

Appendix A: Health Disparities Course Draft Syllabus

University of Arkansas for Medical Sciences

College of Public Health

Department: Interdepartmental

Semester: Fall

Course Information

Course number: PBHL

Course name: Racial and Ethnic Health Disparities: Theory, Experience and Elimination

Meeting time:

Meeting place:

Instructor Information

Course Instructors: Kate Stewart, Creshelle Nash and David Briscoe

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Course Description

This elective course explores racial and ethnic health disparities in the United States. Students will examine the literature on health and health care disparities and issues of measurement; the historical and social structural determinants pertinent to the etiology of disparities; the role of genomics; and policy and programmatic strategies for reducing disparities. Instructors will use a human rights framework that attends to the role of power, as an organizing theme. This course uses traditional approaches to learning (such as didactic lectures, assigned readings, analysis, and discussion) combined with personal and group experiential learning. Students will be required to participate in service learning activities which will include preparation, reflection and practice components. Therefore students will spend time both in class with instructors and in the community with community based partners.

Prerequisites

Students must have a bachelors degree.

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

Course Objectives	Council on Linkages Competencies ²
1. Describe key research documenting racial and ethnic health and health care disparities and discuss pertinent measurement issues.	A1, A2, A4, A5, A9, A11 B1, F2, F6
2. Describe the historical and social structural determinants of racial and ethnic health and health care disparities.	D2, D3, D4, F2, F3, F7, F8
3. Analyze racial and ethnic health and health care disparities using the social ecological model.	D2,F3,8,H
4. Describe strategies for reducing racial and ethnic health and health care disparities.	B1-9 and11, D3,E8,F5,H7,H8
5. Recognize and articulate how social structural determinants play out in the real world context of a community based organization.	C7,D1-5
6. Reflect on how social structural dynamics manifest in their personal experience.	C7,D4-5,F8

Required Course Materials

Assigned Books:

LaVeist, TA – Minority Populations and Health: An Introduction to Health Disparities in the United States, 2005.

Feagan, JR and McKinney, KD - The Many Costs of Racism, 2005.

Shapiro, TM -The Hidden Cost of Being African American: How Wealth Perpetuates Inequality, 2005. (Introduction and chapters 1 and 2)

Trepagnier, B – Silent Racism: How Well Meaning White People Perpetuate the Racial Divide, 2006.

Graves, J.The Race Myth: Why We Pretend Race Exists in America, 2005

Additional readings: To be distributed.

² Appendix A

Assignments and Grading

Type of Assignment	Date or Date Due	Weight	Course Objective(s) Addressed by this Assignment
Class participation and quizzes	Throughout course	15%	All objectives.
Midterm exam	After session 7	15%	Objectives 1, 2, and 3
Individual and group assignments	Throughout the course as assigned	15%	All objectives
Participate in MLK Day of Service activities	MLK Holiday	5%	Objectives 5 and 6
Community service/practice	Throughout course	20%	Objectives 3, 5, and 6
Reflection exercises, journal and discussion	Throughout course	15%	Objectives 5 and 6
Final exam	Last session	15%	All objectives

Assignment Details

All written assignments must be typed using 12 pt. font, double spacing, and a minimum of one inch margins. Where page limits are indicated they should be viewed not as a required length but rather as the absolute maximum allowable length.

Class Participation and Quizzes (Weight: 15%)

Class participation will be judged by the quality of questions asked and the thoughtfulness and content of comments made as well as the evidence that students completed reading assignments. Other assignments will also include assessment of participation so this 15% does not reflect the overall weight that will be given to class participation. Instructors may give unscheduled quizzes to assess familiarity with assigned readings and class discussions. Scores on all quizzes given will be averaged with participation grade to calculate the overall participation/quiz contribution (15%) toward the total grade.

Mid-term Exam (Weight: 15%)

This in-class, closed book, mid-term exam will be cover readings, lectures, and in-class discussions from sessions 1-7.

Individual and Group Assignments (Weight: 15%)

These in-class and out of class activities will allow students to integrate and show their mastery of course material as well as provide opportunities for individual and group reflection.

These assignments will include but not be limited to the following:

During the first session, students will be assigned to small groups to work on projects outside of class. Between sessions they should meet in their groups and discuss two questions separately “why is it so hard to talk about race and what are the implications of focusing on health care versus health disparities”? The group should develop a written summary of their discussion and submit this to their instructors before the next session during which they will report on their discussion. Secondly, students will also be asked to identify a determinant of health and a policy intervention or solution to address it and defend it in oral presentation in class. The problem and intervention may be related to the students’ community service practice experience.

