

SPPH 523 / INDS 502S [co-listed] GLOBAL HEALTH AND HUMAN SECURITY

TIME: Term 2, Monday 14:00 - 17:00 January – April 2017

LOCATION: Case Room (next to the multipurpose room – main floor)
(Room 121 to be used for breakout groups)
Liu Institute Global Issues 6476 NW Marine Drive

INSTRUCTORS:	Dr Jerry Spiegel	<u>TEACHING ASSISTANT</u>
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OFFICE HOURS:	By appointment Preferred office hours Monday mornings	By appointment

Good health is both essential and instrumental to achieving *human security*, a framework that argues that *security* should more appropriately focus on the status of *people* and not *borders*. *Human security* in fact holds that a *people-centered* view of security is necessary for national, regional and global stability. This multi-dimensional *social* perspective also provides an alternative to narrowly technical global health narratives, by not only considering access to health services but also taking into account wider influences on wellbeing.

As we entered the 21st century amid the promise of “globalization”, it was undeniable that about half the world’s population was being left behind, especially children and women. With global disparities widening and concerns over emerging infectious disease in an increasingly interconnected world growing, global health began receiving increased attention and funding. The World Health Organization (WHO) has estimated that more than 40% of the world’s deaths each year are avoidable, given existing global knowledge, technologies and resources. Many of these deaths can be prevented only by reaching people trapped in poverty or conflict and by addressing other sources of insecurity. In this context, attention to Global Health has grown exponentially.

Adopting the Millennium Development Goals (MDGs) represented an attempt by the international community to address this challenge – but the events of September 11, 2001 prompted a resurgence of “national security” orientations to international relations. In 2015, the international community adopted Sustainable Development Goals and achieved broader recognition of climate change as a prominent threat to global health and security.

This course aims to ***develop students’ competencies for critically analyzing and discussing circumstances that affect global health, as well as related intervention strategies and their effects on health equity worldwide.*** It examines issues in global health that are fundamental to achieving human security but generally lie outside the scope of international security studies - and explores global driving forces and policy issues that have great influence on health but generally lie outside of examinations of health status. In doing so, it explicitly considers the role of *sovereignty* and *capacities* as factors that call for greater examination – and in particular reflects on ethical and political issues related to Canada’s international engagement. Specific topics covered in this course include poverty, equity and the *social determination* of health; global change and neglected diseases; issues in environmental health and occupational health accompanying growth; conflict and diplomacy, war and public health; and the challenges of global governance. In 2017, we will reflect on lessons from the Ebola Virus Disease (EVD) outbreak as it vividly illustrates themes of this course – and consider new threats to and opportunities for promoting health and human security.

Learning objectives - in line with developing competencies to frame & analyze global health issues

To be able to:

- Discuss *core concepts* concerning “global health” & “human security”;
- Critically analyze *different approaches* to addressing global health concerns
- Identify & explain *threats* (types, direct and indirect effects) to Global Health Security
- Present & critically discuss *strategies* for promoting human security from a health perspective

Structure

Each session will generally include

- i) an hour-long presentation by experts in different areas, followed by discussion;
- ii) break
- iii) an interactive or student led session (additional 60-80 minutes):
 - a. sessions 1-6 (to February 22) The “interactive” format will generally apply a “world cafe” format to optimize participation: (<http://www.theworldcafe.com/key-concepts-resources/world-cafe-method/> – discussed in class); and
 - b. sessions 7-12 (from February 29) student presentations on topics selected at the beginning of the term – format for 10-15 minute presentations
- iv) class discussion as time permits for last part of session

Grading & Assessment

- i) **“Reflective Journal / Blog entry” (20%)** You will be expected to submit a one page reflection AND/OR contribute a *Discussion Board* blog entry by Monday a.m. of each week. Grading will assess conscientiousness of reflection on “designated questions” (past and upcoming weeks – your choice) or another issue/ i.e. question that you may raise, referring to readings and/or other “reference points” – not “right or wrong” answer.
- ii) **World Cafe discussion convening (20%)** Each student will be a convenor or recorder for one session. This will involve “refining” session questions (in line with a critical introduction of 1 or more readings); facilitating the session; and preparing a 2-5 page summary of main points covered. Details to be discussed in class.
- iii) **Presentation on a selected topic (20%)**, with a clear targeting of a “stakeholder/actor” of student’s choice – to inform/provide background/ convince of a position etc.); 300 word abstract for Feb. 27 (25% of grade) If group presentation is pursued, there will be a group grade as well as an individual grade, such that the student’s grade for this session will be a combination of the two; peer reviews will be conducted.
- iv) **Research paper on a selected topic (30%)** The paper should relate a topic of interest to the course themes. (15-25 pages double-spaced, including figures, tables, and references). The paper may be on the same topic as one of the presentations, and a “paper abstract” is to be submitted by March 20th (25% of grade), so that a response can be provided by March 27 (or earlier). The paper will be due on April 24. *An option is to frame this paper as the introduction to a research project, providing background and introducing a research question and approach to investigating it.*
- v) **Participation (10%)** Full attendance will be required to receive full marks. If there is a session you must miss, please send a note and this will be taken into consideration.

