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

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


- 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

- Ollila E: Global health priorities – priorities of the wealthy? *Globalization and Health* 2005, 1(1) [http://www.globalizationandhealth.com/content/1/1/6](http://www.globalizationandhealth.com/content/1/1/6)

<table>
<thead>
<tr>
<th>Jan 9b</th>
<th>A1a</th>
<th>..... &amp; Human Security</th>
<th>Dr. JERRY SPIEGEL SPPH &amp; Liu Institute</th>
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<td>How does this fit with views of “national security” &amp; “human security”?</td>
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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.

Additional Readings

- King, Gary & Murray, Christopher “Rethinking Human Security”, *Political Science Quarterly* 116(4), 2002, pp. 585-610
How can global health capacities be strengthened? How does sovereignty fit in a globalized world? How 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]

**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**
- *Canadian Foreign Policy* 2010 15(3): Global Health issue: various articles
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:

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<tr>
<th>Date</th>
<th>Speaker(s)</th>
<th>Topic</th>
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<tbody>
<tr>
<td>Jan. 30</td>
<td>Dr. Angeli Rawat and Prince Adu – SPPH, UBC</td>
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<tr>
<td>Feb. 27</td>
<td>Cathy Walker - Canadian Auto Workers health and safety expert</td>
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Readings (Required in Bold; Priorities shaded): (34 pp)

- **Davies, Global Politics of Health** Chapter 3: pp. 62-86
- **Lewis, Stephen Race against Time. (chapter 1)** Anansi Press (pages in Google books) pp 1-33. http://books.google.ca/books?id=Ej6d3b73g0IC&printsec=frontcover&dq=race+against+time+stephen+lewis+google+books&hl=en&sa=X&ei=MA3vUKmMPM_oigKiwYCADQ&ved=0CDkQ6AEwAA#v=onepage&q=race%20against%20time%20stephen%20lewis%20google%20books&f=false

Additional Readings

- 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=MImg&_imagekey=B6T1B-462JK8-Y-9&_cdi=4886&_user=1022551&_orig=search&_coverDate=06%2F08%2F2002&_sk=996400677&view=c&wcd=y&md5=0d6f7vzzz.3sw83b03e0&md5=0d6f7vzzz.3sw83b03e0
Jan 30

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<tr>
<th>B5</th>
<th>POVERTY, DISEASE BURDEN &amp; HEALTH SYSTEMS</th>
<th>ANGELI RAWAT &amp; PRINCE ADU, SPPH</th>
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<td></td>
<td>A look at the social determination of health</td>
<td>Do “vertical” aid interventions necessarily improve health systems? How can health systems &amp; prevention be strengthened?</td>
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</table>

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

- Davies, *Global Politics of Health* Chapter 6: pp. 133-156

Additional Readings

- Farmer, Paul - Diary, London Review of Books http://www.lrb.co.uk/v36/n20/paul-farmer/diary

Feb. 27

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<tr>
<th>B6</th>
<th>GROWTH AND HEALTH Worker and Environmental Health</th>
<th>CATHY WALKER trade union health and safety expert</th>
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<td>a look at problems of growth and globalization / China</td>
<td>Does increased prosperity ensure improved health?</td>
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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

Additional Readings

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:

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<tr>
<th>Time</th>
<th>Instructor</th>
<th>Affiliation</th>
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<tr>
<td>Mr 6</td>
<td>Dr. Maureen Mayhew</td>
<td>SPPH &amp; Family Medicine, UBC</td>
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<td>Mr 13</td>
<td>Dr. Bonnie Henry</td>
<td>SPPH &amp; BC Centre for Disease Control</td>
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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=MImg&_imagekey=B6T1B-4PB8KWDC-1&_cdi=4886&_user=1022551&_orig=browse&_coverDate=08%2F10%2F2007&_sk=996290414&view=c&wpchp=dGLVzVlt- zSkWA&md5=756447062578bafa406b05aa15717c&ie=/sdarticle.pdf](http://www.sciencedirect.com/science?_ob=MImg&_imagekey=B6T1B-4PB8KWDC-1&_cdi=4886&_user=1022551&_orig=browse&_coverDate=08%2F10%2F2007&_sk=996290414&view=c&wpchp=dGLVzVlt-zSkWA&md5=756447062578bafa406b05aa15717c&ie=/sdarticle.pdf)

Additional Readings

- **Levy, BS Sidel, V & Foeg, WF.** *Arms and Public Health: A Global Perspective*, pp. 3-11
March 13  C7  CONFLICT & HEALTH: PREPAREDNESS/BIO-SECURITY  
Dr. BONNIE HENRY  SPPH & Deputy Provincial Health Officer -BC Ministry of Health

Have national security priorities since 2001 helped or hindered global health and human security?

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

- **Global Health Watch 2** D2.3 Security and Health pp 334-339.

Additional Readings


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
**IS GLOBAL GOVERNANCE UP TO THE CHALLENGE?**
**GLOBAL HEALTH DIPLOMACY**
a critical look at how governance crises are being addressed

Are we adequately strengthening capacities for addressing global health challenges and opportunities such as Ebola?

Dr. PAUL GULLY, SPPH (formerly Health Canada)
(was WHO coordinator for Ebola in Sierra Leone)

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

- **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.
- **Laurie Garrett – Foreign Policy** [http://foreignpolicy.com/2014/09/06/we-could-have-stopped-this/](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](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:**

- **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. v121.229.

**Additional Readings**

Readings (Required in Bold; Priorities shaded) [48 pp]


Additional Readings

- Ecosystems and human well-being : health synthesis : a report of the Millennium Ecosystem Assessment

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)
- **Davies, Global Politics of Health Chapters 7; pp. 157-182.**

Some targeted areas to consider:


Additional Readings


Labonte and Schrecker, *Globalization and Health* articles (on CD)


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**April 4**

**WRAP-UP / final presentations**

Dr. JERRY SPIEGEL SPPH & Liu Institute for Global Issues

What does the concept of human security add to our understanding of trends in global health?

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**Other materials and sources**

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

  

Some general sources on global health issues:

- **Canadian Coalition for Global Health Research**: [www.ccghr.ca](http://www.ccghr.ca)
- **World Health Organization**: [www.who.org](http://www.who.org)
- **The Lancet**: [www.thelancet.com](http://www.thelancet.com)
- **British Medical Journal (BMJ)**: [www.bmj.com](http://www.bmj.com)

**Sustainable Development Knowledge Platform** *Sustainable Development Goals* [https://sustainabledevelopment.un.org/sdgs](https://sustainabledevelopment.un.org/sdgs)

**LISTSERVES:**