

GSPP/PUBP: 832 Population Based Health Program Management

	University of Regina Campus	University of Saskatchewan Campus
Instructor:	Mark Lemstra BSc, MSc, MPH, DrSc, DrPH, PhD, PhD	
Phone:	306 230-3911	
E-mail:	marklemstra@shaw.ca	
Office Hours:		
Office Location:		
Term:	Winter 2011	
Room:	ED 619	
Time:	9:00 a.m. to 4:45 p.m. Tues Feb 22 to Sat Feb 26, 2011	

CALENDAR DESCRIPTION

This course will provide students with the tools to: a) analyze population health, b) understand the main determinants of health, c) prepare for intervention and d) evaluate outcomes.

COURSE CONTENT AND APPROACH

The primary objective of the course will be to discuss the main determinants of health. The second objective, however, will be to discuss the difficulties in implementing population based health strategies into actual action due to the dominance of individual based health care treatment. The third objective will be to discuss how to promote evidence based population health strategies into action.

Main Course Material:

1. Lemstra M, Neudorf C. Health disparity in Saskatoon: analysis to intervention. Saskatoon: Saskatoon Health Region; 2008. Available at the Saskatoon Health Region website:

http://www.saskatoonhealthregion.ca/your_health/ps_public_health_pho_reports_publications_and_presentations.htm

REQUIRED READINGS

Readings:

1. Lemstra M, Neudorf C. Health disparity in Saskatoon: analysis to intervention. Saskatoon Health Region [online] 2009 [cited August 31, 2009]. Available from URL:
http://www.saskatoonhealthregion.ca/your_health/ps_public_health_pho_reports_publications_and_presentations.htm
2. Beaglehole R. Oxford textbook of public health (fourth edition). In: Holland WW, Detels R, Knox G. Oxford: Oxford University Press, 2002.
3. Canadian Institute for Health information. Improving the health of Canadians. Canadian population health initiative. Ottawa: Canadian Institute for Health Information; 2005.
4. Marmot M. The status syndrome. How social standing affects our health and longevity. New York: Times Books, Henry Holt and Company; 2004.
5. Evans RG, Barer ML, Marmor TR, editors. Why are some people healthy and others not? The determinants of health of populations. New York: Aldine De Gruyter; 1994.
6. Lemstra M, Neudorf C, Opondo J. Health disparity by neighborhood income. Canadian Journal of Public Health 2006;97:435-9.
7. Lemstra M, Neudorf C, Mackenbach J, Nannapaneni U. Suicide ideation in Saskatoon adults: the role of economic and Aboriginal cultural status after multivariate adjustment. Canadian Journal of Psychiatry 2009;54(9):589-95.
8. Lemstra M, Neudorf C, Mackenbach J, D'Arcy C, Scott C, Kershaw T, Nannapaneni U. Risk indicators for depressed mood in youth: lack of association with Aboriginal cultural status. Pediatrics and Child Health 2008;13(4):285-90.
9. Lemstra M, Neudorf C, Mackenbach J, Nannapaneni U. Marijuana use and problem drinking in Saskatoon youth: the role of economic and Aboriginal cultural status after multivariate adjustment. Pediatrics and Child Health 2009;14(4):225-30.
10. Lemstra M, Neudorf C, Mackenbach J, Kershaw T, Nannapaneni U. Daily smoking in Saskatoon adults: the independent effect of income and Aboriginal cultural status. Canadian Journal of Public Health 2009;100(1):51-4.
11. Eaton WW, Muntaner C. Socioeconomic stratification and mental disorder. In: Horwitz AV, Scheid TL, editors. A handbook for the study of mental health: social contexts, theories and systems. New York: Cambridge University Press; 1999.
12. McKeown T. The medical contribution. In: N Black N et al editors. Health and disease: a reader. Keynes: Open University Press, 1984.
13. Moncrieff J, Wessely S, Hardy R. Active placebos versus antidepressants for depression. Cochrane Database Syst Rev, Issue 1 2003. Oxford: Update software.
14. Moncrieff J. Are antidepressants as effective as claimed? No, they are not effective at all. Can J Psychiatry. 2007;52:96-7.
15. Mosely BM, O'Malley K, Peterson NJ, Menke TJ, Brody BA, Kuykendall DH et al. A controlled trial of arthroscopic surgery for osteoarthritis of the knee. NEJM 2002;347:81-88.

