

Master of Arts in Transformational Urban Leadership

The aim of the MA in Transformational Urban Leadership is to increase the capacity of emergent leaders among the urban poor, with wisdom, knowledge, character and skill across the full range of leadership dynamics of urban poor movements.



[Photo Credit: Maryada Vallet, with No More Deaths & Cruz Roja, Mexico]

TUL650: Primary Health Care (3 units)
Exploring public health issues & health care services in urban slums

Coursewriters: The following have contributed to the course development: Maryada Vallet, MPH; Richard Slimbach, PhD; Viv Grigg, PhD; Alicia Banas, MPH

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Professor, APU MATUL: Maryada Vallet, MPH, Email: mvallet@apu.edu, Skype: voilavallet, For urgent matters, cell # 001.520.991.9265 (MST)

I. Course Description

This course is an exploration of the public health challenges facing the Church and local NGOs within slum communities, along with innovative, community-based responses. Topics addressed include environmental health, maternal and child health, and chronic health conditions (among others) prevalent in urban slums. Students serve as mentored interns with a health organization in the community where they live or work.

| Expanded Course Description

In major urban centers across the globe, slums are evolving from informal squatter communities consisting mostly of wooden shacks or scrap material and gravel streets to communities with houses of durable material, paved streets, potable water kiosks, improved sanitation facilities, household electricity, and nearby schools. Much of this infrastructural work and services that are so crucial to community health are being carried out through concerned individuals organized through various types of community associations and other organizations, including churches.

But of all the basic human services increasingly available to slum dwellers, perhaps the most challenging is that of health service. By definition, health service requires persons with specialized skills and an infrastructure that delivers specialized care (i.e. preventative health education, diagnostic and laboratory services, hospitalization and medication). Few, if any, of these services can be provided or created solely by the slum dwellers themselves. Consequently, they depend upon volunteer groups, nongovernmental organizations (NGOs), and fee-for-service private clinics and pharmacies (usually run by unlicensed or poorly trained professionals or even nonprofessionals).

The majority of these service providers exist in the formal sector *outside* the slum, which is why so little is known of the magnitude and distribution of health problems among the world's slum-dwellers. What *is* known is that slums and shantytowns comprise a social cluster that engenders a distinct set of health challenges that are impacted by the environmental, socio-political and cultural context. Also, chronic non-communicable (i.e. hypertension, diabetes, obesity or malnutrition, depression) and communicable diseases (tuberculosis (TB), HIV, and cholera among other infections) are widespread. Formal health practitioners see and must manage the *complications* of these problems when they manifest as stroke, congestive heart failure, kidney failure, suicide, multi-drug resistant TB and AIDS.

This course addresses what many experts predict will be a certain and unprecedented *dual epidemic* of communicable and non-communicable diseases on the rise among burgeoning slum populations worldwide. Advances in science and technology are securing better health and longer lives for a small, elite fraction of the world's population. Meanwhile slum children die of diarrhea for want of clean water or food, adult slum dwellers die of AIDS for want of affordable medicines, and all are cut off from the political, cultural and economic resources that could help them to create their own health and well-being.

III Course Rationale

"For I will restore you to health, and I will heal you of your wounds, declares the Lord, because they have called you an outcast, saying: It is Zion, no one cares for her." Jeremiah 30:17

In God's proclamation to Jeremiah, physical healing accompanied the promise of freedom from captivity and of spiritual reconnection. Jesus enacts this promise by repeatedly healing the sick and approaching the ill outcasts of society, even on the Sabbath. It is clear that God recognizes the importance of a ministry that holistically addresses health issues of marginalized people as part of a restorative mission. This course is built on the premise of a God of creation who wishes wholism for all- spiritual, physical and social.

This course is also designed to promote the "Transformational Conversations" described by Dr. Grigg. This framework for faith praxis begins with entrance stories (personal health experience and the internship), and through the Community Health Project, prompts students to listen to the emerging urban health issues and

healthcare approaches, then reflecting on the response of the church (and one's own faith formation) in contributing to health transformation. In the end, reflecting on the question of, what would it take for an urban health revival in my community?

The goals are: (1) to comprehend slum health problems in their economic, environmental, social and political context, (2) to consider the catalytic role of churches and local organizations implementing effective and innovative PHC programs, and (3) To associate public health with the holistic message of salvation of all beings and creation.

The course includes (a) weekly student and faculty interaction through online forums and group calls, introducing key ideas and frameworks for exploring primary health care in urban slums (40 hours), accompanied by (b) self-directed project work—reading, observation, interviewing, research, etc. (40 hours)—that is completed in conjunction with (c) practical training within a community health organization (40 hours). Course requirements total 120 hours of "invested learning" (2:1 ratio of out-of-class workload to in-class interaction).

The course is organized around four projects that build upon each other in addition to online discussion,* linked to Student Learning Outcomes (SLO) in the next section:

Online Discussion with weekly participation through group calls and forum threaded discussions, providing time for content review, experiential exchange and reflection. Students are expected to prepare for discussions and in some instances present course content to the cohort. (SLO: 1.1, 2.1)

- 1. <u>Internship</u> with a community-based health organization providing primary health care services to slum populations, with weekly guidance and evaluations provided by a supervisor. This experience informs the student's health topic focus of the course and final projects. (SLO: 1.1, 3.1)
- 2. <u>Community Health Ecology Project</u> that includes observational research and asset mapping of the relationships between environmental, social and political determinants of health in the local slum context (Note: in some locations a similar project organized through a local health course will substitute for this project, to be determined by APU faculty). (SLO: 1.1, 1.2)
- 3. <u>Community Health Project (CHP) Data Collection & Analysis</u> involves collecting primary (interviews) and secondary (national health statistics and database research) data and using mixed methods research for critical analysis and discussion of the findings on a specific health issue for a target population (as agreed upon through the internship). (SLO: 1.3, 3.1, 3.2)
- 4. <u>CHP Community Reportback & Presentation</u> that develops a handover tool and appropriately presents the CHP key findings to the internship organization and community stakeholders. A summary presentation is also provided to the course cohort via Skype. (SLO: 1.3, 3.1)
- *Note: See expanded Project Descriptions & Discussion Topics documents for full guidance on project development and course expectations.

IV. Student Learning Outcomes (SLO)

By the end of this course students will fulfill the following outcomes:

- 1. Cognitive (HEAD): Academic and analytic growth (40%)
 - 1.1 Identify major health issues among the urban poor.

- 1.2 Articulate the impact of multi-dimensional factors (social, political, spiritual/religious, environmental, etc.) on health.
- 1.3 Critically analyze and discuss one health issue experienced by residents in the student's host (slum) community using mixed methods research and analysis.

2. Affective (HEART): Theological input (20%)

2.1 Embrace the role of health promotion and justice for one's faith and in the life of Christian communities. Gain a basic understanding of the church's historic role in health ministries.

