this information to specific concepts or findings covered in the discussion.
4. Are well written are properly cited.
5. Are respectful of the beliefs and opinions of others.

Discussion Participation
Active participation in class discussions is key to the learning process in an online course. You will get the most out of this class if you actively participate in each discussion module. You will not receive credit for simply signing on and reading each other’s post.

Effective communication is crucial in the field of public health; and this includes the written word. Points will be deducted for written work that is difficult to read due to poor format, poor grammar or an excessive number of spelling errors.

ONLINE LEARNING

For those of you who are new to online learning, this mode of instruction is student-centered rather than professor-led. This means that you are largely responsible for your own learning and success. If you are highly motivated, log-on regularly during the online activities, and produce high quality contributions to the discussion and written assignments, you will do well in this course.
Online education is aimed at independent learners

1. If you learn best in the structured setting of a classroom this online course is probably not for you.
2. If you have limited writing skills, this online course will be a challenge for you.

Time commitment
You should expect to spend about 12 hours a week on this course; most of which will be spent on the reading assignments. 12 hours may seem like a lot of time, but it includes the 3 hours you would spend in a traditional classroom setting.

CLASS POLICIES

*Open-book feature: This online course is "open-book". Unlike a classroom setting where you may not have details regarding resources and references, in an online course you have access to the readings, lecture notes, and additional web resources. Therefore, your comments should be informed by the readings and properly referenced.

*Professional Integrity:
The interactive nature of this course allows for the expression of a variety of views and opinions. The discussions are to be guided by respect for each other’s opinion and viewpoint. Personal accusations and abusive speech is not acceptable.
1. Also, please observe proper "Netiquette" -- courteous and appropriate forms of communication and interaction over the Internet (within your online course). Visit: http://www.albion.com/netiquette/corerules.html
2. I reserve the right to remove any questionable or offensive material from public areas of this course.

*Academic integrity: Students are expected to be ethical and honest in carrying out all assignments and course requirements. As per University policy plagiarism, cheating on exams, multiple submission of the same work, forgery, sabotage, unauthorized collaboration with other students, falsification of work, bribery or use of purchased research service reports without appropriate notation, and theft, damage, or misuse of library or computer resources are considered forms of academic dishonesty. Attempts to commit such acts shall also constitute academic dishonesty. Students should become familiar with the University’s definitions and policies as detailed in the Graduate Bulletin and in the University’s Community Rights and Responsibilities.

As per University policy, the burden on avoiding plagiarism falls solely on the student. The University’s Community Rights and Responsibilities is available at the following web address http://www.albany.edu/studentconduct/community_rights_and_responsibilities.php

Please also read the Graduate Bulletin, and go on-line to the UAlbany Library Website http://www.albany.edu/writing/writers_info/plagiarism.html, where there is more information on what constitutes plagiarism and how to avoid it. For any assignment, feel free to consult with the professor to get clarification about potential plagiarism issues, PRIOR to submitting your assignment.
Please be advised that professors are required to report instances of academic dishonesty to the Dean of Graduate Studies.

*Disability:* Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact one of the instructors by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.

*Issues completing coursework:* If an unexpected circumstance develops (e.g., illness, family emergency), you should notify the instructor as soon as possible. In accordance with University policy, a student who misses a meaningful amount of coursework may be asked to withdraw from the course.

*Syllabus:* Tentative due dates are provided in this syllabus. If needed, the due dates may be altered to better allow us to achieve the course goals. Additional assignments may be added during the semester. Therefore, this syllabus should be considered a guide and may be modified. If the syllabus is modified, students will be given notice in a timely fashion. Students are responsible to appraise themselves of changes to the syllabus.
HPM 525 online  
Class schedule, Fall 2014

Learning modules run weekly, from Sunday to Saturday

<table>
<thead>
<tr>
<th>Module</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module 1</td>
<td>Orientation</td>
</tr>
</tbody>
</table>
| Module 2     | The Ecological Model  
PRACTICE DISCUSSION-NOT GRADED |
| Module 3     | Individual Influences: Health Belief Model,  
Theory of Reasoned Action/Planned Behavior  
GROUP DISCUSSION |
| Module 4     | Individual Influences: Social Cognitive Theory,  
Transtheoretical Model  
GROUP DISCUSSION |
| Module 5     | Interpersonal Influences: Social Relationships and Health, Stress and  
Coping  
LEARNING ACTIVITY  
QUIZ 1 |
| Module 6     | Organizational Influences  
GROUP DISCUSSION |
| Module 7     | Community Influences  
LEARNING ACTIVITY |
| Module 8     | Social Determinants: Socioeconomic influences on health  
GROUP DISCUSSION |
| Module 9     | Social Determinants: Race/Ethnicity and Gender  
GROUP DISCUSSION |
| Module 10    | Media Influences  
LEARNING ACTIVITY |
| Module 11    | Policy Level influences  
LEARNING ACTIVITY |
| Module 12    | Ethics in Health Promotion  
GROUP DISCUSSION |
| Module 12    | Overview of Program Planning and Evaluation  
LEARNING ACTIVITY  
QUIZ 3 |
# HPM 525
## Reading List Fall, 2014

| Module 1 | The Ecological Model  
Overview of Health Behavior Theories |
|----------|---------------------------------------|

| Module 2 | Individual influences on health  
Health Belief Model (HBM)  
Theory of Reasoned Action/Planned Behavior (TRA/TPB) |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This publication provides a nice discussion of the application of theory to practice. You might want to save the file for future reference. It is available at: <a href="http://www.cancer.gov/PDF/481f5d53-63df-41bc-bfaf-5aa48ee1da4d/TAAG3.pdf">http://www.cancer.gov/PDF/481f5d53-63df-41bc-bfaf-5aa48ee1da4d/TAAG3.pdf</a></td>
</tr>
</tbody>
</table>
Module 3  Individual influences on health:
Social Cognitive Theory (SCT)
Transtheoretical Model/Stages of Change (TTM)


Module 4  Interpersonal influences on health
Social Relationships and Health
Stress and Coping


Module 5  Organizational influences on health
Schools and the workplace


Wechsler, H. et al. (2000). Using the school environment to promote physical activity and healthy eating. Preventive Medicine, 31, S121-S137.

Module 6  Community influences on health and health behavior


### Module 7

**Social Determinants: Socioeconomic influences on health**


### Module 8

**Social Determinants: Race, ethnicity, and gender**


### Module 9

**Media influences on health**


**Module 10**  
**Policy influences on health**


**Module 11**  
**Ethics in health promotion**


**Module 12**  
**Overview of program planning and evaluation**

1. Program Development & Evaluation  

2. Introduction to Logic Models  

3. Evaluating a Public Health Program  
SOCIAL AND BEHAVIORAL ASPECTS OF PUBLIC HEALTH

HHPM 525-0004 (7781): Spring 2014

COURSE INFORMATION

- **Time**: Wednesday: 1:00-3:50pm,
- **Location**: East Campus, Room C4
- **Prerequisites**: None

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Carolyn H. Grosvenor, MD, MPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Location</td>
<td>SPH, HPMB part-time faculty office</td>
</tr>
<tr>
<td>Phone (HPMB)</td>
<td>518 402-0333</td>
</tr>
<tr>
<td>Email (preferred)</td>
<td><a href="mailto:cgrosvenor@albany.edu">cgrosvenor@albany.edu</a></td>
</tr>
<tr>
<td>Office hours: Wednesdays</td>
<td>By appointment: 9:30-11:30; Walk in: 11:45-12:45</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Teaching Assistant</th>
<th>Bianca Angelica Parker, RN, MPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Location</td>
<td>SPH, Suite 218, Rm 232</td>
</tr>
<tr>
<td>Phone</td>
<td>518 402-0267</td>
</tr>
<tr>
<td>Email (preferred)</td>
<td><a href="mailto:bgonzalez@albany.edu">bgonzalez@albany.edu</a></td>
</tr>
<tr>
<td>Office Hours</td>
<td>By appointment</td>
</tr>
</tbody>
</table>

**COURSE OVERVIEW**

This course provides an introduction to the role of social, cultural, psychological, and behavioral factors in determining the health of populations. Participants will:

1. Gain an understanding of the significance of social, cultural, psychological, and behavioral factors in relation to health status and well-being,
2. Learn to analyze public health problems in terms of the social, psychological, cultural, economic, and demographic factors that contribute to or protect from vulnerability to disease, disability, and death,
3. Improve their ability to apply social science theory, research, and principals to the critical analysis of the appropriateness of public health interventions.

**Learning Objectives**

We will use the **Socio-Ecological Model** as our framework for discussion to describe the interaction between personal and environmental determinants of health. The main premise of this course is that health behavior and health outcomes are determined by multiple factors, therefore, to be effective, public health interventions must be multifaceted in their approach.

The **goal of this course** is for participants to acquire and develop the skills needed to:

1. **Assess** public health issues from a broader social determinants perspective.
2. **Apply** the theories of health behavior to the development of interventions focused on health promotion and preventive health care.
3. **Develop** programs or interventions targeting public health issues using the Socio-Ecological Model as a framework.

After completing this course, participants will be able to:

1. Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.
2. Identify the causes of social and behavioral factors that affect health of individuals and populations.
3. Describe the role of social and community factors in both the onset and solution of public health problems.
4. Describe the merits of social and behavioral science interventions and policies.
5. Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.

**COURSE ACTIVITIES**

**Reading Assignments**

Participants will get the most out of this course if the reading assignments are completed prior to each class. Learning is facilitated by active class participation; so it is expected that contribution to the discussions will be informed by the reading assignments.

- **Course Textbook**

- **Selected Articles** (posted on Blackboard)

- **Additional Resources**
  For participants who would like to develop a more effective writing style, the following resources are recommended:

**Learning Activities**

These activities are designed to help participants achieve the stated learning objectives by applying the knowledge gained to specific health topics.

- **Small group discussions**
  - In order to facilitate discussion and shared learning
- **Mini quizzes x5**
  - 10-minute closed-book quizzes conducted at the start of class
- **Individual written assignment**
• 500 word critique of a journal article focused on a specific determinant of health

- Group assignment and presentation
  - Power point presentation on the social determinants of a specific health problem
  - Grade will be based on overall content and presentation
    - Classmates will participate in the grading process

- Mid-Term Exam
  - Closed book (short answers and narratives)

- Final Exam (cumulative)
  - Open book (case scenarios and narratives)

GRADES

The grading scheme is A-E. The contribution of the learning activities to the final grade is as follows:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>1. Mini quizzes x5</td>
<td>20%</td>
</tr>
<tr>
<td>2. Written assignment</td>
<td>10%</td>
</tr>
<tr>
<td>3. Group assignment &amp; presentation</td>
<td>20%</td>
</tr>
<tr>
<td>4. Mid-term exam</td>
<td>25%</td>
</tr>
<tr>
<td>5. Final exam</td>
<td>25%</td>
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</table>

CLASS POLICIES

Class Participation: Participants will get the most out of this class if they attend and participate in each class. Participants are responsible for the content covered in the class sessions, including the group presentations.

- The instructors should be notified prior to class re: any absences that might occur on the day of a quiz or exam.

Classroom Etiquette: Cell phones are a distraction and disruptive to the learning process; in consideration of others, phones should be muted during class session. Late arrivals are also disruptive; make every effort to arrive prior to the start of class.

Professional Integrity: The interactive nature of this course allows for the expression of a variety of views and opinions. The discussions are to be guided by respect for each other’s opinion and viewpoint. Personal accusations and abusive speech is not acceptable.

Academic Integrity: Academic dishonesty, such as plagiarism, cheating or collaboration on assignments that are intended to be completed alone, violates the University’s Student Code of Conduct (available on the home page of The Office of Conflict Resolution & Civic Responsibility available at www.albany.edu/studentconduct )

- Written assignments will be accompanied by a statement attesting to one’s individual work
  - Academic dishonesty on any written assignment will receive a grade of “0” for that assignment, and may result in a failing grade for the course.
All instances of academic dishonesty will be reported to the Dean of Graduate Studies, per University policy.

**Plagiarize:** “to steal and pass off (the ideas or words of another) as one's own: use (another's production) without crediting the source”. Retrieved 1/19/13 from [http://www.merriam-webster.com/dictionary/plagiarize](http://www.merriam-webster.com/dictionary/plagiarize)

Per University policy, the burden of avoiding plagiarism falls solely on the participant. If you have any questions on how to properly cite sources, please feel free to consult the instructor for clarification prior to submission of any assignment.

- The following tutorials on how to avoid plagiarism may be helpful
  - Plagiarism 101 at [http://library.albany.edu/usered/plagiarism/index.html](http://library.albany.edu/usered/plagiarism/index.html)
  - Introduction to Plagiarism at [http://ec.hku.hk/plagiarism/introduction.htm](http://ec.hku.hk/plagiarism/introduction.htm)
- Citation Guides (**APA or MLA**) are available on the University Library web site at [http://library.albany.edu/usered/cite/index.html](http://library.albany.edu/usered/cite/index.html)

**Accommodations:** Any participant who has a disability that may prevent him/her from fully participating in the course learning activities should contact the instructor by the second class session in order to discuss reasonable accommodations to facilitate the learning process.

**CLASS SCHEDULE**

<table>
<thead>
<tr>
<th>Session/Date</th>
<th>Topic</th>
<th>Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 1</td>
<td>Social Determinants of Health Introduction to Ecological Framework</td>
<td></td>
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<tr>
<td>January 22</td>
<td></td>
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</tr>
<tr>
<td>Session 2</td>
<td>Socio-Ecological Model</td>
<td>Mini Quiz #1</td>
</tr>
<tr>
<td>January 29</td>
<td></td>
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<tr>
<td>Session 3</td>
<td>Individual Influences: Health Belief Model; Theory of Reasoned Action/Planned Behavior</td>
<td>Mini Quiz #2</td>
</tr>
<tr>
<td>February 5</td>
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<tr>
<td>Session 4</td>
<td>Individual Influences: Social Cognitive Theory; Stages of Change</td>
<td>Mini Quiz #3</td>
</tr>
<tr>
<td>February 12</td>
<td></td>
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</tr>
<tr>
<td>Session 5</td>
<td>Interpersonal Influences: Social Support/Networks; Stress/Coping</td>
<td>Mini Quiz #4</td>
</tr>
<tr>
<td>February 19</td>
<td></td>
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<tr>
<td>Session 6</td>
<td>Organizational Influences Community Influences</td>
<td>Mini Quiz #5</td>
</tr>
<tr>
<td>February 26</td>
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<tr>
<td>Session 7</td>
<td>Public Health in Action Social Structural Influences: SES</td>
<td>Guest Speaker Erika E. Scott, MS</td>
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<tr>
<td>March 5</td>
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<tr>
<td>March 12</td>
<td>Mid-Term Exam</td>
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</tbody>
</table>

**March 19** Spring Break

| Session 8     | Social Capital/Collective Efficacy                                    | Guest Speaker Robert Martiniano, MPA, MPH |
| March 26      |                                                                       |                           |
| Session 9     | Social Structural Influences: Race, Ethnicity & Gender and Health      | Written assignment due   |
| April 2       |                                                                       |                           |
| Session 10    | Policy Level Influences Media Influences                             | Presentation: Groups 1&2 |
| April 9       |                                                                       |                           |
| Session 11    | Program Planning and Evaluation                                       | Presentation: Groups 3&4  |
| April 16      |                                                                       |                           |
| Session 12    | Ethics in Health Promotion                                            | Presentation: Groups 5&6  |
### READING LIST

#### 1. Social Determinants of Health

#### 2. Socio-Ecological Model

#### 3. Health Belief Model & Theory of Reasoned Action/Planned Behavior
- Optional:

#### 4. Social Cognitive Theory & Stages of Change

#### 5. Social Support/Networks & Stress and Coping
6. Organizational and Community Influences
- NIOSH. Stress at Work Posted on Blackboard
- Optional:

7. Social Structural Influences: Socio-economic Status

8. Social Capital and Collective Efficacy

9. Social Structural Influences: Race/Ethnicity and Gender
10. Policy and Media Influences


11. Program Planning and Evaluation


12. Ethics in Health Promotion

GENERAL DESCRIPTION

This course will examine the epidemic of obesity, particularly childhood obesity, and how various behavioral and environmental factors place children at risk of becoming overweight. Sources of influence that will be examined include: children’s nutrition and physical activity behaviors, the family environment, the child care and school environments, community characteristics such as healthy food access and access to safe walking and bicycling paths, and the media. In addition, this course will examine disparities in obesity, the associated negative health outcomes, and policies designed to halt (and reverse) the epidemic.

COURSE OBJECTIVES

By the end of this course, students will be able to:
1. Describe demographic and historical patterns in the prevalence of obesity among children.
2. Provide examples of specific mental and physical health outcomes linked with childhood obesity.
3. Use ecological systems theory to explain factors leading to the emergence of obesity among children.
4. Provide three examples of ethnic/racial or SES disparities in obesity and its health consequences and outline possible reasons for such disparities.
5. Define national recommendations for dietary intake, physical activity and TV viewing among youth and summarize what is known about the impact of each behavior on children’s obesity risk.
6. Name two components of the family environment and the school environment that may increase children’s obesity risk and describe current approaches to mitigate these factors.
7. Provide specific examples, supported by research, of community-level factors that impact children’s obesity risk.
8. Describe at least 2 national and state policy initiatives specific to childhood obesity.
COURSE COMPETENCIES

Public heath competencies addressed in this course include:

- Describe the role of social and community factors in both the onset and solution of public health problems. (MPH core competency)
- Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice. (MPH core competency)
- Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies. (MPH core competency)
- Identify health issues unique to different stages of the life cycle and describe how public health strategies can be tailored to meet such needs. (Social Behavior and Community Health competency)

CLASS FORMAT

A combination of lecture and discussion format will be used during classes. Students will also participate in practical experiences related to childhood obesity prevention.

PREREQUISITES

Graduate or advanced undergraduate standing

REQUIRED COURSE READING:

There are a number of required articles. These articles are available on the Blackboard course website. Additional course material is available on the Internet at the provided URLs.
CLASS POLICIES AND EXPECTATIONS

- All students are expected to attend class, participate in class discussions and complete the required readings. Class absences must be justified ahead of time.
- All assignments are to be handed in on time. A minimum of 5% per day will be deducted for late papers.
- Academic dishonesty, such as plagiarism or unauthorized collaboration on any assignment will result in a fail grade for that assignment, and could result in a fail grade for the class. Please refer to the booklet, Community Rights and Responsibilities (http://www.albany.edu/judicial_affairs/standardsofconduct.html) for a full explanation of the University’s standards of conduct. An excellent guide to plagiarism (including a self-test) is available at http://ec.hku.hk/plagiarism/introduction.htm. You will be expected to review these materials before the second class.

Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.
COURSE ASSESSMENT

The grading scheme for the class is A-E.
Your final course grade will be based on the following:

Student-led Book Chapter Club Discussion 10%
Food Day Event (October 24th class session) 15%
Environmental audit assignment 15%
In-class Individual Assessment 20%
Class Attendance and Participation 10%
Final Practical Project 30%

Each assignment is summarized below. Detailed instructions for each assignment will be provided by Dr. Bozlak in class.

Student-led Book Chapter Club Discussion (10%)
For this assignment you will co-lead as part of a team 45 minutes of class discussion based on a book chapter chosen by Dr. Bozlak for one class session during the semester. You are welcome to utilize interactive/engaging methods for this discussion, however, it must be a discussion. This is not intended to be a lecture or presentation. Additional information will be provided on the first day of class.

October 24th Food Day Event Organization and Participation (15%)
This assignment will be discussed in class on August 29th. Students will work as part of a team to plan a small project/event as part of the class’s participation in Food Day 2013. For additional information on Food Day, please visit: http://www.foodday.org/about Five percent of your grade will be based on your peers’ evaluation of your participation in the project.

Environmental audit assignment (15%)
For this assignment, you will work in teams of 3-4 people to complete an environmental audit on two parks in the Albany area (assigned by Dr. Bozlak) utilizing the “Community Park Audit Tool” developed in Kansas City, Missouri. Dr. Bozlak will provide detailed written directions in class for this assignment. The audit will be due in Blackboard by 5 pm on November 14th.

Class Attendance and Participation (10%)
Students are expected to come to class prepared to actively participate in each class session. If a student is unable to attend a class session, he or she is expected to notify Dr. Bozlak as soon as it is known that he or she will be absent. More than one unexcused absence may result in the lowering of one’s grade.

Individual Assessment (20%)
Although the work discussed in this course is often done in a team approach, it is important that your individual knowledge of the concepts discussed in this course and the application of that knowledge are evaluated. On October 3rd, Dr. Bozlak will provide more details about this in-class assessment, scheduled for December 5th.
Final Practical Project: (30%) (Due: Anytime before 5 pm on Monday, December 16th; Project must be submitted in Blackboard by all group members)
In childhood obesity prevention, it is common for public health practitioners to work on intervention teams. Thus, the final project in this course is a team project. The final project will consist of groups of 4 people working on a project related to the Alliance of New York State YMCAs’ Pioneering Healthier Communities initiative. Additional information related to this project will be provided by Dr. Bozlak beginning on September 12th. Five percent of each student’s grade on this project will be based on his or her group members’ evaluation.

CLASS SCHEDULE, FALL 2013

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Coursework due (before class in Blackboard)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session I - August 29th</td>
<td>Introductions, Review of Syllabus, &amp; Weight of the Nation video/discussion; Discussion of Food Day 2013; Book Chapter Assignments</td>
<td></td>
</tr>
<tr>
<td>Session II - September 5th</td>
<td>No Class – Rosh Hashanah</td>
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<tr>
<td>Session III - September 12th</td>
<td>The public health burden of obesity and childhood obesity - Book Chapter Discussion I – Fat Politics</td>
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</tr>
<tr>
<td>Session IV - September 19th</td>
<td>The public health burden of obesity and childhood obesity (continued); Measurement and Introduction to causes and interventions - 2:45 pm presentation: Dr. Barbara Dennison and Ms. Kyle Restina, New York State Department of Health</td>
<td></td>
</tr>
<tr>
<td>Session V - September 26th</td>
<td>Social Ecological Model: Part I – Introduction of the social ecological model and The Individual; Book Chapter Discussion II – The Evolution of Obesity</td>
<td></td>
</tr>
<tr>
<td>Session VI - October 3rd</td>
<td>Social Ecological Model Part II – The Family; Book Chapter Discussion III – Overweight – What Kids Say</td>
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<tr>
<td>Session VII - October 10th</td>
<td>Social Ecological Model Part III – Childcare and school environments Book Chapter Discussion IV – School Lunch Politics</td>
<td></td>
</tr>
<tr>
<td>Session VIII – October 17th</td>
<td>Social Ecological Model Part IV – The Community – Access to Healthy Foods 2 pm Guest speakers: Sarah Pechar and Natalie Schubel – HealthShares program</td>
<td></td>
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<tr>
<td>Session IX - October 24th</td>
<td>Special Food Day Event</td>
<td></td>
</tr>
<tr>
<td>Session</td>
<td>Dates</td>
<td>Activities</td>
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<tr>
<td>---------</td>
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<td>-----------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Session X - October 31st | Social Ecological Model Part V – The Community - Physical Activity  
Book Chapter Discussion V - *Last Child in the Woods*; Early Dismissal for Park Audit Assignment | Self and Peer Assessments from Food Day Event due in Blackboard by 5 pm |
| Session XI - November 7th | Social Ecological Model Part VII Society continued, Policy – Physical activity policy;  
2:45 pm Guest speaker: Jennifer Ceponis, Senior Transportation Planner, Capital District Transportation Committee |  |
| Session XII - November 14th | Social Ecological Model Part VIII Society continued, Policy – Nutrition policy  
Book Chapter Discussion VI - *Food Politics* | Park Audit Assignment due in Blackboard by 5 pm |
| Session XIII - November 21st | Social Ecological Model Part VI: Society – Media and childhood obesity; The future of childhood obesity prevention – Early Dismissal for Group Project |  |
| Session XIV - November 28th | No Class: Thanksgiving Break |  |
| Session XV - December 5th  
December 12th | Individual Assessment; Potential Time for Group Project Meetings (after in-class assessment)  
No class – Final exams begin | In-class individual assessment  
Due in Blackboard by 5 pm – Each team member must submit the final version of the assignment by the deadline |
| December 16th | Final Practical Project Due |  |
READINGS – Note: All readings should be read prior to the class session, and all readings are available on Blackboard or at the provided URL.

August 29th Class Session I: Introductions and Introduction to Childhood Obesity

Please review the course syllabus (found on Blackboard) prior to class and come to class with your questions regarding the course.

September 5th: NO CLASS – ROSH HASHANAH

September 12th: Class Session II: The Public Health Burden of Obesity and Childhood Obesity:


Book Chapter for Discussion:


September 26th Class Session IV: The Individual

CDC Division of Nutrition and Physical Activity. (2007). Research to Practice Series No. 4: Does breastfeeding reduce the risk of pediatric overweight? Atlanta: Centers for Disease Control and Prevention.


Book Chapter for Discussion:

October 3rd Class Session V: The Family


Book Chapter for Discussion:
**October 10th Class Session VI: Child Care and the School Environment**


**Book Chapter for Discussion:**


**October 17th Class Session VII – The Community – Access to Healthy Foods**


**October 24th Class Session VIII – Special Food Day Event**

Activities to be discussed and determined as a class.
October 31st Class Session IX – The Community – Physical Activity


Book Chapter for Discussion:

November 7th Class Session X: Society, Introduction to Policy and Physical Activity Policy


Skim the National Physical Activity Plan at:

November 14th Class Session XI – Society, Nutrition Policy


Book Chapter for Discussion:
November 21\textsuperscript{st}  Class Session XII – Media and children’s obesity risk (continued from November 14\textsuperscript{th}); The future of childhood obesity

Yale Rudd Center. (August 2013). Youth-focused food marketing: Examining the spending trends. Issue brief. Accessible at:  
http://www.bridgingthegapresearch.org/_asset/4z16fw/BTG-Rudd-Food-Marketing-brief_FINAL.pdf


HPM535 Community Based Public Health
Approved by SPH Academic Committee 2008

Course number: 7335
Instructor: Janine Jurkowski, PhD, MPH Associate Professor
Email: jjurkowski@albany.edu
Phone: 518-402-0420
Class Meeting: Tuesday 9:00-11:50, in Room C1
Office Hours: Tuesday 2-4, or by appointment. Please email me for arranging appointments.
No Prerequisites but it helps to have taken HPM 525.
Required Reading Material: Course readings will be provided either in class or electronically through Blackboard. It is highly recommended that students purchase or review on-line resources for the American Psychological Association Style or Numeric writing style for the course assignments.

Course Description:
The CDC, NIH, and APHA consider understanding and working in communities essential for improving the health of populations. A central theme to community-based public health is that social, cultural and physical environmental factors as well as systemic factors are important for health equity among communities. These factors can be assets for health promotion but may also hinder health promotion if not considered. Communities are often disenchanted from a long history of government, non-profit and corporate intervention. When working with communities all these factors need to be considered to facilitate relationship building and sustainable health promotion. This course teaches a participatory approach to working with communities and strategies and methods for assessing communities in a way that informs programs and interventions that aim to address the complex factors that create health inequity. This course draws emphasis away from individual approaches to health promotion to address saliency and sustainability.

This service learning course requires students to be actively involved in the community within which they are working. Therefore, being available for meetings, tours and presentations will be reflected in your grade. As a student of the University at Albany School of Public Health taking this course, you are representing the school in the community. Your actions and words will reflect upon all of us. Be prepared, be respectful and be open-minded.
These specific learning objectives. You will be able to:

1. Engage community representatives in solving public health problems.
2. Use a community-based public health approach to public health promotion.
3. Explain the difference between community-placed, community engaged and community-based participatory practice.
4. Conduct a mixed method community health assessment.
5. Develop partnerships and/or coalitions to address a public health problem.

These specific competencies will be covered.

1. Identify individual, organizational, and community concerns, assets, resources and deficits for social and behavioral science interventions.
2. Critique your role as a public health professional and how to successfully work with communities.
3. Describe the role of social and community factors in both the onset and solution of public health problems.
4. Describe the roles of history, power, privilege and structural inequality in producing unequal communities.
5. Explain why cultural competence alone cannot address health disparity.
6. Use the basic concepts and skills involved in culturally appropriate community engagement and empowerment with diverse communities.
7. Apply the principles of community-based participatory research and community assessment to improve health in diverse populations.
8. Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.
9. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.
10. Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served.
11. Describe alternative strategies for collaboration and partnership among organizations, focused on public health goals.
12. Engage in dialogue and learning from others to advance public health goals.
13. Use collaborative methods for achieving organizational and community health goals.

14. Apply social justice and human rights principles when addressing community needs.

15. Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.

16. In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.

17. Apply participatory and collaborative approaches when working with communities.

18. Conduct a community assessment using multiple data collections methods that are appropriate based on the information sought.

19. Describe empowerment strategies that ensure active participation of community members.

20. Use the basic concepts and skills involved in culturally appropriate community engagement and empowerment with diverse communities. 

21. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.

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1. **August 27th  Introduction to Community Health**

   **Discussion:** Define community. What is community health? How different is a community health approach from a typical public health approach?

   **Activity:** Read checklist

   **Activity:** Privilege walks—Discussion; how does your status, demographics affect; 1) how you think about communities and populations? 2) your interactions/perceptions from others within communities?

2. **September 3rd  Social and cultural determinants of health**


**Exercise on developing partners—Groups given a public health concern and a community. The group discusses who they would bring to the table. What do you as public health professionals need to consider before approaching them?**

3. **September 10th Building Capacity of Communities through Collaborative Public Health**


**September 14th- 1-4pm- Arbor Hill/West Hill bus tour** This tour is to teach you about the historical and other contexts of the neighborhoods and to help you understand them geographically. If you cannot attend due to the religious holiday, please make sure you have a team member who is attending. If no team member can go, please let me know. There are no specific points lost for not attending the bus tour event. This is one part of the group project and class participation, but there will be plenty of opportunity to participate in the course activities. All grades in these areas are based on a semester of work. It is a part of the larger grade and your grade will reflect your overall participation. If there is still a question, please contact your instructor.
4. September 17th  Community Assessment Strategies #1: Figuring out How to Get the Information Needed.

GUEST SPEAKER: Arlene Way, President, Arbor Hill Development Corporation


Sara Rosenbaum, JD, The George Washington University School of Public Health and Health Services’ Department of Health Policy.

http://nnphi.org/CMSuploads/PrinciplesToConsiderForTheImplementationOfACHNAProcess_GWU_20130604.pdf


| In Class Activity: Review data provided on Arbor Hill and West hill, what additional information do you want to obtain? |

5. September 24th  Community Assessment Strategies #2: Existing data

Homework Assignment with reviewing data websites: Prior to class, spend a couple hours reviewing the websites. Pick a population and a topic and bring in a table with data on the population and topic. Provide an interpretation of this data and suggest implications for addressing the health issue. This interpretation should be no more than 1 page single spaced with minimum 11 font and 1 inch margins. 5 points


Census and American Community Survey data
http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml

National Health Data
http://www.cdc.gov/DataStatistics/

NY State Statistics vital and health outcome statistics
http://www.countyhealthrankings.org/

NY State Behavior and related data
Behavioral Risk Factor Surveillance Survey
http://www.health.ny.gov/statistics/brfss/

Pediatric nutrition data
http://www.health.ny.gov/statistics/prevention/nutrition/pednss/

Youth Behavior
http://www.cdc.gov/healthyyouth/yrbs/

| In Class Activity: Go to computer lab and look up data that you think would help you understand the health concern in that community. Take notes and come back and discuss in class. 20 minutes to find data. |

6. October 1st Community Assessment Strategies #3 Community Mapping and Surveys


Goodman, RM, Speers, MA; McLeroy, K; Fawcett, S; Kegler, M; Parker, E; Rathgeb Smith, S; Sterling, TD; Wallerstein, N. (1998). Identifying and defining the dimensions of community capacity to provide a basis for measurement. Health Education & Behavior. 25(3):258-278.


7. October 8th    Community Assessment Strategies #4  Focus groups


Focus Group Fundamentals Methodology Briefs: Retrieved from:  
http://www.extension.iastate.edu/publications/pm1969b.pdf

Exercise—Get in groups and develop focus group guide, inclusion criteria, and recruitment strategies, hand in. Best two conducts mock focus group next week.

8. October 15th    Community Assessment #5: Key Informant and In-Depth Interviews

GUEST SPEAKER: Patricia Bowie, Magnolia Place Project  
http://www.slideshare.net/jebyrne/magnolia-ppt

Other readings related to guest speaker are on Blackboard

Section 4: Key Informant Interviews. UCLA Center for Health Policy Research.  

Division for Heart Disease and Stroke Prevention, National Center for Chronic Disease Prevention and Health Promotion. 07/09/2007.

Exercise--Mock focus groups

9. October 22nd  Community Assessment #6: Photovoice as an Assessment Technique for Community Health

Pages 8-18
Bottom of page 31-34
Page 40 Blue Box Steps 5-7


Exercise--Mock Interviews

10. October 29th  Midterm

11. November 5th Experiences with Collecting Data in Communities **Class lecture from 10:45-11:50**
GUEST SPEAKER: Dwight Williams, Clinical Associate Professor, UAlbany SPH. He will talk about his experience collecting data in Albany. Attendance will be taken.

12. November 12th  Healthy Communities from an Urban Planning Perspective
GUEST SPEAKER: Corianne Scally, PhD, Department of Geography & Planning

http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70450
Richard Jackson. Designing Healthy Communities.
http://media.albany.edu:8080/ramgen/cellar/geography_and_planning/scally/social_policy_in_concrete.rm. Need Real Media Player to view it. This is free.
13. November 19th Cultural Competence in Community Health
   Guest Lecturer: Wilma Waithe, PhD Director of the Office of Minority Health, NY State Department of Health


14. November 26th Building Partnerships and Community Coalitions
   Madeline Kennedy, Center for the Excellence in Aging, Healthy Hearts on the Hill
   Charles Welge, Albany County Health Department


16. December 3rd
   Executive Summary for Report in Class. Collaborative work to combine groups into one Report. Everyone bring electronic and paper version of their draft report.

17. December 10th
   Assessment Presentations
   Evaluation and Reflection period
   Final Assessment Report due electronically to professor

Class Assignments:

Bus Tour: September 7th, 1-4pm.
One page Problem Statement (5 points): After reviewing the websites presenting statistics and administrative data. Pick a population and a health issue. Your assignment is to put together a concise table with data on the population and health issue that support why you chose the population and issue. Provide an interpretation of this data (do not just repeat what is in the table). You need to justify why the health topic is a problem and a problem for that specific population. Using all available information you can find, suggest implications for addressing the health issue. (NOTE: You may not find data on your exact target population. However, make a judgment about why this data can be used to talk about your population and talk about its limitations for this.) This interpretation should be no more than 1 page single spaced with minimum 11 font and 1 inch margins. This is due at the beginning of class on September 24th.

Midterm Exam (30 points): The exam will be multiple choice and short answer. It will be based on all the readings, class presentations, and discussions from the first day of class through the week before the exam. October 29th in class.

Proposed Assessment Outline Group Assignment (5 points)
1. Justification of the problem in West Hill/West End. Justification—Individual assignment, You must describe the public health topic/behavior and a description of the target community. It is important to JUSTIFY why West Hill/West End is a high need community and therefore should be a target for intervention and why the public health issue is relevant to that community. The 5 points--2 pages maximum, double spaced and no smaller than 11 font and 1” margins. Provide references and proper citations.
2. 2-3 Page Outline of Assessment-Your group must, briefly describe the purpose of conducting your community assessment (no more than two to three sentences). Then you must describe the type of data you are looking for in your assessment. List/outline the potential data sources for existing data and then what data is/you think may be missing and why you want to collect that additional information. Then outline the methods you will use to collect more data and a brief justification for why you will be employing these methods. Bullet pointsis fine, but must be readable. Maximum 3 pages 11 -12 font and 1” margins. Reference necessary and separate page. Due November 12nd in class.

Community Assessment Report (35 points): This project will be done in groups of no more than 5 people. Your previous assignment must be added to this assignment in more detail. You must put into report format the details from the above assignment information. Sections (TBD by partnership):
Introduction—Introduce the community with census and other data and a brief history of the area. Provide an introduction to the general health of the community. Describe the purpose of the assessment and a justification for the assessment method you used.

Methods--Provide details for your setting. Create a methods section describing the data sources for the existing data, state what was missing. Then describe what additional data you wanted and why you chose the method you used to collect that data. Please cite the literature supporting your chosen data collection method. Finally describe recruitment strategy and method you used.

Results--Describe the sample and results and any existing data. Consider including tables, graphs, and charts for easy of understanding. Think about presenting data for non-public health professionals.

Discussion--Describe the public health problems/behaviors, etc. you identified—highlighting and synthesizing findings. Describe your limitation and recommendations for further assessment. Finally, provide a brief description for how you would intervene (will you use CBPR or community health workers?). You may want to compare your community data to state or national level data or to other groups to justifying intervening in that community for that public health problem. The paper should be no more than 20 pages not including references and it should be written in a standard writing style such as APA or AMA format with references and citations and tables and charts if appropriate. Please be fair to your team members. Each member should contribute their fair share to the assignment. Paper due December 3rd.

Students are required to sign a written agreement that is attached to all written assignments when they are handed in.

Class Presentation of Assessment: Considered a part of class participation, especially for those who are normally quiet. Students will present a summary of the community assessment project. This presentation will be a 10-15 minute presentation describing your assessment. Please include a methods section describing how you collected your data. Also, provide a critical reflection of your experience—challenges, lessons learned, assets, etc. December 10th. (3 points)

Class participation: (0 points total): The class participation grade is based on active participation and critical discussion. In order for this class to be interesting and a full learning experience, students need to complete the class readings prior to the class session and be prepared to participate in class discussion and exercises. Missing more than two classes in the semester without coming to me with a valid reason PRIOR to the missed
class (unless an emergency) will result losing your points. This is the instructor assessment of participation. Now woven into the reflection paper and peer review. Please see instructor for special circumstances.

**Reflection paper: Due December 10th.** Reflect on your experience participating in this quasi service learning course. Think about the positives and pitfalls. How did you learn from these experiences? What was different compared to a traditional class in terms of your learning and applying what you learned? How has this prepared you for your career? See rubric for details. (7 points)

**Peer Review Group Participation: (15 points total):** The peer review participation grade is based on active participation and critical discussion in all group activities inside and outside class. This includes in-class work, writing, presentation development, community events, data collection, etc. Students must assess each other across the whole semester on overall contribution to your team work. So if someone misses one event but is active and involved at other community events, they should not be penalized for the one event. Students must be thoughtful and constructively critical of each other.

**Late or Incomplete Assignments-** Assignments are due at the beginning of class on the due date. If you hand it in later between the end of class on the date due and the Friday after the due date by 5pm, you will start with a 90%. If you hand it in after Friday at 5pm, then it will be considered a zero unless a student requests an incomplete. An incomplete must be requested 24 hours prior to the beginning of class the day the assignment due. Incompletes will only be granted for special circumstances. See the professor for details on the process and timeline for completing an incomplete. If the incomplete is not handed in by the timeline granted, the result will be a failure grade for the assignment.

**Academic Dishonesty:**
Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty. In accordance with University policy, any instance of academic dishonesty (please see the Community Rights and Responsibilities booklet for definitions) will result in an automatic failing grade for the assignment and potentially the course as well as potential sanctions by the school and university.

**Plagiarism:** [http://library.albany.edu/usered/plagiarism/](http://library.albany.edu/usered/plagiarism/) Plagiarism in any form will be considered an instance of academic dishonesty. As per university policy, you must correctly cite outside material in your papers. Students read other people’s ideas when writing papers for graduate courses. Ideas from texts, lecture, the Web, and class discussions are often incorporated into students’ writing. Plagiarism is using others’ ideas
and words without clearly acknowledging the source. Use **APA or AMA style** to ensure that you are properly citing articles in your paper and bibliography. Feel free to consult with the professor to get clarification about potential plagiarism issues PRIOR to handing in your assignment.

- The professor will check your **entire** paper to identify any potential forms of plagiarism.
- All students will sign an agreement form and hand it in with your assignment. It is a contract stating that you understand what plagiarism is and that you did not engage in it. As per University policy, the burden on avoiding plagiarism falls **solely** upon the student.
Instructor Information

Courtney Mulson  
smulson@nycap.rr.com  
(518) 573-2779  
Office Hours: Tuesday 4:30-5:30 or by appointment

Course Time and location – Tuesday 5:30-8:20 PM

Pre-requisites – n/a

Course Description

This course covers significant issues in the areas of working capital management, capital financing, cost analysis, financial statements, budgeting, reimbursement, managed care contracting and tax issues. The course has been developed to provide students opportunities to interpret, analyze and solve problems through in-class discussion and evaluation of pertinent financial issues. An emphasis is placed on uses of information generated through accounting and financial management systems to manage operations in health care organizations. To promote such understanding, students receive problem oriented assignments and examinations in which they can apply knowledge and reasoning techniques gained from this and other courses to reach logical decisions that would effectively control operations in a healthcare organization.

Course Learning Objectives and Competencies

Learning Objectives:

- Acquire the ability to interpret and analyze financial statements of health care provider organizations
- Understand concepts of revenue, expense and capital budgets
- Develop a basic understanding of working capital management
- Be able to communicate financial data to a professional and lay audience
- Perform financial projections and analysis
- Understand and use financial reports for decision making
- Understand issues affecting tax exempt entities
Understand the basic concepts of managed care

Competencies:

This course teaches finance and accounting topics and skills that relate to competencies considered critical by the Association of Schools of Public Health for all MPH graduates.

Readings


Required Readings - Articles dealing with different topics in the course will be available through the University Blackboard system. These articles may be required reading for the course and will supplement discussions in class.

Other Course Requirements – n/a

Assignment Descriptions

Ratio Analysis Assignment  10%
Cost Accounting/Charge Setting  10%
Budgeting Exercise  10%
Capital Expense Exercise  10%
Mid-term exam  25%
Final exam  25%
Class participation  10%

Exams - Both the midterm and final exam will be in-class, closed book exams.

Projects/Exercises - There will be a series of exercises pertaining to various topics contained in the course. The due dates for each assignment are indicated below in the course outline. The assignments are individually based and not group projects. Failure to hand in the assignment on the due date will result in a grade of zero for that project.

Policy on Academic Integrity

Students are strongly encouraged to complete all assigned work during the semester. Course withdrawal will not be granted after the formal withdrawal date noted on the semester calendar. Incompletes must be requested and will be granted only in extraordinary circumstances, most often in personal medical emergencies of an extended nature (please note, incompletes are not appropriate for things such as the student having a heavy workload, unanticipated job responsibilities, the course being harder than anticipated, not handing required assignments in on time, etc.) Any incomplete granted
must be removed by the end of the following semester. Failure to do so will result in a failing grade. Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty, course withdrawal, etc.

Please note that academic dishonesty, in any of its forms, will not be tolerated. In accordance with University policy, any instance of academic dishonesty (please see the Community Rights and Responsibilities booklet for definitions) will result in an automatic failing grade for the course (i.e., a grade of E), reporting of the incident formally to the SPH Dean’s Office and Office of Graduate Studies, and potential sanctions by the school and university. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor.

Other Class Policies

Attendance - Attendance is strongly encouraged and will be taken into account for your participation grade.

Electronic Devices - Students are asked to turn off electronic devices (including cell phones) before coming into class. Laptops are permitted should students wish to use them for note taking but they are not to be used for connecting to the internet during class.

