



EMORY

ROLLINS  
SCHOOL OF  
PUBLIC  
HEALTH

**DEPARTMENT:** Hubert Department of Global Health

**COURSE NUMBER:** 500  
**NUMBER:** 1

**SECTION**

**CREDIT HOURS:** 2

**SEMESTER:** Fall 2019

**COURSE TITLE:** Critical Issues in Global Health

**CLASS HOURS AND LOCATION:**  
Thursdays 4:00–5:50 PM, CNR 1000

**INSTRUCTOR NAME:** Ghada N. Farhat, MPH, PhD

**INSTRUCTOR CONTACT INFORMATION**

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**PHONE:** 404-727-8818

**SCHOOL ADDRESS:** CNR 6045

**OFFICE HOURS:** By appointment

**TEACHING ASSISTANTS**

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Shawnee Bernstein	<a href="mailto:shawnee.bernstein@emory.edu">shawnee.bernstein@emory.edu</a>	TBD
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**COURSE DESCRIPTION**

The overarching objective of GH500 is to equip students with critical perspectives and resources that they will need as public health professionals and global citizens in our increasingly inter-connected and interdependent world. The course introduces students to: (1) fundamental cross-cutting themes that contextualize contemporary global health issues; and (2) selected health topical areas such as maternal and child health, pandemics, and non-communicable diseases. The course provides an overview of the past, present, and expected future directions of global health.

## MPH/MSPH FOUNDATIONAL COMPETENCIES

- Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
- Design a population-based policy, program, project or intervention
- Advocate for political, social or economic policies and programs that will improve health in diverse populations
- Describe the importance of cultural competence in communicating public health content

## MPH/MSPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE LEARNING OBJECTIVES

- Explain how globalization affects global burdens of disease

## COURSE LEARNING OBJECTIVES

- Assess historical, economic, political, social and cultural factors that shape global health challenges
- Compare the strategic role, agendas and historical contributions of major global health organizations.
- Assess best practices and evidence-based approaches used to address global health issues at global, national and community levels.
- Apply ethical principles and cultural humility in global health practice
- Assess the reciprocal relationships between development and health
- Prioritize current and emerging health issues for specific regions or nations based on available evidence.
- Develop multidisciplinary strategies for problem identification and solution-finding for major global health challenges

## EVALUATION

Performance Areas	Percent of Final Grade
<b><i>Individual Evaluation</i></b>	<b>74%</b>
Class Participation	14%
Discussion Board Posts	30% (3 posts at 10% each)
Letter of Intent – Component 2 (individual)	10%
Health Initiative Video Pitch	20%
<b><i>Group Evaluation</i></b>	<b>26%</b>
Health Issue Identification	6%
Letter of Intent – Component 1 (group)	20%

The course grading scale is as follows:

94-100	A	75-79.9	B-
90-93.9	A-	65-74.9	C
85-89.9	B+	0-64.9	F
80-84.9	B		

## COURSE STRUCTURE

### *Course Organization*

GH500 is a required course of all students enrolled in the MPH and MSPH programs at RSPH other than students in Global Health, Global Environmental Health, and Global Epidemiology programs. The course is offered in the Fall and Spring semesters.

The course will use a blend of learning modalities – in-person lectures, interactive small group discussions and teamwork, and flipped classrooms. Evaluation will be based on individual assignments, small-group projects, and class participation. You will be asked to contextualize both individual assignments and group projects around a single focus country throughout the semester. You will be given an opportunity to choose their focus country from among five selected for this year: **Brazil, China, India, Nigeria, and Rwanda**. Countries were selected to demonstrate diversity in health outcomes and strategies across nations with rapidly growing economies and relatively large populations in Africa, Asia, and South America. You will then be assigned to interdisciplinary teams (representing a mix of home departments) for group work at the beginning of the semester.

### *Description of Assignments*

All assignments will be due on Canvas **by 11:59 pm the night before class on the week it is due**.

Points will be deducted for late submissions at the rate of 1 pt for each day late. We have worked to maintain continuity across the assignments and distribute them throughout the course. Assignments, both individual and group work, are summative and require that you assimilate what you have learned over several sessions and deliver it to a specified audience in the form of a letter of intent and a video pitch.

#### **1. Group assessment (26%):**

##### **Key Health Issue Identification (6%)**

In preparation for the midterm and other individual assignments, each group will be asked to identify a health issue of importance in its focal country. Rationale for selecting this issue must be provided.

