COURSE SYLLABUS

Introduction to Public Health: Local to Global Perspectives
PHS 370: 3-Credits
Spring 2017

University of Wisconsin - Madison

LECTURES
Tuesday/Thursday 9:55-10:45 A.M.
6210 Social Sciences
1180 Observatory Drive

DISCUSSION SECTIONS (75 minutes/week)
Various times and locations (see below)

COURSE DIRECTOR
Patrick L. Remington, MD, MPH
Professor, Population Health Sciences
Associate Dean for Public Health
UW School of Medicine and Public Health

TEACHING ASSISTANTS (TAs)
Billy Burrough
Daniel Bornstein

REQUIRED TEXTBOOK

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I. COURSE OVERVIEW AND LEARNING OBJECTIVES

This 3-credit course is intended to give students an overview of the principles and practice of public health in a global context. The prerequisite for this Intermediate Level course is a college-level science or biology course. As an introductory public health course, it is intended for students with no previous course work in public health or epidemiology. This is one of three core courses developed in 2011, with support from the Madison Initiative for Undergraduate Education, and part of the Undergraduate Certificate in Global Health.

Course goal: To learn the principles and practice of public health as applied to leading global health problems.

Course objectives:
- Define public health and learn the difference between individual- and population-based strategies for improving health (how it works)
- Understand the goals of public health—to improve health and eliminate health disparities
- Understand the methods used to measure the health of populations, find causes, and develop programs that work
- Describe the leading global health problems, including their causes and methods for prevention
- Understand the challenges and opportunities for closing the gap between science and practice
- Understand the advantages and limitations of the various types of population-based approaches to improve public health (education, marketing, engineering, policy, and law)
- Know the core functions of public health (assessment, policy development, and assurance) and how public health is organized at the local, state, national, and international level
- Learn about the importance of interdisciplinary approaches to public health

Course Director: Patrick Remington, MD, MPH

Dr. Remington received his undergraduate degree in molecular biology and his medical degree from the University of Wisconsin. After completing an internship at Virginia Mason Hospital in Seattle, he trained at the CDC as an Epidemic Intelligence Service Officer (assigned to the Michigan health department); as a Preventive Medicine Resident in the Division of Nutrition at the CDC, and as part of the CDC Career Development Program, when he obtained his MPH in Epidemiology from the University of Minnesota. He was the Chief Medical Officer for Chronic Disease and Injury Prevention in the Wisconsin Division of Health for almost a decade, and joined the Department of Population Health Sciences in 1997. Dr. Remington’s current research examines methods to measure the health outcomes and determinants in populations, as well as health disparities by education, race, or region. In addition, he is examining ways to use this information in community health improvement, such as through the County Health Rankings (www.countyhealthrankings.org).

Follow him on Facebook (Dr. Patrick Remington) or on Twitter (@plremington).

Contact Information

Office: 4263 Health Science Learning Center (HSLC)
Phone: (608) 263-1745
Email: plreming@wisc.edu
Office hours: By appointment (Marianne Markgraf mmmarkgra@wisc.edu)
Homepage: https://pophealth.wisc.edu/patrick-remington
II. TEACHING ASSISTANTS

The teaching assistants are responsible for many aspects of the course, including organizing the modules and lectures, preparing the quizzes, and communicating with students about attendance, grades, and other questions.

**TA for Sections 301 - 313**

**Billy Burrough** is an MD-MPH student in the School of Medicine and Public Health planning to complete his residency in Pediatrics. Currently in his MPH year, he is working with the Madison-based Providers and Teens Communicating for Health (PATCH) organization. His interests lie in health equity and social justice, and he is hoping to incorporate policy work into his future career as a pediatrician. You can follow him on Twitter (@billyburrough).

Email: wburrough@wisc.edu

**TA for Sections 314 - 326**

**Daniel Bornstein** is a PhD student in the Community and Environmental Sociology program. He studies the use of technical indicators for sustainability of agricultural supply chains, with an interest in land rights and food security. He has conducted research in The Gambia, on rice seed systems and food safety regulations.

Email: dbornstein2@wisc.edu
III. MODULES AND CORE FACULTY

The course will be organized into seven modules, with six modules addressing leading global public health problems. Except for module 4, each module lasts for 2 weeks and includes 4 lectures and 2 discussion sections:

<table>
<thead>
<tr>
<th>Module</th>
<th>Topic</th>
<th>Faculty Leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Introduction to public health</td>
<td>Remington</td>
</tr>
<tr>
<td>#2</td>
<td>Global public health</td>
<td>DiPrete-Brown</td>
</tr>
<tr>
<td>#3</td>
<td>Infectious diseases</td>
<td>Sethi</td>
</tr>
<tr>
<td>#4</td>
<td>Chronic disease</td>
<td>Remington</td>
</tr>
<tr>
<td>#5</td>
<td>Injuries</td>
<td>Durkin</td>
</tr>
<tr>
<td>#6</td>
<td>Environmental health</td>
<td>Malecki</td>
</tr>
<tr>
<td>#7</td>
<td>Integrating medicine &amp; public health</td>
<td>Remington</td>
</tr>
</tbody>
</table>

Core Course Faculty (Module Leaders)

**Lori DiPrete Brown, MS, MTS** is an Assistant Clinical Professor in the Schools of Medicine and Public Health and Pharmacy, and serves as the Associate Director for Education and Engagement in the Global Health Institute. She has played a leadership role in developing global health programs since she joined UW in 2003, including graduate and undergraduate Certificate Programs in Global Health. She teaches courses in global health, quality improvement in low-income countries, and the health and human rights of orphans and vulnerable children. She advises graduate independent global public health field study students, and leads GHI's Summer Quality Improvement Leadership Institute, which has trained leaders from 15 countries. Currently, Professor DiPrete Brown is leading a new campus-wide initiative that addresses women's wellbeing both locally and globally. DiPrete Brown received a BA from Yale (1983), served in the US Peace Corps in Honduras (1983-1985), and then pursued public health graduate study at Harvard (MSPH, 1988). From 1988 to 2003 DiPrete Brown worked in health and development programs worldwide, collaborating with international organizations such as USAID, WHO, the Pan American Health Organization, Save the Children, CARE, and the Aga Khan Foundation. DiPrete Brown defines global health broadly, taking into account root determinants of suffering and well-being such as access to food, water, health care, education, a peaceful existence, realization of political, civil and cultural rights, and the opportunity to live in a sustainable and harmonious relationship to the natural environment.