Assignments - All assignments are due on the time and date indicated in the syllabus. No exceptions will be made.

Class Participation - Class participation is 10% of your final grade and is based on attendance and quality of engagement during the class. Participation will be critiqued on the quality (substance) of what one has to say, relevant to the material we are discussing that night in class.

Course Schedule

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<tr>
<th>Week 1 (Jan 28)</th>
<th>Introduction to the Course</th>
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<td>Course Expectations</td>
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<td>Nowicki – Chapter 1</td>
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<tr>
<th>Week 2 (Feb 4)</th>
<th>Organization of Financial Management &amp; Tax Status</th>
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<th>Week 3 (Feb 11)</th>
<th>Financial Reporting</th>
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<td>Nowicki – Chapter 14</td>
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<td>Financial Statement Review</td>
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Week 4 (Feb 18)  Financial Reporting  
Nowicki – Chapter 14

Financial Statement Review

Week 5 (Feb 25)  Third Party Payment  
Nowicki – Chapter 4

Week 6 (Mar 4)  Medicare & Medicaid  
Nowicki – Chapter 5

Midterm Review

Ratio Analysis Assignment Due

Week 7 (Mar 11)  MIDTERM

NO CLASS ON MARCH 18TH

Week 8 (Mar 25)  Cost Accounting  
Nowicki – Chapter 6

Week 9 (Apr 1)  Gross Charges, Budgeting  
Nowicki – Chapter 7, 12

Week 10 (Apr 8)  Capital Budgeting  
Nowicki – Chapters 13

Cost Accounting/Charge Setting Exercise Due

NO CLASS ON APRIL 15TH

Week 12 (Apr 22)  Accounts Receivable, Working Capital & Materials Management  
Nowicki – Chapter 8, 9, 10

Budgeting Exercise Due

NO CLASS ON APRIL 29TH

Capital Budgeting Exercise Due
Week 14 (May 6)  Wrap-up, Final Exam Review

Week 15 (May 13)  Final Exam due by email to smulson@nycap.rr.com

Course Reading List – n/a
**Course Overview:**

The application of economics to health care departs from the historical view that health care is outside normal market transactions. Only recently has health care been viewed as an industry, and acknowledged that economic concepts are as relevant to health care as they are to any other industry. In many ways, these attitudes are a reaction to the troublesome spiral of cost inflation that has plagued health care delivery for the last four decades. Resulting from a number of changes that have occurred in the socioeconomic environment of the health care system, there is greater recognition that appropriate economic judgment is essential at all levels of decision making.

Economic analysis is required not only at the decision level of social policymaking and at the institutional level in the struggle to balance budgets, but also at the micro level, as providers and consumers must make tough decisions about how best to use their resources. More and more, health services are critically examined to determine whether the benefits received from the health care services are worth the resources spent in obtaining the benefits. Such scrutiny is an essential part of the overall effort to improve the level of efficiency in the health care delivery system. This efficiency is analyzed under a variety of social and governmental structures.

This course is designed to introduce basic economic theories, concepts, and tools and apply them specifically to the health care sector under a variety of contexts. In this course, the structure, organization, activities, functions, and problems of health and medical care are considered from a specific point of view— that of the economist. This economic point of view is based on three fundamental observations:

1. resources are scarce relative to wants;
2. resources have alternative uses, making choice necessary; and
3. Unique solutions may not exist, since there are significant variations in the relative importance that people in society attach to wants.

Therefore, the basic economic problem then becomes how to allocate scarce resources so as to satisfy best human wants (individual and/or societal). The purpose of this course is to enhance your
ability to use the theories, concepts, and tools of economic analysis to evaluate, systematically, the features, utilization patterns, delivery mechanisms of the health care system, to ensure that more efficient and equitable allocation decisions are attained. This analysis focuses on a variety of health care systems and how the governmental role in these systems varies in the corrections in the market and in the provision and consumption of health care services.

The structure of this course is fully online.

Course Competencies:
This course teaches topics and skills that relate to competencies considered critical by the Association of Schools of Public Health (ASPH).

The following Health Policy and Management Competencies will be achieved at the end of the course:
1. Describe the legal and ethical bases for public health and health services
2. Discuss the policy process for improving the health status of populations
3. Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives

The following Cross-Cutting Competencies will be achieved at the end of the course:
1. Differentiate among availability, acceptability, and accessibility of health care across diverse populations (Diversity).
2. Apply social justice and human rights principles when addressing community needs (Leadership)
3. Apply basic principles of ethical analysis (e.g. the Public Health Code of Ethics, human rights framework, other moral theories) to issues of public health practice and policy (Professionalism)

Learning Objectives:
1. Compare and contrast the characteristics of the United States health care system with those of at least one other country;
2. Relate the critical decisions that have to be made in any system, and the implications of making those decisions under conditions of scarce resources;
3. Develop specific economic tools that can be used to improve decision making in the health care industry under capitalist, collectivist and developing economies;
4. Convey how health care services are organized and financed in the United States and other select countries, and the incentives inherent in each organizational and financing structure;
5. Develop tools to evaluate the implications of the various health care financing and delivery models given ethical and cultural considerations
Books for purchase:

Required:


Recommended:


Course Requirements:
To ascertain if the purpose and objectives of the course have been achieved, exams, class exercises and analytic reports will be used. Course grades will be determined by the following:

1. Three discussion papers 30%
2. Exercises 10%
3. Participation 10%
4. Midterm Exam 20%
5. Final exam: 30%

Details Concerning Course Components:

Discussion Papers. Three discussion papers are assigned during the semester, which allow students opportunities to apply economic tools discussed in class to evaluate real-world policy proposals, current debates, or other phenomena presented in the media. Students may develop a discussion paper using material obtained from selecting a health-related news release. Students may obtain a news article (e.g., New York Times web links, etc.) and will need to have it reviewed by me to determine the appropriateness of the topic and/or method of analysis for the course prior to developing the discussion paper. Many of these releases are opinion papers, so your thoughts concerning the development of the argument presented is required in your analysis. Your reaction should include an assessment of the argument’s economic feasibility and how the economic impacts complement or contradict any social, political or ethical arguments presented in the piece. Your reaction should be clearly linked to any relevant economic theory presented in class and a brief literature search related to the article’s topic and your analytical approach used to evaluate the article’s assumptions or conclusions. For example, if the article proposes that the government should impose price ceilings on prescription drugs, your paper should:
1. briefly summarize the related literature in the course outline and elsewhere concerning drug price inflation and the impact of price controls on economic markets,
2. briefly summarize the position taken by the author of the article, and
3. present your reaction to the article that includes whether or not the argument and conclusions are sound from an economic perspective.

With your paper, attach the short bibliography related to the topic and your analytical approach (e.g., consumer theory, producer theory, etc.) used to critique the argument, and a copy of the article you used as the basis for your paper with the date and time you accessed the article from the web site.

Other course components: Weekly exercises are assigned to assess students’ understanding of key concepts taught in the course. All assignments will be on the BLS and deliverables will also be submitted on-line. Assignments are graded, and solutions to all assignments are discussed in class, in handouts or on-line. Late submissions of the assignments are unacceptable, and will receive a failing grade.

The midterm and final examinations are based on class notes, assigned readings, and assigned exercises. The final examination is cumulative.

Students are expected to read the required readings prior to class and be able to provide input during on-line discussions. Therefore, attendance is also expected.

CLASS POLICIES
ATTENDANCE
Attendance is expected. I factor in class-participation in your final grade. Information about the exam, assignments, etc. will be on-line. If circumstances require you to miss a session, please contact me to find out what transpired. I do not provide make-up tests; if you had a legitimate reason to miss the final exam, you will have to make it up at my convenience.

ACADEMIC INTEGRITY
As stated in the University’s Community Rights and Responsibilities, the following forms of conduct are deemed as academically dishonest acts and will not be tolerated: plagiarism, cheating on exams, multiple submission of the same work, forgery, sabotage, unauthorized collaboration with other students, falsification of work, bribery or use of purchased research service reports without appropriate notation, and theft, damage, or misuse of library or computer resources. Attempts to commit such acts shall also constitute academic dishonesty. Students assume full responsibility for honesty in academic exercises. In accordance with University policy, any instance of academic dishonesty will result on an automatic failing grade for the course and potential sanctions by the School and University. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. There are no exceptions. For more information, please consult the link: http://www.albany.edu/judicial/docs/CRR2007-2010.pdf

DISABILITY
If you are in need of any kind of assistance or consideration, please do let me know.
Schedule of Topics and Readings: Additional topics may also be included, time permitting.

Module 1: Health Economic Theories and Methods

**Week 1 (week of August 36, 2013):** Overview of the course. Students are sensitized to the types of issues health economists address and the role of health economics in policy-making from an international perspective. Basic graphical tools, regression methods and concepts used in the course are also presented.

Readings:
M&N Chps 1 & 2
Dewar, Chps 1 &2.

**Week 2 (week of September 2, 2013):** No Class. Holidays.

**Week 3 (week of September 9, 2013):** Topics in economic evaluations are introduced. Issues addressed are the basic theoretical arguments used in evaluations, practical steps in economic evaluations, and the use of these methods in making sound choices.

Readings:
M& N Chps 9, 12,13 .
Dewar, Chp 14.

**Week 4 (week of September 16, 2013):** An exploration of efficiency in the health care system in the U.S. is performed. Comparisons of alternative system configurations are also presented.

Readings:
M&N Chp 19.
Dewar, Chp. 15
Module 2: The Consumer’s Problem

**Week 5 (week of September 16, 2013):** The general framework for the demand for health care is presented to explain how consumers choose affordable combinations of goods and services. The market for health insurance in the U.S. is also discussed, including the role of society in the health care economy and the role of third party payments for medical care.

   Readings:
   M&N Chps. 2,3
   Dewar, Chps 4,5

**Week 6 (week of September 23, 2013):** The global portrait of income distribution and the reasons why some countries fail to thrive are presented. Implications for health and health care are also discussed.

   Reading:
   Sachs: Chps 1,3

**Week 7 (week of September 30, 2013):** Solutions for ending poverty and improving health and health care for the world populations will be considered.

   Reading:
   Sachs: Chps 12,13

Module 3: The Producer’s Problem.

**Week 8 (week of October 7, 2013):** Models of firm behavior are introduced and the determination of efficient production levels is performed. Impacts on the costs of delivering health services are also presented.

   Reading:
   M&N Chps 4,5
   Dewar, Chp. 6

**Week 9 (week of October 14, 2013):** Midterm Exam
Module 4: The Health Care Market and the Role of Government

Week 10 (week of October 21, 2013): Alternative market structures are presented that are dominant in the health care market.

Reading:
M&N Chp 15

Week 11 (week of October 28, 2013): Market imperfections and the role of government in correcting for supply or demand failures are presented.

Reading:
M&N Chp 8, 17
Dewar, Chps. 9, 10

Module 5: Comparative Health Systems

Week 12 (week of November 4, 2013): A description of the common features of health systems around the world is presented with an introduction to variation and performance across systems

Reading:
M&N: Chps 20,21

Week 13 (week of November 11, 2013): Myths and Realities to ending Poverty globally are explored as well as challenges ahead.

Reading:
Sachs: Chps 16,18

Week 14 (week of November 18, 2013): The economics of health care reform efforts are considered. Reforms abroad will be considered as well as the view from abroad of the U.S. reform effort.

Reading:
M&N Chp 25

Week 15 (week of November 25, 2013): No class. Holiday.

Week 16 (week of December 2, 2013). Review session.

Week of December 9, 2013: Final Exam.
Course Title: Health and Human Rights: an Interdisciplinary Approach

Course #: Cross listed/shared resource -- HHPM 486/586 RPOS 486/586

Term: Fall, 2014

Day/Time: TBA

Location: TBA

Professor: Arash Alaei, MD; Kamiar Alaei, MS, MD, MPH

Assistant: Elizabeth Gray; eqgray@gmail.com

Contact: kalaei@albany.edu, aalaei@albany.edu; (518) 442-2736, (518) 442-2735

Office Hours: TBA

Course Description: This course takes an interdisciplinary approach to health and human rights and the contemporary challenges and solutions associated with them. The course will be taught by physicians and human rights champions, with guest lectures from experts in public health, philosophy, social welfare, law, gender studies, and public administration, among others. Through lectures, discussion, and case studies, students will develop a broad theoretical understanding of health as a human right, become familiar with legal and policy frameworks to support public health, and acquire skills in the application of these concepts and the implementation and evaluation of solutions to our modern health challenges.

Course Structure and Requirements: Students will be assigned readings in preparation for weekly lectures and will be expected to submit a short response to the readings. Each week there will be a one-hour lecture followed by a facilitated discussion. Students will then be assigned a relevant case study, where they will work in small groups to analyze the challenges of the case and develop applicable solutions. Students will present their findings to the class at the end of each meeting. There will also be two major evaluations, a midterm exam and a grant proposal, designed to assess understanding and application of course material. Near the start of the semester students will choose the topic of their grant proposal, and students will prepare this proposal throughout the semester through periodic planning assignments related to the skills presented in each class meeting.

Course Objectives:

Upon completion of this course, students should:

- Define and recognize the theoretical, moral, sociological, practical, and legal considerations that relate to promotion of public health as a human right;
- have the skills to critically analyze public health challenges, and develop concrete, implementable, adaptable, evaluable solutions;
- identify and describe how human rights law can be an important tool in addressing current global health challenges in specific contexts;
- assess the right to health through other human rights, as framed by international treaties and covenants, in particular in the context of places of deprivation of liberty;
• be familiar with contemporary domestic and international public health concerns;
• appreciate and contribute to the importance of an interdisciplinary approach to public health;
• have the skills to develop an effective health intervention and construct a persuasive grant proposal.

It will also prepare students with the following ASPH Competencies:

Health Policy and Management:

D. 2. Describe the legal and ethical bases for public health and health services.
D. 3. Explain methods of ensuring community health safety and preparedness.
D. 4. Discuss the policy process for improving the health status of populations.
D. 5. Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives.
D. 10. Demonstrate leadership skills for building partnerships

Social and Behavioral Sciences:

E. 2. Identify the causes of social and behavioral factors that affect health of individuals and populations.
E. 3. Identify individual, organizational and community concerns, assets, resources and deficits for social and behavioral science interventions.
E. 4. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.
E. 5. Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.
E. 9. Apply ethical principles to public health program planning, implementation and evaluation.

Diversity and Culture:

G. 5. Use the basic concepts and skills involved in culturally appropriate community engagement and empowerment with diverse communities.
G. 6. Apply the principles of community-based participatory research to improve health in diverse populations.
G. 7. Differentiate among availability, acceptability, and accessibility of health care across diverse populations.
G. 8. Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.

G. 9. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.

G. 10. Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served.

Leadership:

H. 4. Engage in dialogue and learning from others to advance public health goals.

H. 5. Demonstrate team building, negotiation, and conflict management skills.

H. 8. Apply social justice and human rights principles when addressing community needs.

H. 9. Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.

Program Planning:

K. 2. Describe the tasks necessary to assure that program implementation occurs as intended.

K. 4. Explain the contribution of logic models in program development, implementation, and evaluation.

K. 5. Differentiate among goals, measurable objectives, related activities, and expected outcomes for a public health program.

K. 6. Differentiate the purposes of formative, process, and outcome evaluation.

K. 7. Differentiate between qualitative and quantitative evaluation methods in relation to their strengths, limitations, and appropriate uses, and emphases on reliability and validity.

Grading:

This course is A-E graded and the grades are determined based on the following criteria:

Reading response essays: 30%

Planning assignments: 25%

Attendance/Participation: 10%

Midterm: 15%
Grant proposal: 20%

Reading Response Essays: In preparation for each lecture students will be expected to complete readings assigned by the lecturer found in the reading list below and to write a short (250-500 word) response summarizing and reflecting upon the readings. All readings will be posted on Blackboard, and any changes or additions to the readings will be posted at least one full week before the response essay is due. Papers that are submitted through Blackboard at 5pm the evening before the class meeting will be graded as satisfactory or unsatisfactory. Papers turned in after 5 pm but before class are accepted and will receive feedback, but will automatically receive a grade of unsatisfactory. Satisfactory essays receive full credit, and one unsatisfactory grade may be dropped. There will be 11 of these assignments total, worth 3 points each. One essay can be dropped, or students can earn 3 points extra credit if they successfully complete and receive a grade of satisfactory on every assignment during the semester. Please note that response essays should be typed directly or copied and pasted into the submission box, not attached as a file.

Case Studies: Each week students will receive a case study and a set of associated questions. Students will work together as a group to answer these questions, which will involve an assessment of the public health challenge and potential solutions. Active participation in these in-class case study group assignments will be factored into the participation grade.

Participation: Active reflection, sharing and defending of ideas, and intellectual collaboration are essential to the progress and development of health and human rights. As such, students are expected to engage with lecturers and fellow students, participate in discussion, work cooperatively in-group work, and orally present and defend their findings. This will be assessed by readiness and productivity, measured by in-class tasks, including the case studies.

Midterm: The midterm will be in-class, open-book exam focused on the application of relevant material. Students will be expected to be familiar with general theories, concrete concepts from lectures and be able to meaningfully apply these concepts in a practical context.

Planning Assignments: The skills developed in the case studies will be applied to the students’ chosen public health intervention and they will be asked to do planning assignments throughout the semester based on those skills acquired toward their grant proposal. There will be five (5) of these assignments throughout the semester worth 5 points each, graded 0-5. Students will receive comments and will have the opportunity to revise these sections for their final submission of the grant proposal. Graduate students will be assigned additional readings or trainings to prepare for these planning assignments to give them the technical knowledge that they will need to complete their grant proposal (i.e. USAID’s Training e-modules on How to Work with USAID).

Grant proposal: For the final assessment, students will be asked to work individually to write a grant proposal applying the concepts learned throughout the semester. Given that concise and persuasive writing is an essential skill used in writing grant proposals, and that most grant guidelines indicate a strict page limit, the proposal may not exceed fifteen pages. While there is no page limit minimum, if a proposal were significantly shorter than fifteen pages it would be unlikely that sufficient information and discussion had been included. The grant proposal will be on a topic of the students’ choice (some suggestions will be provided), and will follow standard grant proposal guidelines. Undergraduate students will work on a general grant proposal with guidelines that will be provided by the professors. Graduate students will be given a choice among 3-5 actual grant proposals (from calls for proposals by USAID, NIH, etc.) with specific guidelines from the granting organization. They will be expected to research the granting
organizations and the types of initiatives that are being funded, and determine an appropriate funder for their proposed intervention. Then they will frame their proposal according to the criteria of the actual proposal guidelines. They will be graded on the content of their proposed intervention, and also on their ability to meet the expectations and priorities of the chosen funder in the presentation of their proposed intervention.
The Grant Proposal will be submitted through Blackboard on (TO BE DETERMINED). Please note that the Grant Proposal is to be submitted in full, in one single document, as an attachment through Blackboard.

**Attendance Policy:** Since this course is based heavily on discussion, in-class group work, and application of concepts to concrete case studies, good attendance is essential. We understand that things may come up that prevent students from attending class and so one absence is allowed, with prior notice, for any reason. Students are still expected to complete reading and response essay on time, and to review and respond to case study questions before the following class meeting so as not to fall behind. If more than one class is missed, or if the absence is not pre-arranged, student will lose 5 points from the participation grade for each absence, up to two times. If there are any additional absences the student will fail the course. For documented illness (i.e. with doctor’s note) students may miss class with no penalty, but are expected to catch up on missed work within a reasonable time frame.

**Disability Policy:** Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning and psychiatric disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of the Disability Resource Center (Campus Center 137, 442-5490). That office will provide the course instructor with verification of your disability, and will recommend appropriate accommodations.

**Academic Dishonesty Policy:** Students are expected to comply with the University at Albany’s Community Rights and Responsibilities. An incident of unethical conduct (e.g. cheating, plagiarism) or classroom disruption will result in a Fail and referral to the appropriate Departmental and University Committees. More information on academic integrity is available at the following website: http://www.albany.edu/reading/academic_integrity.php. Students will be asked to sign a statement of honor, promising to act with academic integrity.

**Units:**

**Unit 1: Basis for Health as a Human Right**

**Introduction: Health as a Human Right**
*Institute for Health and Human Rights* - Kamiar Alaei

**Philosophical Foundations of Human Right to Health**
*Department of Philosophy* - Kristen Hessler

**Health as a Question of Social Justice**
*School of Social Welfare* - Robert Miller
Unit 2: Society, Policy, and Responsibility

Introduction: Design, Implementation and Adaptation of Health Intervention Programs
Institute for Health and Human Rights - Kamiar Alaei

Allocating Scarce Resources: Making Difficult Decisions about Distributing Funds for HIV/AIDS Programs
Department of Public Administration and Policy – Erika Martin

Political Science Approach to Protection of Right to Health
Department of Political Science - Victor Asal

Unit 3: Social Considerations for Fair Fulfillment of Human Rights

Introduction: Advocacy and Respect for Disadvantaged, Marginalized and Stigmatized Persons
Institute for Health and Human Rights - Kamiar Alaei

Social and Cultural Determinants of Health
School of Public Health – Carol Whittaker

Gender, Sexuality, and Public Health
Department of Women’s Studies - Vivien Ng

Prisoners and Psychological Health
School of Criminal Justice - Allison Redlich

Unit 4: International Frameworks for the Promotion and Protection of Health as a Human Right

Institute for Health and Human Rights - Kamiar/Arash Alaei

Legal Defense of Human Rights
Albany Law School - Alicia Ouellette

Reading Schedule (All readings will be available on Blackboard):

Week 1
Introduction: Health as a Human Right - Kamiar/Arash Alaei

Factsheet

For Case Study:

Best Practice in HIV/AIDS Prevention and Care for Injecting Drug Abusers: the Triangular Clinic in Kermanshah, Islamic Republic of Iran, World Health Organization


Week 2

Philosophical Foundations - Kristen Hessler


Week 3

Health as a Question of Social Justice - Robert Miller


Week 4

Introduction: Implementation - Kamiar/Arash Alaei


Week 5

Allocating Scarce Resources - Erika Martin

Week 6

**Political Science Approach** - Victor Asal


Quality of Government QoG Cross-Section Data codebook and please download the dataset to your computer and at there should be at least one laptop for each two people. You can find the data and codebook here: [http://www.qog.pol.gu.se/data/qogstandarddataset/](http://www.qog.pol.gu.se/data/qogstandarddataset/)

Week 7

**Midterm Exam**

Week 8

**Introduction: Advocacy for disadvantaged persons** - Kamiar/Arash Alaei

**Required reading:**


**Optional reading:**


**For Case Study:**


Week 9
**Social and Cultural Determinants of Health** – Carol Whittaker


**Week 10**

**Gender, Sexuality, and Public Health** - Vivien Ng


**Week 11**

**Prisoners and Psychological Health** - Allison Redlich


**Week 12**


**Required reading:**


Logic Model
Optional reading:


*For Case Study:*


**Week 13**

**Legal Defense of Human Rights** - Alicia Ouellette

Course description:

Substance abuse disorders are among the most difficult problems that confront public health professionals. Although the symptoms of addiction may receive proper medical attention, prevention-oriented public health practitioners need to understand and integrate knowledge and strategies relevant to addiction to improve health and address disease at both individual high-risk and population-based levels. This course provides an introduction to the basis of addictive disorders, specific drugs of abuse, at-risk populations, comorbidity of substance abuse and medical/mental health disorders, and public health interventions at multiple levels.

Course competencies:

After completion of this course, students should be able to:

1. Identify basic theories, concepts, and models from a range of biological, social, and behavioral disciplines that are used in public health research and practice to understand the basis of addiction and public health practice objectives (Sessions 1,2,3,4,5).
2. Understand the neurobiological mechanisms underlying addiction (Sessions 1,2,3).
3. Understand the epidemiology and genetics of substance abuse (Session 4).
4. Understand cultural diversity and the impact of culture on addiction (Session 5).
5. Understand the comorbidity of substance abuse and mental health disorders, including identifying the causes of social and behavioral factors affecting addictive patterns in individuals and populations (Sessions 6).
6. Understand gender differences in addiction and course of illness (Session 7).
7. Understand drug dependence, pregnancy, and the newborn (Session 8).
8. Understand the significance of infectious disease in substance use disorders (Session 9).
9. Identify further minority and cultural risk factors in substance use, including the role of social and community factors in both the onset and addressing of substance use (Session 10).
10. Understand urban violence contextually and its influence on substance use patterns (Session 11).
11. Understand treatment models and the application of evidence-based approaches in the development and evaluation of addiction interventions (Session 12).
12. Understand the economic costs and benefits of public health interventions with addiction, including identifying critical stakeholders for the planning, implementation, and evaluation of public health programs, policies, and interventions addressing addiction (Session 13).

Required Readings:
A reading list begins on p. 7. Required articles and handouts will be provided to the students throughout the course. Additional research articles for the group presentation will be the responsibility of the student, with reference list to be provided by each group to the instructor.

Supplemental Material:
A hard copy is approximately $40 new (6th edition) and $12+ used (6th edition). An online resource is available at http://www.bedfordstmartins.com/online/cite6.html
Course requirements:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Group Presentation</td>
<td>20%</td>
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<tr>
<td>Question &amp; Answer Paper</td>
<td>30%</td>
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<tr>
<td>Quiz</td>
<td>10%</td>
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<tr>
<td>Final Exam</td>
<td>35%</td>
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<tr>
<td>Class Participation</td>
<td>5%</td>
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**Contribution** (5%): This portion of your grade recognizes student contributions to the course through in class discussions, keeping up to date with the readings, seeking help for assignments in a timely manner, and working effectively with others in group discussion and the classroom activity.

**Question and Answer Paper** (30% total): Students will complete one Question and Answer paper (Q & A paper), worth 30% of the final grade. For the Q & A paper, a series of questions will be presented and students will choose four of the questions to answer. The Q & A paper is not to exceed 8 double-spaced 12-font pages (excluding references). The paper is designed to help students enhance their understanding of addiction and its direct relationship to critical public health issues, and to assist in preparation for the final exam. The Q & A paper is due in class on April 1, 2013.

**Group presentation:** (20%: 10% group oral presentation; 10% written review of literature). Students will be assigned to a class study group. The purpose of the study group is to lead a seminar-type discussion of additional research gathered related to the topic for the week. This 30 minute presentation will include a review of relevant research articles, key points and terminology, facts, and conclusions, with the intent to engage the class in further discussion of the topic. In addition, all group members will hand in a written summary of research and other materials reviewed, including references.

**Quiz** (10%): The quiz will be administered and reviewed prior to the lecture on
February 18th (Session 4), and will cover basic terms/definitions/neurobiology concepts serving as a foundation for the course. The quiz will include short answer and multiple-choice items.

**Final exam** (35%): The final exam will take place at our regular class time on May 13, 2014. The final will be an in-class, closed book exam, with both short answer and short essay questions. All course material will be covered on the final exam.

**Class policies and expectations:**

- All students are expected to attend class, participate in class discussions and complete the required readings. **Class absences will need to be justified ahead of time.**

**Class attendance is mandatory:** Class absences will be recorded. If you have a legitimate reason for missing class, you will need to contact the instructor by noon the day of class. Emailing or phoning during class or right before class will not be accepted as a legitimate absence. Two unexcused absences from class will result in a half grade deduction from your final grade (e.g., B to B-). Missing more than 2 classes will result in your final grade dropping one full grade (e.g., a B will be reduced to a C).

- **All assignments are to be handed in on time.** A minimum of 5% per day will be deducted for assignments.

- **Incompletes** - They must be requested prior to the assignment due date. They will only be granted for special circumstances. Please see the professor for the process and timeline for requesting and completing an “incomplete”. If the incomplete is not handed in by the timeline granted by the professor, the result will be a failure grade for the course. Please refer to the current University at Albany Graduate Bulletin for policies on course withdrawal.

- **Academic dishonesty**, such as plagiarism or unauthorized collaboration on any assignment, will result in a fail grade for that assignment or exam, and may result in a failing grade for the course. There will be no exceptions.

  **Plagiarism**: According to University policy, you must correctly cite outside material in your papers. Directly coping published material without appropriately indicating it is copied and adequately citing the author(s) and source are examples of plagiarism. Use APA or Numerical format to ensure that you are properly citing articles.

Please read the Graduate Bulletin, and go on-line to the UAlbany Library Website
http://library.albany.edu/usered/ncplaga/index.html, where there is more information on what constitutes plagiarism and how to avoid it. For any assignment, feel free to consult with the professor to get clarification about potential plagiarism issues, PRIOR to handing in your assignment.

As per University policy, the burden on avoiding plagiarism falls solely on the student. Please refer to the current University at Albany Community Rights and Responsibilities (http://www.albany.edu/judicial_affairs/standardsofconduct.html) for policies on academic dishonesty. Please be advised that professors are required to report instances of academic dishonesty to the Dean of Graduate Studies.

Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.
<table>
<thead>
<tr>
<th>Date and Session #</th>
<th>Topic and guest speaker</th>
<th>Course assessment due</th>
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<tbody>
<tr>
<td>Session 1</td>
<td><strong>Introduction</strong>&lt;br&gt;Conceptual Framework; Definitions</td>
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<tr>
<td>January 28th</td>
<td><strong>Neurobiology of Addiction, Pt. I</strong></td>
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<tr>
<td>Session 2</td>
<td><strong>Neurobiology of Addiction, Pt. II</strong></td>
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<tr>
<td>February 4th</td>
<td><strong>Epidemiology of Addiction</strong></td>
<td><strong>Quiz-Terms/Definitions</strong></td>
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<tr>
<td>Session 3</td>
<td><strong>Cross-Cultural Aspects of Addiction</strong></td>
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<td>February 11th</td>
<td><strong>Co-Occurring Disorders</strong></td>
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<td>Session 4</td>
<td><strong>Women and Addiction</strong></td>
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<tr>
<td>February 18th</td>
<td><strong>Perinatal Substance Abuse</strong></td>
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<tr>
<td>Session 5</td>
<td><strong>Infectious Disease and Addiction</strong></td>
<td><strong>Q &amp; A Paper Due</strong></td>
</tr>
<tr>
<td>February 25th</td>
<td><strong>Minorities and Substance Abuse</strong></td>
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<tr>
<td>Session 6</td>
<td><strong>Exposure to Urban Violence/Domestic Violence</strong></td>
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<tr>
<td>March 4th</td>
<td><strong>Treatment Models for Working with Addiction</strong></td>
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<tr>
<td>Session 7</td>
<td><strong>Assessing the Economic Costs &amp; Benefits of Public Health Interventions</strong></td>
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<tr>
<td>March 11th</td>
<td><strong>Review or Final Exam</strong></td>
<td><strong>Final Exam</strong></td>
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<tr>
<td>Session 8</td>
<td><strong>As necessary</strong></td>
<td><strong>Final Exam</strong></td>
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</tbody>
</table>
No Classes on 3/18/2014 or 4/15/14

HPM 611
Topics in Addiction and Public Health
Course Readings

Neurobiology of Addiction (Sessions 2, 3)

Epidemiology of Addiction (Session 4)

Cross-Cultural Aspects of Addiction (Session 5)

Co-Occurring Disorders (Session 6)

Women and Addiction (Session 7)

Perinatal Substance Abuse (Session 8)

Infectious Disease: HIV/AIDS and HCV (Session 9)

Minorities and Substance Abuse (Session 10)

Exposure to Urban Violence/Domestic Violence (Session 11)

Treatment Models for Working with Addiction (Session 12)

Assessing the Economic Costs and Benefits of Public Health Interventions (Session 13)
TBA
University at Albany
School of Public Health
Department of Health Policy, Management, and Behavior

HPM 612
Applications in Health Policy Analysis and Evaluation

Spring 2013

Instructor

Wendy Weller, PhD
Office Hours: Wednesday 10-12:00 or by appointment
East Campus, Room 167
E-mail: wweller@albany.edu
Phone: (518) 402-0302

Schedule

Wednesday 1:00-3:50
Classroom C2

Overview

This class provides an opportunity for students to integrate and apply material and tools developed in HPM 500 and HPM 501 through discussion and analysis of current health policy issues. The class will be taught as a seminar, with case-studies, in-class exercises, and student led discussions to illustrate key policy concepts and techniques. During the semester, students will conduct an in-depth analysis of a current health policy of their choice.

Goals of Course

The goals of this course are to:

- To ensure that students have a broad and solid understanding of the multi-dimensions of health policy;

- To expand and deepen students’ understanding of what works and what doesn’t in the health policy realm by studying “real world cases” of policy interventions designed to correct a variety of health and health care problems;

- To reinforce students’ knowledge, skills and attitudes in the key areas of critical thinking, systematic scientific analysis, political and community development, and communication essential for a successful career in the health policy field; and

- To help students identify the health policy area(s) that interests them most and to enable them to develop expertise in this area.
Specific Course Competencies

2. To apply the techniques of health policy analysis, including how to analyze and synthesize information about a problem, develop and evaluate alternative solutions, and recommend a course of action.

3. To improve skills in preparing written policy documents and giving policy-relevant presentations.

4. To examine the practical application of policy analysis in different health settings and develop an appreciation of the political aspects of the policy process.

Methods/Course Structure

The course will be delivered as a discussion seminar based primarily on the required readings, in-class exercises, and student presentations. As the instructor will give no formal lectures, the success of the course depends on student’s critical reading, thinking, and participation. It is important for students to read any required readings prior to class and to provide input.

Copies of any reading materials will be posted on the course electronic reserves page. The direct link for the electronic reserves page is http://eres.ulib.albany.edu. You can also access the electronic reserves through the library’s web page (http://library.albany.edu). The password for the course is “policy” (with no quotes).

Required Texts

There are no required texts for the course. Rather, the course is structured around health policy related journal articles and documents that are available on the electronic reserves page.

In addition, all students should subscribe to or check the Daily Health Policy Report on the Kaiser Family Foundation’s website (http://www.kff.org) prior to each class period. Students should also periodically check the New York Times and the Albany Times-Union for state and local health policy issues that are being debated.

Course Requirements/Evaluation

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Due Date</th>
<th>Total Points</th>
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<tbody>
<tr>
<td>Problem Statement Memo</td>
<td>March 13</td>
<td>15 points</td>
</tr>
<tr>
<td>Policy Options Memo</td>
<td>April 10</td>
<td>15 points</td>
</tr>
<tr>
<td>Final Policy Analysis Paper</td>
<td>May 1</td>
<td>30 points</td>
</tr>
<tr>
<td>Final Policy Analysis Presentation</td>
<td>May 1</td>
<td>10 points</td>
</tr>
<tr>
<td>Policy Article Discussion Paper 1</td>
<td>To be Assigned</td>
<td>10 points</td>
</tr>
<tr>
<td>Policy Article Discussion Paper 2</td>
<td>To be Assigned</td>
<td>10 points</td>
</tr>
<tr>
<td>Class Participation and Discussion Questions</td>
<td>Semester</td>
<td>10 points</td>
</tr>
</tbody>
</table>
**Academic Integrity**

Academic dishonesty is not tolerated in this class or at the School of Public Health. Please refer to the booklet: *Community Rights and Responsibilities* which you were given when you entered the school. If you do not have a copy, please see Caitlin Reid or to go to the following website http://www.albany.edu/judicial_affairs/standardsofconduct.html.

Any written assignment containing plagiarism will receive a score of 0 points and will put the student at risk of failing the class. Please refer to the *Community Rights and Responsibilities* booklet for definitions and examples of plagiarism. **It is the student’s responsibility to understand and avoid plagiarism.**
## Course Calendar Overview

### Applications in Health Policy Analysis and Evaluation

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
</tr>
</thead>
</table>
| 1.   | January 23 | Introduction and Overview  
Discuss Student Health Policy Interests |
| 2.   | January 30 | HPM 500 and HPM 501 Revisited  
Economics and Health Policy  
**Discuss choosing a final paper topic** |
| 3.   | February 6 | The “Fiscal Cliff”, the Debt Ceiling, and Healthcare |
| 4.   | February 13| “Patient Dumping” – A Two Way Street  
**Student Led Discussion (1)** |
| 5.   | February 20| Class Selected Health Policy Topic  
**Discuss final policy paper topics in-class**  
Submit final paper topic for instructor review |
| 6.   | February 27| Medical Malpractice – How Big is the Problem? Is there  
A Solution?  
**Student Led Discussion (2)** |
| 7.   | March 6    | The CLASS Act – Do Good Ideas Translate into Good Policies?  
**Student Led Discussion (3)** |
| 8.   | March 13   | Class Selected Health Policy Topic  
**PROBLEM STATEMENT MEMO DUE** |
| 9.   | March 20   | **NO CLASS – WINTER BREAK** |
| 10.  | March 27   | Accountable Care Organizations – Panacea or Latest Fad? |
| 11.  | April 3    | Class Selected Health Policy Topic  
**Student Led Discussion (1)** |
| 12.  | April 10   | New York State Medicaid Redesign – Past, Present, and Future  
**OPTIONS MEMO DUE** |
| 13.  | April 17   | Mental Health Parity – Is the Wait Over?  
**Student Led Discussion (2)** |
| 14.  | April 24   | Class Selected Health Policy Topic  
**Student Led Discussion (3)** |
| 15.  | May 1      | **FINAL PRESENTATIONS / FINAL PAPER DUE** |
Applications in Health Policy Analysis and Evaluation
Readings and Class Topics

Week 1: January 23
Introduction and overview
Discuss Student Health Policy Interests
Discuss guidelines for Discussion Papers

Week 2: January 30
HPM 500 and HPM 501 Revisited
Economics and Health Policy
Discuss choosing a final paper topic

Required Reading:

After reading the article you should be prepared to discuss the following in class:

1. What are the key points that Rice makes about economic theory as it relates to health care, particularly in the areas of competition and demand?

2. Do you agree with Rice that many of the key assumptions that economists rely on do not hold in health care? Should we simply ignore economic theory when it comes to health care policy?

3. Do you agree that “researchers and policy analysts will blind themselves to policy options that may be most effective in improving social welfare” if they do not recognize the problems with the “health care market?”

4. Should we rely on market theory when thinking about the health care system?

Week 3: February 6
The “Fiscal Cliff”, the Debt Ceiling and Healthcare

Required Reading:


Week 4: February 13  “Patient Dumping” – A Two Way Street  
Student Led Discussion (1)

Required Reading:


After reading the articles you should be prepared to discuss the following in class:

1. Why was the man profiled in the NYT article “stuck in the hospital”? What was the impact on the hospital? Would it make a difference if the man had not been an undocumented immigrant? Why?

2. As discussed in two of the articles, EMTALA is a law that was enacted largely to avoid hospitals “dumping” patients needing emergency care who were unable to pay. Describe the provisions of EMTALA. How do these provisions conflict with eligibility requirements for public programs such as Medicare and Medicaid? How do these conflicting requirements impact the overall health care system?

3. Would you have supported EMTALA if you were a policymaker at the time it was enacted? Why or why not?

4. Recent expansions of Medicaid through health care reform do not cover “illegal aliens”. What are the pros and cons of covering “illegal aliens” through Medicaid? If you were a policy maker
would you support coverage of this population through Medicaid? If you were a hospital administrator would you support coverage of this population through Medicaid?

Week 5: February 20  
Class Selected Policy Topic  
*Discuss final policy paper topics in-class*  
*Submit final paper topic for instructor review*

Required Readings to be Determined

Week 6: February 27  
Medical Malpractice – How Big is the Problem? Is there a Solution?  
Student Led Discussion (2)

Required Readings:


Read p. 34 of the New York State Medicaid Redesign Final Report. The report is available on-line under the NYS Medicaid tag on e-reserves.

Optional Readings:

Several additional articles are available in a *Health Affairs* theme issue devoted to medical malpractice published in 2010 (volume 29 issue 9). You may want to skim through this issue, especially the brief “Entry Point” article. You can access the entire issue of *Health Affairs* electronically through the UAlbany Library website.

Week 7: March 6  
The CLASS Act – Going, Going, Gone  
Student Led Discussion (3)

Required Readings:


A Report on the Actuarial, Marketing, and Legal Analysis of the CLASS Program. Department of Health and Human Services, October 2011. (NOTE: you only need to SKIM this document for an appreciation of policy analysis produced by a public agency. This is a report to Congress on the CLASS Act from DHHS and served as the rationale for why the program was essentially eliminated.)

Week 8: March 13  Class Selected Health Policy Topic
PROBLEM STATEMENT MEMO DUE

Required Readings to be Determined

Week 9: March 20  NO CLASS – WINTER BREAK

Week 10: March 27  Accountable Care Organizations – Panacea or Latest Fad?

Required Readings:


Burns LR and Pauly MV. Accountable Care Organizations May Have Difficulty Avoiding the Failures of Integrated Delivery Networks of the 1990s. Health Affairs. 2012. 31(11):2407-2415.


Optional Readings:
See the November 2012 issue of Health Affairs for additional articles on evaluations of specific ACO attempts.


Crossen FJ. The Accountable Care Organization: Whatever its Growing Pains, the Concept is Too Vitally Important to Fail. Health Affairs. 2011. 30(7):1250-1255

Week 11: April 3  Class Selected Health Policy Topic
Student Led Discussion (1)

Required Readings to be Determined
Week 12: April 10  
New York State Medicaid Redesign
*OPTIONS MEMO DUE*

**Required Readings:**


Medicaid Waiver: Tool to Fully Implement the MRT Action Plan. August 2012. (Summary of NYS Medicaid 1115 Waiver application submitted to CMS)

Also explore the NYS Medicaid Redesign Team Website available at [http://www.health.ny.gov/health_care/medicaid/redesign/meetings/](http://www.health.ny.gov/health_care/medicaid/redesign/meetings/) for an appreciation of both the process and the content of Medicaid reform in New York. Note: There are many, many links on this website. You do not need to carefully go through each link.

Week 13: April 17  
Mental Health Parity
Student Led Discussion (2)

**Required Reading**


Week 14: April 24  
Class Selected Health Policy Topic
Student Led Discussion (3)

**Required Readings to be Determined**

Week 15: May 1  
*FINAL PRESENTATIONS*
*FINAL PAPER DUE*
### ASSIGNMENTS

<table>
<thead>
<tr>
<th>Assignment 1</th>
<th>Problem Statement Memo</th>
<th>15 points</th>
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<tr>
<td>Due: March 13, 2013</td>
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Prepare a 3 page memo detailing your selected health policy problem along with the major stakeholders and their views. Specifications for the memo will be discussed in more detail in class.

<table>
<thead>
<tr>
<th>Assignment 2</th>
<th>Policy Options Memo</th>
<th>15 points</th>
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<tr>
<td>Due: April 10, 2013</td>
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Prepare a 3 page memo describing at least 4 options for addressing your selected health policy problem. Specifications for the memo will be discussed in more detail in class.

<table>
<thead>
<tr>
<th>Assignment 4</th>
<th>Final Health Policy Analysis Paper</th>
<th>30 points</th>
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<tr>
<td>Due: May 1, 2013</td>
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Prepare a 10-12 page double-spaced paper that analyzes a current health care policy problem at the state or national level by defining the problem, identifying options to address the problem, evaluating the options and recommending a final option. The final paper will be based on Assignments 1-3. Specifications for the final paper will be discussed in more detail in class.

<table>
<thead>
<tr>
<th>Assignment 5</th>
<th>Discussion Papers</th>
<th>10 points each for a total of 20 points</th>
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<tbody>
<tr>
<td>Due: Students will be assigned dates</td>
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Each student will be responsible for leading 2 class discussions on a specific health policy issue of the student’s choice. The topic does not have to be limited to the health care system. It can be any public health policy issue (e.g., obesity, health literacy, etc). Students who are leading the discussion will select an article from a relevant academic journal (e.g., *Health Affairs, American Journal of Public Health, etc.* ) and write a short paper (5 pages or less) on the content of the article, your viewpoints on the arguments presented in the article, and discussion questions related to the article.