3. Practice (HANDS): Local knowledge and action (40%)

- 3.1 Apply theoretical knowledge to experiences with the internship in order to understand the challenges and innovations of health care in slum communities.
- 3.2 Conduct community-based participatory action research, collecting primary and secondary data for a health topic; then, presenting the findings back to the community stakeholders.

V. Required & Recommended Course Materials

The materials appearing below for purchase and in the Course Bibliography represent some of the best sources addressing primary health care and public health issues within urban and resource-poor communities. Students are also encouraged to seek out and utilize at least five local/regional reference materials in order to optimize the cultural relevance of the learning experience. Please note that while only two texts are required for purchase (and others recommended) to reduce your costs, the majority of required reading will be available for download on the course website and through online web pages. Please see Course Bibliography (Section VIII) for the complete list of required reading, more reference material and online resources. Required materials are marked with an asterix, others recommended.

- *Farmer, Paul. 2004. Pathologies of Power: Health, Human Rights and the New War on the Poor. California Series in Public Anthropology, Berkeley, CA. (Estimated cost: Amazon: \$12, Kindle: \$15) Note: any book by Paul Farmer that you can get your hands on is well worth the read, such as Infections and Inequalities (2001), Partner to the Poor (2010), Reimagining Global Health (2013), In the Company of the Poor (2013), and his award-winning biography Mountains Beyond Mountains (2009, new edition, Tracy Kidder).
- *Minkler, Meredith. 2012. Community Organizing and Community Building for Health and Welfare, 3rd edition. Rutgers University Press, New Brunswick, NJ. (Estimated cost: Amazon: \$25, Kindle: \$15)
- Evans, Abigail Rian. 1999. *The Healing Church: Practical Programs for Health Ministries*. United Church Press, Cleveland, Ohio. (Amazon \$17, No Kindle Edition)
- Khan, O.A. & Pappas, G. 2011. Megacities & Global Health. American Public Health Association, Washington, DC. (Amazon: \$60, No Kindle Edition)
- Swartley, W.M. 2012. Health, Healing and the Church's Mission. Inter Varsity Press Academic, Downers Grove, IL. (Amazon: \$15, Kindle: \$10)
- Werner, D. and Bower, B. 2012. Helping Health Workers Learn. Hesperian Health Guides, Berkeley, CA.

(Access entire text at http://hesperian.org/books-and-resources/ or purchase hard copy for \$20)

Note: *any* Hesperian Health Guide is extremely practical and helpful and all have been recently updated in 2012, such as the world renowned *Where There is No Doctor*, the companion *Where Women Have No Doctor*, and *A Community Guide to Environmental Health*.

VI. Course Calendar

The course is designed around your experiences of working with a mentor/supervisor in a community-based health organization among the urban poor and reflecting on the lessons learned.

The instructed learning component of the course will utilize weekly online discussions, including the APU Sakai forum threaded discussions (approximately 1 hour/week) and group Skype calls/discussions (1.5 hours/week). The online discussions will be guided by the instructor, including introductions of new health topics and concepts, processing of internship experiences, faith & health reflections and exchange between the cohort on local health issues and solutions. The course will focus on both an overview of urban health issues and important public health concepts, and the participatory research focused on a critical health topic in the student's slum community. Most of the course is dependent on the student taking responsibility to do independent reflection, research and writing, utilizing both experience and local/global health literature in order to accomplish the course learning outcomes.

The course is scheduled around the online discussions and four major projects. (See expanded Project Descriptions and Discussion Topics documents for explanation of each assignment in detail, go to Sakai course page > Resources > Course Documents). The course schedule, topics, evaluation and assignments may be altered at the instructor's discretion.

Course Schedule	Course Content	Readings & Assignments (completed by end of week, Sunday: 11:59pm, unless otherwise noted)
	TUL650: Primary Health C	are in Urban Slums
Week 1	Introduction to Urban Health Course introduction and overview Definitions of health Impacts of global/urban-ization Review of relevant course terminology Health actors/systems in urban areas Personal health reflections (entrance stories)	Reading: Text: Farmer (2004): Chapter 9; Minkler (2012): Chapters 2, 6 & 7 Online: See Course Bibliography Sakai: Welcome Letter, Syllabus, Project Descriptions, Discussion Topics docs, Rossi and Green Glossaries, Khan (2011): Chapter 12, and multi-media resources Assignments: Identify and contact potential internship sites and order/ download course materials. Forum Threaded Discussion (FTD) #1 on Sakai: Personal Health Reflection, original post by end of Week 1. Skype Discussion: Course Introduction, Sign up for health topic briefs and faith & health reflections
Week 2	Social (Economic and Political) Determinants	Reading: Text: Farmer (2004): Chapters 1 & 6, Minkler

	of Hoolth (SDH)	(2012): Chantors 0 8 10
	of Health (SDH)	(2012): Chapters 9 & 10 Online: See Course Bibliography
	Review of SDH and other public health	Sakai: See Course Bibliography Sakai: See Reading/Multi-media Resources
	frameworks & discussions of health disparity	Jakai. See Neading/Multi-media Nesodices
	(student 5-10 minute health topic briefs):	Assignments:
	Racism/discrimination	Contact and visit potential internship sites.
	Violence	Contact and viole potential internering cites.
	 Local governance/participation 	FTD #1 on Sakai: Respond (at least twice) to the
	 Access to Medicine 	prior week's forum posts by end of Week 2.
	Gender Equity, etc.	
	Active Observation/Context Research	Skype Discussion: SDH and Health Ecology Project (Project #2)
	 "Windshield" (Sunglasses) Survey 	(3,000)
	Asset/Context Mapping	
Week 3	Environmental Health	Reading:
	Review of environmental health issues and	Text: n/a
	risks in cities (student 5-10 minute health	Online: See Course Bibliography
	topic briefs):	Sakai: See Reading/Multi-media Resources
	Population density & built environment	
	Water and Sanitation (WASH)	Assignments:
	Pollution/Toxins (Ag/Industrial)	Project #2 due Sunday midnight MST: Health
	Disasters/Climate Change	Ecology Project- 4-5 page description of the
	Disasters/Climate Change	community context and health determinants of the
	Final clarifications for Project #2.	local setting, including observational research. [This
		may be replaced by local course participation and
		the course comparison form must be turned in and
		approved by instructor instead.]
		Mark an internal in contracts and learning
		Work on internship contracts and learning
		agreements, begin to consider your health issue focus.
		locus.
		FTD #2 on Sakai: Reflection on the Local Health
		Ecology with an original post by end of Week 3, and
		reference at least one course resource.
		ויסוסוסוסט מניוטמטניטווס טטעוסט ופטטעוטט.
		Skype Discussion: Environmental Health
		Chipo Diodecion.
Week 4	Infectious Disease	Reading:
	Review of common infections and	Text: Farmer (2004): Chapter 7; Minkler (2012):
		Chapter 11
	communicable disease (CD) in urban slums and the basics of transmission and	Online: See Course Bibliography
	epidemiology (student 5-10 minute health	Sakai: Rossi (1999): Chapter 4; See Reading/Multi-
	topic briefs):	media Resources
	HIV/AIDS	
	• HIV/AIDS • TB,	Assignments:
	<u> </u>	Identify health issue & target population with
	Malaria, Chalara	internship supervisor.
	Cholera,	Learning Agreement/Contract due (for Project #1).
	Immunization campaigns (Diptheria, Timberial Honorthia, etc.)	
	Typhoid, Hepatitis, etc.)	