MLK Day of Service (Weight: 5%)

Students will participate in a community service activity organized in recognition of Martin Luther King, Jr., contributing at least 2 hours of service. While students may carry out this service with their community based partner, this requirement is separate from the community service requirement described below.

Community Service/Practice (Weight: 20%)

Students will spend a minimum of 30 hours out of class in a service learning experience with a community-based organization. Instructors will identify selected service learning opportunities with community-based organizations. This assignment may be carried out in pairs. Representatives of these organizations will participate in the second class session to discuss their organizations and activities available. We will attempt to match student interests with organizational needs as much as possible.

Service Learning Reflection, Journal, and Discussion (Weight: 15%)

The purpose of this component of the course is to explore students’ assumptions about racial and ethnic health disparities, develop a deeper understanding of the academic literature and apply their learning to the elimination of racial and ethnic health disparities. Over the course of the semester students will have multiple activities to illustrate learning progress, activities, impressions, reflections, and problems encountered through their service learning experience. These activities will include a “letter to myself” at the beginning of the semester, maintaining a journal, group discussions and case and project presentations.

The “letter to myself” assignment should be completed prior to the first community service learning interaction. In this letter students should describe what they think the people they will be working with will be like, what their own contributions will be, what they think they will see in the community, and what you think are the sources of problems addressed by the organization.

Students' journal entries should relate to their service learning experiences in the community as well as the concurrent readings and discussions in class. Students should also reflect in their journals on their service experience by analyzing and assessing the theories and research findings studied in class in the context of the real world setting of their community service. These reflections should be recorded throughout the semester using the following questions as a guide.

- What was your first impression?
- What did you see and hear?
- What surprised or challenged you?
- Identify, analyze and discuss critical events and how they were overcome
- Connect theory from the class room to your field experience

The journal will be turned in every 2 weeks. There should be at least one dated journal entry for each interaction students have with their community partner.

(Weight: 10%)

Final Exam (Weight: 15%)

GRADING POLICIES

Semester grades will be assigned using the following numerical scale – NO exceptions:

<u>GRADE</u>	<u>RANGE</u>	<u>LEVEL OF PERFORMANCE REFLECTED BY GRADE</u>
A	89.50-100+	Outstanding work, always exceeds expectations
B	79.50-89.49	Good work that usually exceeds expectations
C	69.50-79.49	Meets most expectations, but does not "go the extra mile"
D	59.50-69.49	Does not meet many expectations
F	0.00-59.49	Fails to meet most or all expectations
I	(incomplete)	Incompletes are given only in documented, extenuating circumstances as reported to the instructors in a timely manner

OTHER COURSE POLICIES

Late penalties: Late assignment grades cannot be dropped. Any missed deadline, whether for an individual or team assignment, will result in a 10-point deduction per business day (M-F) unless the deadline was missed because of extenuating circumstances. In this event, you must inform the instructor prior to the deadline or no later than the end of the next working day after the deadline, AND provide official documentation within one week after the missed deadline.

Mechanics - All assignments must be typed in a 12-point font, double-spaced, with a one-inch margin. Your work must adhere to professional standards. Errors in facts, grammar and spelling are unacceptable. Proofread carefully! Throw away nothing;

erase nothing. Always make a copy of your course work for yourself or keep a copy on your computer, in case the original is lost or misplaced. Keep all your work on file until you have received the final grade for the course.

WebCT – UAMS has provided a WebCT online shell that we will use as our course homepage. You may use this website to access course materials and announcements, check your grades, interact with your team via WebCT e-mail and/or the discussion board, or post materials to share with the class. The WebCT portal can be accessed at <http://distance-ed.uams.edu>

Schedule of Class Topics and Reading Assignments:

Time will be set aside each week for discussion and reflection on service learning experiences. For some sessions this may be relatively short serving primarily as a “check-in” opportunity for students to discuss problems or other urgent concerns, while in other sessions there will be a formal discussion of reflection assignments.

#1: Introduction and Course Overview

Introduction to Racial and Ethnic Health Disparities

Blue Eyes, Brown Eyes Video

Doll experiment video

Review Syllabus

Group Assignment: “Why is it so difficult to talk about race?”