Your viewpoint should be substantiated by a brief literature search. For example, if your topic is concerned with the workability of employer mandated insurance, research the literature and include in your report the basic theoretical considerations underlying your argument.
Students should get a copy of the article and the discussion questions to the instructor one week prior to the discussion, so they can be distributed to the class.

All students should be prepared to participate in the discussion.

**Assignment 6**  
**Class Participation (including submission of weekly discussion questions)**  
**Due:** Week 3-14  
**10 points**

Starting with week 3, students will bring at least one policy related discussion question based on the readings for that week to class. The class will use these questions partially as the basis for the week’s discussion.

The course will primarily be in discussion format, where students will examine selected health policy literature and engage in policy exercises. Therefore, it is important that students come to class and be prepared to actively discuss and debate.

**Potential General Health Policy Areas for Discussion Papers:**

- Prevention
- Managed Care
- Safety Net Providers
- Quality
- Long-term Care
- Consumer Protection
- State Reform
- Insurance Coverage
- Medicaid
- Prescription Drugs
- Public Health Workforce
- Injury Prevention
- Chronic Illness

- Medical and/or Public Health
- Work Force
- Provider Payment
- Patient Centered Medical Homes
- HIV/AIDS
- Rural Health
- Vaccines
- Medical Errors / Patient Safety
- Privacy
- Medicare
- Health Information Technology
- Obesity
- Global Health
- Comparative Effectiveness Research
COMMUNICATION AND PUBLIC HEALTH  
(HPM619)

Course Location: School of Public Health  
Course Time:  
Professor: Dr. Jennifer Manganello  
Office: Room #165  
Office phone: (518) 402-0304  
Email: jmanganello@albany.edu  
Office hours:  
Pre-requisite: HPM525 or permission of instructor

COURSE DESCRIPTION

This course is designed to provide an overview of a variety of areas related to communication and public health. The course will review health behavior theories and introduce theories concerning health communication, and provide introductions to topics including interpersonal and organizational health communication, risk communication, media campaigns, and media effects on health. The course will also look at advertising and health, as well as explore the ways that new media (such as the internet) impact health. Cultural differences and ethical issues with respect to communication and health will be covered throughout the semester. Student will develop writing, presentation, and research skills, and will develop science and media literacy skills.

COURSE COMPETENCIES

This course teaches topics and skills that relate to the competencies created by the Association of Schools of Public Health (ASPH).

In accordance with ASPH Social and Behavioral Science Competencies, after completing this course, students will be able to:

- E.1 Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health practice and research
- E.5 Describe steps and procedures for the planning, implementation, and evaluation of public health programs, policies, and interventions
- E.6 Describe the role of social and community factors in both the onset and solution of public health problems
- E.7 Describe the merits of social and behavioral science interventions and policies
• **E.10 Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies**

In accordance with ASPH Communication Competencies, after completing this course, students will be able to:

• **F.2 Describe how societal, organizational, and individual factors influence and are influenced by public health communications**

• **F.4 Apply theory and strategy-based communication principles across different settings and audiences**

Students will also meet this UAlbany SBCH competency:

• **Analyze the role social and behavioral determinants of health and develop strategies for addressing them to solve public health problems**

**READING**

*Required*

The following reading materials will be used for the course. All assigned reading must be completed prior to class. The reading list is located later in the syllabus.


This is available for purchase in the bookstore and is also on 48 hour reserve at the Science Library.


This material is referred to in the syllabus as the Pink Book and is available on Blackboard and online at: http://www.cancer.gov/cancertopics/cancerlibrary/pinkbook/Pink_Book.pdf

3.) Journal articles/Book chapters

These will be available on the Blackboard website which you will access through MyUAlbany or https://blackboard.albany.edu. Readings can be found in session folders.
Course grades will be determined as follows (assignments are described below). I typically use a traditional grading scale when providing assignment and course grades.

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Percentage</th>
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<tr>
<td>Quizzes</td>
<td>45% (15% each)</td>
</tr>
<tr>
<td>Chapter presentations</td>
<td>15% (5% each)</td>
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<tr>
<td>Paper presentations</td>
<td>15% (3% each)</td>
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<tr>
<td>Summary paper</td>
<td>10%</td>
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<tr>
<td>Campaign presentation</td>
<td>15%</td>
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### ASSIGNMENTS

**Quizzes (45% total; 15% each)**
Three quizzes will cover required readings, lectures, and class discussions from all class sessions specific to that quiz. Quizzes will consist of a variety of questions that can include definition, multiple choice, true/false, fill-in-the-blank, and short answer questions. Students must arrive at the start of class to begin the quizzes. The quizzes must be completed in pen, and students will not be allowed to leave the room during the quizzes. All course materials should be left outside of the classroom or be in a closed bag.

**Chapter presentations (15% total; 5% each)**
Each student must sign up to present three of the book chapters assigned as reading. The student must prepare a 5 minute summary of the main points of the chapter, 3 discussion questions, and lead a discussion about the chapter. If you will be absent that day, please send a presentation and 3 discussion questions to me before the start of class. A sign-up sheet will be sent around the second week of class.

**Health Communication Plan Project**
Pretend the Governor of New York has asked you to develop a health communication program to address a health problem for New York residents. You must first select a health problem. Be sure you can justify the selection of the problem with real data from New York state. You will then be developing a health communication program to use health communication strategies to address this health problem. The assignment will consist of three different parts as described below.

**Part A: Paper presentations (15% total; 3% each)**
For sessions 4 through 8 (5 total), students must bring a journal article in to share with the class. All of the articles must be related to both your chosen topic for the project and the session topic. For instance, if your topic is nutrition, for session 6, you could bring in a journal article about a study related to food advertisements. You should prepare a brief summary of the article to discuss in class and upload the article to the Blackboard site in the folder for student readings for that Session #. The article must have been published after 2008.
Part B: Communication program summary paper (10%)
On March 12, you will turn in a paper of no more than 5 pages that presents a basic plan for your health communication program and includes a mention of each of the papers you presented (how it may have contributed to an idea, if you decided that strategy would or would not be useful and why, etc.). Please be sure to address the following in your paper: description of your topic, identification and justification of target group, suggestions for messages, channels (how messages will be distributed), and evaluation strategy. You must also address at least 1 theory, and talk about how the theory will inform the program and its messages. This paper will allow you to get feedback from the professor to help inform the development of your presentation.

Part C: Presentation (15%)
You will develop your communication program and present it to the class on April 23. You should be sure to define your target audience (i.e., people who are overweight, people with low health literacy, lower SES adolescents, parents with children in a specific age group) and justify your decision (with data, theory, etc.). You also need to address what communication strategies you are using (i.e., edutainment, social marketing ads) and why. You will need to describe in detail how theory will inform your program and its messages, identify the goals of your program, describe the formative research you will do, outline the steps you will take to implement the program, provide actual messages and examples of what your ads/websites/etc. will look like, and describe in detail how you will evaluate your program. You should provide specific details, not just broad discussions. Please be sure that the program emphasizes the use of mass media to provide messages. While it is acceptable to have non-media components, the focus must be on providing messages through mass media channels, such as TV, internet, social media, or newspapers. You must use APA style references.

CLASS POLICIES

Students in this course typically have busy lives, and are balancing multiple life obligations. Succeeding in this course will require you to take full responsibility for managing your time and effort in order to meet the course objectives. The following course policies will help clarify your role and help you with the planning of your schedule.

- **Attendance and Participation**: All students are expected to attend class, participate in class discussions and complete the required readings. Attendance and participation are not part of the course grade. It is expected students can make mature decisions about their level of participation in the class.

- **Communications**: You are responsible for reading emails sent to your UAlbany account from your professor and the announcements that are placed on the course web site. Information about readings, news events, your grades, assignments and other course related topics will be communicated to you with these electronic methods. Please understand that professors may not be available to respond to emails outside of standard business hours and plan accordingly for questions about assignments.
Course Withdrawals: It is the student’s responsibility to note the university determined deadlines for dropping or withdrawing from the course and changing to a pass/fail grade. No exceptions will be made. If a student feels they will not be able to complete the course work according to the dates provided on the syllabus, they should drop or withdraw from the course. The instructor reserves the right to ask any student missing a meaningful amount of class time (as defined by the instructor) to withdraw from the course at any time, even if it means a “W” will appear on the student’s transcript.

Incompletes: An Incomplete will only be given in extreme circumstances.

Disability Accommodations: Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and help your educational experience.

Direct Quotes: Excessive use of direct quotes in your assignments is discouraged. You should use references to support your ideas and provide useful information, but should not rely on numerous direct quotes to complete your assignments. Any direct quotes must be cited appropriately.

Syllabus Changes: Information contained in the course syllabus may be subject to change with reasonable advance notice, as deemed appropriate by the instructor in collaboration with the students.

Academic Dishonesty: Academic dishonesty, such as plagiarism, cheating on an exam, submitting work that you previously submitted for another class, submitting work that was submitted for this or any other class by another student, or unauthorized collaboration on any assignment, will result in a grade of 0 for the assignment, and could result in a grade of E (failing grade) for the class. Students who submit more than one assignment with plagiarism will automatically fail the course. Please note, per school policy, all incidents of academic dishonesty must be reported to your department chair, Dean of the School of Public Health, and Dean of Graduate Studies. Incidents may also be subject to sanctions by the school and university. Please refer to the booklet, Community Rights and Responsibilities, for a full explanation of the University’s standards of conduct.


It is the responsibility of the student to know how to reference material correctly in accordance with policies for this class. All students must use APA style referencing. You must correctly cite material that is not your own idea or wording in your papers. Directly copying published material word-for-word without using quotation marks (even if you provide the reference), and not providing references for information taken from other sources, are examples of plagiarism. Examples of how to reference using APA style are provided at this website:
The burden on avoiding plagiarism or other academic integrity violations falls solely on the student. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. For any assignment, you should consult with the professor to get clarification about potential plagiarism issues, PRIOR to handing in your assignment if you have any questions, and you must proofread your work to avoid having a typo count as plagiarism. The professor will randomly check wording and sources in papers or other assignments throughout the course to determine if any plagiarism is occurring. Students who engage in academic dishonesty cannot ask for any exceptions or provide “after the fact” rationales.

Please complete the quiz at this website prior to the next class:

http://library.albany.edu/cfox

http://www.indiana.edu/~tedfrick/plagiarism/item1.html
<table>
<thead>
<tr>
<th>COURSE SCHEDULE</th>
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<tbody>
<tr>
<td><strong>FOUNDATIONS OF HEALTH COMMUNICATION</strong></td>
</tr>
<tr>
<td>Session 1</td>
</tr>
<tr>
<td>Session 2</td>
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<tr>
<td>Session 3</td>
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<tr>
<td><strong>MEDIA AND HEALTH</strong></td>
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</table>
| Session 4 | February 12 | **QUIZ 1: Foundations**  
News Media/Media Advocacy |
| Session 5 | February 19 | Entertainment Media/Media Literacy |
| Session 6 | February 26 | Advertising/Social Marketing/Persuasion |
| Session 7 | March 5 | Health Communication Campaigns |
| Session 8 | March 12 | New Media/Health Information Seeking  
SUMMARY PAPER DUE |
| | March 19 | **NO CLASS-Classes suspended for spring break** |
| **OTHER HEALTH COMMUNICATION TOPICS** |
| Session 9 | March 26 | **QUIZ 2: Media and Health**  
Risk Communication |
| Session 10 | April 2 | Interpersonal Communication |
| Session 11 | April 9 | Health Literacy/Cultural Competency |
| | April 16 | **NO CLASS-Classes suspended** |
| Session 12 | April 23 | **STUDENT PRESENTATIONS** |
| Session 13 | April 30 | Organizational Communication/Health Informatics &  
Telemedicine |
| Session 14 | May 7 | **QUIZ 3: Other Topics**  
Course wrap-up |
SESSION 1:  *Introduction to Course/ Theory*


Pink Book (pp.3-5)

Pink Book (pp.221-223)

Optional:

Chapter 1: Approaches to Health Communication


SESSION 2:  *Research Methods/ Evaluation/Ethics*

SKIM Pink Book (pp.126-163)

*do not read any content in shaded boxes or content about the detailed steps of using the particular research method-focus on the comparison of qual. and quant. methods, descriptions of what the types of methods are, and their pros and cons.*

read pp.136-144 only (start with heading ‘pre-testing research’)


Chapter 40: Ethics in Communication for Health Promotion

Optional:

Chapter 33: Social Networks and Health Communication

Chapter 36: Advancing Health Communication Research

Chapter 37: Using New Technologies to Enhance Health Communication Research

SESSION 3:  *Audiences, Channels, and Messages*

Pink Book (pp.11-13)

**Read pp.125-136 only**

**Read pp.36-40 only**


*Optional:*


SESSION 4:  *News Media /Media Advocacy*

Berkeley Media Studies Group, Issue #1, What is Media Advocacy?


APHA Media Advocacy Manual (pp.3-13)

*Optional:*

SESSION 5:  *Entertainment Media/Media Literacy*

Chapter 16: Popular Media and Health

Kaiser Family Foundation. (Fall 2003). Media Literacy.


**SESSION 6: Advertising/Social Marketing**

Chapter 15: Social Marketing

Chapter 17: Advertising in Health Communication


**SESSION 7: Health Communication Campaigns**

Chapter 13: Developing Effective Media Campaigns for Health Promotion

**SKIM (much of this is a review of other concepts)** Chapter 14: International Health Communication Campaigns


**Start with ‘Methods’ on p. 75 (don’t need to read tables pp.79-84)**

SESSION 8: New Media/Health Information Seeking

Chapter 11: Health Information Seeking

Chapter 12: Online Health Information


Optional:
Chapter 22: Computer-Mediated Social Support


SESSION 9: Risk Communication

Chapter 10: Theory and Practice in Risk Communication


SESSION 10: Interpersonal Communication

Chapter 4: How Medical Interaction Shapes and Effects the Physician-Patient Relationship

Chapter 5: Beyond Primary Care Providers

Chapter 26: Provider-Patient Interaction and Related Outcomes

Optional:

SESSION 11: *Health Literacy/Cultural Competency*

Chapter 19: Integrating Health Literacy in Health Communication

Chapter 20: Culture, Communication, and Health

Chapter 30: Communication and Health Disparities


SESSION 12: NO ASSIGNED READING

SESSION 13: *Organizational Communication/Health Informatics & Telemedicine*

Chapter 6: Telemedicine

Chapter 7: Health Care Teams

Chapter 8: Working Well

Chapter 31: Health Communication and Health Information Technology

SESSION 14: *Course Wrap-Up*


Instructor: Janine Jurkowski, MPH, PhD  
Associate Professor  
Department of Health Policy, Management, & Behavior  
Email: jjurkowski@albany.edu, room 160  
Phone: 518-402-0420

Class Meeting: Monday 1:00pm-3:50pm in HPMB Conference Room  
Office Hours: Monday 10:00am-1:00pm, or by appointment

Course Prerequisites: None

Required Reading Material: Course readings will be provided either in class or electronically. Readings will be multidisciplinary from the fields of public health, sociology, psychology, disability and the humanities.

***If you are not familiar with a writing style, it is highly recommended that students purchase or review on-line resources for the American Psychological Association Style or American Medical Association (Numeric) Style. Do this during the first two weeks of the course.

Course Description:
This course will prepare students to understand underlying factors that have contributed to health disparities in the United States from a historical, theoretical and ecological perspective. Students will be able to apply these explanations across disparate groups and health conditions. Students who successfully complete this course will understand and critique statistics and studies representing disparities. Assignments such as narratives, media critiques and a debate will assess students writing, public speaking and critical thinking skills. Students will be able to use the knowledge gained through the class in their work as public health and service professionals. Readings will be multidisciplinary; from the fields of public health, sociology, psychology, disability, and the humanities.

Course Objectives. As a result of this course, students will be able to:
1. Critique the underlying assumptions of racial/ethnic group labeling in policy and research.  
2. Describe commonalities and differences in determinants of health disparities among various groups who experience disparities  
3. Explain multiple determinants (social, environmental and other determinants) of health disparities and theories regarding their root causes.  
4. Critique existing conceptual frameworks in health disparities research  
5. Apply concepts for intervening to address health disparities.

Course Competencies:
1. Describe the roles of, history, power, privilege and structural inequality in producing health disparities.  
2. Explain how professional ethics and practices relate to equity and accountability in diverse community settings.  
3. Discuss the importance and characteristics of a sustainable diverse public health workforce.
4. Differentiate among availability, acceptability, and accessibility of health care across diverse populations.
5. Appreciate the importance of working collaboratively with diverse communities and constituencies (e.g. researchers, practitioners, agencies and organizations).
6. Explain how the contexts of gender, race, poverty, history, migration, and culture are important in the design of interventions within public health systems.
7. Analyze inter-relationships among systems that influence the quality of life of people in their communities.
8. Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.
9. Analyze the role social and behavioral determinants of health and develop strategies for addressing them to solve public health problems.

1. January 27th
   - Go over syllabus
   - Marmot speech at APHA You Tube
   - http://www.youtube.com/watch?v=oWbDbBBXA_Y
   - http://www.youtube.com/watch?v=eFIB1k0EDEg
   - http://www.youtube.com/watch?v=ocOR8BPU1yg
   - Privilege Walk and Discussion: http://www.albany.edu/ssw/efc/pdf/Module%205_1_Privilege%20Walk%20Activity.pdf

2. February 3rd  Introduction to Health Disparities Statistics and Associations
     http://www.ahrq.gov/research/findings/nhqrdr/nhdr12/highlights.html
   - http://www.kaisernetwork.org/health_cast/hcast_index.cfm?create=high_windows&linkid=1&display=detail&hc=1103

3. February 10th  Categories, Data, and Agendas
   Personal Narrative due.
   Write out a proper citation for this. Including quotation, citation, reference.

4. February 17th  Rooting out disparities: Interdisciplinary Theories and Conceptual Analyses

In Class if time:  http://www.npr.org/templates/player/mediaPlayer.html?action=1&t=1&islist=false&id=122864641&m=122937602

5. February 24th  Theoretical Perspectives on Race


6. March 3rd  Whiteness and Our Lived Experience
Media Critique due.
• Readings to be determined.

7. March 10th  Discrimination in Health and Health Care
Ask about a theory of discrimination- something to do with institutional discrimination and workplace stress impact on hypertension


http://www.youtube.com/watch?v=MuW4FBq_ro

March 17th Spring Break no class

8. March 24th Women’s Health Inequity

DUE: Personal Narrative
Ask about man-made medicine

9. March 31st Affordable Care Act
• Readings TBD by student

10. April 7th Health Disparities among the Homeless
• Readings TBD by student

11. April 14th Breast Cancer Disparities among African Americans
• Readings TBD by student

12. April 21st Environmental Justice: Asthma in Vulnerable Communities
• Readings TBD by student

13. April 28th Disability or Disabled?

*Weirded Out and Blown Away video*

14. May 5th Class Debrief- Culminating Discussion
Position paper due.

Class Requirements:
Students are expected to complete readings prior to class, attend all classes (please be on-time) and actively participate in critical discussions of the readings.

Personal Narrative 10%: Due February 10th
A personal narrative allows you to share your life or an experience in your with others. The reader will vicariously experience the things that happen around you. For this assignment, you will write a personal narrative about how health disparities or a disparities topic impacts you/moves you or affects your life in some way. This assignment needs to be thoughtful and provide some level of synthesis of your understanding of health disparities at this point in your degree program. Feel free to incorporate how your program has helped you to think about this issue differently than before. Creating your own personal narrative is a great way to improve your writing skills. This link provides you will a generic outline or framework for developing your narrative. http://www.sbcc.edu/clrc/files/wl/downloads/StructureofaPersonalNarrativeEssay.pdf The paper should be no longer than 3-5 pages double spaced with 1inch margins.

Critique of Media (20%): This paper will be a critique of a mainstream publication about a particular group that may experience health disparities. This paper should critique the medium using the concepts discussed in the first three classes. Discuss the impact the portrayal may have on the public’s view of the group and the impact on the group itself. Finally, discuss how the impact may affect the health of individual’s within the group either directly or indirectly. Provide a copy of the article, picture or describe the show or movie. For example, you may critique a news article or Dateline episode talking about urban violence in African American communities and discuss stigma and identity. This paper should be written in APA or AMA style. This assignment is to be done individually. (Due by the beginning of class in hard copy format unless otherwise discussed with the instructor). Due March 3rd Paper should be a maximum of 5 pages double spaced and 1 inch margins, not including references.

http://www.youtube.com/watch?v=MuW4FBq_rco

Student Led Topic Class 30%: Due on day student is scheduled to present: Student will pick a health disparities topic that they are interested in and conduct a scholarly literature search to select 3 readings for the class. He/She will also conduct a Google search to examine websites such as CDC, NIH or non-profit sites with expertise in this topic to help the
student provide a one hour class session on the topic to educate and foster discussion. This includes a Power Point presentation. Students will also generate three discussion questions. The student may also create an activity to foster discussion and learning. The student will present on the topic to the class for at least 30 minutes and have three questions for the group discussion.

**Position Paper 25%: Due May 6th**
A graduate-level position paper is a formal argumentative paper on a particular topic. You will need to choose a topic of interest (makes the most sense to work off of your class topic) and make an argument or put forth a position. First make an argument why this is an important public health topic that should be the focus of policy makers and public health professionals. Your main argument will be the crux of your paper and it will be conveyed first and foremost as a thesis statement. You will use existing literature and data to prove or support your argument in the body of the paper. Finally, you need to make at least two detailed recommendations for addressing the issue you are presenting such as a specific policy change or program or environmental change. Whatever it is, the recommendation should be at least a paragraph of detail for each recommendation. This paper should be no longer than 7, seven pages double spaced with minimum 1 inch margins on all sides. I have seen position papers anywhere from 3-7 pages but page number doesn’t matter as much as content and support for your argument. However, the page limit is firm. I stop grading at the bottom of page 7. This page limit does not include references or tables, which should be included as appendices. Make sure your paper is organized and there is no fluff so that you can cover your position and recommendations in the space provided.

**Class participation 15%:** The class participation grade is based on active participation and critical discussion of the readings each week. In order for this class to be interesting and a full learning experience, students need to complete the class readings prior to class. In class graded “quizzes” will be given on random weeks during the professor provided classes to motivate reading. These quizzes will be based on the readings.

Please see instructor for special circumstances or needs for accommodation related to your academic work in this course. You may hand in an assignment two weeks early to get feedback and recommendations for the final draft. There will be no re-write options after the due date for any assignment and no extra credit for the course.

**Late Assignments**- Assignments are due at the beginning of class. To potentially receive the maximum, 100% for the assignment, it is due at the day written in the syllabus. To receive a maximum of 90% the assignment needs to be handed in by Thursday at 4pm after the original due date. Unless under special circumstances, agreed upon prior to the assignment due date, no papers will be accepted after Thursday at 4pm.

**Incomplete Assignments**- They must be requested prior to the assignment due date. They will only be granted for special circumstances. Please see the professor for details on the process and timeline for completing an incomplete.

**Academic Dishonesty:**
Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty. In accordance with University policy, any instance of academic dishonesty will result in an automatic failing grade for the assignment and potentially the course as well as potential sanctions by the school and university. Students are strongly advised to avoid placing themselves in any situation that may be suspect. Please learn what it is and ask if you have questions.
Plagiarism: [http://library.albany.edu/usered/plagiarism/](http://library.albany.edu/usered/plagiarism/) Plagiarism in any form will be considered an instance of academic dishonesty. **As per University policy, the burden on avoiding plagiarism falls solely upon the student.** Use APA or AMA style to ensure that you are properly citing articles in your paper and bibliography. Feel free to consult with the professor for clarification about potential plagiarism concerns PRIOR to handing in your assignment. All students will sign a **written agreement form** and hand it in with your assignment, which is a contract stating that you understand what plagiarism is and that you did not engage in it.
HPM 623: Stress, Social Support Systems and Health
-[Semester, Year]-

XXXXday X:00-X:00
School of Public Health
Room C1
Course No. XXXX

Benjamin Shaw, PhD, MPH
One University Place, Room 177
402-0290
bashaw@albany.edu
Office hours: XXXX

Course description:
This course examines the epidemiology of stress and health, and addresses the protective capacity of networks of social relationships. The course will address the effects of a wide variety of life stressors – such as chronic illness, the death of a loved one, childhood trauma, and financial hardship – on health problems such as substance abuse, mental disorders, and physical illness. Likewise, a variety of social support structures for coping with these life stressors will be discussed, including peer groups, family support, and community-level social networks.

Students will be introduced to key terms and concepts, examine theories that help to explain the effects of stress and social relationships on health, and discuss important methodological considerations for doing research on stress, social relationships and health. We will also review a variety of social epidemiological research findings that provide evidence of linkages between stress, social relationships, and health outcomes, throughout the life course and in various settings. Finally, we will focus on applied intervention work that has attempted to promote health by targeting and mobilizing social relationships and facilitating coping with life stressors.

Course learning objectives and competencies:
This course is designed to help students develop a broad appreciation for the linkages between stress, social relationships, and health. Such an appreciation should enable students to better understand findings emerging from social epidemiological research, and draw insights from these findings that lead to more effective interventions and more well-informed public policy decisions and recommendations.

After completion of this course, students should be able to:
1. Define and distinguish between stress and social relationship terms and concepts, such as stressful life events, chronic strains, social networks and social support;
2. Understand and explain the historical foundations and major theoretical roots of the study of stress, social relationships, and health;
3. Identify and utilize appropriate measurement techniques for assessing stress and social relationships;
4. Discuss research findings related to the health effects of various stressors and specific aspects of social relationships in different populations;
5. Identify, assess, and summarize the findings of programs that have targeted stressors, and/or have incorporated social relationship factors to promote health; and
6. Incorporate stress reduction and social support elements into the design of relevant health promotion programs and policies.
This course also teaches topics that relate to competencies considered critical by the Association of Schools of Public Health (ASPH) for all MPH graduates, including:

E.6 Describe the role of social and community factors in both the onset and solution of public health
F7 Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.
G.1 Describe the roles of history, power, privilege, and structural inequality in producing health disparities.
J.6 Analyze determinants of health and disease using an ecological framework.
K.1 Describe how social, behavioral, environmental, and biological factors contribute to specific individual and community health outcomes.

Additional. Analyze the role social and behavioral determinants of health and develop strategies for addressing them to solve public health problems.

Class policies and expectations:

- All students are expected to attend class, participate in class discussions and complete the required readings. Class absences will need to be justified ahead of time.

- All assignments are to be handed in on time. A minimum of 5% per day will be deducted for late papers/assignments.

- Academic dishonesty, such as plagiarism or unauthorized collaboration on any assignment will result in a fail grade for the assignment, and could result in a fail grade for the class. Please refer to the booklet, Community Rights and Responsibilities (http://www.albany.edu/judicial_affairs/standardsofconduct.html), for a full explanation of the University’s standards of conduct. The University Library website has an excellent guide to avoiding plagiarism (http://library.albany.edu/usered/plagiarism/index.html). You will be expected to have completed this tutorial before the first assignment is due, and are responsible for knowing the material. Please see me if you have any questions about this.

Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.

Readings:
A collection of required readings will be available through the electronic reserve system in Blackboard. Some additional readings may also be distributed in class or posted on Blackboard throughout the semester.
Course requirements:

- **Class participation** 10%
- **Literature review and presentation** 20%
- **Press release** 20%
- **Mini research project** 25%
- **Stress intervention project** 25%

(Final grading scheme: A-E)

**Class participation:**
- Students are expected to attend class and participate in class discussions and exercises on a regular basis. Students should prepare for class by thoughtfully reading the assigned articles/chapters before each class session so that they are ready to be active contributors to the class.
- Students should also come to each class with 1-2 discussion questions based on the readings for that week and/or an item from the current news, a movie, a book, or some other type of media that speaks to the proposed links between stress and/or social relationship factors, and health. Each week, any student may be asked to share his/her question(s) or news items with the rest of the class.

**Literature review and presentation:**
- Each student will be required to submit a written review (i.e., summary and critique) of the research literature on a specific topic related to stress, social relationships, and health. Topics will be selected in consultation with the instructor. The main text of this written assignment should be between 1,000-1,500 words. This assignment is due in class on September 17.
- Students will also be required to prepare a brief (5-minute) oral summary of their literature review, highlighting its major findings (also due on September 17). These summaries will be presented in class; after each presentation, other students and the instructor will have the opportunity to provide feedback to, and ask questions of, the presenter. Students may choose to include visual aids, such as PowerPoint slides.

**Press release:**
- Each student will be required to find a recent (2013) journal article reporting research results about some aspect of the link between stress and health (or social relationships and health).
- Students will be required to prepare a brief (400-500 words) press release that effectively describes the research findings to the general public (October 15). Examples will be provided in class.

**Mini research project:**
- As a class, we will work together to carry out a small-scale research project that addresses 3 main research questions: 1) To what extent to local health departments in NYS address the problem of stress in their communities? 2) To what extent to local health departments in NYS address the problem of social isolation in their communities? 3) What do local health departments see as the major barriers to addressing these problems in communities?
- In class, we will develop an interview protocol and identify a sample of specific county health departments to assess. Each student will be assigned one health department to contact and will be required to interview one health department staff person.
• Each student will be required to summarize their findings in a brief (3 page) report, due on November 12. Each student will also be given the opportunity to present their findings in class (also on November 12).

Stress intervention project:
• Each student will be asked to choose a health problem and population who could benefit from a specific type of public health intervention targeting stress or social isolation.
• Students will be required to develop a proposal for implementing such an intervention by
  a) Summarizing the problem and its apparent connection to stress and/or social isolation;
  b) Documenting and critiquing any current programs that target your chosen health problem in your population; and
  c) Describing the basic structure of a new stress/social isolation intervention that could be effective in addressing this problem.
• Intervention proposals should be between 1,000-1,500 words.
• All written assignments will be due on December 10. On that same day, each student will present their proposal in class.
| Session 1 | August 27 | Introduction and Course Overview  
| | | Stress and Health: A Public Health Perspectives |
| Session 2 | September 3 | The Health Effects of Stress and Social Factors:  
| | | Mechanisms of Action |
| Session 3 | September 10 | Stress, Social Networks, and Health: Lifecourse  
| | | Perspectives |
| Session 4 | September 17 | Stress and Social Networks: Measurement Strategies |
| **September 24** | NO CLASS |  |
| Session 5 | October 1 | Stress and Mental Health |
| Session 6 | October 8 | Stress and Health Behaviors |
| Session 7 | October 15 | Workplace Stress and Health |
| Session 8 | October 22 | Community Level Stress, Social Connections, and Health |
| Session 9 | October 29 | Stress, Social Relationships, and Health Disparities |
| **November 5** | NO CLASS |  |
| Session 10 | November 12 | Stress-focused Interventions for Health Promotion |
| Session 11 | November 19 | Social Network Interventions for Health Promotion |
| **November 26** | NO CLASS |  |
| Session 12 | December 3 | Stress, Social Networks, and Health Policy |
| Session 13 | December 10 | *Presentations* |
Session 1  August 27  Introduction and Course Overview
Stress and Health: A Public Health Perspective

From Obesity to Shorter Lifespans: Why Stress Is Public Health Enemy Number One  

Managing Stress | The Forum at Harvard School of Public Health  
http://theforum.sph.harvard.edu/events/managing-stress


Stress, A User’s Guide. University of Michigan School of Public Health, p. 18-41  
http://www.sph.umich.edu/news_events/findings/fall11/Fall2011Findings.pdf

Session 2  September 3  The Health Effects of Stress and Social Factors:  
Mechanisms of Action


Session 3  September 10  Stress, Social Networks, and Health: Lifecourse Perspectives


Session 4  September 17  Stress and Social Networks: Measurement Strategies


Session 5  October 1  Stress and Mental Health

Coughlin, SS & McNeil, RB (2013). Post-traumatic stress disorder and chronic health conditions. Chapters 1 and 2. APHA.


Session 6  October 8  Stress and Health Behaviors


Session 7  October 15  Workplace Stress and Health


Session 8  October 22  Community Level Stress, Social Connections, and Health


Session 9  October 29  Stress, Social Relationships, and Health Disparities


**Session 10**  
**November 12**  
**Stress-focused Interventions for Health Promotion**


**Session 11**  
**November 19**  
**Social Network Interventions for Health Promotion**


**Session 12**  
**December 3**  
**Stress, Social Networks, and Health Policy**


HPM 625
INTRODUCTION TO PUBLIC HEALTH AND AGING

Fall 2012, Thursday 9-11:50
School of Public Health Room C1

Course Syllabus

Instructor

Mary Gallant, PhD, MPH
Associate Professor, HPMB
159 School of Public Health
Tel: 518-402-0292
Email: mgallant@albany.edu
Office hours: Tuesday 12-2 (beginning 9/11) and other times by appointment

Course Description

This course will provide an overview of issues related to public health and aging. We will begin with an overview of the demography and epidemiology of aging, and discuss how aging is viewed in society today, including myths of aging and stereotypes of aging, and briefly review theories of aging. The course will continue to cover the concept of successful aging, the implications of chronic illness and disability for public health, health promotion for older adults, and other topics central to public health in an aging society.

Objectives

By the end of this course, students will be able to:

1. Describe the basic demographic trends in the aging population, and describe the major health problems and issues for older populations and explain their implications for public health practice.
2. Identify the components of usual versus successful aging, and identify the main behavioral, social and environmental factors that influence successful aging.
3. Explain the role of chronic diseases and disability in the lives of older adults, and describe their implications for public health.
5. Compare public health, aging network, and health care services for older adults and describe available resources for older adults.
6. Demonstrate an understanding of dementia and its implications for families and society.
7. Identify the key components of end of life care.
8. Describe how issues related to older adults are addressed in the media.
9. Demonstrate an in-depth understanding of a special health issue for older adults.
Competencies

This course addresses the following MPH competencies for the Social Behavior and Community Health concentration:

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health systems in the US.
2. Identify key sources of data for epidemiologic purposes.
3. Analyze the role of social and behavioral determinants of health and develop strategies for addressing them to solve public health problems.
4. Identify health issues unique to different stages of the life cycle and describe how public health strategies can be tailored to meet such needs.

Blackboard

This course has an associated Blackboard page, which can be accessed through MyUAlbany. All handouts, assignments, Powerpoint slides and non-textbook readings will be available on the Blackboard site. In addition, Blackboard will be used for informal online discussions associated with the “Aging Issues around Us” discussion assignment (see description below). Any announcements that I want you to be aware of between class sessions will also be posted on the Blackboard site.

Readings

Except for session 1, there are readings assigned for every class session. These are detailed on a separate reading list. All readings should be completed before the class session for which they are listed on the reading list.

The following book is required for the course. It has been ordered at the university bookstore, but is also easily available online. It comes in paperback and hardcover, but the paperback is significantly less expensive.


Evaluation

Class participation (15%) – This includes attending class, arriving on time at the beginning of class and after breaks, completing all assigned readings before class, and contributing thoughtfully to class discussions and small group activities.

Aging Issues around Us Discussion Assignment (20%) – To raise awareness of the relevance of aging issues to daily life, and to connect what we are learning to other aspects of our lives, each student will identify, and present to the class for discussion, three different examples from “the outside world” that are relevant to topics in this class. These examples can be from the media (news articles, advertisements, TV, etc.), other courses, internships, and other
activities in your daily lives. Each student will briefly present one of the three examples at the beginning of a class session. The other two examples are to be shared with the class in an online Blackboard discussion. In addition, every student is expected to contribute \textit{substantively} to at least five online discussions started by others. Each discussion “presentation” will be worth 5% of your grade, and your participation in others’ discussions will be worth the remaining 5%.

\textbf{Successful Aging Essay (15\%)} – What does it mean to age successfully? The purpose of this assignment is to develop your own understanding of the concept of aging successfully. This brief essay will be based solely on one’s own thoughts and brief informal interviews with other people. This assignment is due by the start of class on \textbf{September 13}.

\textbf{Semester Project (40\%)} and Project Proposal (10\%) – Each student will develop a semester project that meets their professional goals and interest in public health and aging. A brief proposal for the project must be turned in no later than the start of class on \textbf{September 27}. Additional details about this project and the project proposal will be handed out separately. The completed project is due by \textbf{noon on December 6}. Each student will briefly share their projects with the rest of the class in a 10 minute presentation at the end of the semester.

\textbf{General Course Policies}

If you need to miss class, please inform the instructor ahead of time. It is your responsibility to find out what you missed in class and to make arrangements for any assignments due. \textbf{More than 3 missed classes during the semester will automatically result in loss of half of the total class participation points for the semester}, in addition to any points lost as a result of late assignments not arranged with the instructor (see below).

\textbf{Assignments submitted any time after the specified due date and time will result in 5 points deducted from the assignment/paper grade for each day it is late, unless previous arrangements are made with the instructor.} (I.e. any assignment submitted within 24 hours of its due date/time will receive -5 points, between 24 and 48 hours, -10 points, etc.). If an extenuating circumstance arises and you think you might not be able to meet a deadline, it is your responsibility to contact the instructor ahead of time to discuss possible alternatives.

\textbf{Academic Honesty}

You are expected to adhere to the guidelines of academic honesty as outlined in the UAlbany booklet “Community Rights and Responsibilities”. Collaboration on assignments intended to be completed independently and plagiarism will ordinarily result in a failing grade for the assignment and/or course. Because plagiarism is a serious issue, and sometimes occurs unintentionally due to lack of knowledge about the correct way to cite others’ work, you are expected to be familiar with the material in the tutorial on plagiarism provided by the University library (\texttt{http://library.albany.edu/usered/ncplaga/index.html}).
Introduction to Public Health and Aging
Class Schedule

Session 1 Aug 30 Introduction and Overview
Images and Stereotypes of Aging
Why Public Health for an Aging Society?

Session 2 Sept 6 What Happens as We Get Older?
Theories of Aging
The Biology of Aging

Session 3 Sept 13 Demography of Global Aging
Public Health, Aging Services and Health Services

Session 4 Sept 20 Assessing Health Disability

Session 5 Sept 27 Successful Aging
The Burden of Chronic Illnesses

Session 6 Oct 4 Health Behaviors
Health Promotion Interventions

Session 7 Oct 11 Social Determinants of Health
Social Engagement

Session 8 Oct 18 Environmental Influences on Older Adults – Social, Physical, Built

Session 9 Oct 25 Vision and Hearing Loss

Session 10 Nov 1 Dementia and Caregiving

Session 11 Nov 8 End of Life Care

Session 12 Nov 15 Falls Prevention

Nov 22 No class – Thanksgiving break

Session 13 Nov 29 Student Presentations of Final Projects

Session 14 Dec 6 Semester wrap-up: movie and potluck brunch
HPM 626
Social and Behavioral Aspects of Chronic Illness
Fall 2013

Thursday 9-11:50
School of Public Health
Room C1

Mary Gallant, PhD, MPH
159 George Education Center
402-0292
mgallant@albany.edu
Office hours: Tues 12-2 or by appointment

Course Description:

This course examines social and behavioral factors in chronic illness. Theoretical and conceptual frameworks for viewing chronic illness in the context of individual and family development across the life course will be discussed. The course will focus on the impact of chronic illness on families, psychosocial factors influencing adaptation to chronic illness, and interventions to promote self-management of chronic illness.

Learning Objectives:

After completing this course, students should be able to:

1. Describe the epidemiology of chronic illness among different age groups, both nationally and globally.
2. Explain the major theoretical and conceptual frameworks used to understand chronic illness and chronic illness management.
3. Describe the major social, psychological, developmental and behavioral factors that influence adaptation to and management of chronic illness at different life stages.
4. Explain the social and behavioral impact of chronic illness on individuals and families across the life course.
5. Evaluate and critique interventions designed to promote adjustment to and self-management of various chronic illnesses.

Competencies:

This course addresses the following MPH – Social Behavior and Community Health concentration competencies. That is, this course should help students develop the knowledge and skills necessary to:
1. Identify key sources of data for epidemiologic purposes.

2. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.

3. Analyze the role of social and behavioral determinants of health and develop strategies for addressing them to solve public health problems.

4. Identify health issues unique to different stages of the life cycle and describe how public health strategies can be tailored to meet such needs.

5. Analyze specific highly prevalent health problems/conditions to determine social, community, and behavioral risk factors that are key to target in an intervention.

**Blackboard**

This course has an associated Blackboard page, which can be accessed through MyUAlbany. All handouts, assignments, Powerpoint slides and readings will be available on the Blackboard site. In addition, Blackboard may be used for informal online discussions associated with homework assignments. Any announcements that students should be aware of between class sessions will also be posted on the Blackboard site.

**Readings:**

There will be assigned readings for every class session. These are detailed on a separate reading list. *All readings should be completed before the class session for which they are assigned.*

**Course Requirements and Assessment:**

**Attendance and participation**

This includes attending class, arriving on time at the beginning of class and after breaks, completing all assigned readings before class, and contributing thoughtfully to class discussions and small group activities. Attendance/participation will be graded as follows for each class session: 0 = absent; 1 = present and adequate participation; 2 = present and thoughtful participation that reflects good familiarity with the readings, and advances and elevates the class discussion. However, **3 or more missed classes during the semester will automatically result in loss of half of the total class participation points for the semester.**
Homework 5%

Occasionally, students will be given brief homework assignments to complete between class sessions. These may involve participating in a brief Blackboard discussion, developing a question to pose to the class based on a reading, or some other brief task to prepare for a class activity. Homework will be graded on a completed/not completed basis. Your first homework assignment is to introduce yourself to the rest of the class on Blackboard before Sept 5.

Project #1 25%

How do families obtain health information about a selected chronic illness? The purpose of this assignment is to gain an understanding of how families obtain health information when a chronic illness is first diagnosed. Students will collect information on prevalence, incidence, cause, medical treatment and self-management options, and local sources of information and support for an assigned chronic illness. This information will be summarized and shared with the class both in writing, and during a brief class presentation. Additional details about this assignment will be distributed separately.

Class discussion assignment 25%

During the course of the semester, we will be reading about a variety of interventions that focus on particular chronic illnesses. In teams of two, students will be responsible for leading a class discussion about a particular intervention, based on a reading assignment. Additional details about this assignment will be distributed separately.

Final project 35%

Students will choose one of the following options for a final project, which will be due on Thursday December 12 by 5:00 pm. Additional details about this assignment will be distributed separately.

- Attending at least two support group meetings for a chronic illness and interviewing at least 2 individuals with a chronic illness and preparing a paper detailing the findings.

- Keeping a journal throughout the course that is based on media coverage of one or more chronic illnesses and providing a summary of possible impact on public awareness and knowledge.

- Preparing a review of published health education interventions for a particular chronic illness.
• Preparing a review of published health education interventions for one or more chronic illnesses for a particular ethnic or racial group.

Course Policies:

If you need to miss class, please inform the instructor ahead of time. It is your responsibility to find out what you missed in class and to make arrangements for any assignments due. More than 2 missed classes during the semester will automatically result in loss of half of the total class participation points for the semester, in addition to any points lost as a result of late assignments not arranged with the instructor (see below).

Assignments submitted any time after the specified due date and time will result in 5 points deducted from the assignment/paper grade for each day it is late, unless previous arrangements are made with the instructor. (i.e. any assignment submitted within 24 hours of its due date/time will receive -5 points, between 24 and 48 hours, -10 points, etc.). If an extenuating circumstance arises and you think you might not be able to meet a deadline, it is your responsibility to contact the instructor ahead of time to discuss possible alternatives.