	T	ETD #2 on Cakair Dognand (at least triing) to the
	Identifying a health issue & target population (with internship)	FTD #2 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 4.
	Gathering Secondary Data- Describe the health topic, determine magnitude, determinants and describe the population/context	Skype Discussion: Infectious Disease and Project #3a Secondary Research.
Week 5	Chronic & Non-Communicable Disease (CNCD) Review of common CNCD in urban slums (student 5-10 minute health topic briefs): • Diabetes, • Cancer, • Substance abuse, • Cardiovascular disease, • Mental Health/Stress Disorders	Reading: Text: n/a Online: See Course Bibliography Sakai: Same as Week 4; See Reading/Multi-media Resources Assignments: Project #3a Secondary Data Collection- 2-3 page report on student's health topic from secondary research.
		FTD #3 on Sakai: Describe the emerging urban health issue for the CHP with original posts by end of Week 5. Reference course material and/or local sources.
		Skype Discussion: CNCD and Project #3a
Week 6	Maternal & Child Health (MCH)- Including Household Food Security & Nutrition Review of common MCH issues in urban slums, including impacts of household-level food insecurity and malnutrition (student 5-10 minute health topic briefs): • Women's reproductive health and family planning (inc. maternal mortality) • Childhood illness (children under five)-diarrhoeal, pneumonia, etc. • Household-level nutrition (quantity, quality & variety of nutrient deficits)	Reading: Text: Minkler (2012): Appendix 2 Online: See Course Bibliography Sakai: Judd (1991): Ch. 11, See Reading/Multimedia Resources Assignments: Identify interview participants (with internship). FTD #3 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 6. Skype Discussion: MCH and Food Security/ Nutrition
\\\ - 7	Explain Project #3b	and Project #3b
Week 7	Primary Research Toolkit How to conduct Key Informant Interviews (KII), Focus Groups (FGs) and Individual Case Studies/Health Histories	Reading: Sakai: Same text reading as Week 6; See Reading/Multi-media Resources
	The Interviews: NGOs/Churches Health Provider & Traditional Healer	Assignments: Be prepared to share interview list during Skype discussion. Conduct interviews and expand notes/ narratives during this week and next.
	Government/MoH Community leader	FTD #4 on Sakai: Share insight from interviews and community stories for an original post by end of Week 7.

	Community member first hand	
	Community member first-hand experience with the health topic	Skype Discussion: Primary Research (Project #3b)
Week 8	Mixed Methods Analysis- Triangulation Why mixed methods for urban health research? • The "gold standard" in health research and the limitations • Identifying the components of your "triangle" diagram "Urban health research requires a combination of epidemiologic observations, ecological characterization, and a description of the lived experience of individuals living in a given environment." (p 254) Handbook of Urban Health	Reading: Text: n/a Online: See Course Bibliography Sakai: Barg (2005, in Handbook): Ch. 13, Green (2005): Ch. 2, Judd (1991): Ch. 13, See Reading/Multi-media Resources Assignments: Project #3b in process FTD #4 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 8. Skype Discussion: Mixed Methods Critical Analysis and Discussion of CHP (Project #4)
Week 9	Community Interventions and Best Practice Interventions/Case Studies Review- What are people doing to address the issue? And what is considered the best practice? • Summarize community-based interventions, the challenges, successes and lessons learned • Review types of interventions (Prevention, Education, Access, Behavior, Advocacy) and pick one type to be the focus. • Example of SWOT analysis for applying to local context/capacity assessment. • Discussion of best practices. • "Ten Commandments of Community-based Research"	Reading: Text: Minkler (2012): Appendix 4, 7 & 8 Online: See Course Bibliography Sakai: Lawrence (2005): Ch. 24, etc. See Reading/Multi-media Resources *Students will research local case studies of interventions and best practice on the health issue. Assignments: Project #3b in process FTD #5 on Sakai: Best practices for the health issue, and are the biblical, with contributions from the church? Submit original post by end of Week 9. Skype Discussion: Community-based Interventions and Best Practice
Week 10	Final clarifications for data analysis (Project #3b) Accountable Research:	Reading:
	Discussion on concepts of accountability and empowerment in sharing data. Planning for student presentations or 'reportbacks' of CHP to internships and/or stakeholders Interpretation and application of the research (policy-making/advocacy, program planning, public awareness, fund-raising, etc.) What product will be "handed over" to	Text: Minkler (2012): Appendix 3 [Refer to Parts 6 & 8 of this text if applicable to your Project #4] Online: See Course Bibliography Sakai: LeCompte (2010): Ch. 9, See Reading/Multimedia Resources Assignments: Project #3b due FTD #5 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 10. Skype Discussion: Accountable Research and

	be of most use to the org?	Project #4
	Preparing for CHP Community Reportback (Project #4)	
Week 11	Theology of Health Review of historical foundations for theology of health & health ministry, and review church-based models for primary health care in urban slums as well as the Farmer model of non-church, but faith-based care/POFP.	Reading: Text: Farmer (2004): Chapters 3 & 5 Online: See Course Bibliography Sakai: Evans (1999): Chapter 1 +; Swartley (2012): Chapters 4-5; See other Reading/ Multi-media Resources Assignments: Be prepared to share and discuss the required reading for the Skype discussion. Community Reportbacks in progress. FTD #6 on Sakai: Theology of health original post by end of Week 11. Skype Discussion: Theology of Health Discussion; Sign up for presentations during Wks 13-14
Week 12	Finalize Presentations/Theology of Health continued LISTEN TO AUDIO: https://www.youtube.com/watch?v=msmTIBk heJU	Reading: n/a Assignments: Finalizing presentations for community and cohort. Community Reportbacks in progress. FTD #6 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 12. Skype Discussion: BREAK! Guest speaker: Paul Farmer and founder of liberation theology, Gustavo Gutierrez, lecture on YouTube! (1:34)
Week 13	Presentation of Projects/Findings to Cohort	Reading: n/a Assignments: Student final project presentations to cohort. FTD #7 on Sakai: Community reportback original post by end of Week 13. Skype Discussion: Student presentations
Week 14	Presentation of Projects/Findings to Cohort, continued	Reading: n/a

		Assignments: Student final project presentations to cohort. FTD #7 on Sakai: Respond (at least twice) to the prior week's forum posts by end of Week 14. Skype Discussion: Students are prepared to give 10-minute presentation of CHP to the cohort. Clarifications for all final assignments.
Week 15	Wrap-up! (Skype as needed, TBD)	Assignments: All remaining assignments due Friday at midnight MST. Internship docs: Signed Service Log, Self-Assessment & Intern Evaluation of the Agency, and Performance Evaluation documents all due. Complete course evaluation. FTD #8 on Sakai (one week only!): From a summary of your responses on the course eval (also to be submitted via email), provide an original post by end of Week 15. Has your understanding of slum health problems and their determinants changed? Has your faith perspective on urban health been impacted? What did you like most about this course? What would you change or add? Skype Discussion: TBD, individual emails and calls as needed