Summary of Modules

- A. Framework for understanding global health and human security (weeks 1, 2)
- B. Global change, burden of disease and capacity (weeks 3, 4, 6)
- C. Conflict and health (weeks 7, 8)
- D. Global Governance (week 5, 9, 10)
- E. Wrap-up (week 11)

Reading materials

- Sara Davies *Global Politics of Health* – Polity Press
- A CD with article readings will be provided for each student at 1st session.
- *Global Health Watch (GHW)– 4*
 - Individual chapters are available at <http://www.ghwatch.org/node/45484>

SCHEDULE OVERVIEW

date	#	topic	speaker
Jan. 9	A1 A1a	CHALLENGES OF GLOBAL HEALTH & HUMAN SECURITY	Dr. JERRY SPIEGEL, UBC Outline of course; Basic concepts & Frameworks
		What are the main challenges that characterize global health in 2016? Who are the key actors? Where does responsibility for “health security” lie? How does this fit with views of national security and human security?	
		○ SET WORLD CAFE SCHEDULE ○	
Jan 16	A2	FOREIGN POLICY & PARTNERSHIPS THROUGH A GLOBAL HEALTH LENS A look at different approaches in the name of security & health	Dr. JERRY SPIEGEL & ANNALEE YASSI, UBC
	○	How can global health capacities be strengthened? How does sovereignty fit in a globalized world? What partnerships can make a difference? What principles should be considered?	
Jan. 23	B3	HIV/ AIDS SCIENCE & SECURITY A look at global health challenges & why framing matters	Dr. DAVID MOORE SPPH &; <i>BC Centre for Excellence in HIV/AIDS</i>
	○	What are the implications of framing HIV/AIDS as a “security” issue? How do science and policy interact?	
Jan. 30	B4	POVERTY, DISEASE BURDEN & HEALTH SYSTEMS A look at the social determination of health	Dr. ANGELI RAWAT / PRINCE ADU, UBC
	○	Do “vertical” aid interventions necessarily improve health systems? How can health systems & prevention be strengthened?	
Feb 6	D5	IS GLOBAL GOVERNANCE UP TO THE CHALLENGE? GLOBAL HEALTH DIPLOMACY AMID CHANGE a critical look at how governance crises are being addressed	Dr. PAUL GULLY, SPPH (formerly Health Canada)
	○	Are we adequately strengthening capacities for addressing global health challenges and opportunities such as Ebola?	
		◆ SET PRESENTATION SCHEDULE ◆	
Feb 13 Holiday – No Class Feb 20 – BREAK - No Class			
Feb 27	B6	GROWTH AND HEALTH- Worker & Environmental Health a look at problems of growth and globalization / China	CATHY WALKER <i>trade union health and safety expert</i>
	◆	Does increased prosperity ensure improved health?	
Feb 27		◆ SUBMIT PRESENTATION ABSTRACT ◆	
Mr. 6 tbc	C7	WAR, PUBLIC HEALTH & HUMANITARIAN AID a look at how lack of physical safety & security affects health	Dr. MAUREEN MAYHEW, UBC
	◆	Can humanitarian aid be separated from the “national” interests of “donor” countries? If so, how?	
Mrh 13	C8	CONFLICT & HEALTH: PREPAREDNESS/ BIO-SECURITY a look at how global health & human security is being addressed	Dr. BONNIE HENRY SPPH & <i>Deputy Provincial Health Officer -BC Ministry of Health</i>
	◆	How have “security” priorities since 2001 helped or hindered global health and human security?	
Mr. 20	D9	THE CHALLENGE OF CLIMATE CHANGE A look at an unconventional emerging health threat	Dr. TIM TAKARO, Simon Fraser University
	◆	Are we now approaching climate change as a human security issue?	
Mr. 20		■ SUBMIT PAPER ABSTRACT ■	
Mr 27 tbc	D10	“MAN-MADE” EPIDEMICS and Trade/Economic Policy a look at challenges of non-communicable disease and trade	Dr. JOHN CALVERT, Simon Fraser University
	◆	Has globalization been a vector for promoting health security or insecurity?	
Apr 3	E11	WRAP-UP / final presentations (if necessary)	Dr. JERRY SPIEGEL, UBC
	◆	What does the concept of human security add to our understanding of trends in global health?	
Apr 24	■	■ SUBMIT PAPER ■	

SYMBOLS: ○ World Café Sessions ◆ Student Presentations

A. INTRODUCTION & ORIENTATION TO CORE THEMES

- weeks 1 & 2

This module introduces the core concepts underlying a global health perspective of human security (and vice versa) – and explains the organization and expectations of the course.

Key foundational concepts are introduced in historical context, with particular attention to relationships with foreign policy and ethical concerns. This orientation is intended to provide a basis for assessing and interpreting the themes that follow with the contributions of guest speaker perspective

This module will consist of three sessions led by the course instructor:

Jan. 9 (2 parts) **Spiegel** – Introduction and core concepts: Global Health Narratives

Planned as an extended session to make up for one of the classes lost due to holidays

Jan. 16 **Spiegel & Yassi**– Relationships with foreign policy – and the potentiality of partnerships

Jan. 9a	A1	Challenges of Global Health....	Dr. JERRY SPIEGEL Outline of course / Intro; Basic concepts & Frameworks
		What are the main challenges that characterize global health in 2017? Who are the key actors?	

The opening session introduces basic concepts and background – and explores the significance of different “framings” of global health. Emphasis will be on the relationship between global forces, health and human security and the conception of “global health” itself. Various analytical tools and frameworks will be presented:

- Social determinants/determination of population health;
- "Upstream" factors influencing global health
- Applying an ecosystem framework to complexity: in which to understand the driving forces, pressures, states, exposures, effects and actions that can be taken.
- Basic epidemiological concepts will be introduced to facilitate a critical appraisal of the literature.