Academic Integrity:

You are expected to adhere to the guidelines of academic honesty as outlined in the UAlbany booklet “Community Rights and Responsibilities”. Collaboration on assignments intended to be completed independently and plagiarism will ordinarily result in a failing grade for the assignment and/or course.

Because plagiarism is a serious issue, and sometimes occurs unintentionally due to lack of knowledge about the correct way to cite others’ work, you are expected to be familiar with the material in the tutorial on plagiarism provided by the University library (http://library.albany.edu/usered/ncplaga/index.html).
| Session 1 | August 29 | Introduction  
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<td>Conducted online via Blackboard</td>
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<td>Session 2</td>
<td>September 12</td>
<td>Epidemiology of chronic illness across the life course</td>
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<td>Session 3</td>
<td>September 19</td>
<td>Understanding chronic illness – Theoretical and conceptual issues</td>
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<td>Session 4</td>
<td>September 26</td>
<td>Chronic illness among children</td>
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<td>Session 5</td>
<td>October 3</td>
<td>Interventions for children</td>
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<td>Session 6</td>
<td>October 10</td>
<td>Interventions for children</td>
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<td>Session 7</td>
<td>October 17</td>
<td>Chronic illness among adolescents</td>
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<td>Session 8</td>
<td>October 24</td>
<td>Interventions for adolescents</td>
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<td>Session 9</td>
<td>October 31</td>
<td>Chronic illness during adulthood</td>
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<td>Session 10</td>
<td>November 7</td>
<td>Interventions for adults</td>
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| Session 11 | November 14 | Interventions for adults  
|           |           | Support groups |
| Session 12 | November 21 | Chronic illness among older adults |
| Session 13 | December 5 | Chronic illness among older adults - Caregiving |

*September 5*  
No class – Rosh Hashanah  

*November 28*  
No class - Thanksgiving
HPM 627
PROGRAM DEVELOPMENT IN HEALTH PROMOTION

Spring 2013, Tuesdays 9:00 am – 11:50 am
School of Public Health Room C1
3 credits

Course Syllabus

Instructor
Christine T. Bozlak, PhD, MPH
Assistant Professor, HPMB
Room 173 School of Public Health
Phone: 518-402-0299
cbozlak@albany.edu
Office hours: Wednesdays, 1 pm – 3 pm and by appointment

Course Description
This course provides an introduction to the application of theory and evidence to the development of health promotion interventions. Students will be introduced to the major steps of program planning, and will apply these steps to design their own health promotion intervention. The course takes an ecological approach to health promotion, and also gives students the opportunity to critically evaluate a variety of health promotion interventions targeting change at the individual, interpersonal, organizational, community and public policy levels, and to examine how behavioral science theories have been applied to the design of these interventions.

Prerequisites
HPM 525 is a prerequisite for this course. Students who have not taken HPM 525 must have the instructor’s permission to enroll in this course.

Learning Objectives
By the end of this course, students should demonstrate the knowledge and skills needed to:

1. Conduct a systematic assessment to define a particular health issue or problem, to identify the behavioral and environmental factors relevant to that health problem, and to identify appropriate targets and levels of intervention.

2. Distinguish between individual, group, organizational, community, and policy levels of intervention, and identify the strengths and limitations of each.

3. Identify and apply relevant theory and research to intervention design.

4. Develop a health promotion intervention using a systematic program planning process.
Competencies:

This course addresses the following MPH competencies for the Social Behavioral and Community Health concentration:

1. Conduct a systematic assessment to define a particular health issue or problem, to identify the behavioral and environmental factors relevant to that health problem, and to identify appropriate targets and levels of intervention.

2. Explain in detail how social determinants (such as social relationships, mass media, social position, race, ethnicity, culture and disability) can influence health and health behavior and apply that knowledge to the design of health promotion programs.

3. Develop a theory- and evidence-based health promotion intervention using a systematic program planning process.

Readings

There is one required book. It is available at the campus bookstore and online via Amazon.com.


Note: For this semester, the 5th edition of this book is also acceptable.

The following book, which has been required in HPM 525, will also be a useful resource in this course.


Additional readings are available on the Blackboard course website. Unless otherwise stated, all readings and reading-related assignments are to be completed prior to the class date under which they are listed. Reading assignments may be subject to minor additions or revisions over the semester.
General Course Policies

● Class will begin promptly at 9:00 am and will end by 11:50 am. We will generally take one 5-10 minute break.

● If you need to miss class, please inform the instructor ahead of time. More than one unexcused absence will result in the lowering of one’s attendance and participation grade.

● Assignments are to be handed in to Dr. Bozlak or submitted via Blackboard no later than 9:00 am on the day they are due. Assignments and papers submitted late will result in 5% deducted from the assignment/paper grade for each day it is late, unless previous arrangements are made with the instructor. If an extenuating circumstance arises and you think you might not be able to meet a deadline, please contact the instructor ahead of time to discuss possible alternatives.

● Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact the instructor by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.

Academic Honesty

You are expected to adhere to the guidelines of academic honesty as outlined in the UAlbany booklet “Community Rights and Responsibilities” found at http://www.albany.edu/judicial/docs/CRR2007-2010.pdf

Collaboration on assignments intended to be completed independently and plagiarism will ordinarily result in a failing grade for the assignment and/or course.

Because plagiarism is a serious issue, and sometimes occurs unintentionally due to lack of knowledge about the correct way to cite others’ work, you are expected to be familiar with the material in the following tutorial on plagiarism provided by the University at Albany library. This tutorial takes about 10-15 minutes to complete and can be found at: http://library.albany.edu/usered/plagiarism/index.html

Course Requirements and Grading

The grading scheme for this course is A-E.
Your grade for the course reflects a combination of individual and team activities and assignments.

Component A: Individual and Small Group Activities / Assignments

Component A: Individual and Small Group Activities / Assignments

50% of course grade

Class attendance and participation

5%

This course depends on active engagement by all class members. This is not exclusively a lecture course, and students are expected to attend class ready to participate in both large-group and small-group discussions. Class preparation
and participation is evaluated on the basis of class attendance, being on time for class, participating thoughtfully in class discussions and small group exercises, and demonstrating familiarity with assigned readings during class activities.

Group Discussion Facilitation 10%

In teams of two, you will lead a 30 minute class discussion related to the topic of the day. This will primarily be by showing and then discussing with the class an example of how other program developers have addressed the topic, or you can use an example from your own experience. An example is bringing in a short article on a program that required expensive resources for discussion during the class session on budgeting. Please feel free to be creative. Additional information will be provided in class.

The Realities of Program Planning Project 15%

Sometimes, there is a difference between program planning in theory, and how it is done in practice. Consequently, each student will be asked to complete an individual project in which s/he will pick one organization to interview to learn more about how they plan their programs. (Phone interviews are acceptable; In-person interviews are preferred.) Dr. Bozlak will provide the interview questions. Each student will write a 3-5 page paper about the program, the interview, and an analysis of and reflection on what was learned through this assignment. Each student will present what they learned through this assignment through a short presentation (no longer than eight minutes; 3 PowerPoint slides) on March 12th.

Final Individual Assessment 20%

On April 23rd, there will be an in-class closed-book assignment in which you will read an article describing an intervention and critique the intervention by providing written answers to questions based on what has been learned in the course. Additional information will be provided by Dr. Bozlak.

Component B: Team Activities/Assignments 50% of course grade

Final Team Project 20%

Your team will fully develop a proposal for a health promotion intervention on a topic chosen by your group from a list provided by Dr. Bozlak. The final project is due on Tuesday, May 14th by 9 am in Blackboard. A detailed description of this assignment will be handed out separately.

Semester Team Project Part I 10%

On February 26th, your team will be asked to turn in a written assignment that will present a draft of the needs assessment, problem identification, goals, and objectives of your intervention. This assignment will be returned to each team with detailed comments. This section of the final project should then be revised and incorporated into the final project due on May 14th.
NOTE: If you want additional feedback from Dr. Bozlak, you may turn in your draft theory and logic model sections on March 26th for review. This is optional.

Reverse Site Visit Presentations for Group Project 15%

On Tuesday, April 30th, all teams will present their intervention proposal at a reverse site visit. Grades for the presentation will be based on the overall presentation and your team’s responses to questions posed by the instructor and peer reviewers. Dr. Bozlak will provide the reviewers’ feedback to each group after the presentation. Each team is expected to review the feedback and make changes to the final paper, as appropriate.

Peer Evaluations 5%

Peer evaluations are an essential component of group work. This component of your grade will be based on evaluations completed by your other team members related to how you contributed to your team members’ learning and overall team performance. You will also be required to complete such evaluations for the other members of your team. Peer evaluations must be turned in on time (no later than 12 pm on May 15th) or the submitter will receive a deduction on this required assignment. Additional instructions and tools for completing this score component will be distributed separately.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Coursework due (before class in Blackboard)</th>
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<tbody>
<tr>
<td>Session I – January 29th</td>
<td>Overview of course; History and foundations of program planning - Readings: ● McKenzie Ch.1 &amp; 2 (5th ed. Ch. 1&amp;3)</td>
<td>Sign up for discussion facilitation</td>
</tr>
<tr>
<td>Session II - February 5th</td>
<td>Models for program planning in health promotion; Needs assessment; Begin - problem identification and definition; Community building and stakeholder involvement; Group creation and group time - Readings: ● McKenzie Ch 3, 4, 9 (5th ed. Ch. 2,4,9) ● Issel Ch. 5 - Strongly recommended: McKenzie Ch. 5</td>
<td>Topic selection for final projects – Submit to Dr. Bozlak by end of class session</td>
</tr>
<tr>
<td>Session III - February 12th</td>
<td>Problem identification and stakeholder involvement continued; Goals, objectives and setting priorities; Group Time - Readings: ● Yoo, S., Butler, J., Elias, T.I., Goodman, R.M. (2009). The 6-Step model for community empowerment: Revisited in public housing</td>
<td>Email name of organization for “Realities of program planning” assignment to Dr. Bozlak by 5 pm; Potluck sign-up</td>
</tr>
<tr>
<td>Session IV - February 19&lt;sup&gt;th&lt;/sup&gt;</td>
<td>Intervention Design: Program Theory &amp; Begin Logic Models; Group Time</td>
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<tr>
<td>- Readings:</td>
<td>(5&lt;sup&gt;th&lt;/sup&gt; ed. Ch 6); CDC SMART objectives document</td>
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<td><strong>Session V - February 26&lt;sup&gt;th&lt;/sup&gt;</strong></td>
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<td>Intervention Design – Logic Models continued, Strategies and Activities, Evidence-based programs</td>
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<tr>
<td>- Readings:</td>
<td>(5&lt;sup&gt;th&lt;/sup&gt; ed. Ch 7); Bartholomew Ch. 2 &amp; 3</td>
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<td>Group Assignment Part I due to Dr. Bozlak by 9 am in Blackboard. Part I consists of the following sections: Needs Assessment and Problem Identification, Goals &amp; Objectives</td>
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<td><strong>Session VI – March 5&lt;sup&gt;th&lt;/sup&gt;</strong></td>
<td>Intervention Design: Strategies continued – Focus on policy and advocacy interventions; The importance of intervention setting; Planning activities and Timelines; Group Time</td>
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<tr>
<td>Session VII – March 12th</td>
<td>The realities of program planning assignment – Presentations, class discussion, and potluck</td>
<td>8 minute presentation (3 slides); interview write-up and analysis due in Blackboard by 9 am today</td>
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<tr>
<td>March 19th</td>
<td>Spring Break – No Class</td>
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<tr>
<td>Session VIII – March 26th</td>
<td>Resource Allocation, Budgeting, Marketing; Group Time</td>
<td>Optional: If you would like feedback from Dr. Bozlak on your group’s theory and logic model for your project, you may turn it in to her today for review.</td>
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<tr>
<td>Session IX – April 2nd</td>
<td>Program adoption, implementation, and sustainability</td>
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<td>Session X - April 9th</td>
<td>Planning for Evaluation</td>
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<td>Session XI -</td>
<td>Group work time &amp; Team meetings with Dr.</td>
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<tr>
<td>Date</td>
<td>Activity</td>
<td>Description</td>
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<tr>
<td>April 16&lt;sup&gt;th&lt;/sup&gt;</td>
<td>Bozlak</td>
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<tr>
<td>Session XII - April 23&lt;sup&gt;rd&lt;/sup&gt;</td>
<td>In-class individual assessment; Out-of-class group work time</td>
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<tr>
<td>Session XIII - April 30&lt;sup&gt;th&lt;/sup&gt;</td>
<td>Reverse site visit presentations</td>
<td>Each group must submit a PowerPoint presentation or presentation outline to Dr. Bozlak by 9 am</td>
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<tr>
<td>May 7&lt;sup&gt;th&lt;/sup&gt;</td>
<td>No Official Class: Work within groups to finish and revise final proposal based on site visit reviews, if desired. Dr. Bozlak will be in C1 if students would like to meet in this space to work on their projects as a group and/or meet with her.</td>
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<tr>
<td>May 14&lt;sup&gt;th&lt;/sup&gt;</td>
<td>Final Exam Week</td>
<td>Group proposal due in Blackboard by 12 pm on May 14</td>
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<tr>
<td>May 15&lt;sup&gt;th&lt;/sup&gt;</td>
<td></td>
<td>Peer evaluations due to Dr. Bozlak via email or Blackboard by 12 pm</td>
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</table>
HPM 627
PROGRAM DEVELOPMENT IN HEALTH PROMOTION

Spring 2014, Tuesday 9:00 – 11:50
School of Public Health Room C1

Course Syllabus

Instructor

Mary Gallant, PhD, MPH
Associate Professor
Department of Health Policy, Management
and Behavior
Associate Dean for Student Affairs, SPH

Room 159 School of Public Health (Rm 107)
402-0262
mgallant@albany.edu
Office hours: Thursday 12-2 and by appt.

Course Description

This course provides an introduction to the application of theory and evidence to the
development of health promotion interventions. Students will be introduced to the major steps
of program planning, and will apply these steps to design their own health promotion
intervention. The course takes an ecological approach to health promotion, and also gives
students the opportunity to critically evaluate a variety of health promotion interventions
targeting change at the individual, interpersonal, organizational, community and public policy
levels, and to examine how behavioral science theories have been applied to the design of
these interventions.

Prerequisites

HPM 525 is a prerequisite for this course. Students who have not taken HPM 525 must have
the instructor’s permission to enroll in this course.

Course Goals

This course is primarily designed to help you learn to think like a health promotion expert, and to
help you learn to solve problems and make decisions as a health promotion professional by
using your own ideas, empirical evidence, and relevant theory. More specifically, at the end of
this course, you will be able to:

1. Conduct a systematic assessment to define a particular health issue or problem, to
identify the behavioral and environmental factors relevant to that health problem, and to
identify appropriate targets and levels of intervention.
2. Develop measurable program objectives.
3. Design program components and activities that are appropriate to meet program
objectives.
4. Critique existing health promotion interventions and identify their strengths and
limitations.
5. Identify and apply relevant theory and evidence to intervention design.
6. Collaborate with student colleagues in using your own ideas, theory and evidence to
make decisions in the health promotion program development process.
7. Develop a health promotion intervention using a systematic program planning process.

### Competencies

In addition to MPH core social and behavioral science competencies, this course primarily addresses the following MPH competencies for the Social Behavior and Community Health concentration:

1. Apply theory and strategy-based communication principles across different settings and audiences.
2. Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served.
3. Demonstrate team building, negotiation, and conflict management skills.
4. Use collaborative methods for achieving organizational and community health goals.
5. Analyze determinants of health and disease using an ecological framework.
6. Describe how social, behavioral, environmental, and biological factors contribute to specific individual and community health outcomes.
7. Describe the tasks necessary to assure that program implementation occurs as intended.
8. Explain how the findings of a program evaluation can be used.
9. Explain the contribution of logic models in program development, implementation, and evaluation.
10. Differentiate among goals, measurable objectives, related activities, and expected outcomes for a public health program.
11. Prepare a program budget with justification.
12. In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.
13. Develop a theory- and evidence-based health promotion intervention using a systematic program planning process.

### Readings

There is one required book. It is available at the campus bookstore and online via Amazon.com. Please be sure to get the 2013 edition of this textbook.


The following book, which has been required in HPM 525, will also be a useful resource in this course. For anyone who does not have a copy of this book from HPM 525, the instructor has a copy which may be borrowed for short periods.

**Health Behavior & Health Education. K Glanz, BK Rimer, & FM Lewis (Eds) Jossey-Bass. 3rd or 4th ed.**

All other assigned readings will be available on the class Blackboard site. Unless otherwise stated, all readings and reading-related assignments are to be completed prior to the class date under which they are listed. Reading assignments may be subject to minor additions or revisions over the semester.
Course Format and Grading

This course utilizes team-based learning. On the first day of class, you will be assigned to a team that will work together for the remainder of the semester. Teams will work together in class, and the amount of time you will need to work together in person outside of class will be limited, although you may choose to do so in preparation for certain assignments. In-class team work will consist of team quizzes, brief team “application” activities, and larger team assignments, all of which will require significant individual preparation by each team member. Thus, team members will be accountable for contributing to the success of the team. Each team member’s contribution to the team’s functioning, learning and overall team performance will be assessed by other team members at the end of the semester, and this peer evaluation will be 5% of your course grade.

Over the course of the semester, each team will develop a complete plan for a health promotion program on an assigned topic. The course is divided into 5 content units, corresponding to steps in the program planning process. Units, which will last 1 – 3 weeks, will all be structured the same way, and will include individual and team quizzes based on the assigned reading for that unit, large group discussions to clarify concepts, in-class team activities in which you will apply the concepts from that unit, brief individual homework assignments in preparation for these team activities, and a final unit project in which you complete the relevant step of your program plan. A detailed unit outline, containing assigned readings, homework assignments, and specific instructions for the unit project, will be handed out at the start of each unit. At the end of the semester, each team will share their complete program plan with the rest of the class and with some site visitors.

Your grade for the course will reflect a combination of individual and team activities and assignments, as follows:

Component A: Individual Activities / Assignments 45% of course grade as follows

Individual Readiness Assurance Process (RAP) 10% of course grade

On the first day of each unit, an individual Readiness Assurance Process assessment quiz (RAP) will be administered at the start of class. This will consist of a closed-book, 10-question quiz on the assigned readings. These assessments will cover basic concepts and main ideas from the assigned readings, and are designed to ensure that you are ready to begin applying the material to the program planning process. At the end of the semester, your lowest individual RAP score will be dropped.

Final Individual Assessment 25%

During the final exam period, there will be an in-class closed-book assignment in which you will read an article describing an intervention, and critique the intervention by providing written answers to questions based on concepts important to the program planning process.

Homework Assignments 10%

Over the course of the semester, you will be assigned several brief homework assignments that will be necessary for upcoming team activities and projects. Homework will be graded on a 3-point basis as follows: 0=not completed; 1=completed, minimally adequate; 2=completed, excellent.
Component B: Team Activities/ Assignments  

50% of course grade as follows

Team Readiness Assurance Process (RAP)  
10%

Immediately following each individual Readiness Assurance Process quiz, each team will complete the same RAP quiz. You will work together as a team to discuss the questions and choose answers. At the end of the semester, your lowest team RAP score will be dropped.

Team In-class Assignments  
5%

During class time, you will engage in multiple small activities within your team. Each of these activities will be graded on a 3-point basis as follows: 0 = inadequate; 1 = minimally adequate; 2 = good; 3 = excellent.

Team Unit Projects  
25%

Each unit will culminate in a team unit project, in which your team will complete an aspect of one step of designing a health promotion intervention. Specifics about these unit projects will be included with the detailed outlines provided for each unit. Each unit project will be due by the end of class on the day indicated on the course schedule.

Final Program Plan  
10%

By revising, expanding, and compiling your unit projects, your team will fully develop a proposal for a health promotion intervention on an assigned topic. The final project is due on Friday, May 9 by noon. A detailed description of this assignment will be handed out separately.

On Wednesday May 6 all teams will share their nearly-completed program plans with the rest of the class and with some external reviewers in a brief presentation. This will be used for both feedback on your program plans, and feedback on presentation skills, but will not be graded.

Component C: Peer Evaluation  

5% of course grade

Peer evaluations are an essential component of team-based learning. This component of your grade will be based on evaluations completed by your other team members related to how you contributed to your team members' learning and overall team performance. (You will also be required to complete such evaluations as the basis for team maintenance scores for the other members of your team.) Additional instructions and tools for completing this score component will be distributed separately. Midterm peer evaluations will be conducted to assess and enhance group functioning but these will not count toward your final grade. Final peer evaluations will be conducted on May 6 and will count toward your final grade.

General Course Policies

Class will begin promptly at 9:00 and will end by 11:50. We will generally take one 5-10 minute break.

Attendance is not explicitly graded. However, you will not receive any credit for activities or assignments that are completed during class time in which you are absent. Therefore, you must plan carefully for any class you know you will need to miss. Because illness and other
unexpected absences sometimes occur, you are allowed to drop one individual and one team RAP score. If you know ahead of time that you have an unavoidable conflict with a day on which team unit projects will be completed, please come see me.

**Cell Phone / Laptop Policy**

Out of respect for other students, please turn your cell phone off. If you must have your cell phone on in case of an emergency, please keep it on vibrate and only use it during the break period. There should be no texting during class.

Students are encouraged, though not required, to bring laptops to class to use during class activities, if desired. Please, however, do not surf the net during class and only use the laptop for class activities.

**Academic Honesty**

Students are expected to adhere to the University’s standards of academic integrity, described in the Graduate Bulletin (www.albany.edu/graduatebulletin/requirements_degree.htm#standards_integrity). Collaboration on assignments intended to be completed independently and/or plagiarism will ordinarily result in a failing grade for the assignment and could result in a failing grade for the course.

Because plagiarism is a serious issue, and sometimes occurs unintentionally due to lack of knowledge about the correct way to cite others’ work, you are expected to be familiar with the material in the following tutorial on plagiarism provided by the University at Albany library. This tutorial, which can be found at http://library.albany.edu/usered/plagiarism/index.html, takes about 10-15 minutes to complete. All plagiarism, even when unintentional, is subject to the same penalties, so please ensure that you are familiar with the rules about citing others’ work.

**Students with Disabilities**

The Disability Resource Center at UAlbany provides support and advocacy services to students with disabilities. Please arrange a time to talk to me if you need additional support in this class because of a disability.
### HPM 627
**COURSE OUTLINE SPRING 2014**

<table>
<thead>
<tr>
<th>Session 1</th>
<th>January 28</th>
<th>Class canceled due to instructor illness</th>
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</thead>
<tbody>
<tr>
<td>Session 2</td>
<td>Feb 4</td>
<td>Overview of course; overview of program planning</td>
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</table>

#### UNIT 1

| Session 3 | Feb 11 | Needs assessment  
RAP 1 |
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<tbody>
<tr>
<td>Session 4</td>
<td>Feb 18</td>
<td>Needs assessment, continued</td>
</tr>
</tbody>
</table>
| Session 5 | Feb 24 | Setting goals and objectives  
Unit 1 project |

#### UNIT 2

| Session 6 | Mar 4 | Theories, methods and strategies for individual and interpersonal interventions  
RAP 2 |
|-----------|-------|--------------------------------------------------|
| Session 7 | Mar 11 | Theories, methods and strategies for individual and interpersonal interventions, continued  
Unit 2 project |
|           | Mar 18 | No class |

#### UNIT 3

| Session 8 | Mar 25 | Theories, methods and strategies for organizational and community-level interventions  
RAP 3 |
|-----------|--------|--------------------------------------------------|
| Session 9 | Apr 1  | Theories, methods and strategies for organizational and community-level interventions, continued  
Unit 3 project |

#### UNIT 4

| Session 10 | Apr 8  | Organizing and implementing an intervention, Part I  
RAT 4  
Unit 4 project |
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<tbody>
<tr>
<td></td>
<td>April 15</td>
<td>No class</td>
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#### UNIT 5

| Session 11 | Apr 22 | Organizing and implementing an intervention, Part II  
RAT 5 |
| Session 12 | April 29 | Organizing and implementing an intervention, continued  
|           |         | Unit 5 Project |
| Session 13 | May 6   | Reverse site visit – project presentations  
|           |         | End of semester pot luck |
|           | May 9   | Final projects due by noon |
|           | May 13  | Final individual assessment |
COURSE INFORMATION

Instructor information:

Feng (Johnson) Qian, MD, PhD  
Tel: 518-402-0325  
Assistant Professor, HPMB  
Email: fqian@albany.edu  
Rm 169, School of Public Health  
Office hours: Wednesday 4pm – 6pm & other times by appointment

Teaching assistant:

Victoria (Tori) J. Roggen  
Email: troggen@albany.edu  
Office hours: Wednesday 11am-12pm

Course time and location: SPH Teaching Lab L2

Pre-requisites: None

COURSE DESCRIPTION

This course introduces students to the methods, objectives, and applications of economic evaluations in the health care sector. It incorporates the elements of economic analysis of health care delivery and its growing role in medical decision making and health policy evaluation. Economic evaluation techniques such as cost-effectiveness, cost-benefit, and cost-utility analysis are presented as paradigms for determining resource allocations and for purposes of program planning. In this course, students will also participate in a lab to learn decision analysis software such that they can perform analyses themselves as a class project.

COURSE LEARNING OBJECTIVES AND COMPETENCIES*

Learning Objectives:

(1) Demonstrate understanding of the concepts of cost and outcome evaluation as applied to public health programs, policies, and interventions
(2) Describe steps for designing and conducting economic evaluation of public health programs, policies, and interventions
(3) Use decision analytic modeling for economic evaluation
(4) Apply techniques used in economic evaluations to particular health care policies or programs
(5) Learn how to tailor economic evaluation to reflect the interests and concerns of critical stakeholders
(6) Apply “systems thinking” when evaluating health and economic consequences of public health programs, policies, and interventions
(7) Use TreeAge software to conduct economic evaluation
(8) Communicate the results of an economic evaluation to specialists and the general public

Competencies:

This course teaches topics and skills that relate to Health Policy and Management competencies considered critical by the Association of Schools of Public Health (ASPH):

(1) Identify the main components and issues of the organization, financing, and delivery of health services in the US
(2) Use quality and performance improvement concepts to address organizational performance issues
(3) Utilize “systems thinking” for resolving organizational problems as well as community and public health issues
(4) Apply the principles of program planning, development, budgeting, management, and evaluation to organizational and community initiatives
(5) Effectively communicate health policy and management issues using media, advanced technologies and community networks

READINGS

Required Textbook

Recommended Textbooks


Reference Textbook

Required Readings
There are readings assigned for each class. They are available via the Blackboard site. All readings should be completed before the class session for which they are listed on the reading list.

OTHER COURSE REQUIREMENTS

TreeAge software (student version) is strongly recommended. (link: www.treeage.com)
Class participation (10%) – This includes attending class, arriving on time at the beginning of class and after breaks, completing all required readings before class, and contributing thoughtfully to class discussion and lab learning activities.

Homework (20%) – This includes 4 homework assignments. Students need to submit their homework by the due date and time.

Midterm examination (30%) – This is a 2-hour closed book written examination on March 13, 2014.

Semester project (40%) – Students will be required to write a 10±2 page publishable paper of an economic evaluation on public health or medicine. Specific guidelines for the semester project will be provided by the instructor in class. It is best to start thinking about the paper as early in the course as possible. To assist in moving your ideas forward you will be required to write a 1-page overview of your project (due February 20, 2014) and to give a 15 minute presentation of your research project on May 1, 2014 (10%) including your results as well as their public or clinical policy implications (templates for your presentation and papers will be offered by the instructor). During the presentation, each student will discuss with the class with regard to the methodology, results, and implications. Each student must prepare sufficient copies of their outlines for all students in the class. A final paper (30%) is due on May 8, 2014.

For the project, students are expected to complete independent Cost-Effectiveness Research using TreeAge software. The instructor strongly encourages each student to prepare an abstract and a paper to submit to national conferences (e.g., International Society for Pharmacoeconomics and Outcomes Research Annual Meeting (ISPOR), Society for Medical Decision Making Annual Meeting (SMDM), etc) and peer-reviewed journals (e.g., Value in Health, Medical Decision Making, etc).

Grading System:
A: 96-100
A-: 90-95
B+: 85-89
B: 80-84
B-: 75-79
C+: 70-74
C: 65-69
C-: 60-64

ASSIGNMENT DESCRIPTIONS

See above for the 4 homework assignments information.
As stated in the University’s Community Rights and Responsibilities, the following forms of conduct are deemed as academically dishonest acts and will not be tolerated: plagiarism, cheating on exams, multiple submission of the same work, forgery, sabotage, unauthorized collaboration with other students, falsification of work, bribery or use of purchased research service reports without appropriate notation; and theft, damage or misuse of library or computer resources. Attempts to commit such acts shall also constitute academic dishonesty. Students assume full responsibility for honesty in academic exercises. In accordance with University policy, any instance of academic dishonesty will result in an automatic failing grade for the course and potential sanctions by the school and university. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. There will be no exceptions.

**GENERAL COURSE POLICIES**

If students need to miss class, please inform the instructor ahead of time. It is student’s responsibility to find out what you missed in class and to make arrangements for any assignments due. More than 3 missed classes during the semester will automatically result in loss of half of the total class participation points for the semester, in addition to any points lost as a result of late assignments not arranged with the instructor (see below).

Homework assignments submitted any time after the specified due date and time will result in 5 points deducted from the assignment/paper grade for each day it is late, unless previous arrangements are made with the instructor. (I.e., any homework assignment submitted within 24 hours of its due day and time will receive -5 points, between 24 and 48 hours, -10 points, etc.). If an extenuating circumstance arises and students think that they might not be able to meet a deadline, it is student’s responsibility to contact the instructor ahead of time to discuss possible alternatives.
Session 1 (Jan 23): Course Overview / Introduction to Economic Evaluations in Health Care

Objectives:
(1) To introduce course content, expectations, and evaluations
(2) To provide an overview of the practical importance for conducting economic evaluations
(3) To review the basic types of economic evaluations

Readings:
(2) Garber AM. Cost-effectiveness and evidence evaluation as criteria for coverage policy. Health Affairs 2004; W4-284.

Session 2 (Jan 30): Research Design Issues (9:00-10:30am)

Objectives:
(1) To provide a basic “frame” upon which to conceptualize a cost-effectiveness analysis
(2) To review the study designs used in cost-effectiveness research, including decision analysis and clinical trials
(3) To review elements of effectiveness data used in cost-effectiveness research

Readings:

Lab 1 (10:50-11:50pm)
Introduction to Decision Trees and TreeAge software
Session 3 (Feb 6): **Issues in Evaluating Cost** (9:00-10:30am)

**Objectives:**
1. To understand the theoretical basis for estimating costs
2. To understand types of costs
3. To distinguish between costs, charges, reimbursements
4. To determine the role of time and the importance of discounting and inflation

**Readings:**

**Lab 2 (10:50-11:50am)**
**Building a Tree using TreeAge software**

Session 4 (Feb 13): **Issues in Evaluating Outcomes – Quality-Adjusted Life Years (QALYS)** (9:00-10:30am)

**Objectives:**
1. To develop a framework for determining the appropriate measures of an intervention’s effectiveness
2. To review approaches to aggregating and valuing outcomes so that they can be compared
3. To demonstrate how variability in the methods by which outcomes are valued affects estimates of burden and treatment effectiveness

**Readings:**

**Lab 3 (10:50-11:50am)**
**Using Formulas in TreeAge software**

Feb 20: No Class

But, students need to submit a one-page project outline to the instructor and get approved by the course instructor by February 20, 2014.
Session 5 (Feb 27): **Practical Costing Methods** (9:00-10:30am)

**Objectives:**
1. To determine which costs to include in a cost effectiveness analysis
2. To understand practical aspects and limitations in costing health care
3. To review common problems encountered in estimating costs

**Readings:**

**Lab 4 (10:50-11:50am)**

Bayes’ Theorem and Applications

Session 6 (March 6): **Decision Analysis: Estimating Declining Exponential Approximation of Life Expectancy (DEALE)**

**Objectives:**
1. To discuss the declining exponential approximation of life expectancy (DEALE)
2. To provide students with a method for estimating outcome values in decision trees

**Readings:**

March 13: Midterm 2-hour closed book written examination

SPRING BREAK: March 15 – March 21 No Class
Session 7 (March 27): Estimating Probabilities and Utilities

Objectives:
(1) To understand sources of and data for estimating within decision analysis
(2) To review diagnostic test characteristics (sensitivity, specificity, etc)
(3) To understand sources of and data for estimating utilities within decision analysis

Readings:
(2) Gafni A. Alternatives to the QALY measure for economic evaluations. Support Care Cancer. 1997;5:105-11.

Session 8 (April 3): Introduction to Markov Models (9:00-10:30am)

Objectives:
(1) To develop a unifying framework for modeling long-term outcomes
(2) To introduce simple Markov models and semi-Markov models
(3) To simulate long-term outcomes

Readings:

Lab 5 (10:50-11:50am)
Markov Modeling

Session 9 (April 10): Reading Literature on Proposed Study

Session 10 (April 17): Evaluating Uncertainty in Cost-Effectiveness Analysis (9:00-10:30am)

Objectives:
(1) To review the four kinds of uncertainty that pose problems: i) parameter values, ii) projection beyond the period of the study, iii) stochastic uncertainty, and iv) generalizability
(2) To provide students with examples of how to measure the uncertainty in a cost-effectiveness ratio in the context of an RCT
**Readings:**

**Lab 6 (10:50-11:50am)**  
Cost-Effectiveness Analysis/Sensitivity Analysis

**Session 10 (April 24): Role of Decision Making in Healthcare & Issues Surrounding Economic Evaluations in Health Care**

**Objectives:**
(1) To have a basic understanding of the psychology of judgment and decision making  
(2) To understand the role of decision science in health services research  
(3) To have a basic understanding of the controversial issues surrounding economic evaluations in the U.S.  
(4) To learn the latest progress and debates in economic evaluation methods in the world research

**Reading:**

**Session 11 (May 1): Student Project Presentation**

**May 8: Student Final Paper Due by 5pm May 8 - Submitted to the course instructor by email**
Georges Potworowki, PhD
Assistant Professor
Office HPM 185
Office hours: Wednesdays 4:00-5:00pm, Thursdays 10:30-11:30am, or by appointment
Email: gpotwo@albany.edu
Tel: 518-402-0332

Location: C3
Time: Thursdays, 1:00-3:45 PM

Pre-requisites: HPM 500, HPM 501, advanced standing or permission of Instructor.

This course is designed to cover the major aspects of managing both public and private health care organizations. These aspects include managing external relationships with key stakeholders like patients and providers, understanding the individual and group dynamics that occur within health care delivery settings, and applying the business and emerging tools used in managing on an everyday basis in health care delivery settings. Topics that would be covered in this course include the strategic management process in health care (overview), forming organizational alliances, human resources issues in managing health care professionals, organizational behavior and culture, business essentials in the areas of marketing, accounting, and finance as they apply to specific health management needs, and emerging management tools like quality management and health information systems.

Course learning objectives
At the end of the course, it is expected that students will be able to:

Communication skills:
- Stronger ability to communicate as a manager and decision maker both verbally and in writing.
- Enhanced writing skills.
- More skill in management conversation and communication, i.e., learning how to analyze issues quickly (and with incomplete information) and devise decision alternatives/solutions in clear and concise ways.
- Enhanced ability to perform PowerPoint management presentations.
- Enhanced knowledge of how to present evidenced-based management assessments and analyses of health care organization issues.

Analytical skills:
- Systems thinking and how it applies to organizations in health care.
• Understand how the concept of “organizational learning” applies to health care settings.
• Understand and apply the basic principles of evidenced-based management to health care decision making.
• Understand how to think about health care quality and apply tailored management strategies to improving quality in health care settings.
• Understand how to begin the process of work redesign within health care organizations.
• Understand how to use performance measurement and improvement tools such as the Balanced Scorecard and Lean Techniques of Production.
• Knowledge of how to conceptualize and analyze quality problems in health care settings.
• Knowledge of how to apply the tools and philosophy of a learning organization to health management and health service delivery issues.
• Understanding key issues and decisions to consider in leading and managing an organization through change.
• Greater ability to make timely management decisions in health care based on incomplete information.
• Enhanced ability to analyze real world health organization cases and identify pertinent management issues and how to solve them by applying theory.
• Enhanced ability to think through the ethical and human resource implications of health management decisions.

Library research skills:
• Enhanced ability to do library and internet research, using appropriate databases in the management and health services administration areas, for producing literature reviews around specific management topics such as culture and organizational change, and their applicability to health care issues.
• Increased familiarity with the content of top peer-reviewed management journals, both within and external to the health care field.
• Enhanced knowledge to conduct systematic management reviews of topics such as health care quality, and produce strong, evidenced-based conclusions from this research.

Synthesis and integration skills:
• Understanding of the major issues faced by health care managers on an everyday basis in terms of balancing issues such as efficiency with both quality of care and worker/professional concerns.
• Perform case analyses which require integration of diverse management theories/concepts/research to the diagnosis and solution of management problems.
• Enhanced ability to analyze real world health organization cases and identify pertinent management issues and how to solve them applying theory.
• Enhanced ability to identify the multi-dimensional aspects of performance and quality in typical health care service settings.
• Fuse different articles from the literature together into original statements on a health management issue.
• Integrate management theory and research into coherent analytic statements on health management problems and solutions.

Basic management and public health science skills:
• Understanding of the basic principles of cutting edge management innovations in health care such as Total Quality Management, Pay for Performance, the Balanced Scorecard, Lean Techniques of Production, patient-centered care, and learning-oriented approaches to quality improvement.
• Be able to identify the key elements of an “ideal-type” service delivery organization with respect to human resources management, ethical decision making, service quality, and customer satisfaction.
• Understanding the elements of planning, redesign, and decision making in health organizations that contain diverse groups of stakeholders.
• Knowledge of the main elements comprising management decision making in health care.
• Understanding the importance of mission, values, and ethics in organizational success.
• Understand systems thinking and how it applies to health care delivery settings.
• Understand the role of performance data when used to assess or improve quality of care.
• Understand and be able to constructively influence team dynamics
• Understand and be able to effectively apply basic principles of conflict resolution.
Competencies
This course teaches topics and skills that relate to competencies considered critical by the Association of Schools of Public Health (ASPH) for all MPH graduates (http://www.asph.org/publication/MPH_Core_Competency_Model/index.html), including

Health Policy and Management:
• Apply quality and performance improvement concepts to address organizational performance issues.
• Apply ‘systems thinking’ for resolving organizational problems.
• Communicate health policy and management issues using appropriate channels and technologies.
• Demonstrate leadership skills for building partnerships.

Professionalism:
• Apply evidence-based principles and the scientific knowledge base to critical evaluation and decision-making in public health.

Leadership:
• Describe the attributes of leadership in public health.
• Engage in dialogue and learning from others to advance public health goals.
• Demonstrate team building, negotiation, and conflict management skills.
• Use collaborative methods for achieving organizational and community health goals.
• Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.

Systems Thinking
• Identify characteristics of a system.

READINGS

Required Texts:
This course does not use a textbook, but rather draws on peer-reviewed journal articles, articles from leading practitioner journals, and other media sources. These will be posted on Blackboard, and in some cases, may not be the same for all students. For some classes, students will be responsible for identifying, reading, and then presenting a relevant article of their choosing. All assigned readings are required and are to be completed prior to the class date for which they will be the focus of discussion.

GRADES
This is a class that treats students as they should be treated: advanced (near degree) masters’ candidates. It is designed as a capstone experience for MPH and MS students in health policy and management. Thus, the expectations placed on students are fair but challenging given this advanced status. It is also a course whose depth and value are determined largely by students’ personal desire to engage the material, do research, and be active participants in each class. It is critical that all readings are done on time, done carefully, and that students come to class prepared to discuss the material and ask questions. Falling behind in this type of course is not advised given how each week’s material builds upon prior material. Unless otherwise noted, you are required to read everything on the syllabus. The class will be a mixture of short lectures, group discussion, and exercises. Always bring the textbook to class, and use the critical reading techniques taught in the first class.

Keep in mind always that strategic management and leadership are a blend of art and science, but more a disciplined art in the end that relies upon having a lot of sound information at your disposal. First and foremost, it involves making evidenced-based decisions. It is comprised of a set of skills best acquired through “on the
job” training and practice. A big part of this class is to begin this practice. However, there is a specific model and tools which you must learn to use well, and these are the focus of this class. The semester will focus on using the case method employed by such places as Harvard Business School. There is plenty of material that lends itself to debate and discussion. In addition, the use of case analysis as a teaching tool is crucial to provide “real world” instances in which strategic management and leadership can be practiced properly (they can undermine employee morale, organizational effectiveness, and personal career advancement if not practiced properly). To get better at strategic decision making, one has to practice making and evaluating lots and lots of strategic decisions. One also must learn how to link aspects of the organization’s situation to different decision alternatives. This course addresses both of these needs. It is fully expected that students will attend class and actively fulfill their role as outlined here. The individual components of the course will be graded numerically, and will be compiled into a letter grade ranging from A to E for the course overall.

<table>
<thead>
<tr>
<th>Evaluation component</th>
<th>Percent of total grade</th>
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<tbody>
<tr>
<td>Individual situational analysis paper</td>
<td>30%</td>
</tr>
<tr>
<td>Individual decision analysis paper</td>
<td>30%</td>
</tr>
<tr>
<td>Group strategic plan</td>
<td>25%</td>
</tr>
<tr>
<td>Team participation (peer reviewed)</td>
<td>5%</td>
</tr>
<tr>
<td>Class Participation</td>
<td>10%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
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</tbody>
</table>

**ASSIGNMENT DESCRIPTIONS**

1. **Individual situational analysis paper (30%)**
   Students will be required to prepare a situational analysis and SWOT matrix of a case contained in the Swayne et al. book. More will be said about this assignment in class, and guidelines will be provided. However, its objective is to get students comfortable analyzing an organizational situation with which they are not previously familiar, pull out its relevant aspects (relevant to the strategic problem facing the organization in the particular case), and clearly and succinctly present these aspects in written form. The situational analysis is the foundation of a good strategic/business plan. Key learning objectives for this paper are to get students comfortable in choosing and using the proper tools in doing internal environmental analysis, external environmental analysis, competitor analysis, and in conveying only pertinent information produced by those tools relative to the particular case issue at hand. It is also designed to get students comfortable understanding the scope and substance of information that goes into business planning and decision making. This exercise prepares students for doing the remainder of the assignments in the course.

2. **Individual decision analysis paper (30%)**
   For this assignment, students will use the assigned case from the Swayne et al. book used for assignment one and their situational analysis paper to develop an in-depth decision analysis paper (with full appendixes). The intent of this assignment is to build on and extend assignment one and prepare a decision analysis that presents the strategic issue, situational analysis, strategic alternatives at each organizational level, and select aspects of the operational plan for implementing those alternatives/decisions. More will be said about this assignment in class. Unlike the situational analysis, the decision analysis will require more intense and comprehensive understanding of all aspects of the case, more brevity in expression of thought, and will require students to begin thinking about the decisions and operational aspects that need to be made in a strategic planning process.

3. **Group Strategic Plan (25%)**
   The major group-based product of the course is the group strategic plan and presentation, due at the end of the semester. This project will represent a full-blown strategic plan (all aspects from situational analysis to feedback/evaluation) of a real strategic issue for a local health care organization. Students will be assigned into groups early in the semester. More will be said about this assignment in class, and student groups are urged to begin working on the plan early in the semester, since it represents a fairly major research effort on the part of
the group. In essence, this plan and the associated in-class presentation of that plan represent the culminating assignment of the course, designed to get you experience doing long-term strategic planning in a multiple stakeholder setting around a real health care issue. From this project, students will feel comfortable in their ability to engage in a strategic planning process and in developing a strategic plan in any organizational situation they might encounter.