##### **Letter of Intent – Component 1 (Group) (20%):**

The Letter of Intent is a 2-component midterm assignment. Component 1 is a group assignment while component 2 is an individual assignment. In Component 1 (Group), student groups will **design a population-based health initiative** (program, project, or intervention) that addresses a key health issue in their selected country. The health initiative must be tailored to the socioeconomic/development context of the country and must demonstrate a consideration of cultural values and practices. Component 1 is worth 20% of the final course grade. Component 2 is described under the individual assessment and is worth 10%.

## **2. Individual assessment (74%):**

### **Class Participation (14%):**

You are expected to attend class and participate in the in-class activities designed for each session. Each session will include group (think-pair-share; group reports) or individual (5-minute reflections) activities that require you to engage with the lecture content. These activities will be submitted online and used to assign individual participation scores in the course.

### **Letter of Intent – Component 2 (Individual) (10%):**

The Letter of Intent is a 2-component midterm assignment. Component 1 is a group assignment while component 2 is an individual assignment. In Component 2 (Individual), each student will **design a sustainability program** to ensure that the proposed initiative remains operational beyond the funding period and has a lasting health impact on the long term. Specifically, factors that promote and potentially hinder the sustainability of your proposed health initiative must be frankly discussed. Component 2 is worth 10% of the final course grade.

### **Health Initiative Video Pitch (20%):**

In this assignment, students will individually develop a video pitch, for a lay audience, that advocates for a political, social, or economic policy or program that would support the goals of the population-based health initiative (program, project, or intervention) described in the Letter of Intent assignment.

### **Individual Discussion Board Posts (30%):**

You will be assigned 3 brief (~500 word) discussion board posts worth 10 points each. You will be expected to read your classmates' posts (within your country group) before the next class period.

- Post 1: After identifying a key health issue in their focal country, each student will gather information to identify which global health actors/ organizations are involved in addressing the health issue in-country.
- Post 2: After completing the cultural competence module, students will individually write a post describing how they will apply awareness of

cultural values and practices to implement their population-based initiative (program, project or intervention), described in the Letter of Intent assignment. (see “Group assessment”).

- Post 3: Before developing the Health Initiative Video Pitch, students will individually submit a reflection on the importance of cultural competence in communicating the public health content of their video pitch.

### ***Summary of Assessment of Competencies:***

<b>MPH Foundational Competency Assessed</b>	<b>Representative Assignment</b>
1. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	Individual Discussion Board Posts – Post 2: After completing the cultural competence module, students will individually write a post describing how they will <b>apply awareness of cultural values and practices</b> to implement their population-based initiative (program, project or intervention), described in the Letter of Intent assignment.
2. Design a population-based policy, program, project or intervention	Letter of Intent – Components 1 and 2: In Component 1 (Group), student groups will <b>design a population-based health initiative</b> (program, project, or intervention) that addresses a key health issue in their selected country. The health initiative must be tailored to the socioeconomic/development context of the country and must demonstrate a consideration of cultural values and practices. In Component 2 (Individual), each student will <b>design a sustainability program</b> to ensure that the proposed initiative remains operational beyond the funding period and has a lasting health impact on the long term.
3. Advocate for political, social or economic policies and programs that will improve health in diverse populations	Health Initiative Pitch: students will individually develop a video pitch, for a lay audience, that <b>advocates for a political, social, or economic policy or program</b> that would support the goals of the population-based health initiative (program, project, or intervention) described in the Letter of Intent

	assignment.
4. Describe the importance of cultural competence in communicating public health content	Individual Discussion Board Posts – Post 3: Before developing the Health Initiative Video Pitch, students will individually submit a reflection on the importance of cultural competence in communicating the public health content of their video pitch.

## COURSE POLICIES

**Attendance:** You are expected to attend class regularly. Missing a session will risk your in-class participation grade for that session. One excused absence will be allowed per semester.

**Class Environment:** Please respect the integrity of the classroom environment and the learning of your colleagues by silencing your phones and only using laptops or notebooks to take notes in class or as instructed by the lecturer. Please avoid email and social media during class. We are a diverse community. Each of us brings distinctive backgrounds and experiences to the study of global health. Global health is about cooperation across borders and divisions. We will model this in the classroom. Many are likely to have strong opinions about topics and content covered in this course. Respect for one another is fundamental in our interactions. This does not mean that we have to agree with one another or that you can not have and express strong opinions and ideas. It does mean that we listen to one another actively and respectfully.

**Required Readings:** Readings will be drawn from a range of disciplinary perspectives, including history, epidemiology, political science, economics, sociology and anthropology. Required readings (and videos) will be posted on the class Canvas site. If changes are necessary, they will be posted at least one week in advance. This course does not have a required textbook.