This session also provides an occasion for discussing the organization of the course and student obligations. **Students will briefly introduce themselves (program, background & experience, special interests / objectives).**

An exercise introducing and illustrating the “World Cafe” method will be conducted.

Readings (Required in Bold; Priorities shaded): (41 pp)

- ❖ **Beaglehole R, Bonita R.** (2010) **What is Global Health?** *Global Health Action*, 3: 5142 - DOI: 10.3402/gha.v3i0.5142 <http://www.globalhealthaction.net/index.php/gha/article/view/5142> 1-2.
- ❖ **Anderson, K., Raza, D., & Philpott, J.** (2014). **Exploring the Hidden Curriculum of Global Health.** *Social Medicine* 8, no. 3 (2014): 143-146.
- ❖ **Garrett L.** (2007) **The challenge of global health.** *Foreign Affairs*;86(1):14-38. <http://www.foreignaffairs.org/20070101faessay86103/laurie-garrett/the-challenge-of-global-health.html?mode=print>
- ❖ **Varmus, H., R. Klausner, E. Zerhouni, and T. Acharya.** (2003) **Grand challenges in global health.** *Science* 302, no. 5644: 398-399.
- ❖ **Global Health Watch 4 Introduction** pp. 1-7. http://www.ghwatch.org/sites/www.ghwatch.org/files/Introduction_0.pdf
- ❖ **AND LOOK AT THIS HANS ROSLING VIDEO!:** http://www.youtube.com/watch?v=jbkSRLYSojo&feature=player_embedded
- An additional “Ted Talk” video is at: <http://www.youtube.com/watch?v=hVimVzgtD6w>

Additional Readings

- Koplan JP, Bond TC, Merson MH, et al, (2009) Towards a common definition of global health. *Lancet* **373**: 1993–95.
- Labonte R. and Spiegel, J. "Setting Global Health Priorities." *BMJ* 2003;326:722-723
<http://bmj.bmjournals.com/cgi/reprint/326/7392/722>
- Ollila E: Global health priorities – priorities of the wealthy? *Globalization and Health* 2005, 1(1) <http://www.globalizationandhealth.com/content/1/1/6>
- Jamison, D. T., Summers, L. H., Alleyne, G., Arrow, K. J., Berkley, S., Binagwaho, A., ... & Ghosh, G. (2013). Global health 2035: a world converging within a generation. *The Lancet*, 382(9908), 1898-1955.
- Chiriboga, David, Paulo Buss, Anne-Emanuelle Birn, Juan Garay, Carles Muntaner, and Laura Nervi. "Investing in health." *The Lancet* 383, no. 9921 (2014): 949.

Jan 9b	A1a & Human Security	Dr. JERRY SPIEGEL <i>SPPH & Liu Institute</i>
		Where does responsibility for “health security” lie? How does this fit with views of “national security” & “human security”?	

The second part of session 1 will *introduce* how health and human security have been addressed in the context of “International Relations”, where health is one of many values that have to be addressed. This theme will then be examined in greater depth in session A2.

Follow-up Readings (Required in Bold; Priorities shaded): (57pp)

- ❖ **Davies, *Global Politics of Health*** Chapters 1 & 2; pp. 9-61.
- ❖ ***Global Health Watch 3*** D5 Health and global security: reasons for concern pp. 289-295
http://www.ghwatch.org/sites/www.ghwatch.org/files/D5_0.pdf

Additional Readings

- Fidler DP. (2005) *Health and Foreign Policy: A Conceptual Overview*. London, England: The Nuffield Trust; (<http://www.nuffieldtrust.org.uk/talks/health-and-foreign-policy-conceptual-overview>).
- *WHR 2007* ch. 2 (Threats to public health security) http://www.who.int/whr/2007/07_chap2_en.pdf
- *Responsibility to Protect. Report of the International Commission on Intervention and State Sovereignty* (December 2001) <http://www.dfait-maeci.gc.ca/iciss-ciise/pdf/Commission-Report.pdf> - Canadian position at http://www.dfait-maeci.gc.ca/canada_un/HLP_submission-en.asp
- King, Gary & Murray, Christopher “Rethinking Human Security”, *Political Science Quarterly* 116(4), 2002, pp. 585-610
- McInnes, C. and Lee, K. (2006) Health, security and foreign policy. *Review of International Studies*, 32, 5–23.
- Commission on Human Security, Chapter 6: Better health for human security, Ch.6
<http://www.humansecurity-chs.org/finalreport/index.html>

Jan. 16	A2	FOREIGN POLICY & PARTNERSHIPS THROUGH A GLOBAL HEALTH LENS A look at different approaches in the name of security & health	Dr. JERRY SPIEGEL <i>SPPH & Liu Institute</i> Dr. ANNALEE YASSI <i>SPPH</i>
		How can global health capacities be strengthened? How does sovereignty fit in a globalized world? What partnerships can make a difference? What principles should be considered?	

Readings (Required in Bold; Priorities shaded): (44 pp)

- ❖ **Spiegel JM and Huish RL Canadian foreign aid for global health: Human security opportunity lost.** *Canadian Foreign Policy* 2010; 15(3): 60-84. [and *CFP* 2012; 18(2): 244-246]
- ❖ **Schmidt, H., Gostin, L. O., & Emanuel, E. J. (2015). Public health, universal health coverage, and Sustainable Development Goals: can they coexist?** *The Lancet*, 386(9996), 928-930.
- ❖ **Fehling, M., Nelson, B. D., & Venkatapuram, S. (2013).** Limitations of the Millennium Development Goals: a literature review. *Global Public Health*, 8:10, 1109-1122, DOI: [10.1080/17441692.2013.845676](https://doi.org/10.1080/17441692.2013.845676)
- ❖ **Maciocco, Gaviano & Stefanini, Angelo. (2007).** From Alma-Ata to the Global Fund: the history of international health policy. *Revista Brasileira de Saúde Materno Infantil*. 7(4), 479 – 486.