4. Team participation (5%)
The team participation score is based on the average of your helping behavior scores submitted anonymously by your team members. Evaluations will be submitted by students to the instructors, who will then screen the feedback, de-identify it, and send it to each of the intended students. Feedback will be submitted at the midpoint of the semester for formative feedback, and again at the end of course. Only the scores from the final evaluations will count towards your final grade.

5. Class participation (10%)
This is a real grade that will be given at the midterm point and updated on the last night of class of 10 points. Please remember, class participation in this course will not mean simply talking the loudest or most. Rather, it will be critiqued on the quality (i.e., substance) of what one has to say, relevant to the particular material we are discussing that night in class. As managers, you will always need to choose your arguments, points, and words carefully. In other words, thoughtful, succinct, and clear points made that reflect knowledge of material required for that evening will score the highest. Evidenced based responses lead to the highest participation grade. The participation grade can range from 0/10 to 10/10 depending on class attendance and the scope and substance of student involvement.

**POLICY ON ACADEMIC INTEGRITY**

Academic dishonesty, in any of its forms, will not be tolerated. For this course, the two major concerns are plagiarism and collaboration on the individual assignments. Plagiarism in any form is considered an instance of academic dishonesty. I will randomly check papers, assignments throughout the course to determine if any plagiarism is occurring. I do this through online tools as well as checking the content of supporting articles and references. There will be no exceptions so please familiarize yourself with what constitutes plagiarism and seek assistance from the instructors if you have any questions or concerns. There is also plenty of good guidance that can be found on the Web for how to avoid plagiarism. As per University policy, the burden on avoiding plagiarism falls solely upon the student. There will be no “after the fact” rationales that can be provided to the instructor in favor of your case where plagiarism is involved. Please read the Graduate Bulletin, and get on-line to the UAlbany Library Website, which has much more detail about what constitutes plagiarism and how to avoid it.

Collaboration on the individual assignments, which includes, but is not limited to, sharing of case-relevant information between individuals in the class, is also a form of academic dishonesty. No information for the individual assignments is to be shared across students. Each student is expected to do every aspect of the two individual assignments on their own with no help from others in the class. Any instance of collaboration on individuals’ papers, including during the information-gathering phase, is considered an instance of academic dishonesty.

In accordance with University policy, any instance of academic dishonesty (please see the Community Rights and Responsibilities booklet for definitions) will result in an automatic failing grade for the course (i.e., a grade of E), reporting of the incident formally to the Office of Graduate Studies, and potential sanctions by the school and university. Students will be told at the time the incident occurs of this penalty, and it will be applied immediately. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. That said, we are here to help you learn. For any assignment, feel free to consult with us to get clarification around potential plagiarism problems, BEFORE you hand in your assignment (and not after you hand it in, which is too late).
**OTHER CLASS POLICIES**

**Attendance**
This class is discussion and case-based, and so student attendance is critical (i.e., the more students engage in class, the more they will learn). Any class missed without a documented, valid excuse will result in a reduction of the class participation grade. Missing two classes, regardless of reason, drops the overall participation grade to 5/10, and possibly lower depending on student input in the other class sessions. Missing more than two classes in the course, regardless of reason, will result in an automatic 0/10 participation grade, which drops the overall course grade by 1-2 grades (e.g., A to C). Thus, missing classes in the course can facilitate a failing grade in the course, and definitely lowers a course grade substantially. The instructor reserves the right, in accordance with University policy, to ask any student missing a meaningful amount of time in class (as defined by the instructor) to withdraw from the course before the formal withdrawal period ends. Class participation grades can and will vary from zero to 10 based upon the extent to which individual students provide thoughtful input into class discussions.

**Assignments**
You have three options for handing in your three assignments: 1) An assignment submitted before its deadline and in the manner specified by the instructors will be eligible for a maximum of 100% of the grade for that assignment and will receive written feedback; 2) An assignment submitted within 48 hours after its deadline and in the manner specified by the instructors will be eligible for a maximum of 80% of the grade for that assignment and will receive written feedback; 3) Any assignment submitted more than 48 hours after its deadline, but in the manner specified by the instructors, will receive written feedback.

**Withdrawals and Incompletes**
Students are strongly encouraged to complete all assigned work during the semester. Course withdrawal will not be granted after the formal withdrawal date noted on the semester calendar. Incompletes must be requested and will be granted only in extraordinary circumstances, most often in personal medical emergencies of an extended nature (please note, incompletes are not appropriate for things such as the student having a heavy workload, unanticipated job responsibilities, the course being harder than anticipated, etc.). Any incomplete granted must be removed by the end of the following semester. Failure to do so will result in a failing grade. Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty, course withdrawal, incompletes, etc.
## Calendar: Principles of Health Organization Management

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aug 29</td>
<td>Introduction to the Course</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Sep 5</td>
<td>UAlbany Classes Suspended - Rosh Hashanah</td>
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<tr>
<td>3</td>
<td>Sep 12</td>
<td>Evidence-based management and systems thinking</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>4</td>
<td>Sep 19</td>
<td>Decision-making</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
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<td></td>
<td>* Individual Assignment 1 handed out</td>
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<td></td>
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<td>* Individual Management Paper instructions handed out</td>
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<tr>
<td>5</td>
<td>Sep 26</td>
<td>Baldrige</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
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<td></td>
<td>✭ Individual Management Paper topic due</td>
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<tr>
<td>6</td>
<td>Oct 3</td>
<td>Conflict Resolution</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
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<td>✭ Individual Assignment 1 due (10%)</td>
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<tr>
<td>7</td>
<td>Oct 10</td>
<td>Teams</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>8</td>
<td>Oct 17</td>
<td>Leadership</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>9</td>
<td>Oct 24</td>
<td>Organizational Learning</td>
<td>✭ Individual Management Paper due (25%)</td>
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<td>Reading: Posted on Blackboard</td>
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<tr>
<td>10</td>
<td>Oct 31</td>
<td>Organizational Change</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>11</td>
<td>Nov 7</td>
<td>Ellis Medicine’s Baldrige Journey (Guest: Cindy Farrelly)</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>12</td>
<td>Nov 14</td>
<td>Motivation and Performance: Symposium (with Guests)</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td>13</td>
<td>Nov 21</td>
<td>Organizational Culture</td>
<td>Reading: Posted on Blackboard</td>
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<tr>
<td></td>
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<td>✭ Individual Assignment 2 due (25%)</td>
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<tr>
<td>14</td>
<td>Nov 28</td>
<td>UAlbany Classes Suspended - Thanksgiving</td>
<td></td>
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<tr>
<td>15</td>
<td>Dec 5</td>
<td>Team presentation</td>
<td>Reading: None</td>
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<tr>
<td></td>
<td></td>
<td>✭ Team presentations and report due (25%)</td>
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HPM 645 - GLOBAL PUBLIC HEALTH
Summer Session, 2014
Instructor: John Justino, Director, Center for Global Health
E-mail: jjustino@albany.edu
Office Hours: By Appointment

Course Description/Overview: This course explores international public health issues and various health care systems are identified; measures of health outcomes in populations are evaluated. Specific issues to be explored include infectious disease; reproductive health and nutrition; chronic disease and mental health; unintentional injuries and violence; and health and the economy. International health programs and projects as well as the globalization and practice of international health will also be explored. Each student will select a national public health system for an in-depth study which will identify major population-based health issues and make recommendations for improved outcomes. Prerequisite: graduate standing.

Global Health Competencies and Learning Objectives: In 2011 the Association of Schools of Public Health (ASPH) established the Global Health Competency Model for use in formal educational programs related to global health. Five domains were selected for emphasis: (1) Capacity Strengthening; (2) Collaborating and Partnering; (3) Ethical Reasoning and Professional Practice; (4) Health Equity and Social Justice; (5) Program Management; (6) Socio-Cultural and Political Awareness; and (7) Strategic Analysis. For each domain specific competencies were developed. It is anticipated that students completing this course (as well as others in the Global Health Certificate) will gain competency in all the domains. By completion of this course, students are expected to acquire the following competencies:

- 1.2 Identify methods for assuring health program sustainability.
- 1.4 Develop strategies that strengthen community capabilities for overcoming barriers to health and wellbeing.
- 2.6 Exhibit interpersonal communication skills that demonstrate respect for other perspectives and cultures.
- 3.1 Apply the fundamental principles of international standards for the protection of human subjects in diverse cultural settings.
- 3.2 Analyze ethical and professional issues that arise in responding to public health emergencies.
- 4.1. Apply social justice and human rights principles in public health policies and programs.
- 4.3. Critique policies with respect to impact on health equity and social justice.
- 5.2. Apply scientific evidence throughout program planning, implementation, and evaluation.
- 5.6. Develop monitoring and evaluation frameworks to assess programs.
- 6.4. Design health advocacy strategies.
- 6.5. Describe multi-agency policy-making in response to complex health emergencies.
- 7.2. Implement a community health needs assessment.

In addition, the specific learning objectives include the development and demonstration of the following:

- An understanding of the principal causes of mortality and morbidity throughout the world today and in the future in light of the demographic transition from high to low fertility rates and reduced mortality rates which are faced by many nations today;
- An understanding of the cultural diversity of population groups within various countries and regions of the world and their belief systems, values, and responses to illness and death as well as an understanding that international health cannot be separated from issues of human rights and social justice;
An understanding of specific health issues including the health of women and children, reproductive health and nutrition, the principal infectious agents and vectors responsible for communicable disease, and the increasing rates of non-communicable (or chronic) diseases;

An understanding of the appropriate responses to complex humanitarian emergencies which involve the displacement of large numbers of people within a country or between neighboring countries;

An understanding of the importance of health for economic development and productivity;

An understanding of the roles played by national, regional, and international agencies as well as nongovernmental and private voluntary agencies in the delivery of preventive and other health care services; and

The ability to conduct a health assessment of a specific low-income nation including recommendations for improving health outcomes by applying the knowledge and understandings gained during the course.

Course Learning Activities: Each module is organized in a format that includes two or three mini-lectures followed by a discussion question and a brief writing assignment or exercise as well as a reading assignment based on the textbooks and other assigned readings. The readings and lectures may contain several major concepts which will be further explored in the discussion and writing assignments.

The discussion questions are meant to evoke student interaction. Every student is expected to contribute to every discussion. This will require almost daily connection to the course to follow the discussion. My job is to monitor the discussion and to keep it on track. I may, from time to time, offer an opinion or move the discussion along but, for the most part, it will be up to you to keep the discussion going. You may draw upon the lectures and reading assignments as well as supplemental readings and personal experience when contributing to the discussion.

The written assignments and exercises are generally short (400-500 word) "papers" or short answer "tests" to determine your level of understanding of the material presented.

How You Will Be Evaluated: The course has been divided into eleven teaching modules and one final project module; each teaching module contains two or three mini-lectures and a reading assignment; most contain a discussion question to encourage class participation and a written assignment or exercise. We will have a mid-term review to assess progress and a final project consisting of a health assessment of a specific nation.

Your final grade in the course will be determined by the following (total points can add up to 100):

<table>
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<tr>
<th>Element</th>
<th>Points</th>
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<tr>
<td>Discussion/participation</td>
<td>30</td>
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<tr>
<td>Written exercises</td>
<td>30</td>
</tr>
<tr>
<td>Mid-term review</td>
<td>15</td>
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<td>Final project</td>
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Grading scale for final grade:

<table>
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<tr>
<th>Total points</th>
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<td>93-100</td>
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<td>90-92</td>
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<td>87-89</td>
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<td>Less than 70</td>
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Discussion/Participation: You will be assessed on the quality, quantity, and timeliness of your discussion contributions. The frequency of your log-ins will definitely be an important factor; I expect you to log-in and contribute at least 5 or more times for each module. The following criteria will guide you: relevant (your contribution should be relevant to the topic under discussion and the question raised); important (your responses should address a significant issue); thought-provoking (your response should indicate that some thought went into it and should not be a re-statement of another student's response); original (clearly your contribution and not that of another student); and timely (posted on time so that other students may have ample time to respond to it.) Don't expect to "make-up" for discussions you missed. Think of this as a virtual classroom; you would not be able to come at the end of the semester to respond to a discussion held many weeks earlier.

My role in discussions is primarily to monitor what you, the class members, are contributing; I may not enter at all if you are able to carry the discussions on your own. One of the roles you may play is to help others stay "on track" related to the discussion topic. You may also want to summarize the leading points that have been made to clarify the issue. It is during the discussions that you get to know one another; if you go a bit "off track" once in awhile and, by doing so, discover important things about your fellow classmates, that's "healthy" and can help the class to know and gain respect for one another--but it shouldn't become a habit. You will receive a grade on each discussion; it will be posted in your private folder generally within a week following the close of the module. (30 points)

Written Exercises: These short (400-500 word) papers will be evaluated based on a number of criteria. The paper needs, of course, to address the topic and be supported by rigorous argument and reflective of significant thought. It should be well organized, free of jargon, and free of errors. To get consistently high grades in these papers, you must write insightfully and complete the assignments on time. Each written assignment will be evaluated and a score given generally within a week following the close of the module. (30 points.)

Mid-term Review: An open-book test of your understanding of the major concepts presented during the first six modules. The Mid-term Review assignment is described in detail in Module 6. (15 points)

Final Project: The final project consists of a 10-12 page (double-spaced) health assessment of a specific nation which should demonstrate your ability to apply the principles and understandings learned in the course. You will select a low-income country and conduct a health assessment of that nation. If you have taken the on-line Principles of Public Health course (EPI 503) you will be familiar with the health assessment process. After you describe the country's governance and demographics, you will identify the principal public health category 1, 2, and 3 concerns facing that nation and develop suggested interventions to overcome these problems. You will also justify the appropriateness of the interventions and suggest the likelihood of success of these interventions using some basic evaluation tools. The paper will be judged according to the criteria given for the written exercises (see above). A copy of your final project with my comments and the grade will be returned to you if you have given me your home mailing address; a summary of these comments and the grade will be posted in your private folder. Your final project (but not the comments and grade) will be shared with your classmates so all can learn from the research you have done. The Final Project assignment is described in detail in Module 10 and the due date for the Final Project is August 3rd. (25 points)

Please note the following: (1) The Final Project is due roughly two weeks prior to the end of the summer semester; (2) Students must submit the name of the country on which they wish to do their Final Project by July 6th; and (3) Students are encouraged to start work on their Final Project several weeks prior to the start date of the Final Project Module.

Required Books and Readings: All the books will be available at the University at Albany Bookstore and Mary Jane Books, 215 Western Avenue, Albany or by placing orders as outlined below.
There are two required textbooks for the course:

**International Public Health: Diseases, Programs, Systems, and Policies** (Second Edition) edited by Michael H. Merson, Robert E. Black, and Anne J. Mills and published in 2006 by Jones and Bartlett Publishers. The book is available through most bookstores and online booksellers. It may also be obtained directly from the publisher by calling 1-800-832-0034 or by visiting their website: [www.jbpub.com](http://www.jbpub.com).

**Case Studies in Global Health: Millions Saved** by Ruth Levine and published in 2007 also by Jones and Bartlett Publishers. Available through local bookstores or online book sellers or through the publisher by contacting them at 1-800-832-0034 or [www.jbpub.com](http://www.jbpub.com).

**Recommended/Optional Reading:** In addition to these two textbooks, students are encouraged to read following two books on their own time (these books are not required) when/if possible:


The reading assignments will be supplemented by mini lectures drawn from a number of sources with many drawn from **Textbook of International Health** (Second Edition) by Paul F. Basch published in 1999 by Oxford University Press and **Essentials of Global Health** by Richard Skolnik published in 2007 (but copyright 2008) by Jones and Bartlett Publishers, Sudbury, MA.

The discussion questions and the written assignments will draw upon your understanding of the textbook, lecture material, and supplemental reading and research.

In addition to the textbook readings, students will be expected, on a regular basis, to identify, read, and share news articles related to international health issues during online discussions. Newspapers and weekly news magazines may be used as long as the sources are reputable. Science and public health journals will also be excellent sources and many are available on-line.

The books will be available through the SUNY Learning Net "Bookstore" or you may order them on Amazon.com, directly from the publishers, or through a local bookstore.

**Standards of Conduct:** All students should be aware of the University at Albany’s standards of conduct as described in the booklet entitled “Community Rights and Responsibilities.” In addition to other standards, the standards related to academic dishonesty are defined as follows:

“Conduct including, but not limited to, plagiarism, cheating, multiple submission, forgery, sabotage, unauthorized collaboration, falsification, bribery or use of purchased research service reports without proper notation; and theft, damage or misuse of library or computer resources. Attempts to commit such acts shall . . . constitute academic dishonesty. Students assume full responsibility for honesty in academic exercises.” (p.4.) Appendix C of the document provides a complete definition of each type of misconduct as well as the penalties for violations of academic integrity (pp. 11 and 12).
Course Schedule: A course schedule is provided below. Please note that the Assignments for each Module are due on the final day of the course week listed for each module. The Discussion for each module also closes on the final day of the course week listed for that module.

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<thead>
<tr>
<th>Week</th>
<th>Dates</th>
<th>Module Title</th>
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<tbody>
<tr>
<td>1</td>
<td>May 27–June 1</td>
<td>Module 1 - Introduction to International Public Health: World Views and Health Futures</td>
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<tr>
<td>2</td>
<td>June 2–June 8</td>
<td>Module 2 - The History of International Public Health and Measures of Health and Disease</td>
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<tr>
<td>3</td>
<td>June 9–June 15</td>
<td>Module 3 - Culture, Behavior, and Health</td>
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<td>4</td>
<td>June 16–June 22</td>
<td>Module 4—Reproductive Health and Nutrition</td>
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<td>5</td>
<td>June 23–June 29</td>
<td>Module 5—Infectious Diseases</td>
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<td>6</td>
<td>June 30–July 6</td>
<td>Module 6—Chronic Diseases and Risks; and Mid-Term Review</td>
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<td>* students must also submit the name of the country on which they wish to do their final project by July 6th</td>
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<td>7</td>
<td>July 7–July 13</td>
<td>Module 7—Unintentional Injuries, Violence, and Mental Health</td>
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<tr>
<td>8</td>
<td>July 14–July 20</td>
<td>Module 8—Environmental Health and Complex Humanitarian Emergencies</td>
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<tr>
<td>10</td>
<td>July 28–Aug. 3</td>
<td>Module 10—Final Project: Country Health Assessment</td>
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<td>* Please note that the due date for the Final Project is roughly two weeks prior to the end of the summer session. Students are encouraged to start work on their Final Projects several weeks prior to the start of Module 10.</td>
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<tr>
<td>11</td>
<td>Aug. 4–Aug. 10</td>
<td>Module 11—Health and the Economy</td>
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<tr>
<td>12</td>
<td>Aug. 11–Aug. 15</td>
<td>Module 13—Global Cooperation in International Health and Globalization and Health</td>
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COURSE MODULES

Module 1--Introduction to International Public Health: World Views and Health Futures

Module Overview: This module is a "warm up" module which allows students time to register for the course, obtain the textbooks, and find their way around in the environment of internet-based education. The reading assignment will be a short one. You will also be asked, after completing the three mini-lectures, to discuss and write about your personal views regarding international health.

There are three lectures: the first is designed to make you consider your personal views related to international public health issues; the second, based on Laurie Garrett's Betrayal of Trust: The Collapse of Global Public Health is a somewhat discouraging view of the current situation; and the third lecture, drawn from Critical Issues in Global Health edited by Koop, Pearson, and Schwarz, considers some additional critical issues facing global health today.

I urge all of you to become members of the Global Health Council. The website is http://www.globalhealth.org. You can sign up for their weekly bulletins and newsletters and you'll get notices of conferences and advocacy events.
Module Learning Objectives: At the end of this module, a student should be able to:

* Describe several world views on the future, especially those views related to health, and determine which of the views most closely resembles his/her own view of the future of global health;
* Describe the state of the world's health today and the disparities that exist between the rich nations and the poor nations and to consider the role of public health related to those disparities;
* Describe Laurie Garrett's view that public health worldwide is in such a poor state that our trust has been betrayed;
* Express what he/she believes to be the responsibilities we have (if any), individually and collectively, as public health professionals regarding global health; and
* Describe what he/she believes to be the most significant public health threats facing his/her community, the United States, and the world today.

Readings: There are no readings in addition to the lectures contained in this module. This will give everyone a chance to order the books and receive them before there is a reading assignment related to them.

Assignments: Merson, Black and Mills state: "There is a broad consensus that poverty is the most important underlying cause of preventable death, disease, and disability. Unfortunately, more people live in poverty today than 20 years ago" (p. xix, International Public Health).


"The miracles of science could and should be shared equally in the world. There is a growing chasm between those of us who are rich, powerful, and healthy and those who are poor, weak, and suffering from preventable diseases. If we are to improve health, we must concentrate on existing disparities in opportunities, resources, education, and access to health programs. Only to the extent that we can eliminate these disparities will our dreams for global health in the twenty-first century be realized" (page xxi).

Laurie Garrett (see the second lecture) describes the sad state of public health worldwide, including problems facing this country.

Write a 400-500 word essay on the following: Describe what you believe to be the most significant public health threats facing your community, the United States, and the world today.

Discussions: What statements in the Basch quiz do you agree with and which ones do you disagree with and why? Also discuss where you place yourself in terms of the four basic outlooks on world and health futures (see the first lecture of this module); are you (1) a convinced neo-Malthusian, (2) a guarded pessimist, (3) a guarded optimist, or (4) a technology-and-growth enthusiast?

Module 2—The History of International/Global Public Health and Measures of Health & Disease

Module Overview: By now you will have received your textbooks and can begin the reading and other assignments related to them.

This module includes two rather long "mini-lectures" on the history of international/global health as well as readings from your texts related to measures of health and disease, an introduction to the case studies textbook, and our first case study. Any course should provide a bit of context and, for this course, that means a look at the history of international/global public health which brings us to this point in time. Your textbook does that to a very limited extent but I have chosen to feature Basch again for an expanded version of the history of public health in general and international/global public health more specifically. Then we will go to the textbooks for the first reading assignments; your written and discussion questions will be based on your textbook readings.
Module Learning Objectives: At the end of this module, a student should be able to:

* Demonstrate an understanding of the early history of international/global public health (up to about 1900): how classical Roman and Greek health and medical practices as well as traditional practices from Indian, Chinese, and other cultures have influenced our current public health practices;
* Demonstrate an understanding of the organization of international/global health since 1900: the rise of intergovernmental organizations including the World Bank, the International Monetary Fund, and the United Nations' family of health-related organizations;
* Demonstrate an understanding of the national organizations and non-governmental organizations committed to improving health worldwide;
* Demonstrate an understanding of the UN's Millennium Development Goals, especially those related specifically to improving population health in developing nations;
* Demonstrate an understanding of the essential elements of health information and knowledge of the types of data required to assess ill health;
* Demonstrate an understanding of the first case study which discusses the elimination of smallpox, one of only a few diseases which met the six preconditions for disease eradication, one of which was the high burden of disease it imposed on extraordinary large numbers of individuals in many nations.


Assignments: The writing assignment comes directly from the textbook chapter on measuring health and disease in populations: in a 400-500 word essay, describe the essential elements of health information and the types of data that are required to assess ill health.

Discussions: In the Introduction to Case Studies in Global Health, the author makes this statement: "One of the greatest human accomplishments has been the spectacular improvement in health since 1950, particularly in developing countries. With death rates falling steadily, more progress was made in the health of populations in the past half century than in many earlier millennia." After reading the introduction and the first case study related to the eradication of smallpox, create a discussion around the following questions:

What are the characteristics of smallpox that made it an appropriate candidate for eradication?
Define the terms eradication, extinction, elimination, and control of diseases.
Should a measles eradication program be initiated? Why or why not?
If polio is eradicated, should all poliovirus samples be destroyed? Why or why not?
In 1965, why didn't the World Health Organization (WHO) immediately undertake a full-scale smallpox eradication program after endorsement by the World Health Assembly?
What role(s) did the US play in the program to eradicate smallpox?
What are the major lessons that were learned from the eradication of smallpox experience?

Although you will find responses to these questions in the case study itself including the section on "The Eradication Debate" (pp.7-8), the list of references will also lead you to material which can be useful in responding to these questions and moving the discussion forward. You may, for example, wish to read more on Edward Jenner and his role regarding smallpox. (If you ever get the chance to visit the National Museum in Tokyo, you might be surprised to find a statue of Jenner near the entrance. Why do you suppose Edward Jenner was selected to honor in this manner by the Japanese?)

Module3—Culture, Behavior, and Health

Module Overview: This module focuses on culture and its impact on behavior and health but two of the lectures are directed specifically at the ethical factors that are involved in public health research and practice. Ethics and Public Health: Model Curriculum is a new curriculum which could be used for a full semester's course on public health ethics. Here we draw upon some introductory material pertinent to a discussion of public health ethics then we turn to the particular ethical
considerations involved in conducting public health research or practice in international settings. The last lecture looks at the work of Susan Scrimshaw, a medical anthropologist and an expert in health culture and behavior (and now the President of The Sage Colleges here in the New York State Capital Region), in order to raise some questions about the two case studies presented in the reading assignments.

**Module Learning Objectives:** At the end of this module, a student should be able to:

* Demonstrate an understanding of the basics of public health ethics, the principles and values that are used to guide actions designed to promote health and to prevent diseases and injury in population groups.
* Demonstrate an understanding of the major ethical guidelines that have been established for public health research and practice conducted in international settings including respect for cultural difference, informed consent, and standards of care.
* Demonstrate an understanding of how the Belmont Report's three principles to guide public health research and practice (respect for individuals, beneficence, and justice) may have come into play in the two HIV/AIDS case studies presented in the texts.
* Demonstrate an understanding of the importance of cultural differences by drawing on the two HIV/AIDS case studies (those related to experience in sub-Saharan African nations and those in Thailand and Cambodia); what might be the "barriers" to success in southern African nations that were overcome (or not a factor) in two Asian nations?

**Readings:** Chapter 2 of *International Public Health,* "Culture, Behavior, and Health" and Case Study 2 of *Case Studies in Global Health,* "Preventing HIV/AIDS and Sexually Transmitted Infections in Thailand."

**Assignments:** Neither Scrimshaw who wrote the "Culture, Behavior, and Health" chapter in your main textbook nor Ruth Levine in the case study entitled "Preventing HIV/AIDS and Sexually Transmitted Infections in Thailand" discussed the ethical factors involved in the research they outlined. Drawing on the two mini lectures regarding ethical standards for public health research and interventions, write a 400-500 word essay on the following: How might the Belmont Report's three principles to guide public health research and practice (respect for individuals, beneficence, and justice) have come into play in either/both of the two case studies presented (Scrimshaw's on experience in sub-Saharan Africa and Levine's on Thailand)? Are there other ethical guidelines, as outlined by Patricia Marshall (see the second mini lecture for this module), that might have been considered?

**Discussions:** Dr. Scrimshaw presents a behavioral health case study based on the sub-Saharan African experience related to the HIV/AIDS epidemic. After a brief discussion of the epidemiology of the disease, she discusses many of the factors that have constrained the prevention of further exposure and infection there. In the *Case Studies in Global Health* textbook, the second case study is on "Preventing HIV/AIDS and Sexually Transmitted Infections in Thailand" which describes a very successful program in that country. This intervention showed dramatic results in behavior change and in health outcomes. In fact, questions were raised about the accuracy of the results data: could such success in reducing infections be attributed to the program put in place in Thailand? Could the success be replicated in another country? What made this program work so well? What "barriers" to success might have been present in southern African nations that were overcome or not present in Thailand?

I expect this discussion to range over a number of issues related to these two case studies and what importance cultural differences might play in their differing success levels. In this discussion, the term "culture" will be very expansive to allow consideration of the social, economic, and political factors also involved. On page 60 of the Merson textbook you'll find the Social Environment and Health Model which may be useful in this discussion. You might start by responding to these questions: Would the model that worked in Thailand and Cambodia work in southern African nations? Why or why not? If you were appointed Minister of Health for a southern African nation, what HIV/AIDS prevention strategies would you introduce and why? What intervention strategies would you avoid and why?
Module 4—Reproductive Health and Nutrition

Module Overview: This module will focus on two of the components, reproductive health and nutrition, which are essential for well functioning and effective public health systems. The two assigned Merson textbook chapters will provide the foundation for both the case studies and the lectures as well as the assignments for this module. The two lectures draw upon Basch's approach to what he calls "health on the edge" which provides the opportunity to explore the effect of poverty on health status and a number of international health programs which have been established with the goal of "health for all."

Module Learning Objectives: By the end of this module, a student should be able to:

* Demonstrate an understanding of the impact of poverty on the health of individuals and communities
* Describe why maternal and child health (MCH) can be regarded as the foundation of an public health efforts
* Demonstrate an understanding of the need for reproductive health and family planning services to help individuals, both women and men, and populations reduce fertility and maintain reproductive health
* Demonstrate that, at the societal level, programs need to be supported to improve the status of women either through education or changes in laws and customs to reduce violence
* Demonstrate an understanding of how the improvements in women's social and economic status have played a major role in increasing demand for contraception and how reproductive health services and information have been shown to impact attitudes and behavior regarding family size
* Indicate the range of nutritional concerns in low-income countries, from deprivation, hunger, and micronutrient deficiencies which impair health to the increase in some areas of obesity and resulting chronic illnesses
* Demonstrate a clear understanding of how a national nutrition surveillance system established to monitor a low-income country's most pressing child and maternal nutrition problems could be guided by the examples described in two case studies, one to reduce child mortality with vitamin A in Nepal and the other to prevent iodine-deficiency disease in China

Readings: There is extensive reading associated with this module. It includes Chapter 3 on Reproductive Health and Chapter 5 on Nutrition in the Merson textbook and four case studies in the Levine text: Case 13, Reducing Fertility in Bangladesh; Case 4, Reducing Child Mortality with Vitamin A in Nepal; Case 15, Preventing Iodine-Deficiency Disease in China; and Case 16: Preventing Neural-Tube Defects in Chile.

Assignments: Public (or population) health is so very closely associated with factors related to reproductive health including fertility, contraception, safe motherhood, child survival and to the demographic changes that include a worldwide population estimated to be 8 to 11 billion people by the middle of this century. Jane Menken and M. Omar Rahman outline the need for reproductive health and family planning services to reduce fertility as well as to provide safe and effective services for individuals and communities. They state: "Specific health technological inputs are a necessary but not sufficient determinant of significant improvements in reproductive health." Drawing on the Menken and Rahman chapter as well as Case Study 13, "Reducing Fertility in Bangladesh," write a 400-500 word essay in which you provide examples of changes in women's status that demonstrate the validity of this statement. In other words, how have improvements in women's social and economic status played a role in increasing demand for contraception and how have reproductive health services been shown to impact both attitudes and behaviors regarding family size?

Discussions: This discussion assignment comes directly from the West, Caballero, and Black chapter on nutrition in the Merson textbook: The Ministry of Health of a lower-income country has decided to institute a national nutrition surveillance system to monitor the country's most pressing child and maternal nutrition problems. Discuss the kinds of nutritional problems, target groups, approaches to assessment, options for routine contact in the community, and types of agencies to organize into a surveillance system that need to be considered. The three examples provided in the case studies text, the one on reducing child mortality with vitamin A in Nepal, the one on preventing iodine-deficiency disease in China, and the one on preventing neural-tube defects in Chile will be excellent resources in addition to the chapter on nutrition written by West et al.
Module 5—Infectious Diseases

**Module Overview:** This module has just one focus: infectious diseases. And you'll have a reduced reading load which may be very welcome.

In a 1999 World Health Organization report, acute infectious diseases were cited as the leading cause of death among children and young adults in low-income countries and accounted for half of all deaths in poor countries. The chapter in your Merson textbook regarding infectious diseases is by Arthur Reingold and Christina Phares who provide a description of the epidemiological features of the infectious diseases of greatest significance today in low- and middle-income countries and of the strategies available to control and prevent them. The case studies include controlling tuberculosis in China, eliminating measles in Southern Africa, and preventing Hib disease in Chile and the Gambia. We'll also revisit the exciting and classic public health success story of the eradication of smallpox in one of the lectures and find other reasons, gained through the case studies, to celebrate the progress being made in selected countries and against selected infectious diseases.

**Module Learning Objectives:** At the end of this module, a student should be able to:

* Demonstrate an understanding of the major infectious diseases confronting low- and middle-income countries, their unique epidemiological features and the relevant technological challenges, resource limitations, and cultural barriers that have shaped current approaches to their prevention and control.
* Describe the current approaches to prevention and control of infectious diseases which include preventing exposure to the infectious agent; providing agents to ensure immunity among susceptible individuals and populations; and treating and caring for those infected to reduce transmission and stop the spread of disease.
* Demonstrate, based on the experience related to controlling TB in China, how the lessons learned there (including the finding that the DOTS protocol can be rapidly scaled up while simultaneously achieving high coverage rates, that political commitment is essential, and that creative solutions work) might be transferable to other efforts to control and prevent infectious diseases in other low- and middle-income countries such as Russia and those of the former Soviet Union and Eastern Europe.
* Describe the factors that argue for the feasibility of eradicating measles as well as the challenges to meeting that goal.

**Readings:**

* Chapter 4, Infectious Diseases, in the Merson textbook.
* The following case studies in the Levine textbook:
  --Controlling Tuberculosis in China (Case 3)
  --Eliminating Measles in Southern Africa (Case 17)
  --Preventing Hib Disease in Chile and the Gambia (Case 20)

**Assignments:** Reingold and Phares state "Like smallpox, measles, can, in theory, be completely eradicated . . ." (Merson, p. 132) and Levine in Case 17 shows how seven countries in southern Africa undertook a plan to eliminate measles. Describe, in a 400-500 word essay, the factors which make measles a candidate for eradication and also discuss the challenges that have prevented complete eradication to date.

**Discussions:** Tuberculosis is one of those re-emerging diseases, one that has come back in a more virulent form which is often resistant to many of the common drugs used to fight it. In Case #3, Controlling Tuberculosis in China, Levine demonstrated how the directly observed treatment shortcourse or DOTS program was successful in controlling the disease there and that the Chinese experience provided many lessons that may be valuable for countries like Russia and those of the former Soviet Union and Eastern Europe where multi-drug-resistant tuberculosis (MDR-TB) is on the rise. Discuss those lessons learned and how they might be useful in these countries against TB and other infectious diseases.
Module 6—Chronic Diseases and Risks; and Mid-Term Review

Module Overview: The focus of this module is chronic diseases and risks but, in addition to learning about the burden of chronic diseases worldwide, the writing assignment will be a mid-term review. The readings will include a chapter on chronic diseases and risks in the Merson textbook and five case studies from the Levine textbook which are required to complete the mid-term review. There is no discussion question for this module.

Module Learning Objectives: At the end of this module, a student should be able to:

* Demonstrate an understanding of the epidemiologic trends related to the burden of chronic diseases worldwide and be able to discuss the importance of chronic diseases to global health
* Describe the three key risk factors that explain a significant proportion of the chronic disease burden worldwide
* Demonstrate knowledge on a number of global health issues covered in previous modules including those related to human rights and ethics; behavioral change as an essential component of health status improvement; the importance of public health programs designed to improve maternal and child health including reproductive health and nutrition programs; the worldwide impact of infectious diseases and programs designed to prevent and control infectious diseases; and the worldwide impact of chronic diseases and the programs designed to prevent and control chronic diseases.


For the mid-term review, the following case studies from the Levine textbook:

* Case 14, "Curbing Tobacco Use in Poland" (pp. 105-112)
* Case 3, "Controlling Tuberculosis in China" (pp. 17-24)
* Case 6, "Saving Mothers' Lives in Sri Lanka" (pp. 41-48)
* Case 16, "Preventing Neural-Tube Defects in Chile" (pp. 121-126)
* Case 5, "Eliminating Polio in Latin America and the Caribbean" (pp. 33-40)

Assignments: The written assignment for this module is a mid-term review of some of the major issues and topics covered so far in the course. It is, naturally, an "open book" assignment. Although many of the questions are based on the case studies presented in your Levine textbook, you may find resource material in the Merson textbook, the lectures, and any other reputable source.

There are 5 questions and each response essay will be scored as equal to all the others (no individual question is worth more than any other) and the highest grade for each question will be 3.0; a perfect score will be 15.0.

I expect you to write a minimum of one double-spaced page (based on a typewritten page length) in response to each question. The same "rules" apply as those for weekly written assignments; you may want to revisit the "How You Will Be Evaluated" section before beginning to respond.

Here are the questions:

1. The Importance of Ethical and Human Rights Issues in Global Health: Discuss the meaning of a "human rights" approach to health. What is meant by "the right to health"? Include in the discussion some of the key treaties and conventions related to human rights, those that have laid the foundations for research on human subjects. What are some of the key ethical concerns related to carrying out research on human subjects?

2. Behavior Change as Essential to Health Status Improvements: The following questions are based on Case 14, "Curbing Tobacco Use in Poland" (Levine, pp.105-112) and Case 3, "Controlling Tuberculosis in China" (Levine, pp. 17-24). Regarding Case 14, what are the factors that account for the growing smoking problem in the developing world? What age groups would you focus on if you were to develop programs to curb smoking? Why? What social and behavioral trends should be monitored to track program impact over time? Based on your reading of the case involving TB in China, discuss
the changes in smoking behavior in that country and the potential health consequences. If you were an antitobacco advocate in China, what would you focus on?

3. Reproductive Health and Nutritional Programs: The following questions are based on several case studies already assigned (Cases 4, 13, 15, and 20) as well as Case 6, "Saving Mothers' Lives in Sri Lanka" (Levine, pp. 41-48) and Case 16, "Preventing Neural-Tube Defects in Chile" (Levine, pp. 121-126). Why is maternal and child health the foundation of all public health efforts? Based on the Sri Lanka example, if another country was to pursue a strategy of professionalizing midwifery as the "first line" support for prenatal care and delivery, what other elements of the health care delivery system would need to be in place? Regarding the reduction in fertility in Bangladesh, what do you think education has to do with fertility? Programs to overcome micronutrient deficiencies can provide relatively easy and low-cost solutions to many health problems in low- and middle-income countries; what are some of the most effective solutions to overcoming these deficiencies? How are reproductive health and nutritional status related?

4. Infectious (Communicable) Diseases: After reading Case 5, "Eliminating Polio in Latin America and the Caribbean" (Levine, pp. 33-40) and, based on the Merson chapter on infectious diseases as well as the lectures included in module 6, respond to the following: Smallpox has been eliminated worldwide; polio has been eliminated in Latin America and the Caribbean. What other diseases might be targets of eradication or elimination? Why these and not others? What role does poverty play related to infectious disease? If you were working in the Ministry of Health of a low-income country, and you needed to establish priorities concerning resource allocation, how would you determine the relative importance of various infectious diseases as causes of mortality in that country? The causes of morbidity? Of disability? How might the polio eradication initiative in Latin America and the Caribbean contribute to the preparation for an outbreak of avian influenza?

5. Chronic (Non-Communicable) Diseases: Given current trends, what are likely to be the major causes of death and disability in low-income countries in the 2020s? What policies and actions taken over the next decade at national and international levels could influence these trends? What are the major impediments to introducing these policies and actions? What are the common underlying characteristics of chronic diseases? AIDS is an infectious disease but now, given the availability of treatment through powerful antiretroviral drugs, it is often included among the list of major chronic diseases--why is this the case? Are there other infectious diseases that have characteristics of chronic diseases--what are they? What are the three key risk factors that explain a significant proportion of the burden of chronic diseases?

Discussions: There is no discussion question for this module.

Module 7—Unintentional Injuries, Violence, and Mental Health

Module Overview: This module combines a chapter on unintentional injuries and violence with one on mental health (although mental disorders have often been included in chronic or non-communicable disease discussions). Both have a greater impact on the burden of disease in low- and middle-income countries than might be suspected at first glance. While they tend to be public health issues found lower down on the list of priorities for developing countries, and research into low-cost but effective interventions has been limited, there are a few examples of successful interventions which may be replicated.

Module Learning Objectives: At the end of this module, a student should be able to:

* Describe the burden of disease that is related to unintentional injuries and violence and to mental disorders
* Outline the costs and consequences of unintentional injuries, violence, and mental disorders
* Describe the measures that can be taken to address and prevent key injury issues in cost-effective ways and to address appropriate interventions to improve mental health services in low- and middle-income countries

Readings: In the Merson Textbook:

Chapter 7, "Unintentional Injuries and Violence," by R. Norton, A.A. Hyder, and G. Gururaj
Chapter 8, "Mental Health," by V. Patel, A.J. Flisher, and A. Cohen
Assignments: Write a 450-500 word essay on the following: Why should public health programs in low- and middle-income countries address unintentional injuries and violence? Describe the burden of disease that is related to unintentional injuries and violence. What types of injuries constitute the greatest proportion of the burden? What are some of the major risk factors? Describe some measures that can be taken to address and prevent injuries.

Discussions: Re-read the sections in chapter 8 entitled "The Evolution of Culturally Sensitive Biomedical Classifications" and "Alternative Worldviews of Mental Illness," (Merson, pp. 359-361). Discuss the differences between the etic and the emic approaches to psychiatric measurement and diagnoses. What are the strengths and weaknesses of each? If a clinician is attempting to make a "cultural formulation" of an individual's mental health problem, what might be used as guidelines? Discuss the concept of culture-bound syndromes. Do you believe such syndromes will fade over time and, if so, why?

Module 8—Environmental Health and Complex Humanitarian Emergencies

Module Overview: This module provides an overview of the global burden of disease attributable to environmental causes with an emphasis on the burden of disease from indoor and outdoor air pollution and unsafe water and sanitation. Environmental health research techniques and risk assessment are reviewed and explored from the vantage points of household exposures (water and sanitation as well as indoor air quality affected by biomass fuels and housing quality) and those encountered in the workplace (the risks related to agriculture, mining, construction, and manufacturing); at the community-level (outdoor air quality, waste management, and microbiological and chemical contamination of food and water); at the regional level with exposures related to the atmospheric dispersion of contaminants and improper land use and water engineering projects); and global environmental factors based on climate change, depletion of ozone, loss of biodiversity, degradation of land and water sources, and persistent organic pollutants. And, if that weren't discouraging enough, we'll also explore the types of disasters, including natural ones and those called complex humanitarian emergencies, that impact human health. Such disasters generally have a greater impact on populations in low- and middle-income countries but there are steps that can be taken to prepare for such emergencies and improve the manner in which health-related services are delivered.

Module Learning Objectives: At the end of this module, a student should be able to:

* Discuss the most important environmental threats to health in low- and middle-income countries
* Describe the environmental hazards within the household, the workplace, the community, the region, and globally
* Describe the environmental hazards of globalization
* Describe the types of disasters that impact human health and discuss the health effects of natural disasters and complex humanitarian emergencies
* Describe key measures that can be taken to mitigate the health impacts of natural disasters and complex humanitarian emergencies

Readings: Merson textbook: Chapter 9, "Environmental Health" by Anthony J. McMichael, Tord Kjellstrom, and Kirk R. Smith (pp. 393-443) and Chapter 10, "Complex Emergencies" by Michael J. Toole, Ronald J. Waldman, and Anthony Zwi (pp. 445-511).

Levine textbook: Case 11: "Reducing Guinea Worm in Asia and Sub-Saharan Africa" (pp. 81-88) and Case 12: "Controlling Chagas Disease in the Southern Cone of South Africa" (pp. 89-95).