As the instructor of this course, I endeavor to provide an inclusive learning environment. However, if you experience barriers to learning in this course, do not hesitate to discuss them with me and the Office for Equity and Inclusion, 404-727-9877.

## RSPH POLICIES

### ***Accessibility and Accommodations***

Accessibility Services works with students who have disabilities to provide reasonable accommodations. In order to receive consideration for reasonable accommodations, you must contact the Office of Accessibility Services (OAS). It is the responsibility of the student to register with OAS. Please note that accommodations are not retroactive and that disability accommodations are not provided until an accommodation letter has been processed.

Students who registered with OAS and have a letter outlining their academic accommodations are strongly encouraged to coordinate a meeting time with me to discuss a protocol to implement the accommodations as needed throughout the semester. This meeting should occur as early in the semester as possible.

Contact Accessibility Services for more information at (404) 727-9877 or [accessibility@emory.edu](mailto:accessibility@emory.edu). Additional information is available at the OAS website at <http://equityandinclusion.emory.edu/access/students/index.html>

### ***Honor Code***

**You are bound by Emory University's Student Honor and Conduct Code.** RSPH requires that all material submitted by a student fulfilling his or her academic course of study must be the original work of the student. Violations of academic honor include any action by a student indicating dishonesty or a lack of integrity in academic ethics.

***Academic dishonesty refers to cheating, plagiarizing, assisting other students without authorization, lying, tampering, or stealing in performing any academic work, and will not be tolerated under any circumstances.***

The RSPH Honor Code states: "Plagiarism is the act of presenting as one's own work the expression, words, or ideas of another person whether published or unpublished (including the work of another student). A writer's work should be regarded as his/her own property." ([http://www.sph.emory.edu/cms/current\\_students/enrollment\\_services/honor\\_code.html](http://www.sph.emory.edu/cms/current_students/enrollment_services/honor_code.html))

*To learn more about plagiarism, check out this online tutorial: ["Don't Cheat Yourself"](#) from the University of Leicester.*

## COURSE CALENDAR

*Please note that topics and dates may change as the semester progresses. Updates will be announced via email and posted on the Canvas site.*

Session	Lecture	Lecturer	Method of delivery	Assignment Due
Week 1 8/29	COURSE OVERVIEW  WHAT IS GLOBAL HEALTH?  DESIGNING POPULATION-BASED POLICIES, PROGRAMS, PROJECTS, AND INTERVENTIONS	Farhat	Face-to-face lecture	
Week 2 9/5	PAST, PRESENT & FUTURE OF GLOBAL HEALTH	Farhat	Face-to-face lecture	
Week 3 9/12	POPULATION DYNAMICS	Cunningham	Face-to-face lecture	
Week 4 9/19	GLOBALIZATION AND GLOBAL BURDEN OF DISEASE	Farhat	Face-to-face lecture	Identification of Key Health Issue (9/18)
Week 5 9/26	The GLOBAL HEALTH LANDSCAPE: ACTORS & COLLABORATION	Farhat	Face-to-face lecture	
Week 6 10/3	CULTURAL COMPETENCE	Spangler	Flipped lecture*	Post 1 on Global Health Actors (10/2)
Week 7 10/10	HEALTH SYSTEMS	McFarland	Flipped lecture*	
Week 8 10/17	GLOBAL TUBERCULOSIS CONTROL	Castro	Face-to-face lecture	Letter of Intent – Components 1 and 2 (10/16)
Week 9 10/24	ETHICS  ADVOCACY	Lavery	Flipped lecture*	
Week 10 10/31	WATER, SANITATION & HYGIENE	Patel	Face-to-face	Post 2 on Cultural



			lecture	Awareness and Implementation of Health Initiative (10/30)
Week 11 11/7	DECISION-MAKING & PRIORITIES	Bednarczyk	Face-to-face lecture	
Week 12 11/14	NON-COMMUNICABLE DISEASES	Farhat	Face-to-face lecture	Post 3 on Cultural Awareness and Communication of Public Health Content (11/13)
Week 13 11/21	MATERNAL AND CHILD HEALTH	Patel	Face-to-face lecture	
Week 14 11/28	No class – Thanksgiving week			
Week 15 12/5	NEGLECTED TROPICAL DISEASES	Fairley	Face-to-face lecture	
Week 16 12/12	NO CLASS			Health Initiative Video Pitch Due: (12/11)

**\* Flipped classroom: In a flipped classroom, students will first view lectures before class through recorded video lectures. Class time is invested in assimilating new knowledge via in-class discussions and group work.**