ALSO: Students should be prepared to introduce a media representation of a “global health” issue (news clip / profile of a broadcast / other representation summary) with their comment on its significance.

Additional Readings

- Sustainable Development Knowledge Platform *Sustainable Development Goals*
<https://sustainabledevelopment.un.org/sdgs>
- Grand Challenges Canada. January 2011 *The Grand Challenges Approach*.
<http://www.grandchallenges.ca/wp-content/uploads/2011/02/thegrandchallengesapproach.pdf>
- Labonte R, Gagnon M: Framing health and foreign policy: lessons for global health diplomacy. *Globalization and Health* 2010, 6:14.
- *Canadian Foreign Policy* 2010 15(3): Global Health issue: various articles
- Huish RL, Spiegel JM Integrating Health and Human Security into Foreign Policy: Cuba's Surprising Success. *The International Journal of Cuban Studies*, Volume 1, Issue 1, June 2008
http://www.cubastudiesjournal.org/londonmet/library/h79048_3.pdf
- Dodd R and Cassels A. Health, development and the Millennium Development Goals 2006 *Annals of Tropical Medicine and Parasitology*, Volume 100(5-6), 379-387.
- Pogge T. The First UN Millennium Development Goal: A Cause for Celebration? *Journal of Human Development*, volume 5, number 3 (November 2004) pp 317-338.
- Amin, S. "The Millennium Development Goals: A Critique from the South." *Monthly Review* 57, no. 10 (2006): 1-15.
- Spiegel JM, Yassi A. Lessons from the margins of globalization: Appreciating the Cuban health paradox. *Journal of Public Health Policy*. 2004;25(1):96-121.
http://www.jphp.umb.edu/documents/204-020_Health_25_1_spiegel.pdf
- Yassi A, Breilh J, Dharamsi S, Lockhart K, Spiegel JM. The Ethics of Ethics Reviews in Global Health Research: Case studies applying a new paradigm. *Journal of Academic Ethics*. 2013. DOI 10.1007/s10805-013-9182-y
- Dharamsi et al (2013) Saving Africa: A Critical Study of Advocacy and Outreach Initiatives by University Students. *Journal of Global Citizenship & Equity Education* 3(1): 53-67.

B. GLOBAL BURDEN OF DISEASE & CAPACITIES TO PROVIDE HEALTH SECURITY

- weeks 3, 4, 6

This module explores a range of specific disease burden areas, considering them in the context of their implications for human security and capacities for effectively addressing them to provide health security. It includes an orientation to the challenges of HIV/AIDS, infectious diseases (etiology, natural and anthropogenic factors for their origin and spread, persistence, and resistance in human populations, and attempts at eradication), tobacco, occupational and environmental disease as well as considerations of what the example provided by Cuba in producing excellent health results suggests.

This module will consist of three sessions:

Jan. 23 **Dr. David Moore** – BC Centre of Excellence for HIV / AIDS, SPPH

Jan. 30 **Dr. Angeli Rawat and Prince Adu** –SPPH, UBC

Feb. 27 **Cathy Walker** - Canadian Auto Workers health and safety expert

Jan 23	B4	HIV/ AIDS – Science & Security A look at global health challenges & why framing matters	Dr. DAVID MOORE SPPH & BC Centre for Excellence in HIV/AIDS
		What are the implications of framing HIV/AIDS as a “security” issue? How do science and policy interact?	

Readings (Required in Bold; Priorities shaded): (34 pp)

- ❖ **Brandt, A.M. (2013) How AIDS Invented Global Health.** *New England Journal of Medicine* 368(23): 2149-2152.
- ❖ **Gonsalves, G., & Staley, P. (2014). Panic, Paranoia, and Public Health—The AIDS Epidemic's Lessons for Ebola.** *New England Journal of Medicine.*
<http://www.nejm.org/doi/full/10.1056/NEJMp1413425> pp.1-3.
- ❖ **Davies, *Global Politics of Health* Chapter 3;** pp. 62-86
- ❖ **Yu, D, Souteyrand, Y, Banda, MA et al. (2008) Investment in HIV/AIDS programs: Does it help strengthen health systems in developing countries?** *Globalization and Health* 2008, 4:8
- ❖ **Lewis, Stephen *Race against Time. (chapter 1)*** Anansi Press (pages in Google books) pp 1-33.
http://books.google.ca/books?id=Ej6d3b73a0IC&printsec=frontcover&dq=race+against+time+stephen+lewis+google+books&hl=en&sa=X&ei=MA3vUKmMPM_ojKiwYCADQ&ved=0CDkQ6AEwAA#v=onepage&q=race%20against%20time%20stephen%20lewis%20google%20books&f=false