**Maureen Durkin, DrPH,** is a Professor in the Department of Population Health Sciences. She received her undergraduate degree and PhD in anthropology from the University of Wisconsin-Madison, and her MPH and DrPH degrees in epidemiology from Columbia University. Her research interests include the epidemiology, prevention, antecedents and consequences of neurodevelopmental disabilities and childhood injuries, both globally and within the United States. She has collaborated in the development of cross-cultural methods for screening for developmental disabilities and methods for surveillance of childhood injuries, and has directed international studies on the prevalence and causes of neurodevelopmental disabilities in low-income countries. She has also directed a cohort study on neuropsychological outcomes of neonatal brain injuries associated with preterm birth and with metabolic disorders detected on newborn screening, and is currently a Waisman Center investigator and principal investigator on the Wisconsin Surveillance of Autism and Other Developmental Disabilities System.
Kristin Malecki, PhD, is an Assistant Professor in the Department of Population Health Sciences. She has a PhD in Environmental Epidemiology and Health Policy and an MPH from Johns Hopkins School of Public Health. Dr. Malecki serves as the co-director for the Survey of the Health of Wisconsin (SHOW), overseeing survey implementation efforts and ancillary study development. She has been a leader in the development and evaluation of indicators for environmental health risk assessment and policy. Dr. Malecki also works to bridge applied public health practice with academic research focusing on environmental health and health disparities using a social determinants of health model. Currently, she serves as co-Investigator for a CDC funded grant exploring a health impact assessment framework for addressing climate change impacts in Wisconsin, a joint program between the Department of Population Health Sciences, the Nelson Institute, and the Wisconsin Department of Health Services (DHS). She also serves as the Principal Investigator for a number of SHOW ancillary studies involving community-academic partnerships. Before coming to the UW she served as the lead epidemiologist for the state Environmental Public Health Tracking Program. In these roles she has gained extensive experience in leading and managing multi-disciplinary teams of researchers, practitioners, and policy makers in development of environmental health surveillance and epidemiologic data for addressing chronic diseases and disparities in the State of Wisconsin and the nation.

Ajay Sethi, PhD, is an Associate Professor in the Department of Population Health Sciences, and Faculty Director of the UW Master of Public Health Program. Dr. Sethi received his PhD in Epidemiology and MHS in Molecular Microbiology and Immunology from the Johns Hopkins Bloomberg School of Public Health. He received a BS in Physiology from the University of Maryland, College Park. His research interests lie broadly in the study of infectious diseases. His studies aim to identify modifiable behavioral and structural factors associated with transmission and morbidity if infection is established. His research employs both quantitative and qualitative methods in clinic- and community-based settings, observational and quasi-experimental study designs, and is conducted in both the US and in Uganda. He works in the area of HIV/AIDS, healthcare-associated infections, and the microbiome.
# IV. LECTURE SCHEDULE

The course will have two, 50-minute lectures each week. Associated chapters in the Riegelman text are noted in parentheses.

## Module 1: Intro to Public Health Principles and Practice (Remington/Burrough)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Chapter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 17</td>
<td>1.1</td>
<td>Public health: The population health approach (Remington)</td>
<td>(Ch. 1)</td>
</tr>
<tr>
<td>Jan 19</td>
<td>1.2</td>
<td>Evidence-based public health (Remington)</td>
<td>(Ch. 2)</td>
</tr>
<tr>
<td>Jan 24</td>
<td>1.3</td>
<td>Public health data and communications (Remington)</td>
<td>(Parts of Ch. 3)</td>
</tr>
<tr>
<td>Jan 26</td>
<td>1.4</td>
<td>Social and behavioral sciences (Remington)</td>
<td>(Ch. 4)</td>
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## Module 2: Public Health in a Global Context (DiPrete-Brown/Bornstein)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 31</td>
<td>2.1</td>
<td>What is global health: Key concepts, successes and challenges</td>
<td>DiPrete Brown</td>
</tr>
<tr>
<td>Feb 2</td>
<td>2.2</td>
<td>Gender, wellbeing and global health</td>
<td>Alonso</td>
</tr>
<tr>
<td>Feb 7</td>
<td>2.3</td>
<td>The Post-2015 Agenda: Improving health systems</td>
<td>DiPrete Brown</td>
</tr>
<tr>
<td>Feb 9</td>
<td>2.4</td>
<td>Calamity and connections</td>
<td>O’Rourke</td>
</tr>
</tbody>
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## Module 3: Infectious Diseases (Sethi/Burrough)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 14</td>
<td>3.1</td>
<td>Infectious diseases: Global burden, costs, and trends</td>
<td>Sethi</td>
</tr>
<tr>
<td>Feb 16</td>
<td>3.2</td>
<td>UW-based outbreaks</td>
<td>Roberts</td>
</tr>
<tr>
<td>Feb 21</td>
<td>3.3</td>
<td>Vaccine controversies</td>
<td>Conway</td>
</tr>
<tr>
<td>Feb 23</td>
<td>3.4</td>
<td>HIV Sex Education: Closing the gap between knowledge and practice</td>
<td>Kendall</td>
</tr>
</tbody>
</table>