V. Evaluation & Assessment

Assessment Task	Max. Points	Weighting
Weekly Online Discussions via Sakai & Skype (40 hours) Sakai (17 points total)- Forum Threaded Discussions include eight FTDs at 2.0 pts each topic (1 pt for original post + 0.5 pts each for two responses, 16 pts total) based on scale of quantity, timeliness and quality of posts. The additional point with FTD #8 is earned for submitting the course evaluation. Skype (8 points total + EC)- Group calls include three student-led short presentations at 2 pts/each for two Faith & Health Reflections and 4 pts for a Health Topic Brief based on timeliness and quality. Additional 0.25 pt of Extra Credit (EC) for 'presence & participation' on each call (13 calls= 3.25 possible EC pts).	25 (+EC)	25%
Project #1: Health Organization Internship (40 hours of voluntary service) Evaluative criteria: Completeness of forms including signatures (60%), timeliness of submission (20%), and student effort/performance (20%): *Contract/learning agreement- 5 pts *Signed service log of completed hours- 10 pts *Self-assessment & Intern evaluation of agency- 5 pts *Performance Evaluation by supervisor- 5 pts	25	25%
Project #2: Community Health Ecology Project (15 hours) or Local Health Course This project includes 4-5 page written report with 2 hours of active observation research (Sunglasses Survey/Asset Mapping) and 8 hours of project-specific reading and writing. This project may be altered/replaced with local health course, as approved by instructor. Evaluative criteria: timeliness, completeness, depth of analysis, writing quality	10	10%
Project #3: Community Health Project (CHP): Data Collection & Analysis (35 hours) Project #3a: Secondary Research- This assignment requires a 2-3 page report from 3-5 hours of online research and reading- 5 pts Project #3b: Primary Data & Analysis- This assignment requires a 10-12 page report from 10 hours of data collection, 5 hours of reading, and 10 hours of analysis and writing- 25 pts Evaluative criteria: timeliness, completeness, depth of analysis, writing	30	30%

quality		
Project #4: CHP Community Reportback & Presentation (10-15 hours)	10	10%
Community Reportback/Presentation that includes: context-appropriate materials/handover (4 pts), a forum with stakeholders to summarize and share the student's work (3 pts) and presentation to cohort on key findings and applicability of research (3 pts). (10-15 hours)- 10 pts		
Evaluative criteria: timeliness, completeness, depth of analysis, materials/presentation quality		
Total	100	100%

VI. Grading

Grades are assigned according to the following levels of proficiency for graduate level work:

	APU	
Grade	GPA	Numeric
A+		N/A
Α	4.0	95-100
A-	3.7	92-94.99
B+	3.3	89-91.99
В	3.0	84-88.99
B-	2.7	81-83.99
C+	2.3	78-80.99
С	2.0	73-77.99
C-	1.7	70-72.99
D+	0	69-69.99
D	0	68-68.99
D-	0	65-67.99
F	0	0-64.99
Inc		

Satisfactory progress in the degree requires a GPA of 3.0 or above, across your courses.

- Class attendance: Students are required to join in the class SKYPE discussions each week and to contribute to ongoing FTDs with an original post and at least two responses to posts of peers within an approximate 2-week period (with the exception of FTD #8 during final week). This gives the core coherence to the online learning process.
- Late work and extra credit: If a student has an "excused" delay from an assignment that is due, they may make that up within the next week without point penalty. Excused delays may be acquired by contacting the APU instructor ahead of deadline and receiving written/email confirmation. If they have no excuse from the week's work, they will receive a 10% drop in grade if submitted within the next

week, and 20% if submitted two weeks later, with progressive decline of the grade. As each assignment builds upon the next in this course and they are revised/compiled for the final project, it is important that students keep up with the pace of the course. Presence and participation in each Skype call allows for a total of 3.25 points of extra credit (0.25 pt/Skype call, 13 total). Note that "presence" on skype during the call without active participation will not suffice for the points.

- o **Incompletes**: The grade of "Incomplete" can only be given in the case of a verified personal/family emergency and with the approval of the course professor and the college dean.
- Returns: The instructor will attempt to grade work the week submitted though this is not always feasible. The course work and grades will be open to view one week after the end of the course.

VII. Course Policies

Attendance in the weekly online SKYPE calls or forum discussions is essential in any learning community, as each class builds on the previous.

Writing Assignments: Projects and Forum Discussions are due at the end of the assigned week (by Sunday, midnight MST, unless otherwise noted). All assignments should be formatted as follows:

- Times New Roman, 12 point
- 1 inch margins
- Title, name and date in right upper corner,
- Page numbers in right lower corner
- 1.15 line spacing
- Formatted endnotes/bibliography
- Checked for spelling/grammatical errors

Preparation/Study time: In a 15-week course, the expected total course time for one class is up to 120 hours. The aim of a course is not to overwhelm the student with stress, but create a positive learning environment. Learning a healthy work-life balance is part of the graduate experience. The instructor recognizes that healthcare may not be your field or expertise, thus adding an element of challenge, but it is hoped that the student complete the course with a new appreciation for the integration of health concepts in all types of social justice, church and community-based work, thus being able to supervise or partner with other development workers for whom this is their specialization.

Academic Integrity: The practice of academic integrity to ensure the quality of education is the responsibility of each member of the educational community at Azusa Pacific University. It is the policy of the university that academic work should represent the independent thought and activity of the individual student, and work that is borrowed from another source without attribution or used in an unauthorized way in an academic exercise is considered to be academic dishonesty that defrauds the work of others and the educational system. Engaging in academic dishonesty is a serious offense for which a student may be disciplined or dismissed from a program. The full academic integrity policy is available in the graduate catalog. Further, all university and departmental policies affecting student work, appeals, and grievances, as outlined in the Graduate Catalog and/or Department Handbook will apply, unless otherwise indicated in this syllabus

References to author and text must be included whenever the author is quoted or ideas used. This is simple respect. Use the APA6 Author-Date system. It is required that you get a copy of EndNote from IMT or the Library for keeping your references over the years. It will do most of the formatting for you.

Copyright Responsibilities: Students and faculty are both authors and users of copyrighted materials. As a student you must know the rights of both authors and users with respect to copyrighted works to ensure compliance. It is equally important to be knowledgeable about legally permitted uses of copyrighted materials. Information about copyright compliance, fair use and websites for downloading information legally can be found at: http://apu.libguides.com/content.php?pid=241554&search_terms=copyright

Information Literacy: Defined as "a set of abilities requiring individuals recognize when information is needed and have the ability to locate, evaluate, and use effectively the needed information" (American Library Association, 1989). In this course, teaching and learning processes will employ the following information literacy standards, as endorsed by the American Association for Higher Education (1999), the Association of College and Research Libraries (2000), and the Council of Independent Colleges (2004). The students in this course will:

- determine the nature and extent of the information needed.
- access needed information effectively and efficiently.
- evaluate information and its sources critically and incorporates selected information into his or her knowledge base and value system.
- individually or as a member of a group, use information effectively to accomplish a specific purpose.
- understand many of the economic, legal, and social issues surrounding the use of information and accesses and uses information ethically and legally.