Additional Readings

- Ostergard, R L. 2002. Politics in the Hot Zone: AIDS and the Threat to Africa’s Security. *Third World Quarterly* Vol. 23 No. 2: 333-350
- Spiegel PB. 2004 HIV/AIDS among conflict-affected and displaced populations: dispelling myths and taking action. *Disasters*; **28**: 322–39.
- Buve A, Bishikwabo-Nsarhaza K and Mutangadura G (2002), The spread and effect of HIV-1 infection in sub-Saharan Africa, *Lancet* **359**, pp. 2011–2017.
http://www.sciencedirect.com/science?_ob=MIimg&_imagekey=B6T1B-462BKJ8-Y-9&_cdi=4886&_user=1022551&_orig=search&_coverDate=06%2F08%2F2002&_sk=996400677&view=c&wchp=dGLbVzz-zSkWb&md5=0d67a17f724431744e96c1c157779c&ie=/sdarticle.pdf
- Anema, A., M. Joffres, E. Mills and P. Spiegel (2008), “Widespread rape does not directly appear to increase the overall HIV prevalence in conflict-affected countries: So now what?” *Emerging Themes in Epidemiology*, 5(11).
- Hunter M (2007) The changing political economy of sex in South Africa: the significance of unemployment and inequalities to the scale of the AIDS pandemic, *Social Science & Medicine* **64** (3), pp. 689–700.
- International Crisis Group (ICG) HIV /AIDS as a security issue 19 June 2001
http://www.crisisweb.org/library/documents/report_archive/A400321_19062001.pdf
- Crane, J. T. (2010). Unequal 'Partners'. *AIDS, Academia, and the Rise of Global Health. Behemoth*, 3(3), 78-97.

Jan 30	B5	POVERTY, DISEASE BURDEN & HEALTH SYSTEMS A look at the social determination of health	ANGELI RAWAT & PRINCE ADU, SPPH
		Do “vertical” aid interventions necessarily improve health systems? How can health systems & prevention be strengthened?	

Readings (Required in Bold; Priorities shaded): (40 pp)

- ❖ **Farmer PE, Nizeye B, Stulac S, Keshavjee S Structural Violence and Clinical Medicine.** *PLoS Med* 2006 3(10): <http://medicine.plosjournals.org/perlserv?request=get-document&doi=10.1371/journal.pmed.0030449> 1686-91
- ❖ **Spiegel JM et al. Which new approaches to tackling neglected tropical diseases show promise?** *PLoS Medicine*. 2010; 7(5): 1-5
- ❖ **Frenk J Reinventing primary health care: the need for systems integration.** *The Lancet* Vol 374. July 11, 2009. Pp.170-172
- ❖ **Travis, Phyllida, et al. Overcoming health-systems constraints to achieve the Millennium Development Goals.** *The Lancet* 364, no. 9437 (2004): 900-906.
- ❖ **Ooms, G, Van Damme, W, Baker, BK et al. (2008) The 'diagonal' approach to Global Fund financing: a cure for the broader malaise of health systems?** *Globalization and Health* 2008, 4:8
- ❖ **Davies, Global Politics of Health** Chapter 6; pp. 133-156
- ❖ **Stilwell B, Diallo K, Zurn P, Dal Poz MR, Adams O, Buchan J. Developing evidence-based ethical policies on the migration of health workers: conceptual and practical challenges.** *Human Resources for Health* 2003, 1:8.

Additional Readings

- Anyangwe, S. C., & Mtonga, C. (2007). Inequities in the global health workforce: the greatest impediment to health in sub-Saharan Africa. *Intl Journal of Environmental Research and Public Health*, 4(2), 93-100.
- Farmer, Paul - Diary, London Review of Books <http://www.lrb.co.uk/v36/n20/paul-farmer/diary>
- Farmer, Paul ‘Social Inequalities and Emerging Infectious Diseases’, *Emerging Infectious Diseases* Vol. 2, No. 4 Oct.-Dec. 1996 <http://www.cdc.gov/ncidod/eid/vol2no4/farmer.htm>
- Backman G, Hunt P, Rajat K *et al.* (2008) “Health systems and the right to health: an assessment of 194 countries” *The Lancet* December 13, 2008 *Lancet Dec. 13, 2008*.
- Sen A “Health as a human right” *The Lancet Dec. 13, 2008*.
- Kruk ME, Porignon D, Rockers PC, Van Lerberghe, W The contribution of primary care to health and health systems in low- and middle-income countries: A critical review of major primary care initiatives. *Social Science & Medicine* xxx (2010) 1–8.
- Yassi A, Bryce EA, Spiegel JM. Assuming our global responsibility: Improving working conditions for healthcare workers globally. *Open Medicine*. 2009; Sept 15; 3(3): 174-177.

Feb. 27	B6	GROWTH AND HEALTH Worker and Environmental Health a look at problems of growth and globalization / China	CATHY WALKER trade union health and safety expert
		Does increased prosperity ensure improved health ?	

Readings (Required in Bold; Priorities shaded): (15 pp)

- ❖ **Huang, Y China: The Dark Side of Growth** (2013) <http://yaleglobal.yale.edu/content/china-dark-side-growth>
- ❖ **Szreter S. Rapid economic growth and ‘the four Ds’ of disruption, deprivation, disease and death: public health lessons from nineteenth-century Britain for twenty-first-century China?** *Trop Med Int Health* 1999;4:146–52 <http://www.blackwell-synergy.com/links/doi/10.1046%2Fj.1365-3156.1999.00369.x>
- ❖ Yang, G. et al. (2008). Emergence of chronic non-communicable diseases in China. *The Lancet*, 372(9650), 1697-1705.