## Module 4: Chronic Diseases (Remington/Bornstein)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 28</td>
<td>4.1</td>
<td>Chronic disease: Global burden, costs, and trends</td>
<td>Remington</td>
</tr>
<tr>
<td>Mar 2</td>
<td>4.2</td>
<td>The Global Tobacco Epidemic</td>
<td>Remington</td>
</tr>
<tr>
<td>Mar 7</td>
<td>4.3</td>
<td>Community-based obesity prevention programs</td>
<td>Vivian</td>
</tr>
<tr>
<td>Mar 9</td>
<td>4.4</td>
<td>Health law, policy, and ethics</td>
<td>Remington</td>
</tr>
<tr>
<td>Mar 14</td>
<td>4.5</td>
<td>Poverty and health</td>
<td>Smeeding</td>
</tr>
<tr>
<td>Mar 16</td>
<td>4.6</td>
<td>MIDTERM (In Class)</td>
<td></td>
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</tbody>
</table>

## SPRING BREAK (MARCH 18—MARCH 26)

## Module 5: Injuries (Durkin/Burrough)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mar 28</td>
<td>5.1</td>
<td>The politics of firearm injury control</td>
<td>Hargarten</td>
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<tr>
<td>Mar 30</td>
<td>5.2</td>
<td>Injuries: Global burden, costs, and trends</td>
<td>Durkin</td>
</tr>
<tr>
<td>Apr 4</td>
<td>5.3</td>
<td>The Opioid Epidemic: A National and State Public Health Perspective</td>
<td>Weiss</td>
</tr>
<tr>
<td>Apr 6</td>
<td>5.4</td>
<td>Health policy advocacy approaches to injury prevention</td>
<td>Corden</td>
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## Module 6: Environmental Health (Malecki/Bornstein)

<table>
<thead>
<tr>
<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apr 11</td>
<td>6.1</td>
<td>Introduction to environmental health</td>
<td>Malecki</td>
</tr>
<tr>
<td>Apr 13</td>
<td>6.2</td>
<td>Studying the health effects of environmental exposures</td>
<td>Malecki</td>
</tr>
<tr>
<td>Apr 18</td>
<td>6.3</td>
<td>Geographies of vulnerability: The 2003 Heat Wave in Paris</td>
<td>Keller</td>
</tr>
<tr>
<td>Apr 20</td>
<td>6.4</td>
<td>Asbestos and health: the case for a worldwide ban</td>
<td>Kanarek</td>
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</tbody>
</table>

## Module 7: Integrating Medicine and Public Health (Remington/Burrough)

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<th>Date</th>
<th>Session</th>
<th>Topic</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apr 25</td>
<td>7.1</td>
<td>Healthcare organization and financing</td>
<td>Remington</td>
</tr>
<tr>
<td>Apr 27</td>
<td>7.2</td>
<td>Measuring the performance of health systems</td>
<td>Remington</td>
</tr>
<tr>
<td>May 2</td>
<td>7.3</td>
<td>Public health institutions and systems</td>
<td>Remington</td>
</tr>
<tr>
<td>May 4</td>
<td>7.4</td>
<td>The future of population health</td>
<td>Remington</td>
</tr>
</tbody>
</table>
V. DISCUSSION SECTIONS AND FACULTY

The goal of the discussion sections (75 minutes/1x per week) is to engage students in active discussions with experienced public health professionals in order to improve the understanding of current public issues and skills as a public health communicator. PLEASE NOTE: These discussion leaders are involved only in the discussion sections and are not involved with the lectures, quizzes, or final exams.

Objectives of the Discussion Section

• Engage in public health discourse as effective speakers and listeners
• Apply public health content from the class lecture and assigned reading to discussion topics
• Bring disciplinary knowledge and life experience to public health issues
• Question one’s own position and perspectives and show respect for other viewpoints
• Explore personal, local and global issues related to each module topic
• Monitor news for public health information and facilitate a thoughtful discussion about a story

Logistics and Format of the Discussion Sections

1. Case Study Discussion (1st Week of Each Module)

The first discussion section in each Module will involve a discussion related to the topic of the module. These Case Studies will be posted in the “Content” section of Learn@UW. All students are expected to read each case scenario and all related readings in advance of the section, come to class prepared to be an active participant in the discussion, and turn in a reflection about the case.

2. Public Health in the News (2nd Week of Each Module)

Instructor-Led News Story Discussion: For the second week in each Module, a recent news story will be included in the Discussion Guide for that. This News Story will be posted in the “Content” section of Learn@UW. All students will be expected to read this news story, come to class prepared to discuss it, and turn in a reflection about it. The discussion section leader will facilitate the discussion (about 15 minutes) using the questions below as a guide.

Student-Led News Story Discussion: Two students will also be expected to find and post a recent (e.g., within the past year) public health news article each week. Students will post their news story in the “Discussion” section of Learn@UW. This news story can be of any topic of interest to the student (i.e., it does not have to relate to that week’s module topic). It can be a major news story or a local story.

The link to the news story must be posted at least 48 hours before the discussion section meets, to give the discussion section leader and the other students in the section time to read it. Students and the discussion leader MAY comment on the news story on Learn@UW, but this is optional.

The student who posted the news story will facilitate the discussion, engaging the other students in the class with questions such as:
• What is the main message from the news story?
• What is the source of the story?
• Is it a credible source?
• Is there a potential for bias in reporting?
• Is the story based on science or opinions?
• If based on a published research study, what is the source of funding for the study? What implications does the source of funding have for your interpretation of the findings?
• What are the implications of the story for you? For others? For policy makers?
Remember that we only have about 15-20 minutes for the discussion of each news story, so it will go pretty quickly.

All Students are expected to read all 3 news stories (the Instructor-Led and the two Student-Led) and come prepared to discuss them.

Weekly Written Reflections (<250 Words)
Beginning the second week of class, all students are expected to hand in a printed (typed), BRIEF (i.e., <250 word) reflection that addresses either the case study (for the first week of each module) or the class-wide news story (for the second week of each module). These reflections should not simply answer the questions in the case study—or the specific questions noted above in the news story—but rather “reflect” on the readings and consider the following:

• What is the major “take home” message you gleaned as you read the materials for the case study or news story?
• Was there anything that surprised you in the readings? Did the case study/news story leave any unanswered questions or doubts in your mind?
• What are the implications of this information for you? For others? For policy makers?

Discussion Topic Schedule
Students lead a discussion about a public health-related news story once during the semester. With 7 discussion sections during the semester, and about 15 students in each section, most sections will have 2 students leading a discussion.