#2: Community Partners

Class Discussion-group assignment

Community Partner Presentations on Service Learning Opportunities

Readings:

- Chapters 3 and 4, pp. 53-97, in Community-Based Participatory Research for Health, Meredith Minkler and Nina Wallerstein (Eds.)
- Additional readings to be distributed.

#3 Preparing for Community Based Service Learning

Principle of Community Based Public Health and Participatory Research

Desensitization workshop

Pre-reflection exercise

Readings:

- Melanie Tervalon and Jann Murray-García, “Cultural Humility versus Cultural Competence: A Critical Distinction in Defining Physician Training Outcomes in Multicultural Education”, Journal of Health Care for the Poor and Underserved, 1998, 9(2): 117-125.
- Additional readings to be distributed.

#4 Health and Healthcare Disparities

National and State Racial and Ethnic Health and Health Care Disparities

Group assignment: “What is the implication of focusing on Health care vs. health disparities?”

Readings:

- LaVeist, TA – Minority Populations and Health: An Introduction to Health Disparities in the United States, 2005, pp 1-50.
- Smedley, Stith, and Nelson, Eds. Executive Summary: Unequal Treatment Confronting Racial and Ethnic Disparities in Health Care, pp. 1-27.

#5 History of Healthcare Disparities

Class discussion- group assignment

Readings:

- LaVeist, TA – Minority Populations and Health: An Introduction to Health Disparities in the United States, 2005, pp 51-130.
- Additional readings to be distributed.

#6 Health disparities research

Measurement Issues

Causal factors overview

Readings:

- LaVeist, TA – Minority Populations and Health: An Introduction to Health Disparities in the United States, 2005, pp 131-202.
- Bruce Link and Jo Phelan, “Fundamental Sources of Health Inequalities”, Chapter 5, pp. 71-84 in David Mechanic, Lynn Rogut, David Colby, and James Knickman (Eds.), Policy Challenges in Modern Health Care, Rutgers University Press, 2005.

#7 Midterm Exam

#8 Social Determinants of Health

The biological construct vs social construct of race

Define race and ethnicity, deconstruct the biological construct of race to emphasize the social and political constructs

Readings:

- Cooper, R, “A Note on the Biological Concept of Race and its Application to Epidemiologic Research”, Ch. 6 in Race, Ethnicity, and Health, TA LaVeist (Ed.), 2002.
- Feagan, JR and McKinney, KD - The Many Costs of Racism, 2005.

#9 Social Determinants of Health

Unnatural Causes

Racism, history, white privilege

Class and Gender

Readings:

- Camara Jones, “Levels of Racism: A Theoretic Framework and a Gardener’s Tale”, American Journal of Public Health. 2000; 90 (8):1212-1215.
- Peggy McIntosh, “White Privilege: Unpacking the Invisible Knapsack” accessed <http://seamonkey.ed.asu.edu/~mcisaac/emc598ge/Unpacking.html> on 4/18/2007.
- Chapters 1 and 2 from Diane J. Goodman, Promoting Diversity and Social Justice: Educating People from Privileged Groups, 2001.
- Trepagnier, B – Silent Racism: How Well Meaning White People Perpetuate the Racial Divide, 2006.

#10 Social Determinants of Health

Cultural issues

Demographics

Migration and immigrant issues

Reading:

- Shapiro, TM -The Hidden Cost of Being African American: How Wealth Perpetuates Inequality, 2005. (Introduction and chapters 1 and 2)

#11: Genomics

Genetics

Genomics

Population genetics

Current issues in individualized drugs/treatment

Reading:

- Graves, J.The Race Myth: Why We Pretend Race Exists in America, 2005

#12 Social Change

Theories

Class discussion

Policy development assignment.

Readings :

- Chapters 17, 18 and 19, in Community-Based Participatory Research for Health, Meredith Minkler and Nina Wallerstein (Eds.)

#13 Social Change

Environmental Justice

Community Based Public Health Practice and Research

Readings :

- Paul W. Speer and Joseph Hughey, "Community Organizing: An ecological route to empowerment and power", American Journal of Community Psychology, 23(5):729-748,1995.
- Additional readings to be distributed.

