Voyage: Spring 2016
Discipline: Public Health
PHS 2050-101: Introduction to Public Health
Division: Lower / 0800-0920 (B days)
Faculty Name: Rick Mayes

Pre-requisites: none

COURSE DESCRIPTION

This course examines what makes us sick, what keeps us healthy, and what it would take to give good health the upper hand in the U.S. and around the world. It will introduce students to the central concepts, definitions, principles, goals and challenges of Public Health as a population-level approach to preventing disease, promoting human health and reducing health disparities. The promotion of health equity, human rights, and social and environmental justice will be explored in relation to global health initiatives. The course emphasizes the biosocial model of public health by incorporating anthropology, sociology, history, and political economy with epidemiology. We will examine the burden of disease, risk factors, and key measures for studying and addressing health and wellness. Using several of the countries we visit as examples of larger themes, comparisons will be made between the public health systems of the U.S., other developed countries, and of developing countries.

COURSE OBJECTIVES

- Identify the historical development of public health
- Understand definitions, concepts, and principles of public health
- Illustrate the interdisciplinary character of public health with the biosocial model
- Explain how public health interacts with health policy and health delivery systems
- Characterize the burden of disease and how and why it varies
- Describe the basic organization of health care and public health systems and the contributions of health professionals

Over the past 150 years, major breakthroughs in public health have enabled humans to live longer, healthier and more productive lives. Clean drinking water, modern sanitation and good nutrition—along with the development of highly effective vaccines and antibiotics—have increased average Western life expectancy by an unprecedented 40 years. Unfortunately, the full benefits of public health have yet to be extended to many of the poorest nations in the developing world and the poorest counties in the U.S. Meanwhile, in the past two decades, infectious diseases that had nearly been conquered, such as tuberculosis, have come surging back, while devastating new diseases such as AIDS, SARS, Ebola, and West Nile Virus have emerged. Microbial resistance to many modern drugs is rising, seriously threatening everyone. With globalization, humans are more vulnerable to outbreaks from any part of the world. Increasingly, therefore, the health of any one individual, as this course will explain, literally depends on the health of all of us.
REQUIRED TEXTBOOKS

Introduction to Public Health (4th edition, 2013) by Mary-Jane Schneider


TOPICAL OUTLINE OF COURSE

Depart Ensenada - January 5

B1 – January 8:  Introduction to and Overview of Public Health I
M. J., Schneider, Introduction to Public Health, Chapters 1-3

B2 – January 10:  Introduction to and Overview of Public Health II
M. J., Schneider, Introduction to Public Health, Chapters 4-5

Honolulu: January 12

B3 – January 13:  Public Health Case Study: Obesity
Schneider, Introduction to Public Health, Chapter 16

* 1 page, single-spaced biography due to Prof. Mayes (to include, among other things: where you’re from, your home institution, personal hobbies/interests, academic major, reasons for participating in SAS, possible future ambitions, etc.)

B4 – January 15:  The Biomedical Basis of Public Health
M. J. Schneider, Introduction to Public Health, Chapters 9-10
PBS Frontline “The Vaccine War” (video)

B5 – January 18:  Social and Behavioral Factors in Health
M. J. Schneider, Introduction to Public Health, Chapters 13-15

no class: January 19


QUIZ 1

B7 – January 23:  Public Health Case Study: Mental Health
M. J. Schneider, Introduction to Public Health, Chapter 19
http://www.nytimes.com/2006/01/15/magazine/15japanese.html?pagewanted=all&_r=0
WHO country Profile, Japan - http://www.who.int/country/jpn/en (just skim)
Yokohama: January 24-25
In-Transit: January 26
Kobe: January 27-28

B8 – January 30: A Biosocial Approach to Global Health
Paul Farmer et al., Reimagining Global Health, Chapter 1
C. Beam, “Under the Knife: Why Chinese Patients Are Turning Against Their Doctors,” New Yorker
http://www.newyorker.com/magazine/2014/08/25/under-the-knife
WHO country Profile, China - http://www.who.int/countries/chn/en (just skim)

Shanghai: January 31-February 1
In-Transit: February 2-3
Hong Kong: 4-5

B9 – February 7: Unpacking Global Health: Theory and Critique
Paul Farmer et al., Reimagining Global Health, Chapter 2

Ho Chi Minh: February 8-12

B10 – February 14: Colonial Medicine and Its Legacies
Paul Farmer et al., Reimagining Global Health, Chapter 3
WHO country Profile, Singapore - http://www.who.int/countries/sgp/en/ (just skim)

no class: February 15

B11 – February 17: Health for All? Competing Theories and Geopolitics
Paul Farmer et al., Reimagining Global Health, Chapter 4
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2700587/?report=printable
WHO country Profile, Myanmar - http://www.who.int/countries/mmr/en/ (just skim)