Module 1: Introduction to Public Health
Week 1 Forming our Learning Community
Week 2 Public health in the news

Module 2: Global Public Health
Week 3 Four Young Women Named Anna: Social Ecology
Week 4 Public health in the news

Module 3: Infectious Diseases
Week 5 Vaccines: Blessing or Curse
Week 6 Public health in the news

Module 4: Chronic Disease and Obesity
Week 7 Bad Sugar and Worse Consequences: Culture and Health
Week 8 Public health in the news
Week 9 Public health in the news

Module 5: Injury Prevention and Control
Week 10 Bike Helmet Laws: Paternalism
Week 11 Public health in the news

Module 6: Environmental Health
Week 12 The Ecological Footprint: Global Stewardship
Week 13 Public health in the news

Module 7: Integrating Medicine and Public Health
Week 14 Evaluating global health system performance
Week 15 Public health in the news
**Substitute Discussion Leaders:** If your discussion section leader is not able to attend a session, your TA will arrange for a substitute leader.

**Discussion Section Attendance Policy:** Students are expected to attend all their regularly scheduled discussion sections. Students will be excused only for illness and professional obligations that cannot be scheduled at other times. **For an absence to be excused, you must get approval from the TA responsible for your section (i.e., Billy or Daniel) BEFORE the class.** In the event of a sudden illness, we still expect an email unless it is a true emergency. Requests by students to miss more than 2 of their assigned discussion sections must be approved by Dr. Remington and may result in a lower participation grade.

Students with an **excused absence** should arrange with their TA a make-up. There are 2 options for making up a discussion section that is missed for a valid reason:

1. **Attend a different discussion section that week.** This must be coordinated and approved by your TA.
2. **Complete a written assignment about the case study or the “in the news” session.** If you are not able to attend a section in person, then you must complete a written assignment:
   a. For the case study session, submit your reflection and answer all the questions for all 3 of the news stories (the class-wide story, and the 2 student-led stories).
   b. For the “in-the-news” session, submit your reflection and answer all the questions for all 3 of the news stories.

   **NOTE:** These assignments should be submitted to your TA and not to your discussion section leader. They are due within one week of your regularly scheduled discussion section. These written make-up assignments will be graded (2 points possible).

   **An unexcused absence cannot be made up.** Students with an unexcused absence will lose 2 points off their discussion section grade for that block.
Discussion Section Instructor Biographies

Demarco Bowen is an MD/MPH candidate with a certificate in global health at UW. He received his BS in Philosophy and Biology at UW-Madison, as well. He has spent time abroad in Uganda and Ethiopia for service learning and epidemiologic research. He also works in Milwaukee as a TRIUMPH (Training in Urban Medicine and Public Health) student with community organizations dedicated towards working with the underserved. DeMarco’s other public health experience includes working at UHS as a Healthcare Advisory Committee member, and working in Red Cliff, WI, a Native American reservation, under Wisconsin AHEC. He also worked as an undergraduate at Sex Out Loud, UW-Madison’s peer-to-peer sexual health resource. DeMarco plans to work as an academic pediatrician, using his MD and MPH to teach healthcare providers and advocate for policy changes for disadvantaged populations at home and abroad.

Alex Bryant is an MD-MPH student at UW School of Medicine and Public Health. Currently in her MPH year, Alex is focused on learning about policy and development of the health sector in an effort to positively impact population health. In undergrad at UW, Alex was fortunate to go to Uganda for her Global Health Certificate field study, and then took a fifth year to study abroad in Cape Town, South Africa and Paris, France. Throughout medical school, she plans to integrate her experiences in global health policy with clinical medicine to inform her professional career.

Stevie Burrows received her MPH in Health Care Organization and Policy from the University of Alabama at Birmingham and her Bachelor's degree from Northwestern University. Her professional interests include sexual and reproductive health, perinatal epidemiology, and rural health disparities. Prior to grad school, Stevie worked as a program coordinator for the Healthy Start Coalition of Florida where she led community outreach programs in maternal and child health. As a graduate research assistant, she researched the roles of social norms and reproductive stigma in pregnancy decision-making in Birmingham, Alabama and investigated the relationship between maternal nativity and birth outcomes. Stevie is currently a Wisconsin Population Health Service Fellow with Public Health Madison & Dane County. During her placement, she will work to strengthen community partnerships and improve sexual and reproductive health outcomes as well as contribute support for Quality Improvement initiatives in the Community Health Division.

Andrea Dearlove is the Senior Program Officer for the Wisconsin Partnership Program—an endowment stemming from the Blue Cross & Blue Shield conversion and representing the commitment of UW-Madison’s School of Medicine and Public Health to improve the health of the people of Wisconsin through education, research and community partnerships. Prior to joining the Partnership Program in January of 2015, Dearlove worked for 7 years with the UW’s Institute for Clinical & Translational Research in their Community Engagement in Research core and before that spent over a decade directing community-based nonprofits ranging in focus areas from environmental protection and land use policy to children’s health.

Katarina Grande, MPH has six years of experience in local and global public health focusing primarily on infectious disease surveillance and outbreak response, structural interventions and systemic poverty research, and HIV/AIDS program management. Most recently, Katarina worked as a Global Program Management Fellow with the CDC in Tanzania. Previously, she has worked in Uganda as a Global Health Corps Fellow on a USAID project aimed at strengthening local government systems to improve health service delivery. Prior to moving abroad, Katarina was a Wisconsin Population Health Service Fellow with the Milwaukee Health Department and Center for Urban Population Health. She holds a BS in journalism and an MPH in environmental and global health. She currently works at the Wisconsin Division of Public Health’s AIDS/HIV Program as the state HIV Surveillance Coordinator.
Mary S. Hayney, Pharm.D, MPH is a Professor of Pharmacy at the UW. She received a bachelor of science and doctor of pharmacy degrees from the University of Minnesota, from the UW and completed her residency training and a postdoctoral fellowship at the Mayo Clinic. She joined the faculty at the University of Wisconsin School of Pharmacy in 1997. Her research interests lie in host response to vaccination. Dr. Hayney is an author on almost 100 peer-reviewed manuscripts. She is a contributing editor for the Vaccine Update feature in the Journal of the American Pharmacists Association. Her clinical practice is with the lung transplant program at the University of Wisconsin Hospital and Clinics. Her teaching responsibilities include immunology and viral pharmacotherapy for pharmacy students. She developed and teaches an immunization delivery course and has taught over 2000 pharmacists and pharmacy students to provide this key preventive health service to their patients.