Assignments: Write a 450-500 word essay on the following: In the early stages of a complex humanitarian emergency (CHE), what are likely to be the most significant health concerns facing refugees? How do those health concerns change over time? Who will be most severely affected by malnutrition, pneumonia, cholera, and measles? In what ways are women especially vulnerable during a CHE and what particular problems do they face as a consequence of these vulnerabilities? If you were in charge of a newly opened refugee camp for those fleeing a war situation, what key steps would you take within the first few days to meet their various needs?
Discussions: Why are environmental health issues important in global health? Which of them do you consider the most important and why? In what regions of the world would the burden from indoor air pollution be the greatest and why? Based on the two cases studies (Guinea Worm and Chagas Disease) and your readings and the lectures, what are the ways in which unsafe water is related to the spread of disease? What are some low-cost approaches to improved personal hygiene? How would you, as a member of an international health mission, try to expand access to improved water and sanitation in a low-income country? What are other ways in which you could reduce the most important environmental health hazards in low-income countries? (Remember to look for and find news items related to these issues and to bring them into the discussion.)

Module 9—Design of Health Systems: Planning and Management for International Public Health

Module Overview: Now that we have looked at the principal contributors to poor health status in low- and middle-income countries, how might we advise them on designing a health system to alleviate these conditions and bring about a healthier population? This module looks at various health systems, the models now in place in generally higher-income countries, to identify the components which might provide opportunities for adoption by poorer countries. Every country spends some percentage of its gross domestic product (GDP) on health services; it may be as little as 3.6 as Bangladesh does or as much as 17.9% as the U.S. does (World Bank Data -- http://data.worldbank.org). Every country must establish a system built on a regulatory base with identified sources of funding to finance both public health and the health care delivery system and with established priorities for targeting interventions that will be most cost-effective and provide the best outcomes. Once a system has been designed, the health planners and managers move in to effectively use the resources made available to realize the greatest benefit to those in need of the services. Managers and planners will need to establish priorities and implementation, monitoring, and evaluation programs. They may rely totally or primarily on the public sector or they may draw upon the private for-profit and not-for-profit sectors. This module will explore all these issues as well as certain low-cost activities that should be included in any package of services created to have the highest impact on preventing illness among the poor and on treating those illnesses that most effect them.

Module Learning Objectives: At the end of this module a student should be able to:

* Describe the main functions of a health system and health systems are organized
* Describe how health systems in low- and middle-income countries might improve the health status of their populations
* Describe the practical steps that could be taken to improve intersectoral collaboration for health
* Describe the relative strengths and weaknesses of the various financing sources available to low- and middle-income countries
* Describe, based on the two assigned case studies, some examples of successful efforts at public and private cooperation in the delivery of health services

Readings: In the Merson textbook:

Chapter 11, "The Design of Health Systems," by Anne J. Mills and M. Kent Ranson, pp. 513-551

In the Levine textbook:

Case 7: "Controlling Onchocerciasis (River Blindness) in Sub-Saharan Africa"
Case 10: "Controlling Trachoma in Morocco"

Assignments: Because you will have the opportunity when you undertake the class project (Module 10) to describe the health system of a country other than the U.S., this assignment asks you to take the role of a health planner given the responsibility for designing a new national health system for the U.S. You may draw upon models already in use (e.g., the British model or the German model) or devise a model of your own making. In a 450-500 word essay, describe the organization of the system (the roles of the public and private sectors), how it will be financed, how you will allocate resources to the public health system and the health care delivery system, what priority services will be provided (and if any
will be excluded), and how it will be regulated. Will competition between providers be encouraged? What role will consumers play?

Discussions: After reading the two case studies assigned for this module, "Controlling Onchocerciasis (River Blindness) in Sub-Saharan Africa" and "Controlling Trachoma in Morocco," discuss the pros and cons of depending on drug donations for the implementation of these key health programs. What do you think motivated Merck and Pfizer to participate as they did in these projects? What are your views about the behavior of for-profit multinational pharmaceutical companies? Did these cases alter your views? Could programs such as these be implemented in other countries? Which ones and why? Can successful programs like these be the impetus for similar health interventions? What might they be? What was the role of the Carter Center in the River Blindness project and how did the public, private for-profit, and not-for-profit or NGO sectors work together on this project? Was there a similar collaboration involved in the controlling of trachoma in Morocco? Are these models for future collaborative relationships? Can you name other successful partnerships involving the public and private sectors?

Module 10-- Final Project: Country Health Assessment (Due Date for Final of August 3, 2014)

Module Overview: This module asks you to conduct a country health assessment. Instead of the usual 10 day module period, this module will give you twice the time. Now that we have looked at many of the issues in international public health, this will be your opportunity to put some of that new knowledge to work: to examine and describe one low-income country by researching its demographics and health statistics, then identifying three of its major health problems (one for each category of disease), suggesting appropriate interventions, and recommending evaluation strategies that might be used to determine success of the interventions. There is no specific reading assignment although you would be wise to review selected chapters of the Merson textbook regarding the measurement of health and illness and specific categories of disease as well as selected case studies from the Levine textbook appropriate to your proposed interventions. There is only one lecture; it will provide some guidance about evaluation for your country health assessment. The writing assignment is the country health assessment, an assignment which will be shared with your classmates. There is no discussion for this module.

Module Learning Objectives: At the end of this module, a student should be able to:

* Demonstrate an understanding of the resources available to public health professionals, especially those engaged in international public health, including demographic information, health statistics, measurements of health and illness within populations, and evaluation strategies for interventions chosen to improve health.
* Construct a country health assessment, an assessment of one low-income country which draws upon relevant research, statistics, and resources, and includes the following;
  * demographic and health indicator data
  * identifies, based on the demographic and health indicator data, three major high-priority public health problems (one for each category of disease)
  * describes appropriate interventions designed to alleviate each of the three major public health problems chosen
  * provides an evaluation strategy designed to measure the success of the interventions (this does not mean you need to do an evaluation; you only need to indicate how you would evaluate your interventions using one of the evaluation strategies discussed in the lecture for this module).

Readings: There are no specific textbook readings although students are encouraged to review pertinent sections of both assigned textbooks for material helpful to completing the assessment.

Assignments: Complete an assessment of the health status of one low-income country; include in the assessment the demographic and statistical data used to identify three high-priority public health problems (one for each category of disease), a description of those problems, the interventions chosen to alleviate the problems, and evaluation strategies that could be used to measure success of the interventions.
* Select a low-income country (at the same time, select a couple of "peer" countries, perhaps those with similar geography, resources, population size, and demographics, etc. to be used for comparison purposes).
* Describe the important features of the chosen country as they might impact the health of the population: its location and geography (include a map); demographic characteristics (include a population pyramid and discuss its implications for the public health and health care systems); its natural resources; the climate; the racial and ethnic composition of its population; the languages spoken; belief systems, if relevant; the educational system; the governance and political systems; economic indicators (per person income) and income distribution (Gini index or coefficient); major occupational categories (and how they might be a health factor); unemployment rate; the national and local health care delivery system (primary, secondary and tertiary facilities as well as access and quality indicators); the level of education for public health professionals and health care providers; and any other relevant indicators.
* Describe the major causes of morbidity and mortality. What is the infant mortality rate? The maternal mortality rate? Compare these to those for peer countries and against rates in middle- and high-income countries. Describe other public health concerns such as lack of easily accessible water and sanitation systems, the level of air pollution, etc.
* Select three high-priority health problems based on the statistics and other data gathered, one for each category of disease (Category I: communicable and infectious diseases, maternal and perinatal, and nutritional diseases; Category II: non-communicable and chronic diseases; and Category III: intentional and unintentional injuries, occupational diseases and injuries, and environmental-related diseases and conditions).
* Design an intervention to alleviate or overcome each of the high-priority problems identified.
* Provide an evaluation strategy which could be used to measure the success of the intervention; be sure to include ethical considerations as well as cost and benefit assumptions.

You will undoubtedly find there are infinite resources. For example, you may wish to begin on the web with the World Fact Book and the country's own website (although information may be limited to positive information). Although Wikipedia information may be reliable, it's best not to use it to excess. Document your sources.

The completed assignment should be a minimum of 15 pages (double-spaced, type-written pages) and should not exceed 25 pages including appendices, end notes, and references.

I do not expect a report that we would submit to the UN or the Gates Foundation and, although it should be well-written, well-organized, and quite comprehensive, I also understand that you cannot cover everything in great detail. This is a learning experience and I expect you to have fun doing it. You will become the class expert on your selected country and we'll all benefit from the research you do!

**Discussions:** There is no discussion for this module.

**Module 11—Health and the Economy**

**Module Overview:** This module focuses on health and the economy. There are just one chapter and one case study plus two relatively short lectures; one of the lectures is related to our own health system. By drawing on two recently published books devoted to ending global poverty, we will explore some of the poverty traps and how very poor countries may be able, with help from richer countries, to escape these traps.

**Module Learning Objectives:** At the end of this module, students should be able to:

* Describe how health and health care systems interrelate with the economy, both in terms of the linkage between health and the growth rate and distribution of income, and by the relationships among health care delivery institutions, health financing policies, and economic outcomes
* Describe how income impacts health and demography, especially fertility
* Describe an intervention program designed to improve social outcomes by providing incentives for behavioral change at the household level
* Describe the "traps of poverty" and how richer nations can assist poorer ones to move up out of poverty
* Describe some of the criticisms and concerns related to our own American health system.
**Readings:** In the Merson textbook: Chapter 13, "Health and the Economy" by Jennifer Prah Ruger, Dean T. Jamison, David E. Bloom, and David Canning, pp. 601-647.

In the Levine textbook: Case 9, "Improving the Health of the Poor in Mexico," pp. 65-72.

**Assignments:** Write a 400-450 word essay on the following: In what ways, and to what extent, do major diseases such as tuberculosis, malaria, and HIV/AIDS affect the income and well-being of people living in low- and middle-income countries? Be sure to include in the discussion, your understanding of impact on health of the "poverty trap" as described in the lectures. Also, to what extent do you believe diseases such as these and other diseases of the poor affect the economy of a wealthy country like ours? Would greater investment in health, especially health care for the poor in the U.S. have any impact on our economy? Since we already spend more of our GDP on health than any other nation, would it be wise to spend more or are there other alternatives for allocating existing resources?

**Discussions:** The following discussion questions are based on the case study, "Improving the Health of the Poor in Mexico":

1. Consider the compact of corresponsibility between the government and the recipients. What is needed to make the compact work?
2. Why were the cash grants given to mothers? Do you think this was a good idea or a bad one? What might have been the positive and negative consequences of this choice?
3. Progresa established a type of entitlement program that now accounts for a relatively large share of the government's expenditures. What are the factors that designers should have taken into consideration regarding the sustainability of the program over time? (Can you think of any U.S. social programs that may be facing the same sustainability problems?)
4. What are the preconditions for a successful conditional cash transfer program?

**Module 12— Globalization and Health / International Cooperation in Global Public Health**

**Module Overview:** In this, our last module of the course, we'll take up the issues related to the recent transition from "international health" to "global health." The chapters in the Merson textbook look at global cooperation in international public health and the intersection of globalization and health. Since the end of the Second World War and the rise of the United Nations and its World Health Organization, there has been momentous change in technology, transportation, trade, and scientific knowledge. In the more innocent post war years, the value of cooperation in addressing health problems was recognized and acted upon; I often wonder it this spirit of cooperation would allow the formation of the U.N. and WHO today if they had not already been established. The field of international health has also expanded greatly to incorporate many more "actors" and the more recent rise of public-private partnerships designed to make major impacts in disease prevention. But challenges to enhancing cooperative action in global health still remain as new infectious diseases emerge, as health systems fail to meet the needs of their constituents, and as financial needs for addressing global health concerns continue to mount. Our ability to use science and technology to develop new vaccines, drugs, and medical devices and to sequence genes will undoubtedly bring future gains but those gains must also be shared; market forces must be tempered with mechanisms like tiered pricing which is already used for vaccines and AIDS drugs to ensure those in low- and middle-income countries have access to such health-enhancing benefits.

r***Although this is the last module, don't forget to complete the evaluation--you will be providing essential feedback which will help those in future classes.***

**Module Learning Objectives:** At the end of this module, a student should be able to:

* Explain why countries have cooperated in issues related to international health
* Describe the major actors involved in international health and how they have changed over the past half century
* Explain the shift in international cooperation from vertical representation to horizontal participation
* Describe the implications for health that these changes, both positive and negative, may mean for future health policy
* Describe how the processes of global change (globalization) are shaping the broad determinants of health and health outcomes
* Provide responses to thought-provoking questions of great importance to the development of international health policies

**Readings:** In the Merson textbook: Chapter 14, "Global Cooperation in International Health" by Gill Walt and Kent Buse (pp. 649-680) and Chapter 15, "Globalization and Health" by Kelley Lee and Derek Yach (pp. 681-708).

In the Levine textbook, re-read Case 7, "Controlling Onchocerciasis (River Blindness) in Sub-Saharan Africa (pp. 49-56).

**Assignments:** The case study on controlling onchocerciasis or river blindness in Sub-Saharan Africa brought together a public-private partnership which involved several major "actors." Explain, in a 450-500 word essay, who these major actors were and what their contributions to the program were. Richard Skolnik in *Essentials of Global Health* (2008) says that these new organizations, public-private partnerships, are able to combine the skills and financing of public and private sector organizations to "advocate for specific health issues, develop new vaccines, diagnostics, and drugs, and ensure that what they develop will be appropriate to the health needs of poor countries and affordable to them as well" (p. 279). Provide some examples, in addition to the one described in Case 7, of successful public-private partnerships that have made a positive impact on health in low-income countries. And reflect upon the challenges that still confront international health authorities as they seek to strengthen the systems for global health by drawing upon the readings, the lectures, and your own review of current news items and scholarly health journals.

**Discussions:** The final lecture for this course asks you to consider some very thought-provoking questions. You may have very visceral and powerful responses to many of the questions. Discuss how you responded to specific questions (be sure to indicate the question then your response to it). Also were there specific things you learned in this class that influenced your response(s)? Might you have responded differently a few months ago? It will be important to discuss as many of the questions as possible during the discussion period, so try not to concentrate on just a few.
This course examines the methods used by public health professionals to determine whether a particular health promotion program or policy is effective, and why or why not? Several major aspects of program evaluation will be addressed, including needs assessment, assessment of program theory, process evaluation, impact evaluation, and efficiency assessment. Students will be given the opportunity to develop knowledge and skills relevant to each of these aspects of evaluation, including how to frame evaluation questions, fundamentals of study design, and basic data analysis techniques for assessing program effects. The overall goal of the course is for students to develop concrete skills that they can apply in designing, carrying out, and critiquing evaluations of real health promotion programs. Therefore, in addition to providing a firm grounding in the principles and techniques that form evaluation science, the art of applying these principles in the real world will also be highlighted.

After completion of this course, students should be able to:

1) Describe the major types, or aspects, of program evaluation (needs assessment, assessment of program theory, process evaluation, impact evaluation, efficiency evaluation), including the goals and strategies typical of each;

2) Create a logic model for a new or existing program that demonstrates the “theory” behind the program;

3) Describe various methods of sampling and measurement for program evaluation, and be able to assess the quality of the data collected;

4) Understand the concept of validity as it pertains study design, and how to identify and minimize threats to validity;

5) Critically review published articles in the academic literature that involve program evaluation;

6) Design and implement a basic process and impact evaluation plan according to a given program’s characteristics and stakeholder needs.
The following Social and Behavioral Science MPH competencies, as identified by the Associated Schools of Public Health, will be met with this course:

- Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.
- Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.
- Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.
- Apply ethical principles to public health program planning, implementation and evaluation.

The following cross-cutting Program Planning MPH competencies will also be addressed:

- Explain the contribution of logic models in program development, implementation, and evaluation.
- Differentiate among goals, measurable objectives, related activities, and expected outcomes for a public health program.
- Differentiate the purposes of formative, process, and outcome evaluation.
- Differentiate between qualitative and quantitative evaluation methods in relation to their strengths, limitations, and appropriate uses, and emphases on reliability and validity.
- Explain how the findings of a program evaluation can be used.
- Assess evaluation reports in relation to their quality, utility, and impact on public health.
Required text


A collection of required readings will also be available on the Blackboard site we will be using for the class.

ASSESSMENTS

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<tr>
<th>Assessment</th>
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<td>Program review</td>
<td>10%</td>
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<td>Logic model assignment</td>
<td>10%</td>
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<tr>
<td>Exam 1</td>
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<td>Evaluation activity</td>
<td>30% (10% design plan; 15% presentation; 5% participation)</td>
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<td>Exam 2</td>
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ASSIGNMENTS

Class participation (5% of grade)
It is important that you attend and participate during class sessions. All students are allowed one absence without penalty. A second absence will result in a loss of 2.5 points from your attendance grade. An additional absence will result in a loss of 5 points from your attendance grade. Your participation in class discussions, both structured and unstructured, will also be reflected in your class participation grade.

Program review (10% of grade)
Each student will work independently to review the literature regarding the effectiveness of one of the following types of programs or policies: 1) Healthy vending; 2) Adult day care; 3) Clean indoor air laws; 4) Programs utilizing “exergames” in school settings; 5) Drug abuse resistance education (DARE) programs; 6) Abstinence-only education programs; 7) Other type of program/policy proposed by students. Students will provide a summary of the health problem being addressed, and the theory that is underlying the program or policy, and will review the available evidence regarding the program’s feasibility and effectiveness. Additional instructions will be provided in class. The review will be due at the beginning of class on February 17.

Logic model assignment (10% of grade)
During class on February 17, each student will be given an example of a logic model for an existing public health program. Students will be required to assess this logic model from the perspective of a program evaluator, and use the information in the logic model to outline the initial steps of an evaluation plan. This assignment is due in class on February 24.
Exam 1 (20% of grade)
This closed-book exam will be given in class on March 10. It will cover material presented in
the first six sessions of the course.

Evaluation Project: Designing an Evaluation Plan (30% of grade)
Students will be required to work in small groups (formed by the instructor) to develop an
evaluation plan, and related materials, for one of two programs:
   A) A healthy vending initiative at UAlbany.
   B) An adult day care program operated by Senior Services of Albany (a local non-
profit).

The evaluation plan that you develop with your group will include several sections: (1) an
assessment/critique of the program theory and its fit with the population needs, (2) a process
evaluation plan, (3) an outcome evaluation design plan, (4) a sampling plan (if applicable), (5) a
measurement strategy and instrument(s), and (6) an analytic strategy.

You will learn of your group assignment in class on February 10, and will then have the
opportunity to meet with your project group to get started.

One interim product will be submitted so that the instructors can review each group’s progress
and provide feedback on the direction of the evaluation plan. Specifically, the group will develop
an outcome evaluation design plan and submit it on March 31. More specific instructions about
what is expected to be included in this interim product will be provided before the due date.

The project will culminate in a class presentation of the full evaluation plan. Each group will be
expected to give a 20 minute group presentation covering each of the topics listed above. The
group presentations will be on April 28. At that time, a copy of the presentation must be handed
in, in addition to a 1-2 page written Executive Summary. Representatives from the “client”
organizations will be in attendance, and their evaluations of your evaluation plans will figure
heavily into your grades (1/2 of your presentation grade).

Students will be asked to assess the contributions of each of the members of their group. The
instructor will provide a form for students to use for this assessment. Completed assessments of
group members must be turned in during class on April 28.

Grades for this project will be computed as follows (a total of 30% of your overall course grade):
   • The design plan will be graded based on its thoroughness and feasibility (10% of
     grade)
   • Presentations and Executive Summaries will be graded according to a rubric that will
     be distributed in class (15% of grade). Note that each member of the team must
     participate in the presentation. Client representatives will award ½ of your grade.
   • Students will also be graded on participation in the group project using assessments
     from other students in the group (5% of grade).

Exam 2 (25% of grade)
The second exam will also be a closed-book exam. It will be given on May 5 and will cover
material addressed throughout the semester.
The final grades for this course will range from A-C or E (failing grade).

Students in this course typically have busy lives, and are balancing multiple life obligations. Succeeding in this course will require you to take full responsibility for managing your time and effort in order to meet the course objectives. The following course policies will help clarify your role and help you with the planning of your schedule.

- All students are expected to attend and participate in class, and complete the required readings.

- All assignments are to be handed in on time. An assignment not handed in on time will receive a penalty regardless of the reason. If you are unable to attend class that day, or will be late, it is your responsibility to get the assignment to the instructor ahead of time. Points will be deducted for **late assignments** at the rate of 5 points PER DAY. If you anticipate a busy week the date an assignment is due, you should plan to turn it in early. You should not leave the work until the last minute in the event you have questions or become ill when the assignment is due.

- The instructor reserves the right to ask any student missing a meaningful amount of class time (as defined by the instructor) to withdraw from the course at any time, even if it means a “W” will appear on the student’s transcript.

- It is the student’s responsibility to note the university-determined deadlines for dropping or withdrawing from the course and changing to a pass/fail grade. No exceptions will be made. If a student feels they will not be able to complete the course work according to the dates provided on the syllabus, they should drop or withdraw from the course.

- Students are expected to turn cell phones off or keep them on vibrate during class. If you need to use your cell phone during class, please quietly excuse yourself from the room while you attend to your phone.

- Using a laptop to take notes in class is acceptable. Using a laptop to check email or use the internet for non-class-related purposes while classroom activities are taking place is unacceptable.

- Repeated improper use of cell phones/laptops will result in a class participation grade of 0.

- Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and help your educational experience.
Academic dishonesty – such as plagiarism, cheating on an exam, submitting work that you previously submitted for another class, submitting work that was submitted for this or any other class by another student, or unauthorized collaboration on any assignment – is not allowed. Please note, per school policy, all incidents of academic dishonesty will be reported to your Department Chair, the Dean of the School of Public Health, and the Dean of Graduate Studies. Please refer to the booklet, Community Rights and Responsibilities, for a full explanation of the University’s standards of conduct.

http://www.albany.edu/judicial_affairs/standardsofconduct.html

It is your responsibility to know how to reference material correctly. All students must use APA style referencing for every assignment or you will lose points on your assignment. Instructions for APA style references are provided at this website:

http://library.albany.edu/cfox

Inform yourself
Please make sure you understand what is considered plagiarism and how references should be provided in your assignments. You must correctly cite material that is not your own idea or wording in your papers, and you MUST use quotation marks to indicate when you have taken exact wording from a source. The burden on avoiding plagiarism or other academic integrity violations falls solely on the student. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. For any assignment, you should consult with the instructor (or TA) to get clarification about potential plagiarism issues PRIOR to handing in your assignment if you have any questions. Students who engage in academic dishonesty may not ask for any exceptions or provide “after the fact” rationales.

The plagiarism policy
I consider plagiarism a very serious offense. ANY form of plagiarism will result in a grade of 0 for that assignment. This can potentially result in a fail grade (E) for the course. A second instance of plagiarism will AUTOMATICALLY result in a fail grade for the course. You cannot change your work once it is submitted, so be sure that you have correct references for your work before you hand it in.
### HPM 647
**Class schedule, Spring 2014**

<table>
<thead>
<tr>
<th>Session</th>
<th>Date</th>
<th>Topic</th>
</tr>
</thead>
</table>
| Session 1 | 1/27   | Overview of course  
                        Introduction to program evaluation                               |
| Session 2 | 2/3    | What are the qualities of an effective public health program?  
                        Engaging stakeholders in the evaluation process               |
| Session 3 | 2/10   | Evaluating fit between a program and a population’s needs  
                        Evaluating a program’s guiding theory                          |
| Session 4 | 2/17   | Using logic models in program evaluation  
                        **Program Review due by 4PM**                                   |
| Session 5 | 2/24   | Process implementation evaluation  
                        **Logic Model Assignment due by 4PM**                           |
| Session 6 | 3/3    | Introduction to outcome evaluation                                  |
| Session 7 | 3/10   | **EXAM 1**                                                         |
|          | 3/17   | **No Class**                                                      |
| Session 8 | 3/24   | Choosing designs for outcome evaluation                             |
| Session 9 | 3/31   | Data collection for outcome evaluation  
                        **Evaluation Project Design Plan due by 4PM**                 |
| Session 10 | 4/7    | Data analysis for outcome evaluation                                |
|           | 4/14   | **No Class**                                                      |
| Session 11 | 4/21   | Ethics in evaluation  
                        Reporting evaluation results                                     |
| Session 12 | 4/28   | **Evaluation Project Presentations**  
                        Assessment of Group Members due in-class                      |
| Session 13 | 5/5    | **EXAM 2**                                                        |
### Session 1
**January 27**
- Overview of the course
- Introduction to program evaluation

### Session 2
**February 3**
- What are the qualities of an effective public health program?
- Engaging stakeholders in the evaluation process

*Issel, Chapter 1*

*Introduction to Program Evaluation*...(CDC book), Executive Summary and Introduction (pages 1-10).

*Introduction to Program Evaluation*...(CDC book), Step 1: Engage Stakeholders (pages 11-18).

*Additional suggested reading:*
Examples of Successful Community-Based Public Health Interventions (*pdf* on Blackboard site)

### Session 3
**February 10**
- Evaluating fit between a program and a population’s needs
- Evaluating a program’s guiding theory

*Issel, Chapters 4-7*

### Session 4
**February 17**
- Using logic models in program evaluation

*Issel, Chapter 8, pp. 274-278*

*Introduction to Program Evaluation*...(CDC book), Step 2: Describe the Program (pages 19-36).


### Session 5  
**February 24**  
**-Process evaluation**

*Issel*, Chapters 9-11

*Additional suggested reading:*


### Session 6  
**March 3**  
**-Introduction to outcome evaluation**

*Issel*, Chapter 12


*Additional suggested reading:*


### Session 7  
**March 10**  
**Exam 1**

### Session 8  
**March 24**  
**-Choosing designs for outcome evaluation**

*Issel*, Chapter 13


*Additional suggested reading:*
### Session 9  
**March 31**  
**-Data collection for outcome evaluation**

**Issel, Chapter 14**

[Introduction to Program Evaluation](#)...(CDC book), Step 4: Gathering Credible Evidence (pages 50-63).

**Additional suggested reading:**

### Session 10  
**April 7**  
**-Data analysis for outcome evaluation**

**Issel, Chapter 15-16**

[Introduction to Program Evaluation](#)...(CDC book), Step 5: Justify Conclusions (pages 65-71).

**Additional suggested reading:**
### Session 11

**April 21**

- Ethics in evaluation
- Reporting evaluation results

*Issel, Chapter 17*


**Additional suggested readings:**


### Session 12

**April 28**

Evaluation project presentations

### Session 13

**May 5**

Exam 2
HPM 650: Strategy and Leadership Applications in Health Management
SPRING 2013

COURSE INFORMATION

Georges Potworowki, PhD
Assistant Professor
Office HPM 185
Office hours: Tuesdays 12:30-2:30 pm or by appointment
Email: gpotwo@albany.edu
Tel: 518-402-0332

Hallie Morgan, MA, MPH
Teaching Assistant
Office hours: By appointment
Morgan.hallie@gmail.com

Location: C3
Time: Mondays, 4:00pm-6:50pm

Pre-requisites: HPM 500, HPM 641

COURSE DESCRIPTION

This course deals with the application of strategic management principles, organization theory, and leadership skills to a variety of “real world” management issues in both private and public sector health organizations. Primary focus is placed on using a strategic framework for identifying, thinking about, and addressing these issues as a health care manager. The course emphasized group decision making processes and case-based learning. In addition, leadership and an understanding of organizational dynamics in health care are included as critical factors determining how well the strategic planning process will work. In this course, it is expected that students will bring knowledge learned in other courses to bear in making strategic assessments and decisions for various cases. Thus, it is strongly recommended that students take this course toward the end of their program of study.

COURSE LEARNING OBJECTIVES AND COMPETENCIES

Course learning objectives
At the end of the course, it is expected that students will be able to:

Basic public health science skills:

• Explain the business model of strategic management and planning that maximizes an organization’s chances for success (both bottom-line and service quality) over its life span.
• Use this model to conduct various aspects of the strategic planning process, both individually and working with others.
• Identify the specific ways in which a strategic and practically-oriented way of thinking improves decision making within health care and public health organizations, especially during times of change.
• Apply systems thinking to health care organizational situation analysis and decision making.
• Identify the various levels and categories of decisions that must be made strategically within any organization. Develop experience making these kinds of decisions based on information analysis.
Synthesis and integration skills:
- Develop a complete strategic plan for a health care organization, including situational analysis, problem identification, decisions, and strategic control and evaluation.
- Apply knowledge learned in other areas of public health and health management training to a strategic planning process, and to integrate that knowledge in ways that are efficient, timely, and practical.

Analytical skills:
- Logically argue positions within a particular case and get others to buy into it.
- Better make timely decisions across a variety of health settings and circumstances.
- Use business planning tools such as the Porter Framework and Value-Chain Analysis appropriately and effectively.
- Conduct secondary data collection through literature reviews, library research, and internet research.
- Conduct basic financial analysis key to understanding an organization’s financial position.
- Synthesize disparate and multiple pieces of organizational and environmental data into a coherent set of statements/judgments that can be used as the information foundation for decision making.

Communication skills:
- Develop and present detailed Power-Point presentations to a management audience, within a group structure.
- Use emerging online technologies for social networking around course assignments.
- Express through written, graphic, and verbal communication the various elements and outputs of a strategic plan relative to specific health care organizations and situations.
- Work within a team-based setting to communicate strategic planning principles to others.

Research skills:
- Conduct a systematic strategic analysis of cases in health management using extensive primary and secondary data collection.
- Conduct literature reviews and effectively and efficiently search databases that contain data on organizations and industries.

Competencies
This course teaches topics and skills that relate to competencies considered critical by the Association of Schools of Public Health (ASPH) for all MPH graduates (http://www.asph.org/publication/MPH_Core_Competency_Model/index.html), including

Health Policy and Management:
- Apply principles of strategic planning and marketing to public health.
- Apply quality and performance improvement concepts to address organizational performance issues.
- Apply ‘systems thinking’ for resolving organizational problems.
- Communicate health policy and management issues using appropriate channels and technologies.
- Demonstrate leadership skills for building partnerships.

Professionalism:
- Apply evidence-based principles and the scientific knowledge base to critical evaluation and decision-making in public health.

Leadership:
- Describe alternative strategies for collaboration and partnership among organizations, focused on public health goals.
• Articulate an achievable mission, set of core values, and vision.
• Engage in dialogue and learning from others to advance public health goals.
• Demonstrate team building, negotiation, and conflict management skills.
• Use collaborative methods for achieving organizational and community health goals.
• Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.

*Systems Thinking:*
• Identify characteristics of a system.
• Provide examples of feedback loops and “stocks and flows” within a public health system.
• Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.
• Analyze the impact of global trends and interdependencies on public health related problems and systems.

### READINGS

**Required Text:**


Other readings will be distributed in class. All assigned readings are required and to be completed prior to the class date for which they will be the focus of discussion.

### OTHER COURSE REQUIREMENTS

None.

### GRADES

This is a class that treats students as they should be treated: advanced (near degree) masters’ candidates. It is designed as a capstone experience for MPH and MS students in health policy and management. Thus, the expectations placed on students are fair but challenging given this advanced status. It is also a course whose depth and value are determined largely by students’ personal desire to engage the material, do research, and be active participants in each class. It is critical that all readings are done on time, done carefully, and that students come to class prepared to discuss the material and ask questions. Falling behind in this type of course is not advised given how each week’s material builds upon prior material. Unless otherwise noted, you are required to read everything on the syllabus. The class will be a mixture of short lectures, group discussion, and exercises. Always bring the textbook to class, and use the critical reading techniques taught in the first class.

Keep in mind always that strategic management and leadership are a blend of art and science, but more a disciplined art in the end that relies upon having a lot of sound information at your disposal. First and foremost, it involves making evidenced-based decisions. It is comprised of a set of skills best acquired through “on the job” training and practice. A big part of this class is to begin this practice. However, there is a specific model and tools which you must learn to use well, and these are the focus of this class. The semester will focus on using the case method employed by such places as Harvard Business School. There is plenty of material that lends itself to debate and discussion. In addition, the use of case analysis as a teaching tool is crucial to provide “real world” instances in which strategic management and leadership can be practiced properly (they can undermine employee morale, organizational effectiveness, and personal career advancement if not practiced properly). To get better at strategic decision making, one has to practice making and evaluating lots and lots of
strategic decisions. One also must learn how to link aspects of the organization’s situation to different decision alternatives. This course addresses both of these needs. It is fully expected that students will attend class and actively fulfill their role as outlined here.

<table>
<thead>
<tr>
<th>Evaluation component</th>
<th>Percent of total grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual situational analysis paper</td>
<td>30%</td>
</tr>
<tr>
<td>Individual decision analysis paper</td>
<td>30%</td>
</tr>
<tr>
<td>Group strategic plan</td>
<td>25%</td>
</tr>
<tr>
<td>Team participation (peer reviewed)</td>
<td>5%</td>
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<tr>
<td>Class Participation</td>
<td>10%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
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### ASSIGNMENT DESCRIPTIONS

1. **Individual situational analysis paper (30%)**
   Students will be required to prepare a situational analysis and SWOT matrix of a case contained in the Swayne et al. book. More will be said about this assignment in class, and guidelines will be provided. However, its objective is to get students comfortable analyzing an organizational situation with which they are not previously familiar, pull out its relevant aspects (relevant to the strategic problem facing the organization in the particular case), and clearly and succinctly present these aspects in written form. The situational analysis is the foundation of a good strategic/business plan. Key learning objectives for this paper are to get students comfortable in choosing and using the proper tools in doing internal environmental analysis, external environmental analysis, competitor analysis, and in conveying only pertinent information produced by those tools relative to the particular case issue at hand. It is also designed to get students comfortable understanding the scope and substance of information that goes into business planning and decision making. This exercise prepares students for doing the remainder of the assignments in the course.

2. **Individual decision analysis paper (30%)**
   For this assignment, students will use the assigned case from the Swayne et al. book used for assignment one and their situational analysis paper to develop an in-depth decision analysis paper (with full appendixes). The intent of this assignment is to build on and extend assignment one and prepare a decision analysis that presents the strategic issue, situational analysis, strategic alternatives at each organizational level, and select aspects of the operational plan for implementing those alternatives/decisions. More will be said about this assignment in class. Unlike the situational analysis, the decision analysis will require more intense and comprehensive understanding of all aspects of the case, more brevity in expression of thought, and will require students to begin thinking about the decisions and operational aspects that need to be made in a strategic planning process.

3. **Group Strategic Plan (25%)**
   The major group-based product of the course is the group strategic plan and presentation, due at the end of the semester. This project will represent a full-blown strategic plan (all aspects from situational analysis to feedback/evaluation) of a real strategic issue for a local health care organization. Students will be assigned into groups early in the semester. More will be said about this assignment in class, and student groups are urged to begin working on the plan early in the semester, since it represents a fairly major research effort on the part of the group. In essence, this plan and the associated in-class presentation of that plan represent the culminating assignment of the course, designed to get you experience doing long-term strategic planning in a multiple stakeholder setting around a real health care issue. From this project, students will feel comfortable in their ability to engage in a strategic planning process and in developing a strategic plan in any organizational situation they might encounter.

4. **Team participation (5%)**
   The team participation score is based on the average of your helping behavior scores submitted anonymously by your team members. Evaluations will be submitted by students to the instructors, who will then screen the
feedback, de-identify it, and send it to each of the intended students. Feedback will be submitted at the midpoint of the semester for formative feedback, and again at the end of course. Only the scores from the final evaluations will count towards your final grade.

5. Class participation (10%)
This is a real grade that will be given at the midterm point and updated on the last night of class of 10 points. Please remember, class participation in this course will not mean simply talking the loudest or most. Rather, it will be critiqued on the quality (i.e., substance) of what one has to say, relevant to the particular material we are discussing that night in class. As managers, you will always need to choose your arguments, points, and words carefully. In other words, thoughtful, succinct, and clear points made that reflect knowledge of material required for that evening will score the highest. Evidenced based responses lead to the highest participation grade. The participation grade can range from 0/10 to 10/10 depending on class attendance and the scope and substance of student involvement.

**POLICY ON ACADEMIC INTEGRITY**

Academic dishonesty, in any of its forms, will not be tolerated. For this course, the two major concerns are plagiarism and collaboration on the individual assignments. Plagiarism in any form is considered an instance of academic dishonesty. I will randomly check papers, assignments throughout the course to determine if any plagiarism is occurring. I do this through online tools as well as checking the content of supporting articles and references. There will be no exceptions so please familiarize yourself with what constitutes plagiarism and seek assistance from the instructors if you have any questions or concerns. There is also plenty of good guidance that can be found on the Web for how to avoid plagiarism. As per University policy, the burden on avoiding plagiarism falls solely upon the student. There will be no “after the fact” rationales that can be provided to the instructor in favor of your case where plagiarism is involved. Please read the Graduate Bulletin, and get on-line to the UAlbany Library Website, which has much more detail about what constitutes plagiarism and how to avoid it.

Collaboration on the individual assignments, which includes, but is not limited to, sharing of case-relevant information between individuals in the class, is also a form of academic dishonesty. No information for the individual assignments is to be shared across students. Each student is expected to do every aspect of the two individual assignments on their own with no help from others in the class. Any instance of collaboration on individuals’ papers, including during the information-gathering phase, is considered an instance of academic dishonesty.

In accordance with University policy, any instance of academic dishonesty (please see the Community Rights and Responsibilities booklet for definitions) will result in an automatic failing grade for the course (i.e., a grade of E), reporting of the incident formally to the Office of Graduate Studies, and potential sanctions by the school and university. Students will be told at the time the incident occurs of this penalty, and it will be applied immediately. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. That said, we are here to help you learn. For any assignment, feel free to consult with us to get clarification around potential plagiarism problems, BEFORE you hand in your assignment (and not after you hand it in, which is too late).

**OTHER CLASS POLICIES**

**Attendance**
This class is discussion and case-based, and so student attendance is critical (i.e., the more students engage in class, the more they will learn). Any class missed without a documented, valid excuse will result in a reduction of the class participation grade. Missing two classes, regardless of reason, drops the overall participation grade to 5/10, and possibly lower depending on student input in the other class sessions. Missing more than two
classes in the course, regardless of reason, will result in an automatic 0/10 participation grade, which drops the overall course grade by 1-2 grades (e.g., A to C). Thus, missing classes in the course can facilitate a failing grade in the course, and definitely lowers a course grade substantially. The instructor reserves the right, in accordance with University policy, to ask any student missing a meaningful amount of time in class (as defined by the instructor) to withdraw from the course before the formal withdrawal period ends. Class participation grades can and will vary from zero to 10 based upon the extent to which individual students provide thoughtful input into class discussions.

Assignments
You have three options for handing in your three assignments: 1) An assignment submitted before its deadline and in the manner specified by the instructors will be eligible for a maximum of 100% of the grade for that assignment and will receive written feedback; 2) An assignment submitted within 48 hours after its deadline and in the manner specified by the instructors will be eligible for a maximum of 80% of the grade for that assignment and will receive written feedback; 3) Any assignment submitted more than 48 hours after its deadline, but in the manner specified by the instructors, will receive written feedback.

Withdrawals and Incompletes
Students are strongly encouraged to complete all assigned work during the semester. Course withdrawal will not be granted after the formal withdrawal date noted on the semester calendar. Incompletes must be requested and will be granted only in extraordinary circumstances, most often in personal medical emergencies of an extended nature (please note, incompletes are not appropriate for things such as the student having a heavy workload, unanticipated job responsibilities, the course being harder than anticipated, etc.). Any incomplete granted must be removed by the end of the following semester. Failure to do so will result in a failing grade. Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty, course withdrawal, incompletes, etc.
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jan 28</td>
<td><strong>Introduction to the Course; The Strategic Planning Model; Doing Environmental Analysis</strong></td>
</tr>
<tr>
<td>2</td>
<td>Feb 4</td>
<td><strong>Situational Analysis: External Environmental Analysis</strong></td>
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<tr>
<td></td>
<td></td>
<td>Reading: Swayne et al., Chapters 1, 2, and Appendix A</td>
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<tr>
<td>3</td>
<td>Feb 11</td>
<td><strong>Situational Analysis: External Analysis; Service Area Competitor Analysis</strong></td>
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<tr>
<td></td>
<td></td>
<td>Reading: Swayne et al., Chapter 3</td>
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<td>4</td>
<td>Feb 18</td>
<td><strong>No Class: President’s Day</strong></td>
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<tr>
<td>5</td>
<td>Feb 25</td>
<td><strong>Situational Analysis: Competitor Analysis; Internal Analysis (Financial Analysis)</strong></td>
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<tr>
<td></td>
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<td>Reading: Swayne et al., Chapters 3, 4, and Appendix B</td>
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<tr>
<td>6</td>
<td>Mar 4</td>
<td><strong>Situational Analysis: Internal Analysis and SWOT</strong></td>
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<tr>
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<td>Reading: Swayne et al., Chapters 4, 5, and Appendix B</td>
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<td>7</td>
<td>Mar 11</td>
<td><strong>Decision Analysis: Directional Strategies</strong></td>
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<tr>
<td></td>
<td></td>
<td>Reading: Swayne et al., Chapter 5</td>
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<td></td>
<td></td>
<td>★ Group Project Situational Analysis + Team member evaluations due at 4:00 pm</td>
</tr>
<tr>
<td>8</td>
<td>Mar 18</td>
<td><strong>No Class: Spring Break</strong></td>
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<tr>
<td>9</td>
<td>Mar 25</td>
<td><strong>Decision Analysis: Evaluating and Choosing Strategies</strong></td>
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<tr>
<td></td>
<td></td>
<td>Reading: Swayne et al., Chapters 5, 6, 7</td>
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<td></td>
<td></td>
<td>Last day to drop semester length course (&quot;W&quot; assigned)</td>
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<tr>
<td>10</td>
<td>Apr 1</td>
<td><strong>Decision Analysis: Evaluating and Choosing Strategies</strong></td>
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<td></td>
<td></td>
<td>Reading: Swayne et al., Chapters 6, 7</td>
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<tr>
<td></td>
<td></td>
<td>★ Situational Analysis (Project 1) due at 4:00 pm</td>
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<tr>
<td>11</td>
<td>Apr 8</td>
<td>TBA</td>
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<td>Apr 22</td>
<td>TBA</td>
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<tr>
<td>14</td>
<td>Apr 29</td>
<td>TBA</td>
</tr>
<tr>
<td>15</td>
<td>May 6</td>
<td><strong>In Class Presentation of Group Strategic Plans</strong></td>
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<tr>
<td></td>
<td></td>
<td>★ Decision Analysis (Project 2) due at 4:00 pm</td>
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<tr>
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<td></td>
<td>★ Group Strategic Plans Powerpoint slides due at 4:00 pm</td>
</tr>
<tr>
<td></td>
<td>May 9</td>
<td>★ Appendices, bibliography, &amp; team member evaluations for Group Strategic Plans due at 4:00 pm</td>
</tr>
</tbody>
</table>
HPM 650: Strategy and Leadership Applications in Health Management  
SPRING 2014

COURSE INFORMATION

Georges Potworowki, PhD  
Assistant Professor  
Office HPM 185  
Office hours: Wednesdays 4:00-5:00pm or by appointment  
Email: gpotwo@albany.edu  
Tel: 518-402-0332

Location: C3  
Time: Wednesdays, 1:00pm-3:50pm

Pre-requisites: HPM 500, HPM 641

COURSE DESCRIPTION

HPM 650 is designed to teach students how to apply the strategic management process and leadership principles to issues in health systems management. It focuses on learning how to make decisions within a health care business environment. It is intended as a capstone-type learning experience that allows students to combine the varied analytical styles of thinking and knowledge gained in other courses (i.e., evidenced-based management, program evaluation, research analysis, statistics, organizational behavior, health policy analysis, financial management, human resource management) to “real-life” health organization issues and problems, by funneling these different styles of thought through the strategic planning business model of decision making.