Additional Readings

- Huang, Y. (2010). Pursuing health as foreign policy: the case of China. *Indiana Journal of Global Legal Studies*, 17(1), 105-146.
- Wu C, Maurer C, Wang Y, Xue S, Davis DL. Water pollution and human health in China. *Environ Health Perspect*. 1999 Apr;107(4):251–256. <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1566519&blobtype=pdf>

C. CONFLICT AND HEALTH

- weeks 7, 8

This module will explore additional public health challenges in the context of war with a focus on developing countries. Topics include: the effects of war on national or local health systems (infrastructure, human and physical resources); war and mental health; changes in ecology attributed to war; food security; structural adjustment programs in countries affected by war/conflict; physical and psychological trauma experienced by refugee populations; infectious diseases and refugee camp ecology; mass human migrations, and health issues related to immigration; logistical dilemmas: water, food and sanitation; special effects on vulnerable populations (women and children). Case studies in Afghanistan, DRC, Iraq and post Gulf War, Latin America will be used. The specific role of health professionals and others in primary, secondary and tertiary prevention of war and the role of international aid agencies and NGOs in providing essential services to displaced peoples will also be examined, as will health issues for peace-keeping forces and aid personnel.

This module will consist of two sessions:

Mr 6 **Dr. Maureen Mayhew** *SPPH & Family Medicine, UBC*
Mr 13 **Dr. Bonnie Henry** *SPPH & BC Centre for Disease Control*

Mr. 6	C9	WAR, PUBLIC HEALTH & HUMANITARIAN AID a look at how lack of security affects health – and considerations for international efforts	Dr. MAUREEN MAYHEW, UBC
		Can humanitarian aid be separated from the “national” interests of “donor” countries? Is so, how?	

Readings (Required in Bold; Priorities shaded): (39 pp)

- ❖ **Davies, *Global Politics of Health*** Chapter 4; pp. 87-104; Chapter 5; pp. 105-132.
- ❖ **Miller, K. E., & Rasmussen, A. (2010). War exposure, daily stressors, and mental health in conflict and post-conflict settings: bridging the divide between trauma-focused and psychosocial frameworks.** *Social science & medicine*, 70(1), 7-16.
- ❖ **Shetty P (2007) How important is neutrality to humanitarian aid agencies?** *The Lancet*, Volume 370, Issue 9585, Pages 377-378. http://www.sciencedirect.com/science?_ob=MIimg&_imagekey=B6T1B-4PB8KWD-C-1&_cdi=4886&_user=1022551&_orig=browse&_coverDate=08%2F10%2F2007&_sk=996290414&view=c&wchp=dGLzVlz-zSkWA&md5=756447062578bafa406bae05aa15717c&ie=/sdarticle.pdf

Additional Readings

- Levy, B. & Sidel, V. *War and Public Health*. (1997) New York, Oxford University Press esp. The Impact of Military Activities on Civilian Populations. pp. 149-167
- Levy, BS Sidel, V & Foege, WF. *Arms and Public Health: A Global Perspective*, pp. 3-11
- Garfield, R. (2000) The public health impact of sanctions: contrasting responses of Iraq and Cuba. *Middle East Report*, 215, 16–19. (copies to be provided)
- Centre for Human Security, Liu Institute for Global Issues. *Human Security Report 2005 War and Peace in the 21st Century* chapter 4 <http://www.humansecurityreport.info/content/view/28/63/>
- Arya, Neil Peace through health? Manuscript in Charles Webel, Johan Galtung (eds.) *Handbook of Peace and Conflict Studies*
<http://manu.uwaterloo.ca/ers/faculty/narya/peace/documents/AryaPeacethroughHealthWebelGaltungchap24.pdf>

March 13	C7	CONFLICT & HEALTH: PREPAREDNESS/BIO-SECURITY a look at how preparedness priorities are set and implemented	Dr. BONNIE HENRY <i>SPPH</i> & <i>Deputy Provincial Health Officer -BC Ministry of Health</i>
		Have national security priorities since 2001 helped or hindered global health and human security?	

Readings (Required in Bold; Priorities shaded): (34 pp)

- ❖ **Moore, S; Mawji, A; Shiell, A; Noseworthy, T. Public health preparedness: a systems-level approach.** *J Epidemiol Community Health.* 2007;61:282–286.
- ❖ **Global Health Watch 2 D2.3 Security and Health** pp 334-339.
- ❖ Rodier, G., Greenspan, A. L., Hughes, J. M., & Heymann, D. L. (2007). Global Public Health Security. *Emerging Infectious Diseases*, 13(10), 1447–1452. <http://doi.org/10.3201/eid1013.070732>
- ❖ Bond K (2008) Commentary: health security or health diplomacy? Moving beyond semantic analysis to strengthen health systems and global cooperation. *Health Policy & Planning* 23: 376–378. & Aldis W. 2008. Health security as a public health concept: a critical analysis.

Additional Readings

- [UK] Review on Antimicrobial Resistance Antimicrobial Resistance: Tackling a crisis for the health and wealth of nations [2014] 4]. [shttp://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf](http://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf)
- Calain P (2007) From the field side of the binoculars: a different view on global public health surveillance *Health Policy Plan.* January 22: 13-20. <http://heapol.oxfordjournals.org/cgi/content/full/22/1/13>
- Levy, Barry S. and Sidel, Victor. Terrorism and Public Health. (2002) New York, Oxford University Press; Chapters on Biological Weapons & Strengthening Public Health Systems <http://jech.bmj.com/cgi/reprint/61/4/282.pdf>
- Sidel VW, Cohen HW, Gould RM. Good intentions and the road to bioterrorism preparedness. *Am J Public Health* 2001;91(5):716–8. <http://www.ajph.org/cgi/reprint/91/5/716>
- Sidel VW, Levy BS. War, terrorism, and public health. *Journal of Law, Medicine and Ethics* 2003;31:516–23. <http://www3.interscience.wiley.com/cgi-bin/fulltext/118893446/PDFSTART>

D. GLOBAL GOVERNANCE AND GLOBAL CHANGE

- weeks 5, 9, 10

How has global governance met the challenge of health and human security? This will be examined “from above” by looking at trends in how governance has been addressed, and “from below” by examining how public health systems and capacities have fared. We will just include a brief overview of issues with a small case study this year on this topic. Global pressures to be considered include global trade and financial systems as well as environmental impacts resulting from global pressures (e.g. industrialization and chronic disease stemming from industrial pollution and populations living close to mining operations, large factories, power plants, large agricultural operations etc.) and global change (e.g. climate change, ozone depletion, transport of persistent organic pollutants, etc.)