Disability Procedure: Students in this course who have a disability that might prevent them from fully demonstrating their abilities should meet with the MATUL program director, as soon as possible to initiate disability verification and discuss accommodations that may be necessary to ensure full participation in the successful completion of course requirements.

Legal Disclaimer: This course is in constant development and may change at the professor's discretion. All effort is made to not materially change major assignments once they have been begun, and if so to do so to the students' advantage. Grading rubrics are not a legal entity but simply a helpful guide to the student as to some elements the professor uses to grade, as grading involves considerable subjectivity. Creativity is encouraged and alternatives to assignments recognized, but normally should be negotiated beforehand.

VIII. Course Bibliography

Introduction to Urban Health (Week 1)

Required

Course Documents: Welcome Letter, Syllabus, Discussion Topics and Project Descriptions documents

Farmer, P., 2004. "Chapter 9: Rethinking Health and Human Rights: Time for a Paradigm Shift," in *Pathologies of Power. CSPA, Berkeley, CA:* 213-246. (That's right, we are starting with the last chapter!)

Green, L.W., Kreuter, M.W. 2005. "Glossary," in *Health Program Planning: An Educational and Ecological Approach, 4th Edition*. McGraw-Hill, New York, NY. [Available on Sakai] JUST TO GLANCE THROUGH

Khan, O.A. & Pappas, G. Eds. 2011. "Ch 12: Primary Care in Megacities of the Developing World," in *Megacities & Global Health*. APHA, Washington, DC: 259-271. [Available on Sakai]

Minkler, Meredith. 2012. "Ch 2: Why Organize? Problems and Promise in the Inner City (by Barack Obama); Ch 6: Community, Community Development, and the Forming of Authentic Partnerships; Ch 7: Ethical Issues in Community Organizing and Community Building. In *Community Organizing and Community Building for Health and Welfare*, 3rd edition. Rutgers University Press, New Brunswick.

People's Health Movement. "Global Call for Action around the 30th Anniversary of the Alma Ata Declaration." Access at: http://www.phmovement.org/en/node/867.

Rossi, P.H., Freeman, H.E., Lipsey, M.W. 1999. "Glossary," in *Evaluation: A Systematic Approach*, 6th Edition. Sage Publications, Thousand Oaks, CA. [Available on Sakai] JUST TO GLANCE THROUGH

Multi-Media Resources (Recommended)

MP3: LiveTalk 2: Health in the Urban Slums: Let the People Lead the Way -Pam Lynam and Stuart Merkel, http://ocw.jhsph.edu/courses/urbanhealth/PDFs/LiveTalk2a.mp3 [Time: 46 min, 17 sec]

PPT (that correlates with MP3 Live Talk) Title/Subject: Urban Health in Developing Countries (Jhpiego/Nairobi Case Study) of JHSPH:

http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban%20Health%20Live%20Talk%202a%202009.pdf

PPT: Title/Subject: Urban Primary Health Care and Health Systems by Abdullah Baqui & William Brieger, JHSPH: http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec6 Baqui.pdf

Social Determinants of Health (SDH) (Week 2)

Required

Farmer, P. 2004. "Ch 1: Suffering and Structural Violence," p.29-50; and "Ch 6: Listening for Prophetic Voices: A Critique of Market-based Medicine," p. 160-178.

Labonte, R., & Schrecker, T. 2007. Globalization and the social determinants of health. *Globalization and Health*, 3:5. [Access at http://www.who.int/social_determinants/resources/globalization_and_sdh1.pdf]

World Health Organization. Commission on Social Determinants of Health. Access at: http://www.who.int/social_determinants/sdh definition/en/.

Recommended

Fry, S., Cousins, B., Olivola, K., 2002. Health of children living in urban slums in Asia and the Near East: Review of existing literature and data. USAID, Washington, DC. [Access at http://www.ehproject.org/PDF/Activity Reports/AR109ANEUrbHlthweb.pdf

Multi-Media Resources

PPT: Title/Subject: The Urban Social Environment by William Brieger, JHSPH, http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec4 Brieger.pdf

PPT: Title/Subject: Municipalization and Urban Health: Tendencies in the Americas, Lessons Learned, and Challenges by Marilyn Rice of JHSPH,

http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec9_Rice.pdf

Active Observation/Local Ecology Research for Health (Weeks 2-3)

Required

Community Toolbox. "Windshield and Walking Surveys." University of Kansas. Access at: http://ctb.ku.edu/en/tablecontents/chapter3-section21-main.aspx.

Community Toolbox. "Identifying Community Assets and Resources." University of Kansas. Access at: http://ctb.ku.edu/en/tablecontents/sub-section-main-1043.aspx.

Minkler, Meredith. 2012. "Ch 9: Community Health Assessment or Healthy Community Assessment" and "Ch 10: Mapping Community Capacity," in *Community Organizing and Community Building for Health and Welfare*, 3rd edition. Rutgers University Press, New Brunswick.

Environmental Health (Week 3)

Required

Conant, J. and Fadem, P. 2012. A Community Guide to Environmental Health. Hesperian Health Guides, Berkeley, CA. [Access at http://hesperian.org/books-and-resources/ and choose two chapters to read online that are relevant to your context, i.e. Protecting Community Water or Solid Waste or Sustainable Farming.]

Kjellstrom, T., Friel, S., et al. 2007, May. Urban environmental health hazards and health equity. *J Urban Health*, 84(3 Suppl): i86-97. [Access at http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1891648/]

McMichael, A.J. 2008. The urban environment and health in a world of increasing globalization: issues for developing countries. *Bulletin of the World Health Organization*, 78: 1117-26. [Access at http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2560839/pdf/11019460.pdf]

Recommended

International Institute for Environment and Development. Publications: Water and Sanitation. Access at: http://pubs.iied.org/search.php?c=waters. (Choose at least one report from this page to read on a water and sanitation issue.)

Vallet, M. 2011. "Ch 13: The Export of Hazardous Waste," in *Risks of Hazardous Waste* (Rosenfeld, P. & Feng, L., Eds.) Elsevier, Oxford: 169-184. [Available on Sakai, covers health effects of electronic, agricultural, industrial wastes dumped in poor countries]

Multi-Media Resources

PPT: Title/Subject: The Urban Environment and Health in Developing Countries by Abdullah Baqui, JHSPH, http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec3 Baqui.pdf

PPT: Title/Subject: The Burden of Urban III Health from Road Transport in Developing Countries by Adnan Hyder, JHSPH, http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec5_Hyder.pdf

Infectious Disease (Week 4)

Required

Farmer, P. 2004. "Ch 7: Cruel and Unusual: Drug-Resistant TB as Punishment," p. 179-195.