Rebecca LeBeau is a UW-Madison alumna who graduated in 2015 with a B.S. in biology and a certificate in global health. She traveled to Nepal as part of the global health field experience and learned about Nepal's health care system, social issues, and culture. Currently, she is a surveillance specialist for the Wisconsin Division of Public Health AIDS/HIV program, where she monitors data quality, helps lead public health interventions, and collaborates on data visualization and public health communication projects. Her professional interests include infectious disease epidemiology and health equity.

Robin Mittenthal studied biology and Chinese at Carleton College in Minnesota before serving as an agricultural advisor with the Peace Corps in The Gambia, West Africa. In the mid 1990s, Robin returned to the United States and worked for more than a decade as a farmhand and manager on both conventional and organic farms in several states. He earned master of science degrees in Nutrition (Tufts University) and Library and Information Science (University of Illinois at Urbana Champaign). He also completed most but not all of a doctorate in entomology at UW-Madison, exploring the impact of organic fertilizers on both plants and their insect pests. He has worked with K-12 students as both a librarian and teacher and now enjoys helping college students think about local food production, the concept of sustainability and other food-related aspects of health. Mittenthal has travelled in China, speaks rusty Mandarin and does environmental health-related volunteering in and around Madison when not working on his small you-pick berry farm. He has helped run UW's undergraduate Certificate in Global Health since its founding in 2011.

Katherine Mooney is a recent MPH graduate with interests in access to health care, health care delivery in resource-poor environments, and care coordination models for cost containment. Her post-graduate experience in a suburban emergency department and subsequent work in health insurance enrollment under the Affordable Care Act have informed her passion for primary care and preventative medicine. As a research assistant, Katie has contributed to a variety of health survey projects, primarily with parents of pediatric patients. She will enter the MD program at the University of Wisconsin School of Medicine and Public Health next fall.

Maria Mora, MD, MS received her medical degree from the prestigious Universidad Central de Venezuela - Escuela Jose Maria Vargas (2008). She also obtained a Masters in Clinical Research from Rush University in Chicago, in 2013. Over the years, she has participated in multiple research projects surgical outcomes, and health services research, to the point of successfully publishing and presenting dozens of projects at national and regional meetings. She completed two years of general surgery residency at Loyola University Medical Center in Maywood, IL, before joining UW-Preventive Medicine Residency Program in 2015. Since her arrival to UW-Madison, Dr. Mora has joined the leadership of regional and national medical organization, and continues her research to improve the health of Wisconsin.
Colleen Moran, MPH, MS is the Climate and Health Program Manager at the Wisconsin Department of Health Services (WI DHS) where she manages BRACE (Building Resilience Against Climate Effects), a CDC funded grant. Prior to her current position, she was a UW Population Health Service Fellow working in the Chronic Disease Prevention Unit and the Bureau of Environmental and Occupational Health at the WI DHS where she was able to pursue her interest the built environment’s influence on chronic disease. Colleen was the first student to receive a dual masters in Public Health and Urban and Regional Planning from UW-Madison. Her experience as an operations manager at a small local car-sharing company in Madison, WI, led her to pursue this dual degree. Colleen is a Madison native who likes to bike, garden, travel, and cook and eat good food!

Nivi Nair is in the MD-MPH Dual Degree program at the UW School of Medicine and Public Health. She recently graduated from UW Madison with a BS in Psychology and Certificates in Global Health and Gender and Women’s Studies (and was a student in PHS 370!). As an undergraduate, Nivi was involved in research on Vitamin A supplementation. She currently continues her research on the evaluation of alternative medical foods for individuals with Phenylketonuria. During her senior year of undergraduate education, Nivi studied abroad in Ethiopia, where she had the opportunity to engage with international public health organizations and to create and pilot a foot health survey for children as part of an epidemiological study at a rural NGO. Additionally, she has worked internationally on community-based development initiatives in Panama and preventive health education in Costa Rica and Nicaragua. Nivi also works with the Dane County Rape Crisis Center, where she is involved in both counseling services and education on sexual health and sexual violence prevention. Her areas of interest include women’s health, injury prevention, and mental health promotion. She looks forward to integrating public health into her future clinical practice.

Britt Nigon, MPH received her Master of Public Health from the Mel & Enid Zuckerman College of Public Health at the University of Arizona. As an MPH student, her research focus was on sexual violence prevention with an internship consisting of a mixed-method study evaluating female undergraduate students’ perspectives of sexual violence in bars and subsequent help-seeking behaviors. She also completed an internship with the Southwest Institute for Research on Women where she supported a national cross-site evaluation of a juvenile drug rehab program and spent one month in rural Mexico performing a sexual health needs assessment. During her grad studies, Britt served as a teaching assistant for the Human Sexuality course for undergraduate public health students for two academic years including two summer sessions of the class conducted in Northern Europe. Prior to her graduate studies, she taught sex education as a Community Health Educator with the Boys & Girls Clubs of Greater Milwaukee and served in rural Peru as a youth development volunteer in the Peace Corps. Britt is currently a Wisconsin Population Health Fellow and is placed with the Wisconsin Division of Public Health where she supports the Chronic Disease Prevention Program.