Strategic management entails an interactive process of assessment, problem identification, solution development, implementation, and evaluation. The ultimate end products of this process are management-based “solutions” (solutions with higher probability of success) to specific organizational problems. Much of what goes into making a successful manager involves the ability to think strategically, make sound decisions, and exercise leadership quickly, especially at critical points in the organization’s existence. It also involves effectively convincing others of your position. In a current health care system rife with change, these skills are essential at all levels of the organization, and in and all types of organizations, be they large or small, public or private, new or established.

COURSE LEARNING OBJECTIVES AND COMPETENCIES

Course learning objectives  
At the end of the course, it is expected that students will be able to:

Basic public health science skills:
- Explain the business model of strategic management and planning that maximizes an organization’s chances for success (both bottom-line and service quality) over its life span.
- Use this model to conduct various aspects of the strategic planning process, both individually and working with others.
- Identify the specific ways in which a strategic and practically-oriented way of thinking improves decision making within health care and public health organizations, especially during times of change.
- Apply systems thinking to health care organizational situation analysis and decision making.
Identify the various levels and categories of decisions that must be made strategically within any organization. Develop experience making these kinds of decisions based on information analysis.

**Synthesis and integration skills:**
- Be able to develop each of the different parts of a strategic plan for a health care organization, including situational analysis, problem identification, decisions, and strategic control and evaluation.
- Apply knowledge learned in other areas of public health and health management training to a strategic planning process, and to integrate that knowledge in ways that are efficient, timely, and practical.

**Analytical skills:**
- Logically argue positions about strategy within a particular case and get others to buy into it.
- Make better and timely strategic decisions across a variety of health settings and circumstances.
- Use business planning tools such as the Porter Framework and Value-Chain Analysis appropriately and effectively.
- Conduct basic financial analysis key to understanding an organization’s financial position.
- Synthesize disparate and multiple pieces of organizational and environmental data into a coherent set of statements/judgments that can be used as the information foundation for decision making.

**Communication skills:**
- Develop and present Power-Point presentations to a management audience, within a group structure.
- Use emerging online technologies for social networking around course assignments.
- Express through written, graphic, and verbal communication the various elements and outputs of a strategic plan relative to specific health care organizations and situations.
- Work within a team-based setting to communicate strategic planning principles to others.

**Competencies**
This course teaches topics and skills that relate to competencies considered critical by the Association of Schools of Public Health (ASPH) for all MPH graduates (http://www.asph.org/publication/MPH_Core_Competency_Model/index.html), including

**Health Policy and Management:**
- Apply principles of strategic planning and marketing to public health.
- Apply quality and performance improvement concepts to address organizational performance issues.
- Apply ‘systems thinking’ for resolving organizational problems.
- Communicate health policy and management issues using appropriate channels and technologies.
- Demonstrate leadership skills for building partnerships.

**Professionalism:**
- Apply evidence-based principles and the scientific knowledge base to critical evaluation and decision-making in public health.

**Leadership:**
- Describe alternative strategies for collaboration and partnership among organizations, focused on public health goals.
- Articulate an achievable mission, set of core values, and vision.
- Engage in dialogue and learning from others to advance public health goals.
- Demonstrate team building, negotiation, and conflict management skills.
- Use collaborative methods for achieving organizational and community health goals.
- Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.
**Systems Thinking:**
- Identify characteristics of a system.
- Provide examples of feedback loops and “stocks and flows” within a public health system.
- Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.
- Analyze the impact of global trends and interdependencies on public health related problems and systems.

**READINGS**

**Required Text:**


Other readings and materials will be posted on Blackboard or distributed in class. All assigned readings and activities are required and are to be completed prior to the class date for which they will be the focus of discussion.

**GRADES**

This is a class that treats students as they should be treated: advanced (near degree) masters’ candidates. It is designed as a capstone experience for MPH and MS students in health policy and management. Thus, the expectations placed on students are fair but challenging given this advanced status. It is also a course whose depth and value are determined largely by students’ personal desire to engage the material, do research, and be active participants in each class. It is critical that all readings are done on time, done carefully, and that students come to class prepared to ask questions, discuss the material, and apply the concepts. Falling behind in this type of course is not advised given how each week’s material builds upon prior material. Unless otherwise noted, you are required to read everything on the syllabus. The class will be a mixture of group discussion, exercises, and short presentations. Always bring the textbook to class, and use the critical reading techniques (posted on Blackboard).

Always keep in mind that strategic management and leadership are a blend of art and science, but more a disciplined art in the end that relies upon having a lot of solid information at your disposal. First and foremost, it involves making evidenced-based decisions. It is comprised of a set of skills best acquired through “on the job” training and practice. A big part of this class is to begin this training and practice. However, there is a specific model and tools which you must learn to use well, and these are the focus of this class. The semester will focus on using the case method employed by such places as Harvard Business School. There is plenty of material that lends itself to debate and discussion. In addition, the use of case analysis as a teaching tool is crucial to provide “real world” instances in which strategic management and leadership can be practiced properly (they can undermine employee morale, organizational effectiveness, and personal career advancement if not practiced properly). To get better at strategic decision making, one has to practice making and evaluating lots and lots of strategic decisions. One also must learn how to link aspects of the organization’s situation to different decision alternatives. This course addresses both of these needs. It is fully expected that students will attend class and actively fulfill their role as outlined here. The individual components of the course will be graded numerically, and will be compiled into a letter grade ranging from A to E for the course overall.
### Assignment Descriptions

**1. Individual Assignment 1 (10%)**
The first individual assignment will involve a case of a health care organizational that requires a situational assessment. The instructor will provide the case and assignment specifics in class. To complete this assignment, you will need to conduct research and draw on various informational resources.

**2. Individual Assignment 2 (10%)**
The second individual assignment will involve a case of a health care organizational that requires a strategy formulation. The instructor will provide the case and assignment specifics in class. To complete this assignment, you will need to conduct research and draw on various informational resources.

**3. Team participation (5%)**
The team participation score is based on the average of your helping behavior scores submitted anonymously by your team members. Evaluations will be submitted by students to the instructors, who will then screen the feedback, de-identify it, and send it to each of the intended students.

**4. Class participation (5%)**
This is a real grade that will be given at the midterm point and updated on the last night of class of 5 points. Please remember, class participation in this course will not mean simply talking the loudest or most. Rather, it will be critiqued on the quality (i.e., substance) of what one has to say, relevant to the particular material we are discussing that night in class. As managers, you will always need to choose your arguments, points, and words carefully. In other words, thoughtful, succinct, and clear points made that reflect knowledge of material required for that evening will score the highest. Evidenced based responses lead to the highest participation grade. The participation grade can range from 0/5 to 5/5 depending on class attendance and the scope and substance of student involvement.

### Policy on Academic Integrity

Academic dishonesty, in any of its forms, will not be tolerated. For this course, the two major concerns are plagiarism and collaboration on the individual assignments. Plagiarism in any form is considered an instance of academic dishonesty. I will randomly check papers, assignments throughout the course to determine if any plagiarism is occurring. I do this through online tools as well as checking the content of supporting articles and references. There will be no exceptions, so please familiarize yourself with what constitutes plagiarism and seek assistance from the instructor if you have any questions or concerns. There is also plenty of good guidance that can be found on the Web for how to avoid plagiarism. As per University policy, the burden on avoiding plagiarism falls solely upon the student. There will be no “after the fact” rationales that can be provided to the instructor in favor of your case where plagiarism is involved.

Collaboration on the individual assignments, which includes, but is not limited to, sharing of case-relevant information between individuals in the class, is also a form of academic dishonesty. No information for the...
individual assignments is to be shared across students. Each student is expected to do every aspect of the two individual assignments on their own with no help from others in the class. Any instance of collaboration on individuals’ papers, including during the information-gathering phase, is considered an instance of academic dishonesty. You are responsible for familiarizing yourself with the updated Standards of Academic Integrity in the Graduate Bulletin, which are available online at:

http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards_integrity

In accordance with University policy, any instance of academic dishonesty (please see the Community Rights and Responsibilities booklet for definitions) will result in an automatic failing grade for the course (i.e., a grade of E), reporting of the incident formally to the Office of Graduate Studies, and potential sanctions by the school and university. Students will be told at the time the incident occurs of this penalty, and it will be applied immediately. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. That said, I am here to help you learn. For any assignment, feel free to consult with me to get clarification around potential plagiarism problems, before you hand in your assignment (and not after you hand it in, which is too late).

OTHER CLASS POLICIES

Attendance
This class is discussion and case-based, and so student attendance is critical (i.e., the more students engage in class, the more they will learn). Any class missed without a documented, valid excuse will result in a reduction of the class participation grade. Missing two classes, regardless of reason, drops the overall participation grade to 5/10, and possibly lower depending on student input in the other class sessions. Missing more than two classes in the course, regardless of reason, will result in an automatic 0/10 participation grade, which drops the overall course grade by 1-2 grades (e.g., A to C). Thus, missing classes in the course can facilitate a failing grade in the course, and definitely lowers a course grade substantially. The instructor reserves the right, in accordance with University policy, to ask any student missing a meaningful amount of time in class (as defined by the instructor) to withdraw from the course before the formal withdrawal period ends. Class participation grades can and will vary from zero to 10 based upon the extent to which individual students provide thoughtful input into class discussions.

Assignments
You have three options for handing in your three assignments: 1) An assignment submitted before its deadline and in the manner specified by the instructors will be eligible for a maximum of 100% of the grade for that assignment and will receive written feedback; 2) An assignment submitted within 48 hours after its deadline and in the manner specified by the instructors will be eligible for a maximum of 80% of the grade for that assignment and will receive written feedback; 3) Any assignment submitted more than 48 hours after its deadline, but in the manner specified by the instructors, will receive written feedback.

Withdrawals and Incompletes
Students are strongly encouraged to complete all assigned work during the semester. Course withdrawal will not be granted after the formal withdrawal date noted on the semester calendar. Incompletes must be requested and will be granted only in extraordinary circumstances, most often in personal medical emergencies of an extended nature (please note, incompletes are not appropriate for things such as the student having a heavy workload, unanticipated job responsibilities, the course being harder than anticipated, etc.). Any incomplete granted must be removed by the end of the following semester. Failure to do so will result in a failing grade. Please refer to the current University at Albany Graduate Bulletin for policies on academic dishonesty, course withdrawal, incompletes, etc.
# Calendar: Strategy and Leadership Applications in Health Management

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
<th>Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jan 22</td>
<td>Introduction to the Course</td>
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<tr>
<td>2</td>
<td>Jan 29</td>
<td>The Nature of Strategic Management</td>
<td>GDS Chapter 1</td>
</tr>
<tr>
<td>3</td>
<td>Feb 5</td>
<td>Understanding and Analyzing the General Environment and the Health Care Environment</td>
<td>GDS Chapter 2 + Supplemental materials on Blackboard</td>
</tr>
<tr>
<td>4</td>
<td>Feb 12</td>
<td>Service Area Competitor Analysis</td>
<td>GDS Chapter 3 + Supplemental materials on Blackboard</td>
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<tr>
<td></td>
<td></td>
<td>* Individual Assignment 2 handed out</td>
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<tr>
<td>5</td>
<td>Feb 19</td>
<td>Internal Environmental Analysis and Competitive Advantage</td>
<td>GDS Chapter 4 + Supplemental materials on Blackboard</td>
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<tr>
<td>6</td>
<td>Feb 26</td>
<td>Directional Strategies</td>
<td>GDS Chapter 5 + Supplemental materials on Blackboard</td>
</tr>
<tr>
<td>7</td>
<td>Mar 5</td>
<td>Developing Strategic Alternatives</td>
<td>GDS Chapter 6 + Supplemental materials on Blackboard</td>
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<tr>
<td></td>
<td></td>
<td>★ Individual Assignment 1 due (10%)</td>
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<tr>
<td>8</td>
<td>Mar 12</td>
<td>Mid-Term (25%)</td>
<td>None</td>
</tr>
<tr>
<td>9</td>
<td>Mar 19</td>
<td>Spring Break (No Class)</td>
<td></td>
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<tr>
<td>10</td>
<td>Mar 26</td>
<td>Evaluation of Alternatives and Strategic Choice</td>
<td>GDS Chapter 7 + Supplemental materials on Blackboard</td>
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<tr>
<td>11</td>
<td>Apr 2</td>
<td>Value-Adding Service Delivery Strategies</td>
<td>GDS Chapter 8 + Supplemental materials on Blackboard</td>
</tr>
<tr>
<td>12</td>
<td>Apr 9</td>
<td>Value-Adding Support Strategies</td>
<td>GDS Chapter 9 + Supplemental materials on Blackboard</td>
</tr>
<tr>
<td>13</td>
<td>Apr 16</td>
<td>Communicating the Strategy and Developing Action Plans</td>
<td>GDS Chapter 10 + Supplemental materials on Blackboard</td>
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<tr>
<td>14</td>
<td>Apr 23</td>
<td>TBA</td>
<td>Posted on Blackboard</td>
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<tr>
<td></td>
<td></td>
<td>★ Individual Assignment 2 due (10%)</td>
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<tr>
<td></td>
<td></td>
<td>★ Team participation (peer review) due (5%)</td>
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<tr>
<td>15</td>
<td>Apr 30</td>
<td>TBA</td>
<td>Posted on Blackboard</td>
</tr>
<tr>
<td>16</td>
<td>May 7</td>
<td>TBA</td>
<td></td>
</tr>
</tbody>
</table>
Adolescent Health: HPM 669; 3 credits  
Spring 2013  
Instructor: Christine Bozlak, PhD, MPH  
Class time: Thursdays, 1:00 pm – 3:50 pm  
Location: SPH C2  
Instructor’s office location and hours: SPH Department of Health Policy, Management, and Behavior, Room 173, Wednesdays, 1 pm – 3 pm or by appointment  
Email: cbozlak@albany.edu, Phone: 518-402-0299

GENERAL DESCRIPTION

This course will examine the primary causes of morbidity and mortality in the U.S. adolescent population, highlight the policies and programs designed to improve the health and wellness of this population, and detail the innovative asset-based and Positive Youth Development approaches to adolescent health and wellness promotion. Protective factors, risk behaviors, and health disparities in the adolescent population will be highlighted and discussed, and special attention will be paid to adolescents with special health care needs, LGBTQ youth, and other vulnerable groups within the adolescent population. Health promotion interventions, such as youth-driven programmatic and policy approaches, will be presented as mechanisms for improving the health and well-being of the adolescent population.

COURSE OBJECTIVES

By the end of this course, students will be able to:
1. Describe the primary causes of morbidity and mortality in the U.S. adolescent population.
2. Discuss the basic foundations and theoretical underpinnings of adolescent development and behavior.
3. Provide examples of common adolescent risk behaviors and describe how these behaviors result in negative health outcomes.
4. Provide examples of protective factors and explain how they influence the health and overall well-being of adolescents.
5. Describe the special health and wellness considerations for adolescents with special health care needs and LGBTQ youth.
6. Provide three examples of health disparities in the adolescent population.
7. Identify examples of interventions (policy and programmatic) at the federal, state, and local levels that are designed to improve the health and well-being of adolescents.
8. Discuss and display how adolescents, and adolescence as a developmental time period, can be positively portrayed through a Positive Youth Development framework using multimedia.
9. Describe the differences between youth-driven and youth-focused interventions to improve adolescent health and wellness.
COURSE COMPETENCIES

Public health competencies addressed in this course include:

- Describe the role of social and community factors in both the onset and solution of public health problems (MPH core competency)
- Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies (MPH core competency)
- Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions. (ASPH Social and Behavioral Sciences competency)
- Identify health issues unique to different stages of the life cycle and describe how public health strategies can be tailored to meet such needs (Social Behavioral & Community Health competency)

CLASS FORMAT

A combination of lecture, in-class activities, guest presentations and discussions, and student-led discussions and presentations will be used during the course.

PREREQUISITES

Graduate standing

REQUIRED COURSE TEXT AND READINGS:

The required course text is:


This text should be available in the University at Albany bookstore, as well as online at sites like Amazon.com.

There are a number of additional required articles. These articles are available on the Blackboard course website. Additional course material is available on the Internet at the provided URLs.
CLASS POLICIES AND EXPECTATIONS

- All students are expected to attend class, participate in class discussions, and complete the required readings. Class absences must be justified ahead of time. Unexcused absences will result in the deduction of class attendance and participation points.

- All assignments are to be handed in on time. A minimum of 5% per day will be deducted for late papers.

- Academic dishonesty, such as plagiarism or unauthorized collaboration on any assignment will result in a fail grade for that assignment, and could result in a fail grade for the class. Please refer to the booklet, Community Rights and Responsibilities (http://www.albany.edu/judicial_affairs/standardsofconduct.html) for a full explanation of the University’s standards of conduct. An excellent guide to plagiarism (including a self-test) is available at http://ec.hku.hk/plagiarism/introduction.htm. You will be expected to review these materials before the second class.

*Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.*
COURSE ASSESSMENT

Your final course grade will be based on the following:

- Advanced show and tell: 10%
- Student-led interventions discussion: 15%
- Special topic presentations/paper: 20%
- Final Project: 45%
- Class Attendance and Participation: 10%

Grading Scale:
- 94 – 100 A
- 91 – 93 A-
- 88 – 90 B+
- 84 – 87 B
- 81 – 83 B-
- 78 – 80 C+
- 73 – 77 C
- 70 – 72 C-
- < 70 E

Each assignment is summarized below. Detailed instructions for each assignment will be provided by Dr. Bozlak in class.

Advanced show and tell (10%)
For one class session during the semester, you will sign up to start the class session with an “advanced show and tell” item. Specifically, you will locate a current (within the last two months) adolescent health or wellness-related news story or other related item and lead a brief 20-25 minute discussion with the class related to the item. It would be best if the item relates to the topic of the class session that day, however, this is not necessary, especially if there is a major breaking adolescent-related story in the media that you think the class would like to discuss, etc. It might be beneficial to bring copies of the article, etc., in class or show a brief video clip. The goals of this assignment are to: 1) begin each class in an interactive manner, with student engagement setting the tone for each class session; 2) inform the class of current events and news related to adolescents and critically analyze and discuss the item; 3) incorporate additional information and knowledge about adolescent health and wellness into the class that would not have been able to be discussed otherwise.

Intervention-focused student-led class discussion: (15%)
For this assignment you will co-lead as part of a team 1 hour of class discussion for one class session during the semester. The primary purpose of this discussion is to facilitate a conversation with your peers about potential interventions for the topic being discussed that day (i.e. substance use; violence; unintended pregnancy; sexually transmitted infections, etc.). The focus of the discussion should not predominately be the causes of these public health problems, but rather potential solutions to prevent them. Locate one intervention that is “youth-focused” and one intervention that is “youth-driven”. You are welcome to utilize interactive and engaging
methods for this discussion, such as portions of a webinar followed by discussion, a class activity, etc. Additional information will be provided on the first day of class.

**Special Topics Paper & Presentations (20%)**: It is not possible within one semester to cover the breadth of topics related to adolescent health. In addition, the instructor realizes that there may be additional topics of interest to students that may not be incorporated into the course plan. Consequently, the individual special topics are an opportunity for each student to do additional research on a specific adolescent health-related topic not already covered in the course, write a 4-6 page paper on the topic, and give a short presentation to the class. One of the sources for the paper must be personal communication with an organization or person with knowledge on the topic. There will be an opportunity for each student to briefly present on their special topic to the rest of the course on March 14th. Additional information on this assignment will be provided in class.

**Class Attendance and Participation (10%)**
Students are expected to come to class prepared to actively participate in each class session. If a student is unable to attend a class session, he or she is expected to notify Dr. Bozlak as soon as it is known that he or she will be absent. More than one unexcused absence will result in the lowering of one’s attendance and participation grade.

**PYD Media Campaign Project (45%)**:

This project has three parts: a) three posters created and presented by groups; b) critiques of other groups’ posters; c) individual research paper and evaluation of project and participation.

a) **Group Poster Creation and Presentation (20%)**: You will work in small groups of two or three to develop 3 unique campaign posters that will promote the message of Positive Youth Development (PYD). “Positive youth development (PYD) is a comprehensive framework outlining the supports young people need in order to be successful. PYD emphasizes the importance of focusing on youths’ strengths instead of their risk factors to ensure that all youth grow up to become contributing adults,” (NCSL, 2010). Specifically, your posters will contain images and/or words that promote youth as assets to their community, rather than problems to be solved. You are free to be creative with your presentation, and as a group, can decide if there are specific topics your campaign should focus on. You should be sure to define your target audience (i.e., teens in a specific age group). The posters should be utilized to help promote a positive image of youth in society. However, each poster should convey a message related to health promotion and healthy adolescent development. These posters will be published on a unique social media site (generationpulse.org) with the Boston College Adolescent Psychology course in an effort to exchange ideas and feedback with students from different disciplines and backgrounds. **Groups must post their posters online by 11:59PM on 4/11/13.** On May 2nd, each group will be required to present their posters in class, explain the rationale for their creation, and answer questions from their fellow students.
b) **Individual Poster Critiques (10%)**: As part of your grade for this project, each student will be required to assess the posters developed by at least 2 other groups (one from our class and one from the Boston College Adolescent Psychology course). Each comment must consist of 1-2 pages, double-spaced. A portion of your assessment should be posted on the genpulse.org website for the group to view. *Critiques are due to Dr. Bozlak and on the website by 4/25/13.*

c) **Individual Research Paper and Project, Peer, and Self-Assessment (15%)**: *Papers are due via Blackboard on the day scheduled for the course final exam, 5/16/13, by 1 pm.* The final paper has two components:

1) Students will *individually* submit a 5-6 double-spaced paper based on research and theory regarding one of your posters. For this paper, please incorporate and explain findings from at least 3-5 empirical research studies. Please note that the research for these papers should be done in advance of the poster creation. Also, individual group members should not write a paper on the same topic and poster.

2) Project, Peer, and Self-Assessment: The last part of the assignment is designed as an assessment so that each student has the opportunity to reflect and comment on their own contribution to the project, their group members’ contributions to the project, and the project itself. Points will be deducted from the project grade if this assessment is not turned in with the final paper. The purpose of this report is to encourage accountability, enable us to give credit as credit is due, and allow for reflection on the assignment. Dr. Bozlak will provide the assessment form in class.

*Suggested topics for posters (You may think of others):*

1) Family: Parent-Adolescent Relationships. Sibling relationships
2) Peers: Friendships, Healthy partner relationships, Sexuality
3) School: School connectedness; service learning; school environment and its effect on health
4) Identity: Finding Purpose, Gender Identity, Religion/Spirituality; Sexual identity, etc.
5) Youth Culture and Challenges: Media (movies, TV, music), Internet and Social networking, Drug and Alcohol Use, Mental Health, Sexually Transmitted Infections, Teen Pregnancy, Gangs, Body Image, Date Rape, etc.
6) Other PYD Resources & Topics: Youth Mentoring, Adult-Youth Partnerships; Civic Engagement; Youth Activism for Health and Wellness
## CLASS SCHEDULE, SPRING 2013

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Coursework due (before class in Blackboard)</th>
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<tbody>
<tr>
<td><strong>Session I – January 24th</strong></td>
<td><strong>Class Introductions &amp; Introduction to adolescence and adolescent health; Morbidity &amp; Mortality; Life course approach; Health versus wellness</strong>&lt;br&gt;Readings:&lt;br&gt;• DiClemente text - Ch. 1 and Ch. 2&lt;br&gt;• Ch. 4 in Kotch, J.B. (2013). Maternal and Child Health: Programs, Problems, and Policy in Public Health. Jones &amp; Bartlett:Burlington, MA.</td>
<td>Sign up for advanced show and tell; leading of class discussions; Special topic assignments</td>
</tr>
<tr>
<td><strong>Session II - January 31st</strong></td>
<td><strong>Adolescence &amp; Healthy Adolescent Development – Focus on the physical; Group time</strong>&lt;br&gt;Readings:&lt;br&gt;• DiClemente text - Ch. 6 Biological underpinnings&lt;br&gt;• Ruffin, N. Adolescent growth &amp; development. Virginia Cooperative Extension. Publication 350-850.&lt;br&gt;• US DHHS Maternal and Child Health Bureau, Adolescent Physical Development, training module document&lt;br&gt;• Kotch text - Ch 9</td>
<td>Form groups for final projects</td>
</tr>
<tr>
<td><strong>Session IV - February 14th</strong></td>
<td><strong>Health care access; Children and youth with special health care needs – Case Study Discussion</strong>&lt;br&gt;&lt;br&gt;<strong>Guest speaker:</strong> Kristine Mesler, Maternal and Child Health Bureau Director, NYSDOH – 2:45 pm – 3:50 pm&lt;br&gt;Readings:&lt;br&gt;• Ch. 12 Kotch book – Children and Youth with Special Health Care Needs</td>
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<tr>
<td>Session V - February 21st</td>
<td><strong>Special Event! 1:00 – 3:30 pm in the SPH auditorium – American Indian Public Health Disparities Symposium</strong> - Students must attend to receive attendance and participation points for today.</td>
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</table>
| Session VI – February 28th Student-led discussion | **Positive Youth Development for All; Asset versus deficit approach to adolescent health; Health versus/and wellness; Group Time**  
Readings:  
- DiClemente text Ch. 7  
| Session VII – March 7th Student-led discussion | **Special Session – Vulnerable subgroups within the adolescent population; Group Time**  
1) LGBTQ youth  
2) Risk Behaviors & Protective Factors – Incarcerated and delinquent youth; Violence  
Readings:  
- DiClemente text Ch. 12  
- DiClemente Ch. 17 |
| Session VIII – March 14th | **Special Topics Paper Submission and In-class Presentations**  
Submit paper in Blackboard by 1 pm and... |
<table>
<thead>
<tr>
<th>March 21st</th>
<th>No Class: Spring Break</th>
<th>Presentations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session X - April 4th</td>
<td><strong>No class – Work on final projects</strong></td>
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</tr>
<tr>
<td>Session XI - April 11th Student-led Discussion</td>
<td><strong>Risk Behaviors &amp; Protective Factors - Reproductive and sexual health - including teen pregnancy and sexually transmitted infections</strong>&lt;br&gt;<strong>Guest Speaker:</strong> Pat McGeown, former CEO of Upper Hudson Planned Parenthood; HPMB Adjunct Faculty&lt;br&gt;Readings:&lt;br&gt;• DiClemente text - Ch. 15, 16, 18&lt;br&gt;• Lanier, Y., Sutton, M.Y. (2013). Reframing the context of preventive health care services and prevention of HIV and other sexually transmitted infections for young men: New opportunities to reduce racial/ethnic sexual health disparities. <em>AJPH</em>, 103(2), p: 262-277.&lt;br&gt;• Potential paper from Guest Speaker</td>
<td>Posters must be uploaded to genpulse website by 11:59 PM, April 11th</td>
</tr>
<tr>
<td>Session XII - April 18th Student-led Discussion</td>
<td><strong>Risk &amp; Protective Factors – Substance Use (tobacco, alcohol, other substances); Group Time</strong>&lt;br&gt;Readings:&lt;br&gt;• DiClemente text - Ch. 8, 10, 11&lt;br&gt;• Bozlak, C.T., Kelley, M.A. (2010). Youth participation in a community campaign to pass a clean indoor air ordinance. <em>Health Promotion Practice</em>, 11(4), p:530-540.&lt;br&gt;• Miller, J.W., Jones, S.E., Naimi, T.S., Brewer, R.D., Jones, S.E. (2007). Binge drinking and associated health risk behaviors among high school students.</td>
<td>Poster critiques due on genpulse website and to Dr. Bozlak in Blackboard</td>
</tr>
<tr>
<td>Date</td>
<td>Event</td>
<td>Location</td>
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<tr>
<td>April 25th</td>
<td>Class trip to Grand Street Community Arts, Albany, NY, and debriefing session over an afternoon snack</td>
<td>Meet in SPH lobby at 1 pm</td>
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<tr>
<td>May 2nd</td>
<td>Final Project – Poster Presentations and Discussions</td>
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<td>May 9th</td>
<td><strong>No Class: Reading Day</strong></td>
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<tr>
<td>May 16th</td>
<td><strong>No Class - Final Exam Week</strong></td>
<td>Final individual paper – including project, peer, and self-assessment, due by 1 pm today in Blackboard</td>
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HPM 669: Adolescent Health
3 credits
Spring 2014
Instructor: Christine Bozlak, PhD, MPH
Class time: Thursdays, 1:00 pm – 3:50 pm
Location: C2
Instructor’s office location: SPH Department of Health Policy, Management, and Behavior,
Room 173
Office hours: Mondays, 10 am – 12 pm
Email: cbozlak@albany.edu, Phone: 518-402-0299

GENERAL DESCRIPTION

This course will examine the primary causes of morbidity and mortality in the U.S. adolescent population, highlight the policies and programs designed to improve the health and wellness of this population, and detail the innovative asset-based and Positive Youth Development approaches to adolescent health and wellness promotion. Protective factors, risk behaviors, and health disparities in the adolescent population will be highlighted and discussed, and special attention will be paid to adolescents with special health care needs, LGBTQ youth, youth in the juvenile justice system, and other vulnerable groups within the adolescent population. Health promotion interventions, such as youth-driven programmatic and policy approaches, will be presented as mechanisms for improving the health and well-being of the adolescent population.

COURSE OBJECTIVES

By the end of this course, students will be able to:
1. Describe the primary causes of morbidity and mortality in the U.S. adolescent population.
2. Discuss the basic foundations and theoretical underpinnings of adolescent development and behavior.
3. Provide examples of common adolescent risk behaviors and describe how these behaviors result in negative health outcomes.
4. Provide examples of protective factors and explain how they influence the health and overall well-being of adolescents.
5. Describe the special health and wellness considerations for adolescents with special health care needs, LGBTQ youth, and youth in the juvenile justice system.
6. Provide three examples of health disparities in the adolescent population.
7. Identify examples of interventions (policy and programmatic) at the federal, state, and local levels that are designed to improve the health and well-being of adolescents.
8. Discuss and display how adolescents, and adolescence as a developmental time period, can be positively portrayed through a Positive Youth Development framework using multimedia.
9. Describe the differences between youth-driven and youth-focused interventions to improve adolescent health and wellness.
COURSE COMPETENCIES

Public health competencies addressed in this course include:

- Describe the role of social and community factors in both the onset and solution of public health problems. (MPH core competency)
- Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies. (MPH core competency)
- Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions. (ASPH Social and Behavioral Sciences competency)
- Identify health issues unique to different stages of the life cycle and describe how public health strategies can be tailored to meet such needs. (Social Behavioral & Community Health competency)

CLASS FORMAT

A combination of lecture, in-class activities, papers and projects, guest presentations and discussions, and student-led discussions and presentations will be used during the course.

PREREQUISITES

Graduate or advanced undergraduate standing

REQUIRED COURSE TEXT AND READINGS:

The required course text is:


This text should be available in the University at Albany bookstore, as well as online at sites like Amazon.com.

There are a number of additional required articles. These articles are available on the Blackboard course website. Additional course material is available on the Internet at the provided URLs.
CLASS POLICIES AND EXPECTATIONS

- All students are expected to attend class, participate in class discussions, and complete the required readings. Class absences must be justified ahead of time. Unexcused absences will result in the deduction of class attendance and participation points.

- All assignments are to be handed in on time. Five percent per day will be deducted for late papers.

- Academic dishonesty, such as plagiarism or unauthorized collaboration on any assignment will result in a fail grade for that assignment, and could result in a fail grade for the class. Please refer to the Standards of Academic Integrity [http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards](http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards) for a full explanation of the University’s standards of conduct. An excellent guide to plagiarism (including a self-test) is available at [http://ec.hku.hk/plagiarism/introduction.htm](http://ec.hku.hk/plagiarism/introduction.htm). You will be expected to review these materials before the second class.

“Every student has the responsibility to become familiar with the standards of academic integrity at the University. Faculty members must specify in their syllabi information about academic integrity, and may refer students to this policy for more information. Nonetheless, student claims of ignorance, unintentional error, or personal or academic pressures cannot be excuses for violation of academic integrity. Students are responsible for familiarizing themselves with the standards and behaving accordingly, and UAlbany faculty are responsible for teaching, modeling and upholding them. Anything less undermines the worth and value of our intellectual work, and the reputation and credibility of the University at Albany degree.” (University’s Standards of Academic Integrity Policy, Fall 2013)

- Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and facilitate your educational experience.
COURSE ASSESSMENT

The grading scheme for the class is A-E. Your final course grade will be based on the following:

- Advanced show and tell: 5%
- Student-led interventions discussion: 10%
- Special topic presentations/paper: 25%
- World Café class session and reflection paper: 15%
- Final Project: 35%
- Class Attendance (5%) and Participation (5%): 10%

Each assignment is summarized below. Detailed instructions for each assignment will be provided by Dr. Bozlak in class.

Advanced show and tell (5%)
For one class session during the semester, you will sign up to start the class session with an “advanced show and tell” item. Specifically, you will locate a current (within the last two months) adolescent health or wellness-related news story or other related item and lead a brief 20-25 minute discussion with the class related to the item. It would be best if the item relates to the topic of the class session that day, however, this is not necessary, especially if there is a major breaking adolescent-related story in the media that you think the class would like to discuss. It might be beneficial to bring copies of the article to class or show a brief video clip. The goals of this assignment are to: 1) begin each class in an interactive manner, with student engagement setting the tone for each class session; 2) inform the class of current events and news related to adolescents and critically analyze and discuss the item; 3) incorporate additional information and knowledge about adolescent health and wellness into the class that would not have been able to be discussed otherwise.

Intervention-focused student-led class discussion: (10%)
For this assignment, you will lead, individual or as part of a team (your choice), 30 minutes of class discussion for one class session during the semester. The primary purpose of this discussion is to facilitate a conversation with your peers about potential interventions for the topic being discussed that day (i.e. substance use, violence, etc.). The focus of the discussion should not predominately be the causes of these public health problems, but rather potential solutions to prevent them. Locate one intervention that is “youth-focused” and one intervention that is “youth-driven”. You are welcome to utilize interactive and engaging methods for this discussion, such as a class activity, etc. You must provide an outline for the discussion to Dr. Bozlak by the end of the class session on the day you present. Additional information will be provided on the first day of class.

Special Topics Paper & Presentation (25%): It is not possible within one semester to cover the breadth of topics related to adolescent health. In addition, the instructor realizes that there may be additional topics of interest to students that may not be incorporated into the course plan. Consequently, the individual special topics are an opportunity for each student to do additional research on a specific adolescent health-related topic not already covered in the course, write a 5-
7 page paper on the topic, and give a presentation to the class. *One of the sources for the paper must be personal communication with an organization or person with knowledge on the topic.* There will be an opportunity for each student to briefly present on their special topic to the rest of the course. *Papers and an outline of the presentation are due in Blackboard by 1 pm on March 13th.* Additional information on this assignment will be provided in class.

**Class Attendance (5%):**
Students are expected to come to class prepared to actively participate in each class session. If a student is unable to attend a class session, he or she is expected to notify Dr. Bozlak as soon as it is known that he or she will be absent. More than one unexcused absence will result in the lowering of one’s attendance and participation grade.

**Class Participation (5%):**
Given the nature of this course, it is expected that students will actively participate in discussions both in small groups and with the larger class. Part of the student’s participation grade will be based on their individual participation in small and large group discussions throughout the semester. Part of the student’s participation grade will be based on special group activities facilitated by the instructor.

**World Café participation and facilitation – Joint class session with Criminal Justice course (15%):**
One of the best ways to know whether or not someone understands course material is to have them teach and discuss the material with someone else who is not from their field. For one unique class session on April 24th, our class will travel to the downtown campus to engage in a discussion with the students from University at Albany Criminal Justice course RCRJ 644 The Incarceration Process. *Readings will be required prior to the session, and each student will be responsible for preparing a portion of the class discussion. A two page reflection paper due by 1 pm on May 1st will also be required.* Additional information is forthcoming.

**PYD Media Campaign Project (35%):**

This project has three parts: a) two posters created and presented by groups of two or three people; b) critiques of other groups’ posters; c) individual research paper and evaluation of project and participation. A portion of the project will be completed in collaboration with a positive psychology course at Boston College.

a) **Group Poster Creation and Presentation (15%):** You will work in small groups of two or three people to develop two unique campaign posters that will promote the message of Positive Youth Development (PYD). (Note: If your group has three people in it, then you will be required to produce three posters.) “Positive youth development (PYD) is a comprehensive framework outlining the supports young people need in order to be successful. PYD emphasizes the importance of focusing on youths’ strengths instead of their risk factors to ensure that all youth grow up to become contributing adults,” (NCSL, 2010). Specifically, your posters will contain images and/or words that promote youth as assets to their community, rather than problems to be solved. You are free to be creative with your presentation, and as a group, can decide if there are specific topics your
campaign should focus on. You should be sure to define your target audience (i.e., teens in a specific age group). The posters should be utilized to help promote a positive image of youth in society. However, each poster should convey a message related to health promotion and healthy adolescent development. These posters will be shared with the Boston College Adolescent Psychology course in an effort to exchange ideas and feedback with students from different disciplines and backgrounds. **Groups must submit their posters to Dr. Bozlak via Blackboard by 11:59 PM on April 10th.** At the end of the semester, on May 8th, each group will be required to present their posters in class, explain the rationale for their creation, and answer questions from their fellow students. Presentation slides or an outline is due to Dr. Bozlak by 1 pm on May 8th.

b) **Individual Poster Critiques (5%):** As part of your grade for this project, each student will be required to assess the posters developed by at least 2 other groups (one from our class and one from the Boston College Adolescent Psychology course). Each comment must consist of 1-2 pages, double-spaced. Your comments will be anonymously shared with the other group. **Critiques are due to Dr. Bozlak via Blackboard by 1 PM on April 17th.**

c) **Individual Research Paper and Project, Peer, and Self-Assessment (15%):** **Papers and assessments are due via Blackboard on May 12th, by 11:59 PM.** The final paper has two components:

1) Students will individually submit a 5-6 page double-spaced paper with one inch margins based on research and theory regarding one of your posters. For this paper, please incorporate and explain findings from at least 3-5 empirical research studies. Please note that the research for these papers should be done in advance of the poster creation. Also, individual group members should not write a paper on the same topic and poster.

2) Project, Peer, and Self-Assessment: The last part of the assignment is designed as an assessment so that each student has the opportunity to reflect and comment on their own contribution to the project, their group members’ contributions to the project, and the project itself. Points will be deducted from the project grade if this assessment is not turned in with the final paper. The purpose of this report is to encourage accountability, enable us to give credit as credit is due, and allow for reflection on the assignment. Dr. Bozlak will provide the assessment form in Blackboard.

Suggested topics for posters (You may think of others):

1) Family: Parent-Adolescent Relationships; Sibling relationships
2) Peers: Friendships, Healthy partner relationships
3) School: School connectedness; service learning; school environment and its effect on health
4) Identity: Finding Purpose, Gender Identity, Religion/Spirituality; Sexual identity, etc.
5) Youth Culture: Media (movies, TV, music), Internet and Social networking
6) Other PYD Resources & Topics: Youth Mentoring, Adult-Youth Partnerships; Civic Engagement; Youth Activism for Health and Wellness
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<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Coursework due (before class in Blackboard if not otherwise indicated)</th>
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<tbody>
<tr>
<td>Session I – January 23</td>
<td>Class Introductions &amp; Introduction to adolescence and adolescent health; Morbidity &amp; Mortality; Life course approach; Health versus wellness</td>
<td>Sign up for advanced show and tell; leading of class discussions</td>
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<td><strong>Readings:</strong></td>
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<td>• DiClemente text - Ch. 1 and Ch. 2</td>
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<tr>
<td>Session II – January 30</td>
<td>Introductory material continued; Adolescence &amp; Healthy Adolescent Development – Adolescent health overview (continued); Physical development</td>
<td>Finalize sign-up sheet for leading intervention discussions; Special topic paper assignments; Form groups for final projects</td>
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<td><strong>Readings:</strong></td>
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<td>• DiClemente text - Ch. 6 Biological underpinnings</td>
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<td>• Kotch text - Ch 9</td>
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<td>Session III – February 6</td>
<td>Adolescence &amp; Healthy Adolescent Development – Focus on the mental (risk-taking, resilience and coping, identity development, decision-making)</td>
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<td>• DiClemente text - Chapters 3 -5</td>
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<td>• DiClemente text – Chapters 19 &amp; 20</td>
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<td>Session IV – February 13th</td>
<td>Positive Youth Development for All; Asset versus deficit approach to adolescent health; Health versus/and wellness;</td>
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<td><strong>Readings:</strong></td>
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<td>• DiClemente text Ch. 7, 19, 20</td>
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<td>Date</td>
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<td>February 20th</td>
<td><strong>School Holiday – No Class</strong></td>
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<td>Session V –</td>
<td><strong>Adolescent Health in New York State; PYD continued</strong></td>
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<td>February 27</td>
<td><strong>Guest speaker: Kristine Mesler, Maternal and Child Health Bureau Director, NYSDOH; 2:45 pm -3:50 pm</strong></td>
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<td>Session VI –</td>
<td>Special Session –LGBTQ youth; Sexual and gender identity; Bullying</td>
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<td>March 6</td>
<td><strong>Guest Speaker: Courtney J. D’Allaird, Program Coordinator, Gender &amp; Sexuality Resource Center (GSRC) University at Albany, State University of New York</strong></td>
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<td><strong>1:30 pm – 3:30 pm</strong></td>
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<td>Readings:</td>
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<td>Session VII –</td>
<td>Special Topics Paper Submission and In-class Presentations and Discussion</td>
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<td>March 13</td>
<td>Submit paper and presentation outline in Blackboard by 1 pm</td>
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| Session VIII  
March 20 | **No Class: Spring Break** |
| --- | --- |
| Session IX –  
March 27 | **Health care access for adolescents; Children and youth with special health care needs**  
**Readings:**  
- Ch. 12 Kotch book – Children and Youth with Special Health Care Needs  
- DiClemente text – Ch 26  
| Session X –  
April 3 | **Risk & Protective Factors – Violence (including self-harm, teen dating violence, homicide)**  
**Readings:**  
- DiClemente text Ch. 12  
| Session XI –  
April 10 | **FIELD TRIP – Upper Hudson Planned Parenthood**  
**Risk Behaviors & Protective Factors - Reproductive and sexual health - including teen pregnancy and sexually transmitted infections – Meet in SPH lobby at 1 pm to travel to UHPP**  
**Readings:**  
- DiClemente text - Ch. 15, 16, 18  
Posters must be uploaded to Blackboard by 11:59 PM, April 10th |
<table>
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<tr>
<th>Session XII – April 17</th>
<th>Risk &amp; Protective Factors – Substance Use (tobacco, alcohol, other substances); Group Time</th>
<th>Poster critiques in Blackboard by 1:00 pm</th>
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<tr>
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<td><strong>Guest speaker:</strong> Jessica Martin, PhD, Assistant Professor, Division of Counseling Psychology, University at Albany; 2 pm – 3 pm</td>
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|                        | **Readings:**  
- DiClemente text - Ch. 8, 10, 11  
| Session XIII - April 24 | Joint class session with University at Albany Criminal Justice course RCRJ 644 The Incarceration Process (Dr. Fader) – Topic: Positive Youth Development principles and their potential for the juvenile justice system 1:30 pm – 3:30 pm | Meet in SPH lobby at 1 pm to travel to downtown campus |
|                        | **Readings:**  
- Chapter 4 “Nothing’s Changed but Me” Reintegration plans meet the inner city.” In Fader, J.J. (2013). Falling Back: Incarceration and transitions to adulthood among urban youth. Rutgers University Press: New Brunswick, NJ.  
<table>
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<tr>
<th>Session XIV</th>
<th>May 1</th>
<th>Debrief April 24th class session; Topic: Youth-serving organizations; Group Time</th>
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<td><strong>Guest speaker:</strong> Rebecca Beeman, MSW, Equinox, Inc. Journey and New Pathways Program Manager – 1:30 pm – 2:30 pm; Group Time</td>
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<td>Session XV</td>
<td>May 8</td>
<td>Final Project – Poster Presentations and Discussions</td>
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<td><strong>Poster presentation PowerPoint slides or presentation outline due in Blackboard by 1 pm</strong></td>
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<td>May 15th</td>
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<td>No Class - Final Exam Week</td>
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<td><strong>Final individual paper – including project, peer, and self-assessment, due by 11:59 pm on Monday, May 12th in Blackboard</strong></td>
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In a society where the health system has grown increasingly complex and difficult to navigate, and where people may have instant access to information from multiple sources, a person’s ability "to obtain, process, and understand basic health information and services needed to make appropriate health decisions", the common definition for health literacy, has become a major issue. This course is designed to introduce students to the concept of health literacy, the significance of health literacy as a determinant of health outcomes, the measures developed to assess health literacy, the ongoing debates around the creation of new measures, and the multiple factors that shape health literacy. Through a variety of readings, individual and group assignments, as well as guest lectures, students will study health literacy (a) at different levels of analysis (e.g., individuals, families, the patient-health provider dyad, organizations, and communities), (b) in the context of various health conditions (e.g., diabetes, cardiovascular diseases, mental health), and (c) from the points of view of policymakers, researchers, and clinicians.