16. Kirkley A, Birmingham TB, Litchfield RB, Giffin R, Willits KR, Wong CJ et al. A randomized trial of arthroscopic surgery for osteoarthritis of the knee. *NEJM* 2008;359:1097-1107.
17. Hennekens CH, Buring JE. *Epidemiology in Medicine*. Boston: little, Brown and Company, 1987.
18. Murray CJL, Lopez AD. Mortality by cause for eight regions of world: Global burden of disease study. *The Lancet* 1997;349:1269-75.
19. Lemstra M, Olszynski WP. The effectiveness of standard care, early intervention and occupational management in workers compensation claims. *Spine* 2003;28:299-304.
20. Lemstra M, Olszynski WP. The effectiveness of standard care, early intervention and occupational management in workers compensation claims: Part 2. *Spine* 2004; 29:1573-9.
21. Cassidy JD, Carroll LJ, Cote P, Lemstra M, Berglund A, Nygren A. Effect of eliminating compensation for pain and suffering on the outcome of insurance claims for whiplash injury. *New England Journal of Medicine* 2000;342:1179-1186.
22. Lemstra M, Olszynski WP. The influence of motor vehicle legislation on injury claim incidence. *Canadian Journal of Public Health* 2005;96:65-8.
23. Lemstra M, Neudrof C, Opondo J. Implications of a public smoking ban. *Canadian Journal of Public Health* 2008;99:62-5.
24. Government of Saskatchewan. Saskatchewan provincial budget 09-10 [online] 2009 [cited August 31, 2009]. Available from URL:
<http://www.finance.gov.sk.ca/budget2009-10/Budget200910Estimates.pdf>
25. Saskatoon Regional Health Authority. Saskatoon Regional Health Authority 2008-2009 Annual Report [online] 2009 [cited August 31, 2009]. Available from URL:
http://www.saskatoonhealthregion.ca/about_us/documents/shr_annual_report_2008_09.pdf
26. Lemstra M, Neudorf C, Beaudin G. Health disparity knowledge and support for intervention in Saskatoon. *Canadian Journal of Public Health* 2007;98:484-8.

SUPPLEMENTARY READINGS

EVALUATION

Student evaluation will be based on the following:

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|---|-----|
| A. Group exercise with power point presentation on Feb 26 | 25% |
| B. Final written assignment due March 12, 2011 | 75% |

LATE ASSIGNMENTS

STUDENTS WITH SPECIAL NEEDS

Students in the course who, because of a disability, may have a need for accommodations are encouraged to come and discuss accommodations with the instructor, and to contact the Coordinator of Special Needs Services at 585-4631.

ACADEMIC INTEGRITY AND CONDUCT

Ensuring that you understand and follow the principles of academic integrity and conduct as laid out in the University of Regina's Graduate Calendar and the University of Saskatchewan's Guidelines for Academic Conduct is vital to your success in graduate school. Ensuring that your work is your own and reflects both your own ideas and those of others incorporated in your work is important: ensuring that you acknowledge the ideas, words, and phrases of others that you use is a vital part of the scholarly endeavour. If you have any questions at all about academic integrity in general or about specific issues, contact your course instructor and to discuss your questions.

ATTENDANCE AND PARTICIPATION

SEMINAR SCHEDULE

Tuesday February 22

A. Introduction (9 am to 9:30 am)

Individual backgrounds

Why are you in JS GSPP?

What do you hope to learn from this course?

The importance of an open mind to new concepts

B. Planned Promotion of Population Health (9:30 am to 11 am)

Analysis of population health

Analysis of behavioural and environmental risk factors

Analysis of determinants of population health and risk factors

Data dissemination, knowledge transfer and community consultation

Analysis of literature

Intervention implementation

Evaluation

Reading 1 (p.3-5, 97)

C. Example of Planned Promotion of Population Health (11 am to 12 pm)

Mental health promotion

D. Determinants of Health (1 pm to 2 pm)

Biomedical view

Lifestyle approach

Broad socioeconomic approach

Population health

Reading 2, 3

E. Analysis of determinants of health (2 pm to 4 pm)

Reading 1

(1, 2.3, 2.4, 2.5, 2.8)

Reading 4, 5

Reading 6, 7, 8

HM 14

F. Analysis of determinants of behaviours (4 pm to 4:45 pm)

Reading 1

(1, 2.2, 2.6, 2.7, 2.9)

Reading 9, 10

HM 15

Wednesday February 23

A. Social theory (9 am to 10 am)

Macro and micro social theory

Reading 11

B. Limited impact of healthcare on population health (10 am to 12 pm)

Infectious disease

Reading 12

HM 9

Depression

Reading 13, 14

HM 1, 47-52

Knee surgery

Reading 15, 16

HM 3, 44

C. Limited impact of healthcare on population health (1 pm to 4:45 pm)

Cancer	HM 30, 32-34
Heart Disease	HM 7, 58
Drugs	HM 6, 55-57, 59
Flu	HM 65-68
Diagnostics	HM 28
Other	