#14 Solutions

Current activities to improve health

Programs

Policies

Individual level change

Readings:

- LaVeist, TA – Minority Populations and Health: An Introduction to Health Disparities in the United States, 2005, pp 283-297.
- Betancourt JR, Green AR, Carrillo JE, Ananeh-Firempong A, "Defining Cultural Competence: A Practical Framework for Addressing Racial/Ethnic Disparities in Health and Health Care", Public Health Reports, 2003, 118/July-August: 293-302.

#15 Solutions/Synthesis

Policy proposals presentation and discussion
Discussion about link to global perspective

Readings :

To be added.

#16 Solutions:

Final Exam

Post reflection

College of Public Health Policies/Late Assignments/Make Up Tests/General Classroom Parameters:

Attendance: Students are expected to be diligent in the pursuit of their studies and in their class attendance. Students have the responsibility of making arrangements satisfactory to the instructor regarding all absences. Such arrangements should be made prior to the absence if possible. Policies of making up work missed as a result of absence are at the discretion of the instructor, and students should inform themselves at the beginning of each semester concerning the policies of their instructors.

Attendance Policies of the Instructors: A student absent more than 10% of the in-class time will have their grade reduced by one letter (exceptions will be at the discretion of the instructor). All assignments are due at by 5 PM on the date assigned in the syllabus or they are designated late. Make up assignments/late assignments are due within one week of the scheduled due date or a grade of zero is given. Make-up exams will be conducted by appointment.

Students with a disability: It is the policy of the UAMS College of Public Health to accommodate students with disabilities pursuant to federal law, state law, and the University's commitment to equal educational opportunities. Any student with a documented disability who needs accommodation should request to meet with the course instructor or the Associate Dean for Academic Affairs no later than within the first 14 days (two weeks) following the first class meeting to develop an accommodation plan. Any student with a documented disability who determines later in the semester to seek accommodation or who develops a disability, during the semester, should refer to the procedures outlined in the college catalogue. Failure to follow these procedures may be construed as a waiver of your rights under the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.

Academic Integrity: UAMS College of Public Health has an Honor Council that responds to allegations of violations of common rules of academic integrity, including plagiarism; giving or receiving any form of aid on quizzes or examinations that is not expressly permitted by the instructor; turning in counterfeit reports, tests, and papers; stealing tests or other academic material; and turning in the same or partial work/assignment to more than one class without informing both instructors involved; or falsification of any report, experimental results, or research data. Please review the Honor Code in the

COPH Student Handbook, which can be found at <http://www.uams.edu/coph/cophandbook.pdf>. **Note:** All work submitted for this course is required to be original work developed for class assignments and should not have been submitted for assignments made as part of previous and/or concurrent courses without the instructors prior knowledge and approval; to do otherwise constitutes academic dishonesty and will be addressed as such in this course.

Plagiarism: Plagiarism is defined as adopting, appropriating for one's own use and/or incorporating in one's own work, without acknowledgement, passages, tables, photographs, models, figures, and illustrations from the writings or works of others; presenting parts of passages of other's writing as products of one's own mind. Any student who plagiarizes may be subject to receiving a zero on the written work and may be dismissed from the College of Public Health. Other penalties may be imposed by the COPH Honor Council, as described in the COPH Student Handbook.

The College of Public Health subscribes to a web based plagiarism detection and prevention system that is used by colleges and universities nationwide. The system works by scanning the submitted document and matching the document against databases of texts, journals, electronic and web sources including web sites that sell or distribute pre-written essays or term papers. As your course instructors, at our discretion, we can submit students' written work to the plagiarism detection system for the purpose of evaluating whether a document has been plagiarized. As your instructors we are informing you via this syllabus that we reserve the right to use this plagiarism detection system at our discretion for this course.

The student is expected to be familiar with the policies for sexual harassment and academic misconduct in the student handbook and college catalogue.

All beepers and/or phones are to be turned off in the classroom. The instructor may impose a 25 point deduction from the student's final grade if such an interruption/infraction occurs.

Due to legal liability, the student's children and/or the student's personal guests/friends cannot attend class.