This module will consist of three sessions (introducing general themes initially; then examining specific areas):

Jan 25	Dr. Paul Gully
Mr 20	Dr. Tim Takaro
Mr 27	Dr. John Calvert

Jan 25	D11	IS GLOBAL GOVERNANCE UP TO THE CHALLENGE? GLOBAL HEALTH DIPLOMACY a critical look at how governance crises are being addressed	Dr. PAUL GULLY, <i>SPPH (formerly Health Canada)</i> (was WHO coordinator for Ebola in Sierra Leone)
		Are we adequately strengthening capacities for addressing global health challenges and opportunities such as Ebola?	

Readings (Required in Bold; Priorities shaded): (48 pp)

- ❖ **Heymann, D. L., Chen, L., et al. (2015). Global health security: the wider lessons from the West African Ebola virus disease epidemic. *The Lancet*, 385(9980), 1884-1901.**
- ❖ **Kentikelenis, A., King, L., McKee, M., & Stuckler, D. (2014). The International Monetary Fund and the Ebola outbreak. *The Lancet Global Health*. 2pp**
- ❖ **Garrett, L. (2015). Ebola's Lessons. *Foreign Affairs*, 94(5), 80-107.**
<https://www.foreignaffairs.com/articles/west-africa/2015-08-18/ebola-s-lessons>
- ❖ **Kickbusch I, Silberschmidt G, Buss P. (2007) Global health diplomacy: the need for new perspectives, strategic approaches and skill in global health. *Bull World Health Organ* 85:230-32.**
- ❖ **Kickbusch I, Kökény M (2013) Global health diplomacy: five years on. *M. Bull World Health Organ* 91:159-159A.**

Additional Readings

- ❖ Drager N, Fidler DP. (2007) Foreign Policy, trade and health: at the cutting edge of global health diplomacy. *Bull World Health Organ*;85:162.
- ❖ Ministers of Foreign Affairs of Brazil, France, Indonesia, Norway, Senegal, South Africa, and Thailand. Oslo Ministerial Declaration-global health: pressing foreign policy issue of our time. www.thelancet.com published online April 2, 2007 DOI:10.1016/S0140-6736(07)60498-X. *Lancet* [Lancet] 2007 Apr 21; Vol. 369 (9570), pp. 1373-8.
- ❖ Laurie Garrett – *Foreign Policy* <http://foreignpolicy.com/2014/09/06/we-could-have-stopped-this/>
- ❖ Paul Farmer - London Review of Books <http://www.lrb.co.uk/v36/n20/paul-farmer/diary>
- ❖ Various articles in CD [selection and student gathering of material for discussion in class]

ARTICLES ON PRIVATE INSTITUTIONS AFFECTING GLOBAL HEALTH AGENDAS:

- ❖ **GHW4, “Private sector influence on public health policy” Chapter D3, pp 279-286.**
- ❖ **Davies, *Global Politics of Health* Chapters 7; pp. 157-182.**
- ❖ **Birn AE, Philanthrocapitalism, past and present: The Rockefeller Foundation, the Gates Foundation, and the setting(s) of the international/ global health agenda. *Hypothesis* 2014, 12(1): e8, doi:10.5779/hypothesis. v12i1.229.**
- ❖ **Brown TM, Cueto M, Fee E. (2006) The World Health Organization and the transition from ‘international’ to ‘global’ public health. *Am J Public Health* 96:62–72.**
- ❖ **McCoy D, Kembhavi G, Patel J, Luintel A. The Bill & Melinda Gates Foundation's grant-making programme for global health. *Lancet* 2009;373(9675):1645-53.**

Additional Readings

- Martens J & Seitz (2015) Philanthropic Power and Development. Who shapes the agenda? <https://www.misereor.de/fileadmin/publikationen/study-philanthropic-power-and-development-2015.pdf>
- Stuckler D, Basu S. (2009) The International Monetary Fund's effects on global health: Before and after the 2008 financial crisis. *Int J Health Serv* 39(4):771-81.
- Ruger JP (2011) Global health governance as shared health governance. *J Epidemiol Community Health*.
- Ruger JP (2006) Ethics and governance of global health inequalities. *J Epidemiol Community Health* 60:998–1003
- Labonte R, Schrecker T, Sanders D, Meeus W. (2004) Committed to health for all? How the G7/G8 rate *Soc Sci Med*. 59(8):1661-76.
- Poku, NK & Whiteside A (2002) Global health and the politics of governance: an introduction. *Third World Quarterly* Vol. 23 No. 2: 191-195.

Mr. 20	D8	THE CHALLENGE OF CLIMATE CHANGE A look at an unconventional emerging health threat	Dr. TIM TAKARO, <i>Simon Fraser University</i>
		Are we now approaching climate change as a human security issue?	