Rangoon: February 18-22

B12 – February 24: Scaling Up Effective Delivery Models Worldwide
Paul Farmer et al., Reimagining Global Health, Chapter 7
http://www.newyorker.com/magazine/2013/07/29/slow-ideas

B13 – February 26: The Unique Challenges of Mental Health and MDRTB
Paul Farmer et al., Reimagining Global Health, Chapter 8
http://www.wsj.com/articles/SB125875892887958111#printMode
WHO country Profile, India - http://www.who.int/countries/ind/en/ (just skim)

Cochin: February 27-March 3
B14 – March 5: Values and Global Health
Paul Farmer et al., Reimagining Global Health, Chapter 9

no class: March 6

B15 – March 8: Redefining the Possible: The Global Aids Response
Paul Farmer et al., Reimagining Global Health, Chapter 5
WHO country Profile, Mauritius - http://www.who.int/countries/mus/en/ (just skim)

QUIZ 2

Mauritius: March 9

B16 – March 11: Health Care and Public Health in South Africa I

[* in class *] watch and discuss “What Are We Doing Here?” documentary: Part I [* in class *]

no class: March 12

B17 – March 14: Health Care and Public Health in South Africa II
WHO country Profile, South Africa - http://www.who.int/countries/zaf/en (just skim)

[* in class *] watch and discuss “What Are We Doing Here?” documentary: Part II [* in class *]

Cape Town: March 15-20

B18 – March 22: Building an Effective Rural Health Delivery Model in Haiti and Rwanda
Paul Farmer et al., Reimagining Global Health, Chapter 6

[* in class *] watch and discuss “A Walk to Beautiful” (documentary) [* in class *]

B19 – March 24: Medical Care and Public Health I
M. J. Schneider, Introduction to Public Health, Chapters 25-26

B20 – March 26: Medical Care and Public Health II
M. J. Schneider, Introduction to Public Health, Chapters 27-28
WHO country Profile, Ghana - http://www.who.int/country/gha/en (just skim)

Takoradi: March 27-28
Tema: March 29-March 31

B21 – April 2: Medical Care and Public Health III (The Dartmouth Atlas)
M. J. Schneider, Introduction to Public Health, Chapter 6-8
B22 – April 4:   Public Health and Aging
M. J. Schneider, *Introduction to Public Health*, Chapter 29

B23 – April 6:   The Future of Public Health and Summary Class Discussion
M. J. Schneider, *Introduction to Public Health*, Chapter 30-31
Paul Farmer et al., *Reimagining Global Health*, Chapter 12

Field Lab Paper due
Casablanca: April 7-11
Study Day: April 12

B24 – April 14:   Final Exam

April 16:   Disembark in Southampton, England

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METHODS OF EVALUATION

Attendance & Participation = 10% of final grade*
2 Quizzes (15% each) = 30% of final grade
1 Field Lab Paper = 25% of final grade
1 Final Exam = 35% of final grade
* any class absence will result in a 5%-point penalty from one's final grade

FIELD WORK

Field lab attendance is mandatory for all students enrolled in this course. Please do not book individual travel plans or a Semester at Sea sponsored trip on the day of our field lab.

*Field Lab (At least 20 percent of the contact hours for each course, to be led by the instructor.)*

**Women's Health Care, Childbirth, and Human-Related Rights in Ghana**

This field lab takes us to a hospital in Ghana where will tour a maternity ward and speak with physicians and midwives about childbirth practices in Ghana. Topics for discussion might include: the availability of pre- and post-natal healthcare for women; beliefs and practices around family planning; infant and maternal mortality rates; the role of midwives in Ghana today; the interaction of “modern” and “traditional” beliefs/knowledge around pregnancy and childbirth; the use of anesthesia during childbirth; the availability of general gynecological care for women; the role of fathers in pregnancy and childbirth. It will help us think further about whether there are aspects of women’s experiences that are “universal” and to what extent a biological process, such as childbearing, is significantly shaped by cultural context.

**Academic Objectives:**

1. To understand the issues related to maternal mortality in Ghana
2. To explore the maternity services available to women in Ghana
3. To identify the strategies that the local and government public health officials are employing to reduce maternal mortality in Ghana.
Field lab dress code is **Business Casual**

What to wear:
- (women – skirt or slacks and a blouse or collared shirt)
- (men – dress pants, a button down or polo)

Personal appearance should be groomed and neat; comfortable closed-toe shoes

**Do NOT Wear:**
- t-shirts, flip-flops, sneakers, jeans, shorts, short skirts, sweatpants, leggings, tank-tops, and/or wrinkled, revealing, stained or dirty clothing.