This course teaches topics and skills concerning the following Association of Schools of Public Health (ASPH) competencies.

Social and Behavioral Science Competencies:

- E.2 Identify the causes of social and behavioral factors that affect health of individuals and populations.
- E.6 Describe the role of social and community factors in both the onset and solution of public health problems.
- E.10 Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.
Communication Competencies:

- F. 7 Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.

Diversity and Culture Competencies:

- G.3 Explain why cultural competence alone cannot address health disparity.
- G.8 Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.

Students will also meet this UAlbany SBCH competency:

- Analyze the role social and behavioral determinants of health and develop strategies for addressing them to solve public health problems

READING

The readings for the course will be provided on the Blackboard course site. All assigned reading must be completed prior to class. The reading list is located later in the syllabus.

GRADES

Course grades will be determined as follows (assignments are described below):

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<thead>
<tr>
<th>Assignment</th>
<th>Percentage</th>
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<tr>
<td>Midterm Exam</td>
<td>20%</td>
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<td>Final Exam</td>
<td>20%</td>
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<td>Class activity</td>
<td>5%</td>
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<td>Measurement tool</td>
<td>15%</td>
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<td>Brochure evaluation</td>
<td>10%</td>
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<td>Website evaluation</td>
<td>10%</td>
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<tr>
<td>Interview and presentation</td>
<td>20%</td>
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ASSIGNMENTS

Class activity (5%)
Students will need to pick one class session where they will be responsible for developing an in-class learning activity that will take about 20 minutes. An example of an activity would be selecting some examples of brochures that are difficult to read and bringing them to class for review and discussion. More information about this assignment will be provided in class.

Midterm and Final Exam (20% each)
The midterm exam will cover required readings, lectures, and class discussions from any class session up until the exam is given. The mid-term exam will be taken in class on **March 6**. The final exam will cover required readings, lectures, and class discussions from the entire semester, as well as material from student presentations. The final exam will be taken in class on **May 8**.

The exams will consist of a variety of questions that can include definition, multiple-choice, true/false, fill-in-the-blank, and short answer/essay questions. Students must arrive at the start of class to begin the exam. The exam must be completed in pen, and students are typically not allowed to leave the room during the exam. All course materials should be left outside of the classroom or be in a closed bag.

**Patient interview and presentation (20%)**
At the most basic level, we confront our health literacy limitations as individuals in our everyday life. For this assignment, you will have to find and interview an individual who is coping with a chronic disease, such as diabetes, a cardiovascular disease, or cancer. As an interviewer, your goal should be to acquire an understanding of the challenges that your interviewee has had to face in coping with his or her disease, especially those related to how they get, understand, and evaluate information related to their condition. Be sure to address how he or she has been able to overcome these challenges, and what methods or ways he or she has used individually, or in concert with family members and/or health providers, to address personal limitations in dealing with a particular health condition. You should also gain an understanding of how the individual evaluates his or her primary physician’s efforts to help them obtain information about their condition, process and understand that information, and navigate the health care system.

Based on your interview, you will have to deliver a formal presentation at the end of the semester, in which you will discuss the main lessons learned from your interaction, but also what your data tell you about the challenges in conceptualizing and measuring health literacy. More information about the presentation requirements will be provided in class.

**Measurement Tool Assignment (Group Project) (15%)**
For this assignment, you will need to work in small groups of 3-5 people to (a) evaluate existing measures of health literacy and (b) develop a new measure. It is up to you to determine if you want this to be a general tool for anyone, or if there is a specific target group (such as people with a certain condition, young people, etc.).

Groups will be expected to write a paper of no more than 5 pages, double-spaced. For this paper, you will begin by picking at least 2 existing tools. You will describe them and compare them to each other. You should address their advantages and limitations. Your new measure should build on existing literature and be, at least in part, the product of reflection on the existing measures you analyzed. Apart from a description of your newly designed measure, you should compare it to existing measures. You should address why you think your tool is an improvement on the other two measures you selected, and specify if there are certain populations for whom your tool was specifically designed.

**Brochure Evaluation (10%)**
For this project, you will need to find two brochures from health facilities that present health information. One should be an example of one you consider to be a good example, and the other should be an example of one that you think could be improved. Please write a paper of no more than 3 pages double-spaced comparing and contrasting the brochures, making suggestions for
improvements that could be made, and addressing whether the brochures would be appropriate for a population with low health literacy. Please bring your paper along with the brochures to class on **February 21**. You will discuss your evaluation with students in class and turn in the paper and brochures to the professor.

**Website Evaluation (10%)**

For this project, you will need to find and evaluate 2 health-related websites (any website that provides positive, healthy information where health is the focus of the website). Ideally, you will pick one website that you think is a good example and another you think could be improved. Please write a paper of no more than 3 pages double-spaced comparing and contrasting the websites, making suggestions for improvements that could be made, and addressing whether the websites would be appropriate for a population with low health literacy. Please bring your paper to class on **April 17**. You will discuss your evaluation with students in class and turn in the paper to the professor.

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**ATTENDANCE POLICY**

There is no separate grade for attendance. Because this is a graduate class, the instructor assumes that you will attend each session of the class and arrive promptly unless you have an emergency or a conflict of a professional nature (in which case, you will need to inform the instructor, ideally before the fact, but, if that’s not possible, then as soon as possible afterwards). Repeated late arrivals and/or any unexcused absences will detract from your final course grade.

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**OTHER CLASS POLICIES**

Students in this course typically have busy lives, and are balancing multiple life obligations. Succeeding in this course will require you to take full responsibility for managing your time and effort in order to meet the course objectives. The following course policies will help clarify your role and help you with the planning of your schedule.

- Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact me by the second week of class to discuss accommodations necessary to ensure full participation and help your educational experience.
- All students are expected to attend class, participate in class discussions and complete the required readings.
- All assignments are to be handed in on time. An assignment not handed in on time will receive a point penalty regardless of the reason. If you are unable to attend class that day, or will be late, it is your responsibility to get the assignment to the instructor ahead of time. Points will be deducted the first day it is late based on when the assignment is turned in. An additional 5 points PER DAY will be deducted for late assignments. If you anticipate a busy week the date an assignment is due, you should plan to turn it in early. You should also not leave the work until the last minute in the event you have questions or become ill when the assignment is due.
The instructor reserves the right to ask any student missing a meaningful amount of class time (as defined by the instructor) to withdraw from the course at any time, even if it means a “W” will appear on the student’s transcript.

It is the student’s responsibility to note the university determined deadlines for dropping or withdrawing from the course and changing to a pass/fail grade. No exceptions will be made. If a student feels they will not be able to complete the course work according to the dates provided on the syllabus, they should drop or withdraw from the course.

Excessive use of direct quotes in your assignments is discouraged. You should use references to support your ideas and provide useful information, but should not rely on numerous direct quotes to complete your assignments.

**Academic dishonesty**, such as plagiarism, cheating on an exam, submitting work that you previously submitted for another class, submitting work that was submitted for this or any other class by another student, or unauthorized collaboration on any assignment, will result in a grade of 0 for the assignment, and could result in a grade of E (failing grade) for the class. Students who submit more than one assignment with plagiarism will automatically fail the course. Please note, per school policy, all incidents of academic dishonesty must be reported to your department chair, Dean of the School of Public Health, and Dean of Graduate Studies. Incidents may also be subject to sanctions by the school and university. Please refer to the booklet, Community Rights and Responsibilities, for a full explanation of the University’s standards of conduct.

[http://www.albany.edu/studentconduct/introduction.shtml](http://www.albany.edu/studentconduct/introduction.shtml)

It is the responsibility of the student to know how to reference material correctly in accordance with policies for this class. All students must use APA style referencing. You must correctly cite material that is not your own idea or wording in your papers. **Directly copying published material word-for-word without using quotation marks (even if you provide the reference), and not providing references for information taken from other sources, are examples of plagiarism.** Examples of how to reference using APA style are provided at this website: [http://library.albany.edu/usered/cite/apa.pdf](http://library.albany.edu/usered/cite/apa.pdf)

The burden on avoiding plagiarism or other academic integrity violations falls solely on the student. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. For any assignment, you should consult with the professor to get clarification about potential plagiarism issues, **PRIOR to handing in your assignment if you have any questions, and you must proofread your work to avoid having a typo count as plagiarism.** **The professor will randomly check wording and sources in papers or other assignments throughout the course to determine if any plagiarism is occurring.** Students who engage in academic dishonesty can not ask for any exceptions or provide “after the fact” rationales.

Please complete the quiz at this website prior to the next class: [http://www.indiana.edu/~tedfrick/plagiarism/item1.html](http://www.indiana.edu/~tedfrick/plagiarism/item1.html)
<table>
<thead>
<tr>
<th>Session</th>
<th>Date</th>
<th>Topic</th>
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<tbody>
<tr>
<td>Session 1</td>
<td>January 24</td>
<td>Introduction to Course/Overview of health literacy/Outcomes</td>
</tr>
<tr>
<td>Session 2</td>
<td>January 31</td>
<td>Frameworks/Definitions and measurement/Readability/Numeracy</td>
</tr>
<tr>
<td>Session 3</td>
<td>February 7</td>
<td>Health providers</td>
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<td></td>
<td><strong>MEASUREMENT ASSIGNMENT DUE</strong></td>
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<td></td>
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<td><em>(Guest speaker: The health provider’s perspective)</em></td>
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<tr>
<td>Session 4</td>
<td>February 14</td>
<td>Health facilities/demands of the health care system</td>
</tr>
<tr>
<td>Session 5</td>
<td>February 21</td>
<td>Communities</td>
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<td><strong>BROCHURE EVALUATION DUE</strong></td>
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<td><em>(Guest speaker: Communities and health literacy)</em></td>
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<tr>
<td>Session 6</td>
<td>February 28</td>
<td>Interventions/Policies</td>
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<td><em>Review for exam</em></td>
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<tr>
<td>Session 7</td>
<td>March 6</td>
<td><strong>MID-TERM EXAM</strong></td>
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<td><strong>CLASSES SUSPENDED</strong></td>
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<tr>
<td>Session 8</td>
<td>March 20</td>
<td>Youth/Parents/Families</td>
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<tr>
<td>Session 9</td>
<td>March 27</td>
<td>Other topics (diabetes, nutrition, oral health, mental health)</td>
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<tr>
<td>Session 10</td>
<td>April 3</td>
<td>Other topics (cultural competency, other)</td>
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<td><em>(Guest speaker: Cultural competence)</em></td>
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<td><strong>NO CLASS-Time to conduct interviews and work on website evaluations</strong></td>
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<tr>
<td>Session 11</td>
<td>April 17</td>
<td>Media literacy/ehealth literacy/science literacy</td>
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<td><strong>WEBSITE EVALUATION DUE</strong></td>
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<tr>
<td>Session 12</td>
<td>April 24</td>
<td><strong>STUDENT PRESENTATIONS</strong></td>
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<tr>
<td>Session 13</td>
<td>May 1</td>
<td><strong>STUDENT PRESENTATIONS</strong></td>
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<td><em>Review for exam</em></td>
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<tr>
<td>Session 14</td>
<td>May 8</td>
<td><strong>FINAL EXAM</strong></td>
</tr>
</tbody>
</table>
Session 1: Introduction and Outcomes


Optional


Session 2: Frameworks, Definitions, and Measurement


Nutbeam D. The evolving concept of health literacy. *Social Science and Medicine.* 2008; 67: 2072-2078

Optional


**Session 3: Health providers**


**Session 4: Health organizations**


**Session 5: Communities**


Matsaganis, M. D. (2011). Community communication capital as a determinant of health literacy and health care access in diverse ethnic neighborhoods.


Optional:


**Session 6: Interventions/Policies**


**Session 8: Youth/Parents/Families**


**Session 9: Other topics**


Session 10: Other topics


Session 11: Media literacy/ehealth literacy/science literacy


Poverty, Behavioral Health, and Health Policy

E-mail: jhastings2@albany.edu (best contact method)

Office: SPH – GEC 183; Phone: (518) 402-0293; SSW – Richardson 203; Phone: (518) 591-8751

Office Hours: Wednesdays 2:30-4:30pm in Richardson Hall
Feel free to send an email message to arrange an appointment.

Course Day & Time: Wednesdays, 5:45pm – 8:50pm
Location: HS 210  Course Category: Advance Social Welfare Policy
Course Website: Blackboard  Course Prerequisite: Graduate status & one policy course

Course Description:
Poverty, Behavioral Health, and Health Policy is designed to provide students with an understanding of how social factors contribute to racial/ethnic, socioeconomic and gender disparities in health, mental health, and care across the life course in a variety of related agency settings. We will examine how dynamic relationships such as interpersonal forms of discrimination and social ties may contribute to disparities in health and mental health. We will also examine the ways in which neighborhood and community context, as well as inequalities in socioeconomic status materially shape health and access to social services. Individual characteristics such as acculturation and client preferences may also contribute to disparities and will be explored.

Course Content:
Much of the social, medical, and epidemiologic literatures on health and mental health disparities are descriptive in nature and focused on identifying and describing specific disparities. In some cases, the reasons underlying a particular health or mental health disparity have not been researched or researched well. The intent of this course is to acquaint future professionals in health care with the organization of the U.S. health care system in terms of policy and services, and to introduce basic issues, challenges, and opportunities that are encountered in health and mental health agencies, research agendas, and interventions via health policy. It is intended to both complement and expand the knowledge gained in other public health and social welfare courses by focusing on underserved populations. The course will explore readings and foster discussions that will include: defining a “disparity,” examining the utility of epidemiology in service delivery, understanding health and behavioral health policies, exploring the role of poverty in health and behavioral health outcomes, examining the role of discrimination in agency service delivery, learning the influence of multicultural alternative medicine and faith-based initiatives and topics that cover immigrant health and mental health, and integrate policy and practice knowledge as they apply to depression, occupational participation, and obesity. Each of the course topics will cover issues across the life course as they relate to race/ethnicity, socioeconomic status, and gender.

Diversity and Values:
In this course, we will specifically address topics that focus on diverse and vulnerable population groups. For example: undocumented persons, younger and older populations, low-income persons, LGBT populations, disabled persons, and persons from communities of color. It is critical that social workers and public health practitioners in the health and mental health areas understand how disparities often negatively affect diverse populations and what can be done to improve outcomes.
Teaching Method
This course uses four teaching strategies that include lectures, cooperative learning activities, guest lectures, and some videos. The combination of the teaching strategies and the course assignments provides students with opportunities to build the skill sets and competencies described in the learning objectives.

Learning Behavior: Students are expected to read all assigned material prior to the class meeting. Throughout the course, we will explore and apply concepts that help us to understand the context of multicultural health and mental health disparities via policy implementations. Therefore, active participation through critical reflection in the classroom is essential to learning for us all. We are all learners. Each of us brings experience and perspective that can enrich our interaction. Our course and classroom should reflect a learning community where all can speak freely. Feel free to provide feedback throughout the course. Your comments on the class activities, readings, or classroom atmosphere via an office hour appointment or email message are welcome. In offering your comments, please consider: What you liked about the class; what would you change; what did you learn and what concerns/issues do you want to share. It is equally helpful to share positive reactions and constructive criticism.

Learning Objectives:
This course teaches topics and skills that relate to competencies considered critical by the Association of Schools of Public Health (ASPH) (http://www.asph.org/document.cfm?page=851) and the Council on Social Work Education (CSWE) (http://www.cswe.org/). Upon completion of this course, students will be able to:

- Describe the U.S. health care system in terms of its institutional structures, organization of services, utilization, and differential impact on population health outcomes;
- Identify, cite, and understand the role of social and community factors in both the onset and solution of public health problems as defined by age, race, ethnicity, gender or sexual orientation group experiences;
- Explain how professional ethics and practices relate to equity and accountability in diverse community settings;
- Differentiate the historical development of the health and behavioral health policies designed to affect availability, access, and effectiveness among diverse populations;
- Demonstrate the ability to convey essential knowledge concerning the Patient Protection and Affordable Care Act (HR3590) and its implications for affordable and equitable access to health care for all segments of the U.S. population;
- Demonstrate the ability to convey essential knowledge concerning state and federal mental health policy and their implications for affordable and equitable access to care for diverse populations;
- Demonstrate the capacity to apply critical thinking when making professional judgments about work in organizations and communities, by selecting appropriate health or mental health measurements; and
- Develop an understanding of and ability to apply a model of policy analysis and evaluation of a health or mental health policy to the delivery of quality social services to diverse populations;

This class will use required and recommended readings assigned for specific weeks. Many of the course readings are located on the Blackboard website.

[revised 10/07/13]
Required Texts:


Recommended Texts:


You will find that the readings vary between being easy to grasp to difficult. The best advice is to avoid trying to read all of the assigned articles in one sitting and be willing to bring up points that seem confusing or provoke a personal response during class discussion. I acknowledge that there is a tremendous amount of literature related to health care and mental health policy. I have endeavored to be selective and keep the reading expectations reasonable and consistent with graduate level work.

Other texts to review for additional knowledge:


* Follow local, state, and national news in the daily press related to public health, social work, and social welfare. This will be extremely helpful for discussion.
Attendance & Grading Statement:

Full attendance and class participation is required.

General Statement on Grading:

Final grades are based on 100 points. An “A” grade is earned by doing a really exceptional job. A “B” is a good, respectable grade. **All assignments should be turned in electronically on the date due by midnight. There are No Extensions. I expect you to submit all assignments on time. Assignments not turned in on time will be marked down by 5 points for each day late from the total score.** Incompletes are not given in this course unless under special circumstances. Requests must be made in writing to the Professor.

**You are welcome to submit any assignment early if you expect to be absent on the due date.**

The way to learn the most from this course is to take the readings, assignments, and deadlines seriously, in substance and timing, so you do not have to play “catch up” just to survive. **If you fail a class assignment, you can restore some points by working harder on other assignments.**

**Final Grades are based on total points:**

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<tr>
<th>Grade</th>
<th>Points</th>
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<tr>
<td>A</td>
<td>94-100</td>
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<tr>
<td>A-</td>
<td>90-93</td>
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<tr>
<td>B+</td>
<td>87-89</td>
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<tr>
<td>B</td>
<td>82-86</td>
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<tr>
<td>B-</td>
<td>78-81</td>
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<tr>
<td>C+</td>
<td>75-77</td>
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<tr>
<td>C</td>
<td>70-74</td>
</tr>
<tr>
<td>Not Passing</td>
<td>&lt;= 69</td>
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</tbody>
</table>

The major policy paper is due on **Wednesday, April 10, 2013 at midnight.** For the appropriate format, you should follow the **Instructions listed on page 7.** The paper should be no more than 15 pages, excluding the cover page and references. It should be typed, using a readable (12-point) font size, with 1-inch margins on all sides, numbered pages, and in APA style and format for citations. (Blackboard submission)

**Academic Integrity (http://www.albany.edu/studentconduct/appendix-c.php)**

Both the University and I believe that we are a community of scholars to which we hold a personal responsibility to behave with integrity and honesty. At all times, we must maintain the highest standards in all that we do academically. If you have any questions about how to cite someone else’s work, please ask.

Our duty to be honest, methodical and careful in the attribution of data and ideas to their sources establishes the foundations of our work. Misrepresenting or falsifying scholarship undermines the essential trust on which our community depends. Plagiarism and multiple submission (submitting substantial portions of the same work for credit more than once without receiving the prior explicit consent of the instructor to whom the material is being submitted the second or subsequent time) are examples of academic dishonesty. The Graduate Bulletin provides additional examples of academic dishonesty. It is available at [http://www.albany.edu/graduatebulletin/requirements_degree.htm](http://www.albany.edu/graduatebulletin/requirements_degree.htm).

Students are expected to adhere to standards of academic integrity including, but not limited to, the appropriate acknowledgment of use of information sources. If I find that a student has plagiarized on an assignment, the possible consequences are: failure on the assignment; failure in the course; or possible dismissal from the graduate program. **However, once you violate the academic integrity guidelines,**
there is no way that you can reverse the damage. Please be alert to the academic integrity guidelines.

Disability Resource Center:
It is the policy of the University at Albany to make reasonable accommodations for qualified students with disabilities. All students with special requests or needs for accommodations should make this request in person as soon as possible (or before February 12, 2013). Please include a copy of your letter from the Disability Resource Center stating that you have registered with them and the suggested academic accommodations when making this request.

Cell Phone Policy:
Cell phones are a disruption to the learning process. Silence all cell phones during class.

Use of Electronics in Class
Laptop computers should not be used in class for anything other than taking notes. A student who is observed engaging in non-course-related activities will be asked to shut down the computer and may be excused for the day.

Inclement Weather
In the event of inclement weather, students should call the University (442-SNOW hotline) or check the campus web-page to see if classes have been cancelled. If the University has canceled class, any written assignments due that day are STILL DUE; you can expect an email from the instructor within 24 hours of closure notification about the implications of class cancelation for our subsequent class. If the University is operating despite inclement weather, the instructor will hold class. Students should contact the instructor if weather or driving conditions make it impossible for them to get to class so that accommodations can be made as necessary.

Course Requirements:
Final grades will be based upon:

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Maximum Points</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>1) Self-Reflection</td>
<td>20 points</td>
<td>February 6, 2013</td>
</tr>
<tr>
<td>2) Health Assessment Exercise: SF-36</td>
<td>10 points</td>
<td>February 27, 2013</td>
</tr>
<tr>
<td>3) Health or Mental Health Policy Paper</td>
<td>50 points</td>
<td>April 10, 2013</td>
</tr>
<tr>
<td>4) Group Work - Mental Health Policy Presentation</td>
<td>20 points</td>
<td>May 1 or 8, 2013</td>
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</tbody>
</table>
Course Assignments

Written assignments will be evaluated on clarity of presentation, adherence to the assignment directions, and interpretation and discussion of the presented material. Only electronic assignments will be accepted. All assignments should be typed in 12-pt Times New Roman font, double-spaced, page numbered, contain 1-inch margins on all four sides and a cover page with your name. Assignments that require reviewing available literature must additionally include a separate references page. All assignments should follow APA format and citation style.

Assignment 1: Beginning Semester Self-Reflection (20 points) Due February 6, 2013

This exercise asks you to think about your private and professional self to assess your own development. Develop responses in four to six (4 - 6) pages to the following questions:

1. Name a population that you want to work with as a public health practitioner or social worker and why.
2. Thinking about your race/ethnicity, gender, sexual orientation, or SES offer a short reflection of the kind of health and or mental health disparities you have encountered that will inform your practice with your named population.
3. Explain how your understanding of what makes the disparity a disparity important to address.
4. Briefly describe a federal, state, or agency policy that addresses the disparity issue.
5. What are your thoughts about the concept of race, gender, or sexual orientation as a social construct ('how you see yourself, how others see you') that is both meaningless and meaningful, and discuss some of the public health implications of the concept.
6. Using your internship agency or work setting and the population it serves, how might professionals contribute to the widening gap in the health or mental health disparity(ies)?
   a. In what ways can public health practitioners or social workers reduce or eliminate health or mental health disparities?

The self-reflection assignment asks you to critically reflect on your own identity. Often when we understand our own race/ethnicity, gender, sexual orientation, and or SES, we can begin to unlock our ways of interacting and “seeing” social problems.

Assignment 2: Health Assessment: SF-36 (10 points) Due: February 27, 2013

One of many questions is figuring out how to assess whether a health disparity among consumers exists. This exercise will help you to reflect on how health disparities can be assessed at the agency level. After completing this exercise, you will be able to: (1) work with the widely used Short-Form 36 Health Status Questionnaire (SF-36); (2) explain some of the advantages and limitations of standardized health status questionnaires used to obtain subjective assessments of health. Develop responses in one to two (1-2) pages.

- Review the description of the SF-36 questionnaire and the scales being measured as given in lecture.
- Go to http://www.sf-36.org/demos/SF-36.html and complete and score the questionnaire.
- Reflect on how well you believe that these scores adequately measure your current health status. Do you believe that you would give the same responses if you repeated the questionnaire in one week?
• Read the following article: Mallinson, S. (2002). Listening to respondents: a qualitative assessment of the Short-Form 36 Health Status Questionnaire. *Social Science and Medicine, 54* (1), 11-21.

➢ **Assignment 3: Health or Mental Health Disparity Policy Analysis Paper (50 points)**

**Due on April 10, 2013**

**General Guidelines:** The paper should be 10-15 pages (excluding cover page and reference page), thoroughly researched, thoughtful, and proofread for correct grammar and spelling. Only electronic papers will be accepted. The paper should be typed in 12-pt Times New Roman font, double-spaced, page numbered, contain 1-inch margins on all four sides, include a cover page, and separate reference pages. The final paper should follow APA format and citation style. Include at least 10 different academic citations on the references page (journal articles, book chapters, enacted legislation, newspapers, etc.). No Wikipedia. At least four of the citations must have a publication date after January 1, 2010. Some sources for data on social problems and on program information include: *Social Security Bulletin; Green Book; Social Work Almanac; Statistical Abstract; and the Encyclopedia of Social Work*. You are expected to select a variety of sources, at least one of which includes empirical research. **Submit papers to the Blackboard website by midnight on Wednesday, April 10th – the due date.** If you have any additional questions, please ask Professor Hastings for clarification. Good luck!

**The final paper:** To complete this assignment, you will need to: (1) select a specific social problem or issue that interests you; (2) Identify and select the social response to that problem or issue as defined by an existing health or mental health policy.

Some suggested social problem areas include: Health care access; no insurance; over-diagnosis of mental illness diagnosis; deportation with a mental illness; immunization practices; general health care; rural health care facilities; diet; occupational safety due to obesity; etc.

**Example Policy Areas/Topics**

• Health Care Policy – i.e. Affordable Health Care Act, Medicaid, Medicare, Veterans Health Care Program, Native American Health, Child Health Insurance Program
• Welfare and Social Security Policy – i.e. Social Security, Food Stamps
• Other – i.e. Immigration, Civil Liberties,
Your final paper should respond to the following questions:

1. Identify and discuss the major components a health or mental health policy that has a clear history of different social factor outcomes in access, availability, and effectiveness in a population.
   a. Describe the social problem that the policy you chose aims to address;
   b. From whose perspective is the issue/condition a social problem? Which group(s) are affected? Describe the demographics of the group(s).
   c. Do all groups in society believe this issue to be a health or mental health disparity emanating from policy implementation?
   d. Describe one social program that emerged as a response to the policy;
   e. Discuss whether the program adequately addresses the problem you defined? Why or why not?

2. Document whether a health or mental health disparity exists within your chosen population with any data that may be available. (Think about data that shows gender, race, ethnicity, sexual orientation, or age, etc. differences)
   a. What is the extent of the disparity?
   b. Describe your perspective on the nature of a just society regarding health or mental health policy.
   c. List a few principles that support your perspective of just distribution of society’s resources. State why these principles are important to your future professional practice ethics.
   d. How has your chosen social problem been studied or evaluated?

3. Describe a theory that can explain the reason for the disparity. Name some key underlying and immediate determinants.

4. Identify and Evaluate Policy Alternatives

5. Identify and discuss possible evaluation methods of the social problem identified. Also discuss policy alternatives to address your policy problem. Be critical and clear on explaining trade-offs.
   e. Describe an agency setting where the policy alternative could be implemented?
   f. What practice activities would public health practitioners or social workers perform in order to implement the policy alternative?

6. What funding recommendations would you offer to an agency interested in addressing the social problem you described above? Why?

Assignment 4: Group Work Mental Health Policy (20 points) Due: May 1 or May 8, 2013

For this assignment, student groups will give a brief oral presentation to class on their topic. The amount of time per group will probably be 20 minutes. Prepare a handout for the class which discusses your mental health policy. Submit a copy of this handout with a list of group member names and a description of each person’s responsibility toward the group project. If your group decides to use PowerPoint for the presentation, send the slides to the professor at least 24 hours before class. Each presentation group should be prepared to answer 1-2 questions about your topic.

* Choose a mental health policy at the state or federal level agreeable to all group members.
Present to the class (basic information for the handout):

- **Name the mental health policy?**
- **Briefly describe the social problem or the underlying issue meant to be addressed?**
- **Briefly describe the major aspects of the policy? (Legislative highlights, implementation strategy, budget allocation agency and funding distribution criteria for programs, etc.)**
- **What populations are affected?**
- **Describe how the implementation of this policy affects different populations?**
- **Name a few beliefs and values that your group discussed that describe just distribution of the policy’s benefits and costs. (Note: every group member does not need to agree. Include a slide on how opinions varied or agreed.)**
- **What are unintended consequences?**
- **Name at least two recommendations to improve the policy.**
- **Specify professional ethics and practices relate to equity and accountability in diverse community settings;**
<table>
<thead>
<tr>
<th>Week</th>
<th>Topic &amp; Readings</th>
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<tbody>
<tr>
<td><strong>Week 1</strong></td>
<td><strong>Introductions &amp; Overview of the U.S. Health Care Policies and Care Delivery Systems</strong></td>
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<tr>
<td><strong>January 23, 2013</strong></td>
<td>Video: <em>Unnatural Causes: Is Inequality making us sick?</em></td>
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<td></td>
<td>• Syllabus Overview and course expectations</td>
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<td>• Plagiarism and Academic Integrity</td>
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<td>• Ice Breaker</td>
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<td>• Blackboard Introduction</td>
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<td><strong>Required Readings</strong></td>
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<td>SW-APHA: Keefe, R. &amp; Evans, T. (2012). Chapter 1</td>
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<td>(Note: <strong>BB</strong> - Blackboard)</td>
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<tr>
<td><strong>Week 2</strong></td>
<td><strong>Patterns of Health Disparities and Health Policy</strong></td>
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<tr>
<td><strong>January 30, 2013</strong></td>
<td>• Policy Analysis Framework</td>
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<td>• Poverty Definitions and Theories</td>
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<td><strong>Required Readings</strong></td>
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<td>Barr (2008). Chapters 1 and 2</td>
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<td><strong>Recommended Readings</strong></td>
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<td>Reid (2010). Chapter 1 and 2</td>
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| Week 3  
February 6, 2013 | Unequal Social Distribution of Disease:  
The Uninsured, Case examples: women, men, children, and the elderly  
Video: *Sicko*  

**Assignment 1 DUE: Self Reflection**  
Group discussion on Public and Private Health Insurance:  
a) How was the policy problem framed?  
b) How was policy analysis used to develop and support recommendations?  
c) Were the standards for a good health policy met?  
Required Readings:  
Recommended Readings  
Reid (2010). Chapter 3  
| Week 4  
February 13, 2013 | Patient Protection and Affordable Care Act (PPACA) – PL 111-148  

Required Readings:  
Barr (2008). Chapters 3 and 4  
BB Olshansky, S., Antonucci, T., Berkman, L., Binstock, R., Boersch-Supan, A., Cacioppo, J., et al. (2012). Differences in life expectancy due to race and educational differences are widening, and many may not catch up.  
Recommended Readings  
Reid (2010). Chapters 4, 5, 6, 7, & 8. |
<table>
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<tr>
<th>Week</th>
<th>Topic &amp; Readings</th>
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<tbody>
<tr>
<td>Week 5</td>
<td><strong>Health Measurement, Maintenance, and Professional Utility</strong></td>
</tr>
<tr>
<td>February 20, 2013</td>
<td>SF-36, CES-D-revised, Beck Depression Inventory,</td>
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<td></td>
<td>- Cultural Beliefs and Values</td>
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<td>- Impact on Access, Treatment, and Intervention</td>
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<td>- New Communication technologies in practice (Remote Care)</td>
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<tr>
<td>Required Readings:</td>
<td>Barr (2008). Chapters 5, 6, and 7</td>
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<td>Recommended Readings:</td>
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<td>Reid (2010). Chapters 9, 10, 11, 12, 13, &amp; Afterword.</td>
</tr>
<tr>
<td>Week 6</td>
<td><strong>Multicultural Alternative Medicine &amp; Faith-Based Services: A Place for Prevention Efforts?</strong></td>
</tr>
<tr>
<td>February 27, 2013</td>
<td>Required Readings:</td>
</tr>
<tr>
<td></td>
<td>Barr (2008). Chapters 8 and 9</td>
</tr>
<tr>
<td></td>
<td>Ka’opua, Gotay, &amp; Boehm (2007). Spiritually based resources in adaptation to long-term prostate cancer survival.</td>
</tr>
<tr>
<td>Week 7</td>
<td><strong>Public Mental Health Policy: Systems, Goals, and Constraints</strong></td>
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<td></td>
<td>State: The Mental Health Parity and Addiction Equity Act of 2008 (New York)</td>
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<td></td>
<td>Video: <em>Kill or cure: A history of medical treatment</em> (Madness: A history)</td>
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<td></td>
<td>Group discussion on mental Illness, disparities, and policy:</td>
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<tr>
<td></td>
<td>- What are the mechanisms that relate gender to mental illness?</td>
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<tr>
<td></td>
<td>- Why think about mental health in a cultural perspective?</td>
</tr>
<tr>
<td>Required Readings:</td>
<td>Levin, B. L., Hanson, A., Hennessy, K. D., &amp; Petrila, J. (2010). A public health approach to mental health services (pp. 5-11).</td>
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<tr>
<td></td>
<td>Recommended Readings:</td>
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<tr>
<td>Week</td>
<td>Topic &amp; Readings</td>
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<tr>
<td>Week 8</td>
<td>Immigrant Health and Mental Health Policies for Adults and Children</td>
</tr>
<tr>
<td>March 13, 2013</td>
<td>Required Readings:</td>
</tr>
<tr>
<td></td>
<td>BB Pear, R. (2012) Limits Placed on Immigrants in Health Care Law</td>
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<td></td>
<td>Recommended Readings:</td>
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<tr>
<td>Week 9</td>
<td>Spring Break</td>
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<tr>
<td>March 20, 2013</td>
<td>Discrimination in Community Health Centers / State Mental Health Agencies</td>
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<tr>
<td>Week 10</td>
<td>March 27, 2013</td>
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<td></td>
<td>Required Readings:</td>
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<tr>
<td></td>
<td>Recommended:</td>
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<tr>
<td></td>
<td>BB Saulnier, C. F. (2002). Deciding who to see: Lesbians discuss their preferences in health and mental health care providers.</td>
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<tr>
<td>Week</td>
<td>Topic &amp; Readings</td>
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<tr>
<td><strong>Week 11</strong></td>
<td><strong>Behavioral Health: Uniformed Services – PTSD &amp; Mental Health Policy</strong></td>
</tr>
<tr>
<td>April 3, 2013</td>
<td><strong>Required Readings:</strong></td>
</tr>
<tr>
<td></td>
<td><strong>BB</strong> IOM (Institute of Medicine) (2012). Programs and Services for PTSD in the Department of Defense and the Department of Veterans Affairs. (pp. 111-164).</td>
</tr>
<tr>
<td></td>
<td><strong>Recommended Readings:</strong></td>
</tr>
<tr>
<td></td>
<td><strong>BB</strong> Featherstone, Rivett, &amp; Scourfield. (2007). Chapter 8, Men’s physical health and disability.</td>
</tr>
<tr>
<td><strong>Week 12</strong></td>
<td><strong>Behavioral Health: Major Depression</strong></td>
</tr>
<tr>
<td>April 10, 2013</td>
<td><strong>Assignment 3 DUE: Health or Mental Health Policy Paper</strong></td>
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<tr>
<td></td>
<td><strong>Required Readings:</strong></td>
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<tr>
<td><strong>Week 13</strong></td>
<td><strong>Occupation, Income, and Poverty</strong></td>
</tr>
<tr>
<td>April 17, 2013</td>
<td><strong>Guest Lecture: Elizabeth Grubert, Ph.D.; School of Public Health</strong></td>
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<tr>
<td>Special Topics</td>
<td><strong>Required Readings:</strong></td>
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<tr>
<td>Week</td>
<td>Topic &amp; Readings</td>
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<tr>
<td><strong>Week 15</strong>&lt;br&gt;May 1, 2013</td>
<td><strong>Classroom: Group Presentations for Assignment 4</strong></td>
</tr>
<tr>
<td><strong>Week 16</strong>&lt;br&gt;May 8, 2013</td>
<td><strong>Course Summary, Reflections, and Evaluations</strong>&lt;br&gt;&lt;br&gt;<strong>Classroom: Group Presentations for Assignment 4</strong></td>
</tr>
</tbody>
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II. COURSE OBJECTIVES: RSSW 781 (SSW STUDENTS ONLY)

<table>
<thead>
<tr>
<th>Substantive Course Objectives</th>
<th>Advanced MACRO Related Practice Behaviors</th>
<th>Evaluation</th>
<th>CSWE Related Competency</th>
<th>Criteria for Advanced MACRO Competency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describe the U.S. health care system in terms of its institutional structures, organization of services, utilization, and differential impact on population health outcomes.</td>
<td>(2) Advocate for human rights and for the needs of the vulnerable, marginalized or oppressed through environmental as well as individual assessment, intervention and change strategies.</td>
<td>3rd &amp; 4th Assignments</td>
<td>(5) Advance human rights and social and economic justice.</td>
<td>1</td>
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<tr>
<td>2. Identify, cite, and understand the role of social and community factors in both the onset and solution of public health problems as defined by age, race, ethnicity, gender or sexual orientation group experience.</td>
<td>(1) Integrate professional attitudes, values and ethics; and demonstrate application of these standards to professional practice.</td>
<td>1st, 3rd &amp; 4th Assignments</td>
<td>(3) Apply critical thinking to inform and communicate professional practice.</td>
<td>1, 3, 4, 5</td>
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<tr>
<td>3. Differentiate the historical development of the health and behavioral health policies designed to affect availability, access, and effectiveness among diverse populations.</td>
<td>(7) Attend to issues of social and economic justice with an understanding and respect for relevant perspectives (dual perspective, systems perspective, and strength perspective), theories and the impact of globalization.</td>
<td>2nd, 3rd &amp; 4th Assignments</td>
<td>(2) Advocate for human rights and for the needs of the vulnerable, marginalized or oppressed through environmental as well as individual assessment, intervention and change strategies.</td>
<td>1, 2, 3, 4, 5</td>
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<tr>
<td>4. Demonstrate the ability to convey essential knowledge concerning the Patient Protection and Affordable Care Act (HR3590) and its implications for affordable and equitable access to health care for all segments of the U.S. population.</td>
<td>(2) Advocate for human rights and for the needs of the vulnerable, marginalized or oppressed through environmental as well as individual assessment, intervention and change strategies. (6) Demonstrate the ability to describe a community in terms of demographics, economic, political, and cultural dimensions including place-based and identity communities enhancing social justice.</td>
<td>4th Assignment</td>
<td>(1) Identify as a professional social worker and conduct one’s self according.</td>
<td>1, 2, 3, 4, 5</td>
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<td>5. Develop an understanding of and ability to apply a model of policy analysis and evaluation of a health or mental health policy to the delivery of quality social services to diverse populations.</td>
<td>(3) Show an understanding of and ability to apply models of research and evaluation to organizational structures, to the delivery of quality social services to diverse populations</td>
<td>3rd &amp; 4th Assignments</td>
<td>(7) Apply knowledge of human behavior and the social environment.</td>
<td>1, 2, 3, 4, 5</td>
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1st Assignment: Self-Reflection; 2nd Assignment: Health Assessment Exercise: SF-36; 3rd Assignment: Group Work Mental Health Policy Analysis; 4th Assignment: Health or Mental Health Disparity Policy Analysis Paper
<table>
<thead>
<tr>
<th>Professional Skill Course Objectives</th>
<th>Advanced MACRO Related Practice Behaviors</th>
<th>Evaluation</th>
<th>CSWE Related Competency</th>
<th>Criteria for Advanced MACRO Competency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Explain how professional ethics and practices relate to equity and accountability in diverse community settings.</td>
<td>(1) Integrate professional attitudes, values and ethics; and demonstrate application of these standards to professional practice. (6) Demonstrate the ability to describe a community in terms of demographics, economic, political, and cultural dimensions including place-based and identity communities enhancing social justice.</td>
<td>1st, 3rd, &amp; 4th Assignments</td>
<td>(4) Engage diversity and difference in practice. (7) Apply knowledge of human behavior and the social environment.</td>
<td>1, 3, 4, 5</td>
</tr>
<tr>
<td>2. Demonstrate the ability to convey essential knowledge concerning state and federal mental health policy and their implications for affordable and equitable access to care for diverse populations.</td>
<td>(4) Show the ability to describe organizational dynamics and analyze policy processes within social service organizations, with special reference to services to marginalized, vulnerable or oppressed populations; assess weaknesses or short comings of structures and systems; and develop evidence-based intervention strategies for addressing these.</td>
<td>3rd &amp; 4th Assignments</td>
<td>(10) Engage, assess, intervene, and evaluate with individuals, families, groups, organizations and communities.</td>
<td>3, 4, 5</td>
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<tr>
<td>3. Demonstrate the capacity to apply critical thinking when making professional judgments about work in organizations and communities, by selecting appropriate health or mental health measurements.</td>
<td>(8) Demonstrate the capacity to apply critical thinking when making professional judgments about work in organizations and communities, and when evaluating practice.</td>
<td>2nd Assignment</td>
<td>(3) Show an understanding of and ability to apply models of research and evaluation to organizational structures, to the delivery of quality social services to diverse populations; (1g). Integrating policy, organizational and community context in clinical practice that benefits the client.</td>
<td>3, 4, 5</td>
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1st Assignment: Self-Reflection; 2nd Assignment: Health Assessment Exercise: SF-36; 3rd Assignment: Health or Mental Health Disparity Policy Analysis Paper; 4th Assignment: Group Work Mental Health Policy Analysis