Farmer, P., et. al. 2001, August 4th. Community-based approaches to HIV treatment in resource poor settings. *Lancet*, 358. [Access at: http://www.who.int/whr/2004/media_centre/en/lancet.pdf]

McMichael, A.J. 2004. Environmental and social influences on emerging infectious diseases: Past, present, and future. *Philosophical Transactions of the Royal Society*, 359: 1049-58. [Access at http://rstb.royalsocietypublishing.org/content/359/1447/1049.full.pdf+html]

Wilson, P. "Giving Developing Countries a Shot: An Overview of Vaccine Access and R&D." Oxfam and Medecins Sans Frontieres. April. [Available on Sakai].

Tatem, A.J., et al. 2008. Human population, urban settlement patterns and their impact on Plasmodium falciparum malaria endemicity. *Malaria Journal*, 7: 218. [Access at http://www.malariajournal.com/content/7/1/218]

Recommended

International AIDS Vaccine Initiative. [Access at: http://www.iavi.org/]

Operation Whole Africa. Reference Materials: Resource Education for AIDS Prevention (REAP). [Available on Sakai, see folder called "HIV/AIDS REAP Tools"].

Partners in Health. Cholera. Access at: http://www.pih.org/pages/cholera/. (Scan webpage and choose one PIH report on Cholera in Haiti to read)

Ratho, R. K., et al. 2005, December. An outbreak of Dengue fever in periurban slums of Chandigarh, India with special reference to entomological and climatic factors. *Indian Journal of Medical Sciences*, *59(12): 518-526*. [Access at https://tspace.library.utoronto.ca/bitstream/1807/7644/1/ms05079.pdf]

Thompson, Dick. 2014. "Ebola's Deadly Spread in Africa Driven by Public Health Failures, Cultural Beliefs." National Geographic Daily News. 2 July. [Access at: http://news.nationalgeographic.com/news/2014/07/140702-ebola-epidemic-fever-world-health-guinea-sierra-leone-liberia/]

WHO, UNICEF, World Bank. 2009. State of the world's vaccines and immunization, 3rd ed. Geneva, World Health Organization. [Access at: http://www.who.int/immunization/sowvi/en/]

Weiss, R.A., McMichael, A.J. 2004 Social and environmental risk factors in the emergence of infectious diseases. *Nature Medicine*, 10: S70-S76. [Available on Sakai].

Multi-Media Resources

PPT: Title/Subject: Urbanization and the Epidemiology of Infectious Diseases by William Moss of JHSPH, Access at: http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec7_Moss.pdf

Identifying a health topic & Gathering Secondary Data (Weeks 4-5)

Required

Measure Demographic and Health Surveys. Data for more than 80 developing countries. USAID. Retrieved July 2012; http://www.measuredhs.com/.

Minkler, Meredith. 2012. "Ch 11: Selecting and "Cutting" the Issue," in *Community Organizing and Community Building for Health and Welfare*, 3rd edition. Rutgers University Press, New Brunswick.

Rossi, P.H., Freeman, H.E., Lipsey, M.W. 1999. "Ch. 4: Assessing the Need for a Program," in *Evaluation: A Systematic Approach*, 6th Edition. Sage Publications, Thousand Oaks, CA: 118- 152. [Available on Sakai]

World Health Organization. *Countries / Health Topics*. Retrieved July 2012; http://www.who.int/countries/en/ and http://www.who.int/topics/en/.

World Health Organization. Urban HEART Reports and Country Profiles: Kenya, Iran, Philippines (etc.) Retrieved July 2012; http://www.who.int/kobe_centre/measuring/urbanheart/en/index.html.

Chronic & Non-Communicable Disease (Week 5)

Required

Balogun, M.R., Odukoya, O.O., et al. 2012, March. Cervical cancer awareness and preventive practices: a challenge for female urban slum dwellers in Lagos, Nigeria. *African Journal of Reproductive Health*, 16(1): 75-82. [Available on Sakai].

Campbell, T. & Campbell, A. 2007, May. Emerging disease burdens and the poor in cities of the developing world. *Journal of Urban Health*, 84(1), 54–64. [Available on Sakai].

Gruebner, O., et al. 2012. "Mental health in the slums of Dhaka - a geoepidemiological study." *Bio Med Central Public Health*, 12:177. [Available on Sakai].

Mbatia, J. et al. 2009. "Prevalence of Alcohol Consumption and Hazardous Drinking, Tobacco and Drug Use in Urban Tanzania, and Their Associated Risk Factors." *International Journal of Environmental Research and Public Health*, 6, 1991-2006; doi:10.3390/ijerph6071991. [Available on Sakai].

Recommended

Jenkins, R., Mbatia, J., Singleton, N., White, B. 2012, June. Common mental disorders and risk factors in urban Tanzania. *Int J Environ Res Public Health*, 7(6): 2543-58. [Access at http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2905566/]

Popkin, B.M. 2004, July. The nutrition transition: an overview of world patterns of change. *Nutrition Review*, 62(7 Pt 2): S140-3. [Available at Sakai].

Riley, L.W. 2007. Slum health: diseases of neglected populations. *BMC International Health and Human Rights*, 7:2. [Access at http://www.biomedcentral.com/1472-698X/7/2]

World Health Organization. 2002. *Innovative care for chronic conditions: building blocks for action*. Geneva: WHO. Retrieved July 2012; http://www.who.int/chp/knowledge/publications/icccreport/en/.

Multi-Media Resources

Video: Title/Subject: UN High-level Meeting on Non-Communicable Disease (NCDs) Prevention and Control, Access at: http://communicable-disease.purzuit.com/video/RGBmLQrKbSU.html

[Time: 6 min, 22 sec] Webpage: http://www.un.org/en/ga/ncdmeeting2011/index.shtml

Maternal & Child Health (MCH), Including Household Food Security (Week 6)

Required

Abuya, B.A., Ciera, J.M., Kimani-Murage, E. 2012, June 21st. Effect of mother's education on child's nutritional status in the slums of Nairobi. *BMC Pediatrics*, 12(1): 80. [Available on Sakai]

Burns, A.A., et al. 2012. Where Women Have No Doctor. Hesperian Health Guides, Berkeley, CA. [Access at http://hesperian.org/books-and-resources/ and choose two chapters to read online that are relevant to your context, i.e. Female Genital Cutting or Sex Workers or Breastfeeding.]

Holmes S. 2008, June 5th. World hunger's urban edge. BBC News. Retrieved July 2012; http://news.bbc.co.uk/2/hi/europe/7437808.stm.