Chidi Obasi, MD, MS, PhD has diverse clinical and research experiences in both developed and developing countries. His interests include infectious disease surveillance, preventive and community medicine, and global health policy and research. He recently completed a 3-year NIH-sponsored Post Doctoral Primary Care Research Fellowship at the University of Wisconsin-Madison. During this period, his work centered on evaluating the effects of exercise and mindfulness meditation on the severity of community acquired acute respiratory infections. He also focused on exploring the relationship between bacterial and viral infections; and co-developing a patient-oriented instrument—the Wisconsin Upper Respiratory Symptom Survey-11 (WURSS-11). In addition, Dr. Obasi obtained his graduate degrees from the University of Wisconsin-Madison (PhD-Clinical Investigation; MS-Population Health Sciences). Prior to this he earned his medical degree from the Abia State University in Uturu, Nigeria and subsequently completed an internship year at the Federal Medical Centre Owerri Nigeria—a tertiary hospital.
Sweta Shrestha, MPH is the Assistant Director for Education for the UW-Madison Global Health Institute, where she serves as instructor, advisor and curriculum program manager for both the graduate and undergraduate Certificates in Global Health and the associated field experiences. Ms. Shrestha has a background in neurobiology and earned her Masters in Public Health and Graduate Global Health Certificate from the University of Wisconsin-Madison School of Medicine and Public Health. Her global health experiences includes community based family planning in Uganda, health systems strengthening in Nepal, women and empowerment research in Ghana and Quality Improvement efforts in other countries including Zambia, Ethiopia, and South Africa. She leads the global health field experience in Nepal and Sri Lanka and is engaged with a range of Global Health Institute initiatives and serves as the Assistant Director for the Quality Improvement and Leadership Institute. She loves to travel, hike (mostly in high altitude where there are less critters) and is dedicated to changing the discourse of global health to be more inclusive of perspectives and values of people all around the world.

Elizabeth Stein, MD, MS received her MD from Howard University after transferring from Jefferson Medical College, where she completed her preclinical years. Prior to medical school, she earned her MS in Foods and Nutrition from the University of Georgia and a bachelor’s in computer science from New York University. At UGA, she researched vitamin D levels in a population of children in Georgia and collected surveillance data on the diets of older adults in rural Georgia. At Jefferson, Elizabeth investigated metabolic syndrome criteria and its associations with insulin resistance in a black population of Philadelphia. After medical school, she developed experience in grant writing and basic science research working as a postdoctoral research fellow of microbiology at the University of Virginia. Most recently, Elizabeth finished her intern year in psychiatry at the University of Florida in Gainesville. As a preventive medicine resident, she is completing clinical rotations at the VA Mental Health Clinic and working with the Survey of the Health of Wisconsin (SHOW) examining data on the health of veterans and predictors of mental health care usage.

Diego Tamez MD, graduated from the Pontifical Catholic University of Puerto Rico in 2005 with a bachelor’s degree in general science. Received his MD from the University of Puerto Rico School of Medicine in 2010. Afterwards, he completed an internship in Internal Medicine at the University of South Florida in Tampa, FL in 2011. Currently is a first year Preventive Medicine Resident at the University of Wisconsin-Madison, which also include being an MPH candidate. Prior to joining the Preventive Medicine Residency, he had different clinical practices in Puerto Rico, and with the Indian Health Services in Oklahoma.

Eva M Vivian, CDE, BC-ADM, FAADE, PharmD is a Professor at the UW School of Pharmacy. She received her doctor of pharmacy degree from the University of Illinois and a Master of Science from the UW. She is certified in diabetes education and advanced diabetes management and maintains a clinical practice at Access Community Health Centers. Dr. Vivian's research interests focus on identifying disparities in the treatment of hypertension, diabetes, and other chronic diseases among ethnic minorities, particularly African American and Latino American patients and developing and implementing strategies to reduce and eliminate them. Dr. Vivian serves on the Editorial Board of the Merck Manuals and Drugs in Context and is a reviewer for the Diabetes Care, The Diabetes Educator, Annals of Pharmacotherapy, Clinical Therapeutics, Current Medical Research and Opinion, and Diabetes Spectrum. Dr. Vivian has lectured at conferences across the United States and has served on the Board of Directors of the American Assoc of Diabetes Educators during 2011-2013. She is also a member of the American Diabetes Association, American Pharmacy Assoc, American Association Colleges Pharmacy and American College of Clinical Pharmacy.
Liz Wendt is a second-year Master in Public Health student at UW School of Medicine and Public Health and a clinical trial coordinator in the Section of Endocrine Surgery at UW Hospital. She graduated from UW-Madison in Spring 2015 with a B.S. in English and Biology and a Certificate in Global Health. Liz has done public health work in Central Appalachia, Ethiopia, Central America, and right here at home in both rural and urban Wisconsin. She looks forward to discussing important public health topics with students in section 323!

Jasmine Zapata is an author, pediatrician, youth empowerment motivational speaker, entrepreneur, mother and wife from the Madison area on a mission to spread the message of "hope, strength, and the power to overcome." She has participated in extensive community engagement work in both the Madison and Milwaukee area and is passionate about getting outside of the clinic walls to make a change. She is currently a UW Preventive Medicine Resident learning more about long-term solutions to many of the public health issues our society currently faces. She loves exploring and learning more about upstream factors that lead to poor health outcomes and then using her creativity and energy to combat them. Her passions are initiatives related to combatting poverty, teenage pregnancy, racial disparities in infant mortality and depression/suicide. She is active on social media https://www.facebook.com/DrJasmineZapata/

Abbie Zeln is currently a student in the MD-MPH Dual Degree Program and Wisconsin Academy for Rural Medicine (WARM) Program at the UW School of Medicine and Public Health. She has a bachelor's degree in Neurobiology and Human Development & Family Studies from UW-Madison. She spent time during her undergraduate years working on the campus-wide 4W Initiative, mainly focusing on prevention of domestic violence and human trafficking. Her interests include health of rural communities, women's health, and preventative medicine. Her interest in rural communities sprouted from her experience conducting a Community Health Needs Assessment for Sauk County, Wisconsin.
VI. COURSE MATERIALS AND INSTRUCTIONAL TECHNOLOGY