** APA Internet address: <http://www.wooster.edu/psychology/apa-crib.html>*

***Professional articles must be full text; and, must have a reference and/or bibliography citing its' sources at the conclusion of the article.*

Appendix A
Council on Linkages
Core Competencies Without Skill Levels

A. Analytic/Assessment Skills

1. Defines a problem
2. Determines appropriate uses and limitations of both quantitative and qualitative data
3. Selects and defines variables relevant to defined public health problems
4. Identifies relevant and appropriate data and information sources
5. Evaluates the integrity and comparability of data and identifies gaps in data sources
6. Applies ethical principles to the collection, maintenance, use, and dissemination of data and information
7. Partners with communities to attach meaning to collected quantitative and qualitative data
8. Makes relevant inferences from quantitative and qualitative data
9. Obtains and interprets information regarding risks and benefits to the community
10. Applies data collection processes, information technology applications, and computer systems storage/retrieval strategies
11. Recognizes how the data illuminates ethical, political, scientific, economic, and overall public health issues

B. Policy Development/Program Planning Skills

1. Collects, summarizes, and interprets information relevant to an issue
2. States policy options and writes clear and concise policy statements
3. Identifies, interprets, and implements public health laws, regulations, and policies related to specific programs
4. Articulates the health, fiscal, administrative, legal, social, and political implications of each policy option

5. States the feasibility and expected outcomes of each policy option
6. Utilizes current techniques in decision analysis and health planning
7. Decides on the appropriate course of action
8. Develops a plan to implement policy, including goals, outcome and process objectives, and implementation steps
9. Translates policy into organizational plans, structures, and programs
10. Prepares and implements emergency response plans
11. Develops mechanisms to monitor and evaluate programs for their effectiveness and quality

C. Communication Skills

1. Communicates effectively both in writing and orally, or in other ways
2. Solicits input from individuals and organizations
3. Advocates for public health programs and resources
4. Leads and participates in groups to address specific issues
5. Uses the media, advanced technologies, and community networks to communicate information
6. Effectively presents accurate demographic, statistical, programmatic, and scientific information for professional and lay audiences

Attitudes

7. Listens to others in an unbiased manner, respects points of view of others, and promotes the expression of diverse opinions and perspectives

D. Cultural Competency Skills

1. Utilizes appropriate methods for interacting sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and persons of all ages and lifestyle preferences
2. Identifies the role of cultural, social, and behavioral factors in determining the delivery of public health services

3. Develops and adapts approaches to problems that take into account cultural differences

Attitudes

4. Understands the dynamic forces contributing to cultural diversity
5. Understands the importance of a diverse public health workforce

E. Community Dimensions of Practice Skills

1. Establishes and maintains linkages with key stakeholders
2. Utilizes leadership, team building, negotiation, and conflict resolution skills to build community partnerships
3. Collaborates with community partners to promote the health of the population
4. Identifies how public and private organizations operate within a community
5. Accomplishes effective community engagements
6. Identifies community assets and available resources
7. Develops, implements, and evaluates a community public health assessment
8. Describes the role of government in the delivery of community health services

F. Basic Public Health Sciences Skills

1. Identifies the individual's and organization's responsibilities within the context of the Essential Public Health Services and core functions
2. Defines, assesses, and understands the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services
3. Understands the historical development, structure, and interaction of public health and health care systems
4. Identifies and applies basic research methods used in public health
5. Applies the basic public health sciences including behavioral and social sciences, biostatistics, epidemiology, environmental public health, and prevention of chronic and infectious diseases and injuries

6. Identifies and retrieves current relevant scientific evidence
7. Identifies the limitations of research and the importance of observations and interrelationships

Attitudes

8. Develops a lifelong commitment to rigorous critical thinking

G. Financial Planning and Management Skills

1. Develops and presents a budget
2. Manages programs within budget constraints
3. Applies budget processes
4. Develops strategies for determining budget priorities
5. Monitors program performance
6. Prepares proposals for funding from external sources
7. Applies basic human relations skills to the management of organizations, motivation of personnel, and resolution of conflicts
8. Manages information systems for collection, retrieval, and use of data for decision-making
9. Negotiates and develops contracts and other documents for the provision of population-based services
10. Conducts cost-effectiveness, cost-benefit, and cost-utility analyses

H. Leadership and Systems Thinking Skills

1. Creates a culture of ethical standards within organizations and communities
2. Helps create key values and shared vision and uses these principles to guide action
3. Identifies internal and external issues that may impact delivery of essential public health services (i.e., strategic planning)

4. Facilitates collaboration with internal and external groups to ensure participation of key stakeholders
5. Promotes team and organizational learning
6. Contributes to development, implementation, and monitoring of organizational performance standards
7. Uses the legal and political system to effect change
8. Applies theory of organizational structures to professional practice