Khatun F, et al. 2012, Jan. Causes of neonatal and maternal deaths in Dhaka slums: implications for service delivery. *BMC Public Health*, 12: 84. [Available on Sakai]

UNFPA. Family Planning and Poverty Reduction. [Available on Sakai]

Recommended

Agarwal S, Bhanot A, Goindi G. 2005. Understanding and addressing childhood immunization coverage in urban slums. *Indian Pediatrics*, 42:653-663. [Access from: http://indianpediatrics.net/july2005/july-653-663.htm]

Awasthi S, Agarwal S. 2003. Determinants of childhood mortality and morbidity in urban slums in India. *Indian Pediatrics*, 40: 1145-1161. [Available on Sakai]

Maruyama, E. et al. 2014, July. Understanding the Context for Agriculture for Nutrition Research: Identifying Country Typologies of Child-Stunting Determinants. International Food Policy Research Institute (IFPRI), Washington, DC. [Access http://www.ifpri.org/sites/default/files/publications/ifpridp01362.pdf]

RUAF Foundation. 2009. Women feeding cities: Mainstreaming gender in urban agriculture & food security. Edited by: Alice Hovorka, Henk de Zeeuw and Mary Njenga, Practical Action Publishing, Rugby, UK. [Access from: http://www.ruaf.org/publications/women-feeding-cities-mainstreaming-gender-urban-agriculture-and-food-security]

WHO. 2007. Community-based management of severe acute malnutrition. A Joint Statement by the World Health Organization, the World Food Programme, the United Nations System Standing Committee on Nutrition and the United Nations Children's Fund. (Updated 2011) [Access at: http://apps.who.int/iris/bitstream/10665/44295/1/9789280641479 eng.pdf]

Multi-Media Resources

Video: Title/Subject: On the Margins in Mauritania In a city slum and a destitute village, two families struggle to feed their children as prices for basic foods sky-rocket, Access at:

http://www.washingtonpost.com/wp-srv/world/globalfoodcrisis/marginsvideo.html [Time: 8m:32s]

PPT: Title/Subject: Feeding Cities by William Brieger of JHSPH, Access at;

http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec8_Brieger.pdf

PPT: Title/Subject: Global Overview of Maternal Neonatal and Child Health – Need for an Urban Focus by Professor Robert Black, Chair of the Dept of International Health, Johns Hopkins University, Access at:

http://uhrc.in/downloads/Presentations/Prof-Black.pdf

Primary Research Toolkit (Weeks 6-7)

Required

Community Toolbox. "Section 6: Conducting Focus Groups/ 12: Conducting Interviews." University of Kansas. Retrieved July 2012; http://ctb.ku.edu/en/tablecontents/section_1018.aspx (FGDs) and http://ctb.ku.edu/en/tablecontents/section_1047.aspx (Interviews).

Judd, C.M., Smith, E.R., Kidder, L.H., 1991. "Ch. 11: Questionnaires and Interviews: Asking Questions Effectively," in *Research Methods in Social Relations*, 6th Edition. Holt Rinehart and Winston, Orlando, FL: 228-265. [Available on Sakai]

Minkler, Meredith. 2012. "Appendix 2: Action-Oriented Community Diagnosis Procedure," in *Community Organizing and Community Building for Health and Welfare*, 3rd edition. Rutgers University Press, New Brunswick.

Recommended

USAID 'old school' documents, but still good!:

TIPS: Conducting Focus Group Interviews (1996). Access at: http://www.scribd.com/doc/6702074/Conducting-Focus-Group-Interviews-233

Conducting Key Informant Interviews in Developing Countries (1989). Access at: http://pdf.usaid.gov/pdf_docs/pnaax226.pdf

Mixed Methods- Triangulation (Week 8)

Required

Community Toolbox. "Section 15: Qualitative Methods to Assess Community Issues." University of Kansas. Retrieved July 2012; http://ctb.ku.edu/en/tablecontents/section_1050.aspx.

Barg, F,K, and Kauer, J. 2005. "Ch. 13: An Anthropological Perspective on Urban Health," in *Handbook of Urban Health: Populations, Methods and Practice*. (Galea, S. and Vlahov, D., eds) Springer, New York: 243-258. [Available on Sakai]

Green, L.W., Kreuter, M.W. 2005. "Ch 2: Social Assessment, Participatory Planning and Situation Analysis," in *Health Program Planning: An Educational and Ecological Approach, 4th Edition*. McGraw-Hill, New York, NY: 29-77. [Available on Sakai]

Judd, C.M., Smith, E.R., Kidder, L.H., 1991. "Ch. 13: Qualitative Research: Fieldwork and Participant Observation," in *Research Methods in Social Relations, 6th Edition*. Holt Rinehart and Winston, Orlando, FL: 298-320. [Available on Sakai]

Recommended

Leeuw, ED. 2009. "Mixing Urban Health Research Methods for Best Fit." *Journal of Urban Health*: Bulletin of the New York Academy of Medicine, Vol. 87, No. 1. [Available on Sakai]

Palena, N. et al. 2006, May. Preparing a Case Study: A Guide for Designing and Conducting a Case Study for Evaluation Input. Pathfinder International Tool Series: M&E-1. [Available on Sakai]

Sami, M. 2011. "Bridging the Gap in Urban Health and Poverty Research." Conference Paper. 14 June. [Available on Sakai]

USAID. 2006, Sept. Urban Health and Care-Seeking Behavior: A Case Study of Slums in India and the Philippines. Prepared by Abt Associates. [Available on Sakai]

Multi-Media Resources

PPT: Title/Subject: A Framework for the Study of Urban Health, by Abdullah Baqui of JHSPH, Access at: http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec1 Baqui.pdf (disregard slides 3-6)

Community Interventions and Best Practice (Week 9)

Required

Community Toolbox. "Section 14: SWOT Analysis." University of Kansas. Retrieved July 2012; [Access at: http://ctb.ku.edu/en/tablecontents/sub_section_main_1049.aspx].

Lawrence, R.J. 2005. "Ch. 24: Building Healthy Cities: The World Health Organization Perspective," in *Handbook of Urban Health: Populations, Methods and Practice*. (Galea, S. and Vlahov, D., eds) Springer, New York: 479-501. [Available on Sakai]

Lazenbatt, A. 2002. "Ch. 3: Evidence-Based Healthcare: Understanding 'Best' Practice," in *The Evaluation Handbook for Health Professionals*. Routledge, London and New York. [Available on Sakai].

Minkler, Meredith. 2012. "Appendix 4: A Ladder of Community Participation in Public Health; Appendix 7: Using Force Field and SWOT Analysis as Strategic Tools in Community Organizing; Appendix 8: Checklist for Action," in Community Organizing and Community Building for Health and Welfare, 3rd edition. Rutgers University Press, New Brunswick.

Yazbeck, A. S., et al. eds. 2005. Reaching the poor with health, nutrition, and population services: What works, what doesn't, and why. World Bank Publications, Washington, DC. Retrieved July 2012. [Access at: http://siteresources.worldbank.org/INTPAH/Resources/Reaching-the-Poor/summary.pdf].

*Note: The community-based best practices for your health topic and locale will need to be researched on your own.

Recommended

Global Health Case Studies Project. Sponsored by Bill & Melinda Gates Foundation, WHO, etc. Retrieved July 2012; [Access at: http://casestudiesforglobalhealth.org/].