Readings (Required in Bold; Priorities shaded): (48 pp)

- ❖ **Bowles, D. C., Butler, C. D., & Morisetti, N. (2015). Climate change, conflict and health.** *Journal of the Royal Society of Medicine*, 108(10), 390-395.
- ❖ **Kelley, C. P., et al. (2015). Climate change in the Fertile Crescent and implications of the recent Syrian drought.** *Proceedings of the National Academy of Sciences*, 112(11), 3241-3246.
- ❖ **Costello A, Abbas M et al (2009) Managing the health effects of climate change.** UCL Institute for Global Health and Lancet Commission. *Lancet* 373:1693–1733
<http://www.consciousclimate.com/pdfs/090516%20Lancet.pdf>

Additional Readings

- Campbell-Lendrum D, Corvalán C, Neira M. Global climate change: implications for international public health policy. *Bull World Health Organ* 2007; **85**: 235–37 <http://www.scielosp.org/pdf/bwho/v85n3/v85n3a20.pdf>
- Barnett J, Adger WN. Climate change, human security and violent conflict. *Political Geography* 2007; **26**: 627–38
- Barnett J. Security and climate change. *Global Environ Change* 2003; **13**: 7–17.
- *Ecosystems and human well-being : health synthesis : a report of the Millennium Ecosystem Assessment*

Mr 27	D10	“MAN-MADE” EPIDEMICS and Trade/Economic Policy a look at challenges of non-communicable disease and trade	Dr. JOHN CALVERT, SFU
		Has globalization been a vector for promoting health security or insecurity?	

Readings (Required in Bold; Priorities shaded): (32 pp)

- ❖ **Calvert J (2014) Presentation on the proposed Trans-Pacific Partnership Agreement, Ottawa: House of Commons Standing Committee on Trade (7pp)**
- ❖ **Friel S et al. (2013). A new generation of trade policy: potential risks to diet-related health from the Trans Pacific Partnership agreement.** *Globalization and health*, 9(1), 46. (7pp)
- ❖ **Davies, *Global Politics of Health* Chapters 7; pp. 157-182.**

Some targeted areas to consider:

- ❖ Collin J, Lee K, Bissell K (2002) The framework convention on tobacco control: the politics of global health governance. *Third World Quarterly* 23: 265–282.
<http://www.tandfonline.com/doi/abs/10.1080/01436590220126630>
- ❖ Cohen-Kohler JC. The morally uncomfortable global drug gap. *Clin Pharmacol Ther* 2007;82:610-14

Additional Readings

- Lee K, Chagas LC, Novotny TE (2010) Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power. *PLoS Med* 7(4).
<http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1000232>
- Roemer R, Taylor A and Lariviere J (2005) Origins of the WHO Framework Convention on Tobacco Control *American Journal of Public Health*, Vol 95(6) 936-938.
- Hunter, DJ, Noncommunicable Diseases, *N Engl J Med* 369;14, 1336-1343
- Beaglehole et al (2011) Priority actions for the non-communicable disease crisis. *The Lancet* 377 (9775): 1438-1447. <http://www.sciencedirect.com/science/article/pii/S0140673611603930>
- Yach, D., & Beaglehole, R. (2004). Globalization of risks for chronic diseases demands global solutions. *Perspectives on Global Development and Technology*, 3(1), 213-233.

- Yach *et al.* (2010) The role and challenges of the food industry in addressing chronic disease *Globalization and Health* 2010, 6:10.
- Daar, A. S. *et al.* (2007). Grand challenges in chronic non-communicable diseases. *Nature*, 450(7169), 494-496.
- Hawkes, C. (2006). Uneven dietary development: linking the policies and processes of globalization with the nutrition transition, obesity and diet-related chronic diseases. *Globalization and health*, 2(1), 4.
- Barnett J, Adger WN. Climate change, human security and violent conflict. *Political Geography* 2007; **26**: 627–38
- Barnett J. Security and climate change. *Global Environ Change* 2003; **13**: 7–17.
- Trouiller P. (2004) Neglected diseases and pharmaceuticals: between deficient market and public health failure. *Lancet*;359:2188-2194.
- Labonte and Schrecker, *Globalization and Health* articles (on CD)
- Cohen, J. C. and Illingworth, P. (2003), The Dilemma of Intellectual Property Rights for Pharmaceuticals: The Tension Between Ensuring Access of the Poor to Medicines and Committing to International Agreements. *Developing World Bioethics*, 3: 27–48.

April 4	E12	WRAP-UP / final presentations	Dr. JERRY SPIEGEL <i>SPPH & Liu Institute for Global Issues</i>
		What does the concept of human security add to our understanding of trends in global health?	

Other materials and sources

For those with no background in epidemiology, the following is recommended as a background reference:

- Neil Pearce *A Short Introduction to Epidemiology* (2nd Edition) Occasional Report Series No 2. Centre for Public Health Research. Massey University Wellington, New Zealand (2005)
<http://csm.lshtm.ac.uk/files/2010/09/A-Short-Introduction-to-Epidemiology-Second-Edition.pdf>

Some general sources on global health issues:

- **PUB-MED:** <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed>
- **Canadian Coalition for Global Health Research** www.ccghr.ca
- **World Health Organization** www.who.org
- **The Lancet:** www.thelancet.com
- **British Medical Journal (BMJ):** www.bmj.com
- **Sustainable Development Knowledge Platform** *Sustainable Development Goals*
<https://sustainabledevelopment.un.org/sdgs>

LISTSERVES:

People's Health Movement – <http://phm.phmovement.org/listinfo.cgi/phm-exchange-phmovement.org>