Thursday February 24

A. Analysis of population health, behaviours and determinants (9 am to 10 am)

Community diagnosis vs. individual diagnosis

How to analyze population health and population behaviours Reading 17 (2, 4)

B. Burden of disease/disorders on society (10 am to 11 am)

Group discussion Reading 18

HM 13

C. Measuring the population impact of disease on society (11 am to 12 pm)

Group discussion

D. Evidence on how to improve the determinants of health (1 pm to 4:45 pm)

Reading 1

Income (Section 3.1b)

Education (Section 3.1c)

Housing (Section 3.1d)

Employment (Section 3.1e)

Access to healthcare (Section 3.1f)

Friday February 25

A. Discussion of group exercise (9 am to 10 am)

Your group will design a population based strategy to reduce the prevalence of a disease or a risk factor in Saskatchewan. You will be assigned to one of four groups:

Population based behavioural modification

Smoking or Physical inactivity

Population based disease modification

Cancer or Mental health

Your group will present to the class in the morning of February 26

Your presentation will be 30 minutes with 15 additional minutes for questions

Caution for assignment:

You will be evaluated on an evidence based proposal

Do not simply modify an existing plan that might not be evidence based

Your proposal will need to address the main determinants of health or behaviour

You need to devise strategies that will lead to actual action and improved health

B. Achievements of population health interventions (10 am to 12 pm)

Family planning and birth spacing Reading 5, 12

HM 9

Infectious disease control and immunizations Reading 12

Work injuries Reading 19, 20

HM 12

Motor vehicle injuries Reading 21, 22

HM 11

Tobacco control	Reading 23
	HM 17
Confusing achievements (ie. screening)	Handout

C. How the health system actually works (1 pm to 2 pm)

Federal budget	
Federal health and social transfer	
Provincial budget (ie. Health, Education, Social Services)	Reading 24
Provincial health budget	HM 10, 35
Regional health authorities	Reading 25
Emphasis on primary and ambulatory care	HM 23, 24, 26, 29
Independent primary care providers (ie. family physicians)	
Lack of health outcomes goals or behaviour goals	HM 18

D. The difficulty of implementing a population health approach (2 pm to 3 pm)

Ministerial silos	
Lack of inter-agency communication	
Multiple jurisdictions, priority setting and decision making	
Lack of coordinated or integrated effort	
Lack of knowledge transfer on main determinants of health	Reading 26
Lack of knowledge on impact of healthcare	
Population needs versus individual client demand	
Political will and vision	HM 20, 21
Lack of community consultation	
Embedded philosophy, beliefs and values	
Advocacy, professional organizations, unions and self interest	
Resource allocation	

E. How to use the Planned Promotion of Population Health to influence action (3 pm to 4:45 pm)

Examples of success from Saskatoon	Reading 1 (3.2)
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Saturday February 26

A. Class Presentations (9 am to 12 pm)

20 minute presentations with 15 additional minutes for questions

Smoking

Physical inactivity

Cancer

Mental health

B. Principles of evaluation (1 pm to 2 pm)

S.M.A.R.T

C. Class wrap-up (2 pm to 4:45 pm)

Feedback on class presentations

HM 2, 4, 46

Discussion of final assignment

Questions

Course evaluation

Saturday, March 12, 2011

Final assignment due

You have recently graduated from the JS GSPP

You have just been hired as a policy analyst with the Saskatchewan government

You have been asked to draft a proposal that would make Saskatchewan residents
the healthiest people in Canada

Use the Planned Promotion of Population Health to devise your proposal

Discuss the main determinants of health and how you plan to influence them

Discuss if you plan to allocate new funding or re-distribute existing funding

If new funding is required, discuss how you plan to raise this money

If funding is from re-prioritization of existing funds, which programs
or services will you reduce or cut

Your proposal will be no more 12 pages double spaced 10 Arial font

1 page	Executive summary
1 page	Analysis of population health
1 page	Analysis of behavioural and environmental risk factors
1 page	Analysis of determinants of population health and risk factors
1 page	Data dissemination, knowledge transfer and community consultation
1 page	Analysis of literature
1 page	Intervention with goals in S.M.A.R.T format
1 page	Intervention implementation
1 page	Evaluation
1 page	Budget
1 page	References will be in Chicago format