Perry, H. & P. Freeman. 2010. How Effective Is Community-Based Primary Health Care in Improving the Health of Children? A Review of the Evidence. Summary Findings Report to the Expert Review Panel (APHA). [Available on Sakai]

Taylor-Ide, D., & Taylor, C.E. 2002. *Just and lasting change: when communities own their futures*. Johns Hopkins Press. [Describes methods for mobilizing communities to take ownership and direct their own health programs. Most chapters describe community case studies. Available on Amazon Kindle]

USAID. 2013, March. Sustainable Service Delivery in an Increasingly Urbanized World. Draft Policy Paper. [Available on Sakai]

WHO Kobe Center. 2005, Aug. A Billion Voices: Listening and Responding to the Health Needs of Slum Dwellers and Informal Settlers in New Urban Settings. Analytic and Strategic Review Paper. [Available on Sakai]

Multi-Media Resources

PPT: Title/Subject: Selected Strategies to Improve Access to and Quality of Urban Primary Health Care by Abdullah Baqui of JHSPH, Access at: http://ocw.jhsph.edu/courses/urbanhealth/PDFs/Urban-sec11_Baqui.pdf

Accountable Research & Community Reportback (Week 10)

Required

Carboni, I. and J. Huddle. "It has opened our eyes: overview of evaluation accountability" (PowerPoint). World Vision International. [Available on Sakai].

Minkler, Meredith. 2012. "Appendix 3: Challenging Ourselves: Critical Self-Reflection on Power and Privilege," in *Community Organizing and Community Building for Health and Welfare*, 3rd edition. Rutgers University Press, New Brunswick. [Chapters in Parts 6 & 8 may also be relevant to the student's reportback approach]

Werner, D. and Bower, B. 2012. *Helping Health Workers Learn*. Hesperian Health Guides, Berkeley, CA. [Access at http://hesperian.org/books-and-resources/ and review a few chapters online to prepare your reportback, i.e. Helping People Look at Their Customs and Beliefs or Storytelling or Homemade Written Materials.]

Recommended

LeCompte, M.D. and Schensul, J.J. 2010. "Ch. 9: Applying Ethnography," in *Ethnographer's Toolkit Book 1:* Designing & Conducting Ethnographic Research, 2nd Edition. AltaMira Press, Lanham, MD: 251-283. [Available on Sakai] Multi-Media Resources

PPT: Title/Subject: "Developing Collective Community Leadership for Better Health of the Urban Poor" by Dr Siddharth Agarwal at the Fourth International Conference on Transforming Development to Alleviate Poverty and Climate Change on January 10th 2008 in New Delhi. Access at:

http://www.uhrc.in//downloads/Presentations/idca-final.pdf

Theology of Health (Week 11)

Required

Community Health Evangelism. Introduction to Global CHE Network PowerPoint [Available on Sakai] and view website at: http://www.chenetwork.org/

Evans, Abigail Rian. 1999. *The Healing Church: Practical Programs for Health Ministries*. United Church Press, Cleveland, Ohio. [Available on Sakai, Note: the entire book is a good read, chapter one is available on Sakai]

Freethought Kampala Blog. "Does God Heal?" Part 1 and Part 2. Access at: http://freethoughtkampala.wordpress.com/2010/02/03/does-god-heal-part-1/

http://freethoughtkampala.wordpress.com/2010/03/07/does-god-heal-part-2-why-claims-of-miracle-healing-arent-believable/

[Note: these blogs help to 'play the devil's advocate' in providing the skeptic's view of God's healing, and some surprisingly good points! To be read in contrast to the Resurgence blog below]

Farmer, P. 2004. "Ch 3: Lessons from Chiapas," p. 91-114; "Ch 5: Health, Healing & Social Justice: Insights from Liberation Theology," p. 139-159.

Resurgence Blog, a ministry of Mars Hill Church. 2013. "Why Doesn't God Always Heal the Sick?" *Tough Topics by Sam Storms*. Access at http://theresurgence.com/2013/05/09/why-doesn-t-god-always-heal-the-sick

[Note: this blog provides the American mega-church evangelical view on God's healing]

Swartley, W.M. 2012. *Health, Healing and the Church's Mission*. Inter Varsity Press Academic, Downers Grove, IL. [Available on Sakai, Note: the entire book is a good read, select chapters are available on Sakai]

Recommended:

Barker, Ash. 2012. Slum Life Rising: How to Enflesh Hope within a New Urban World. Kindle Edition. [Note: This book is worth getting your hands on if you don't already have it from other courses. For this topic, review "Chapter Thirteen: An Incarnational Approach to Urban Poverty Alleviation"]

Campbell, A. 1995. Health as liberation, medicine, theology, and the quest for justice. Wipf & Stock Publishing. [Available for purchase on Amazon, no Kindle Edition].

DeHaven, M. et al., 2004. Health Programs in Faith-Based Organizations: Are They Effective? *American Journal of Public Health*, Vol 94, No. 6. June. [Access at: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448385/pdf/0941030.pdf]

Tearfund. Resources (for purchase): Footsteps Magazine. [Access at: http://resources.tearfund.org/tearfund_resources/public/saleproducts.jsf?freeSearch=productGroup:Footsteps

World Vision International. "Child Health: Generating the Will" [Available on Sakai] and go to: Resources: Health. Retrieved August 2012. Access at: http://www.wvi.org/resources/health

[Note: so many good, free health guides here, take your pick!]

Multi-Media Resources

Video: Title/Subject: "Re-imagining Accompaniment- Global Health and Liberation Theology," discussion by Dr Paul Farmer and Father Gustavo Gutierrez at Notre Dame University (2011). Access at:

http://www.youtube.com/watch?v=msmTIBkheJU

Watch during BREAK week [Time: 1h: 34m: 27s]

Weeks 12-15: No additional required reading, students focus on CHP Reportback and Presentation

Key Faculty References for the Course (in addition to above)

American Public Health Association. Retrieved- ongoing 2012-2013: www.apha.org

Campus Compact Syllabi. Community-Engaged Urban Health Research Methods and Applications. University of Chicago. Retrieved July 2012; http://www.compact.org/syllabi/community-engaged-urban-health-research-methods-and-applications/16700/.

Grigg, V. 2009. "Ch. 2 Transformational Conversations," The Spirit of Christ and the Postmodern City. Emeth Press.

JHSPH OpenCourseware. Urban Health in Developing Countries. Retrieved July 2012;

http://ocw.jhsph.edu/index.cfm/go/viewCourse/course/UrbanHealth/coursePage/index/.

Nadakavukaren, A. 2005. *Our global environment: a health perspective* (5th ed). Prospect Heights: Waveland Press.

Sen, Amartya. 1999. Development as Freedom. Borzoi Books by Alfred A. Knopf, Inc., New York.

Taylor, D. and C. E. Taylor. 2002. *Just and Lasting Change: When Communities Own Their Futures*. The Johns Hopkins University Press, Baltimore.