The textbook is available at the UW bookstore for purchase (about $85 new, $65 used). Used copies of the Second edition are also available on Amazon (as low as $45). Only the Second Edition (ISBN 9781284074611) will have an access code bundled free with the print text. If you prefer to purchase ONLY the ebook and not a print text you may do so through the publisher. The ebook costs about $45 (about half the cost of the printed text) and is labeled as “Navigate 2 Advantage Access for Public Health 101, Second Edition”

http://www.jblearning.com/catalog/9781284074628/

If you decide to use the e-version, you can set up an account on the publisher’s website (http://www2.jblearning.com/my-account/login) and redeem the access code that is printed on the inside cover of the text (specific instructions are included on the access code card). Once you have set up your account and redeemed your access code you will need to enroll in PHS 370 by entering the **Course ID: 7D6AA5**

To do this, click on “Navigate 2 Advantage Access for Public Health 101” in the My Account page. Then click on the Enter Course ID tab on the right and enter the **Course ID.** You will then be enrolled the PHS 370 course, you will not need to enter the Course ID again. Should you run into any issues you may contact the publisher’s technical support at support@jblearning.com or 1-800-832-0034 (option 5).

**Is the ebook required?** No. The ebook/online materials simply expand upon the content presented in the paper version of the 2nd edition.

**Can I order the 1st edition of the textbook, since it is much less expensive?**

You may purchase the 1st edition ($1-$5 each), but it does not come with the ebook and there have been several substantive changes to the chapters in the 2nd edition.

**Optional References:**
- Introduction to Global Health. Jones and Bartlett. (NOTE: This textbook is required for the Introduction to Global Health course [CALS] course).

**Additional Readings:**

Students will be assigned 1-3 key articles per module as required readings for this course. The readings will be available online under “Content” in Learn@UW. Students are expected to keep current with weekly readings to effectively participate in class discussion and adequately prepare for bi-weekly quizzes.

**Instructional Technology & Other Course Resources**

This course will use Learn@UW for class communication, Web-based readings and resources, online lectures, submitting assignments, and posting grades. Therefore, students are expected to regularly access Learn@UW throughout this course. PLEASE NOTE: It takes a few days from the time that you have been enrolled in the course to gain access to the course page in Learn@UW.

You will need a current version of Adobe Acrobat Reader and Adobe Flash Player to access course materials. Both plug-ins can be downloaded from Adobe’s website: http://www.adobe.com
VII. COURSE POLICIES AND STUDENT SERVICES

Attendance Policy: Attendance is expected in the lecture and required for discussion sections.

Class Meeting Cancellation Notices: Occasionally, severe weather, illness, or other circumstances may require cancellation of a class meeting. If this is so, students will be informed via an email notice sent to the class email list. It will be the responsibility of each student to ensure that they check the email that they used for their course registration for such a message.

Non-Discrimination Policy: The UW-Madison is committed to creating a dynamic, diverse and welcoming learning environment for all students and has a non-discrimination policy that reflects this philosophy. Disrespectful behaviors or comments addressed towards any group or individual, regardless of race/ethnicity, sexuality, gender, religion, ability, or any other difference is deemed unacceptable in this class, and will be addressed publicly by the professor.

Disability Reasonable Accommodation Policy: If you qualify for accommodations because of a disability, please submit a letter to the course director that outlines your request in a manner that is timely and consistent with established university policies for making such requests so that your needs may be addressed. Policies for accommodating disabilities are available through the McBurney Disability Resource Center, 903 University Ave., 608-263-2741 (phone) http://www.mcburney.wisc.edu/

Religious Reasonable Accommodation Policy: Every effort shall be made to reasonably and fairly accommodate all students who, because of religious obligations, have conflicts with scheduled exams, assignments, or required attendance, provided advance notification of the conflict is given. Whenever possible, students should give at least one week advanced notice to request special accommodation.

Student Honesty and Rules of Conduct: Academic honesty requires that the course work (e.g., quizzes, papers, exams) a student presents to an instructor honestly and accurately indicates the student's own academic efforts. See: https://students.wisc.edu/student-conduct/academic-integrity/

UWS 14 is the chapter of the University of Wisconsin System Administrative code that regulates academic misconduct. UW-Madison implements the rules defined in UWS 14 through our own "Student Academic Misconduct Campus Procedures." UWS 14.03 defines academic misconduct as follows: "Academic misconduct is an act in which a student:
(a) seeks to claim credit for the work or efforts of another without authorization or citation;
(b) uses unauthorized materials or fabricated data in any academic exercise;
(c) forges or falsifies academic documents or records;
d) intentionally impedes or damages the academic work of others;
e) engages in conduct aimed at making false representation of a student's academic performance;
(f) assists other students in any of these acts."
If you are accused of misconduct, you may have questions and concerns about the process. If so, you should feel free to call Student Advocacy & Judicial Affairs (SAJA) in the Offices of the Dean of Students at (608) 263-5700 or send an email to dos@bascom.wisc.edu.

Student Campus Resources: Some of the topics discussed in this course relate to sensitive health and social issues. Many students have had experiences with health issues such as depression, suicide, violence, or serious health issues. Discussing these issues may be difficult for some students. We recommend that all students be sensitive when discussing these issues. In addition, students should be aware of resources that are available at the UW: https://www.uhs.wisc.edu/mental-health/getting-started/
VIII. ASSESSMENT OF STUDENT PERFORMANCE

Students will be assessed based on the results of bi-weekly quizzes (20%), discussion section participation (30%), a midterm (20%), and a final exam (30%).

1. Bi-Weekly Quizzes (20% of final grade)
A brief multiple-choice quiz will be posted online at the end of each module in the course. Each quiz will consist of about 15 questions (roughly 3 questions from each lecture and case study). The questions will be taken from the lectures and discussion sections in the module, including the required readings.

The quizzes will be “open book” and are intended to help guide student learning. To encourage student-to-student learning, you may collaborate with other students on the quizzes. Please note that the questions that are asked on the quizzes reflect the information that each student will be expected to know for the midterm and final exams.

Quizzes will be posted and available on Learn@UW at 5:00 PM on the last Thursday of the Module and will be open until 10:00 PM Sunday night. Students will have 90 minutes to complete the quiz. Once started, a quiz must be completed within the time limit, so plan accordingly.