**FIELD ASSIGNMENT**

Field Component

* Students will participate in the field lab related to the class. Students will be expected to write a comparison research paper on one of the issues presented during the field lab based on observations during the field lab as well as in another culture we will experience during the voyage. The students’ analyses must be appropriate and culturally sensitive, and should be related to the material presented in lecture or reading/video assignments. Students will be expected to reference the course text, lectures, and at least 5 other scholarly and/or reputable sources using APA guidelines. The paper will compare maternal health in Ghana with related issues in any other country.

**How to Write an “A” Field Lab Paper**

Students naturally want to know a professor’s expectations and grading standards, and what better way to begin than by asking, “How does one write an “A” paper?” An “A” paper will earn high scores on six key dimensions of writing identified in the rubric below. Before scouring the details of this document, though, remember three essential points: (1) we write for an audience; (2) we write to convince or persuade that audience; and (3) writing is a process, not an event. According to New York Times columnist David Brooks, “I tell college students that by the time they sit down at the keyboard to write their essays, they should be at least 80 percent done. That’s because ‘writing’ is mostly gathering and structuring ideas. For what it’s worth, I structure geographically. I organize my notes into different piles on the rug in my living room. Each pile represents a different paragraph in my column. The piles can stretch on for 10 feet to 16 feet, even for a mere 806-word newspaper piece. When ‘writing,’ I just pick up a pile, synthesize the notes into a paragraph, set them aside and move on to the next pile. If the piece isn’t working, I don’t try to repair; I start from scratch with the same topic but an entirely new structure.”

A well-organized paper progresses coherently and logically from paragraph to paragraph, sentence to sentence, and word to word. Begin with an introductory paragraph that clearly and precisely states the purpose, or thesis, and identifies the points to be developed in the paper. *(I cannot stress enough the importance of the introduction.)* Each subsequent paragraph should begin with a topic sentence (or controlling theme) that defines the main point, and each sentence within the paragraph should follow logically from its predecessor. Each sentence should be direct and concise: begin with the subject and, whenever possible, follow with active verb. Clear and precise language enables the reader (the audience) to understand the meaning of the writer’s thoughts. A writer should state what he/she means and specify obscure terms. Select words carefully, read over sentences, place question marks near unclear points, and clarify points before submitting the final draft of a paper. *(By the way, “Etc” (etcetera) is a very imprecise word.)*
Support claims with evidence. An “A” paper substantiates the central thesis and the major points underlying the thesis with proof or logical reasoning. Papers should contain facts, quotations, examples, statistics, references to authorities, or sound reasoning to support the argument. Convince the reader by supporting the claims. Grammar requires attention to detail. No one is perfect, but effort counts. Finally, properly cite all sources of information. You may use either notes/bibliography or a reference list with parenthetical in-text citations with guidelines from the *Chicago Manual of Style*.

*Note: two points will be deducted for every day the paper is late.*

### Rubric for Evaluating Field Lab Papers

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<thead>
<tr>
<th></th>
<th>High (A)</th>
<th>Medium (B)</th>
<th>Low (C-F)</th>
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<tbody>
<tr>
<td><strong>Thesis</strong> 10%</td>
<td>Very clear and precise</td>
<td>Need to specify key terms of the thesis</td>
<td>Thesis is unclear or imprecise</td>
</tr>
<tr>
<td><strong>Organization</strong> 25%</td>
<td>Clear topic sentences; coherent paragraphs; subsection titles/ breaks</td>
<td>Topic sentences need improvement; or a few “random” points</td>
<td>Non sequiturs within paragraphs</td>
</tr>
<tr>
<td><strong>Evidence</strong> 25%</td>
<td>Claims are well supported and extensively sourced</td>
<td>Occasional, but inconsistent support for claims</td>
<td>Claims not well supported</td>
</tr>
<tr>
<td><strong>Sentence structure</strong> 15%</td>
<td>Sentences have a clear subject and active verbs</td>
<td>Occasional passive voice and unnecessary prepositional phrases</td>
<td>General problem with sentence structure</td>
</tr>
<tr>
<td><strong>Grammar</strong> 10%</td>
<td>Proper use of grammar throughout</td>
<td>Some problems with grammar</td>
<td>General misuse of grammar</td>
</tr>
<tr>
<td><strong>Sources</strong> 15%</td>
<td>Sources properly and consistently cited; sources are numerous and scholarly</td>
<td>Some citations are not properly or consistently cited; modest to minimum scholarly sources used</td>
<td>Fails to cite sources</td>
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### RESERVE FILMS FOR THE LIBRARY


### HONOR CODE

Semester at Sea students enroll in an academic program administered by the University of Virginia, and thus bind themselves to the University’s honor code. The code prohibits all acts of lying, cheating, and stealing. Please consult the Voyager’s Handbook for further explanation of what constitutes an honor offense.

Each written assignment for this course must be pledged by the student as follows: “On my honor as a student, I pledge that I have neither given nor received aid on this assignment.” The pledge must be signed or, in the case of an electronic file, signed “[signed]”. 