Students who miss a quiz for ANY REASON will not be able to make it up. Therefore, we strongly recommend that students take the quiz as early as possible and not wait until Sunday night to avoid the following (actual) situation:

“I know that you have stated that late quizzes are not accepted but while I was taking the quiz tonight, I lost internet connection and was unable to answer a couple questions…I don’t believe that this should be viewed as a late quiz, please let me know if there is anything I can do. Thank you very much!”

Our response?

“Since we do not accept late quizzes, we recommend that you do not wait until Sunday night to take the quiz in the future, to avoid a situation like this.”

Learn@UW offers notification services that students may find useful. See the DoIT Tutorial at https://kb.wisc.edu/luwmad/page.php?id=32497 for more information.

2. Discussion Section Participation (30% of final grade)
Students will be graded for their participation in the 15 discussion sections (2 points/week x 15 weeks = 30 points). The points will be based on:

• Attendance (1 point/week)
• Submission of a written reflection (1 point/week)

The discussion section instructor may give an extra credit point at the end of the semester to any student who goes above and beyond what is expected (e.g., consistently and actively participates in class discussion, all weekly reflections are clear, concise, and thoughtful, and led a thoughtful discussion of their “in the news” discussion).

3. Mid-term exam (20% of final grade)
The mid-term exam will be a written, in-class (50 minute) exam on Thursday March 16th, 2017. The exam will include multiple choice and short-answer questions, and cover material from the first four modules of the course. The exam will assess the learning objectives that are included in each module.

Given the large size of this class, the mid-term will only be given once. Students who miss the midterm due to illness or academic conflicts (e.g., a professional commitment that cannot be rescheduled) will be given an alternative make-up written exam. Contact your TA for arrangements.
4. Final exam (30% of final grade)
The final exam will be given on Monday, May 8th, 2017 from 2:45PM - 4:45PM. The location will be assigned later in the semester. This exam will be a written exam and will include multiple choice and short-answer questions. Approximately 2/3 of the questions will cover material from the last three modules and approximately 1/3 will cover concepts from the entire course. The exam will assess the learning objectives that are included in each module.

Given the large size of this class, re-scheduling the final examination will only be done for students with compelling academic or professional conflicts (e.g., a professional commitment that cannot be rescheduled, or more than three final exams in a 24-hour period). If possible, students with an illness requiring medical attention should contact their TA or the course instructor in advance of the final exam.

Overall Course Grading Scheme:
Each assessment described above will be graded based on the following 100-point scale:
- A (outstanding): 93.00+%
- AB (excellent): 88.00 – 92.99%
- B (very good): 83.00-87.99%
- BC (good): 78.00-82.99%
- C (fair): 70.00-77.99%
- D (poor): 60.00-69.99%
- F (fail): <60.00%

The cutoff between grades may be curved lower (e.g., changing an A to 92.00+%) if an exam is more difficult than expected.

Grading Questions and Appeal Policy: All questions regarding any grade in the course must be directed to your TA. If you have a question about a quiz or exam question, you should meet with your TA during office hours.

Please note: We do not adjust final grades at the end of the semester for any reason, other than an error in recording a grade. Letter grades are calculated based on the curve above. With a large class, there will always be a student who falls just below a grade cut off. This is an email from a previous student:

“I'm emailing you as we just received our final grade and I seem to be 0.03% away from an A in the class. I'm not sure if there is anything you can do about it, but I do feel like I participated to my fullest ability both during discussions and in my reflections.”

Our response is always the same. To be fair to all students, we do not adjust the cut off for students who just missed a higher grade.
Honors Sections and Options: This course offers an honors option for students in the Letters and Science Honors Program (see: http://www.honors.ls.wisc.edu/).

Honors Credit (H): To receive “Honors Program Credit,” students may enroll in one of the two discussion sections (301 and 315).

Honors Final Paper: Students enrolled for Honors Credit (H) must complete a final paper. For the paper option, students will select a public health problem of interest to them. Students will organize the paper using the “P.E.R.I.E.” described below:

- **Part #1: Problem**
  - What is the nature and extent of the problem (i.e., descriptive epidemiology)?
  - What groups are at highest risk?

- **Part #2: Etiology**
  - What are the causes of this problem (i.e., analytic epidemiology)?
  - What gaps exist in our knowledge about the causes?

- **Part #3: Recommendations**
  - What programs/policies are effective in preventing this problem?
  - What types of intervention studies have been done to learn about what works?
  - What gaps exist in what we know about prevention and control strategies?

- **Part #4: Implementation**
  - What are the barriers in translating our knowledge about prevention into practice?
  - What ethical, social, or political issues exist?

- **Part #5: Evaluation**
  - How successful have we been in addressing this problem?
  - What can be done to be more successful in the future?

Timeline:
- Before the semester: Enroll in either Honors Section (H).
- March 1: Select topic for paper and post in Dropbox on Learn@UW
- April 1: Outline of final paper should be complete (no need to submit)
- By 11:59PM on day after final exam: Submit paper to the Dropbox on Learn@UW

Format:
This paper should be typed in 12-point font and double-spaced. The length of the paper should be NO MORE THAN 2,500 words (about 10 pages double-spaced). References (no more than 20) should be listed using AMA style (http://www.lib.jmu.edu/citation/amaguide.pdf). The word cap is only for text – any tables, figures, and references will not count toward this limit.

Evaluation: Each paper will be evaluated using the following criteria:
- Clear statement of the problem and public health burden
- Describes the causes of the problem
- Describes evidence-based approaches
- Discusses translating research into practice
- The overall clarity of writing (including proper formatting of sections, references, etc.)
- Assignments that are turned in late will be reduced by one grade level (10 points). This can be waived for valid causes (e.g., illness, required commitments, etc.).

The honors paper grade is not factored into the overall course grade. However, in order to satisfy the honors requirement, the final paper must receive a grade of B or better.

If you have any questions about the honors program, please contact: honors@honors.ls.wisc.edu