

**Health Administration and Public Health**  
**PADM 590-003**  
**3 Credit Hours**

Monday 4:00 – 6:30  
Dane Smith Hall Room 134

**Instructor:** Shannon Sanchez-Youngman, Assistant Research Professor

**Email:** santerry@unm.edu

**Office:** RWJF Center 1909 Las Lomas (corner of Yale and Las Lomas)

**Office Hours:** Wednesdays 2:00-4:00 pm and Fridays 10:00-12:00 pm or by appointment.

**Office Phone:** 505-277-1530

**Course Description:**

This course provides an overview of social, economic and political inequities in the United States and their impact on the health of low income, racial and ethnic minorities, immigrants, rural residents, and another socially disadvantaged populations. Particular attention is paid to how past and current policies and governance in social, health and medical programs at the national and local level promote or impede an equity agenda. Students will examine social science concepts and theoretical frameworks to expand their knowledge and skills in implementing policies, programs and interventions to advance population health at the individual, family, community and institutional level.

**Course Goals:**

- Define the key concepts associated with health equity and describe the key theoretical frameworks that explain health disparities.
- Assess existing policies and programs at the national and local level to evaluate the extent to which they contribute to health equity.
- Assess how devolution, inter-sectoral collaboration, private foundational initiatives and funding, and porous policy networks influence health equity administration in the United States.
- Critically evaluate health administrative strategies to improve both neighborhood and population and health.

**Student Learning Outcomes (aka Objectives):**

- Critically evaluate the research literature and health disparity data sources and evaluate their strengths and limitations.
- Identify aspects of public health administration and governance that promote or impede health equity.
- Describe existing and proposed short and long term programs and policies and strategies to eliminate health disparities and achieve health equity.

**Textbooks/Supplies/Materials/Equipment/Technology or Technical Requirements:**

There is no textbook for this course. The readings come from peer reviewed journal articles, published white papers, public documents and other scholarly sources. These will be electronically distributed to you.

## **Course Requirements:**

### **Participation (10%)**

Regular class participation and attendance is a minimal expectation for a graduate seminar. Participation requires reading the material before class and being on time. If unexpected circumstances prevent you from attending on a given day, let me know ahead of time. This class is interactive, which means that student engagement is vital to create an optimal learning environment for all of us. You are expected to complete assignments on time and to speak up in class when you have questions and ideas. This seminar is designed for you to critically examine policies, interventions, theories, and empirical research. I encourage lively discussions because they help all of us continue to learn and grow both professionally and personally.

### **Reading Reflections (30%) Students will sign up for 3 reflections.**

Students submit three reading reflections over the course of the term. These reflections should 1) summarize 2 selected readings for that week in the required or recommended lists. 2) Offer your own critical analysis of the readings on the class topic. Pages 1 and 2 should summarize your readings and page 3 should include your critical analysis of your summary.

### **Health Topic Discussion Topic (Ungraded) Due February 5**

Students will select a health topic and population of interest to analyze the social, economic and political equities impacting the health of one of the following groups a) uninsured; b) elderly; c) racial and ethnic minorities (e.g. African Americans, Hispanics/Latinos, Asians, or a specific ethnic group within these categories); d) women as a group; e) migrant workers; f) undocumented workers; g) immigrant groups (e.g. middle Eastern Populations, Mexicans); h) LGBTQ groups; i) rural residents; j) the homeless; k) people incarcerated or former prisoners l) children and youth; m) any other non-specified vulnerable and socially disadvantaged community of interest. In one paragraph you will describe the health topic and the population that will be the focus of a health disparity summary and a health equity proposal.

### **Health Disparity Summary (25%) Due February 26**

Students will conduct a literature review and write a short (3 page) summary of a health disparity in a specific population. The summary will describe the scope of the problem and identify factors associated with it (i.e., distribution and determinants of the health disparity). The summary should explain the importance of the problem and serve as the background for the next assignment, the health equity proposal. Specific guidelines for the summary will be distributed in class and available electronically.

### **Health Equity Intervention (25%) Due May 7**

Students will write a short intervention proposal (6 pages) to address the health disparity identified in the health disparity summary. Key elements of the proposal include a conceptual or logic model of the problem, explanation of the selection of modifiable determinants of the disparity (i.e., intervention targets), description of the intervention strategies and consideration of potential limitations. Specific guidelines for the proposal will be distributed in class and available electronically.

## **Student Presentation (10%) Due April 30**

Students will give a 10-15-minute power point presentation of their health disparity and health equity proposals to the class. Specific guidelines for the proposal will be distributed in class and available electronically.

### **Grading:**

A	93-100%
A-	90-92%
B+	87-89%
B	83-86%
B-	80-82%
C+	77-79%
C	73-76%
C-	70-72%
D	60-69%
F	Below 60%

### **Accommodation Statement:**

If you need an accommodation based on how course requirement interact with the impact of a disability, you should contact me to arrange an appointment as soon as possible. At the appointment we can discuss the course format and requirements, anticipate the need for adjustments and explore potential accommodations. I rely on the Disability Services Office for assistance in developing strategies and verifying accommodation needs. If you have not previously contacted them I encourage you to do so.

### **Title IX Statement (Required Language)**

A Note About Sexual Violence and Sexual Misconduct: As a UNM faculty member, I am required to inform the Title IX Coordinator at the Office of Equal Opportunity (oeo.unm.edu) of any report I receive of gender discrimination which includes sexual harassment, sexual misconduct, and/or sexual violence. You can read the full campus policy regarding sexual misconduct at <https://policy.unm.edu/universitypolicies/2000/2740.html>. If you have experienced sexual violence or sexual misconduct, please ask a faculty or staff member for help or contact the LoboRESPECT Advocacy Center.

### **Academic Integrity:**

Each student is expected to maintain the highest standards of honesty and integrity in academic and professional matters. The University reserves the right to take disciplinary action, up to and including dismissal, against any student who is found guilty of academic dishonesty or otherwise fails to meet the standards. Any student judged to have engaged in academic dishonesty in course work may receive a reduced or failing grade for the work in question and/or for the course.

## **Course Schedule:**

**Week 1 (January 15): Martin Luther King Day, No Class**

**Week 2 (January 22): Course Introduction**

**Week 3 (January 29): Health Disparities, Health Inequities and the Social Determinants of Health**

### **Required Readings:**

Braveman, P. (2006). HEALTH DISPARITIES AND HEALTH EQUITY: Concepts and Measurement. *Annual Review of Public Health*, 27(1), 167-194.

Braveman, P. A., Kumanyika, S., Fielding, J., LaVeist, T., Borrell, L. N., Manderscheid, R., & Troutman, A. (2011). Health Disparities and Health Equity: The Issue Is Justice. *American Journal of Public Health*, 101(S1).

Marmot, M., Friel, S., Bell, R., Houweling, T. A. J., & Taylor, S. (2008). Closing the gap in a generation: health equity through action on the social determinants of health. *The Lancet*, 372(9650), 1661-1669.

Sen, Amartya. (2010). "Why Health Equity?" In *Tackling Health Inequities through Public Health Practice*, Richard Hofrichter and Rajiv Bhatia, Editors. Oxford: Oxford University Press, 57-70.

### **Recommended:**

Health and Human Services: Health Equity Glossary

<https://www.minorityhealth.hhs.gov/npa/templates/browse.aspx?lvl=1&lvlid=34>

**Week 4 (February 5): The Social Determinants of Health Part I: Structural Racism(s)**

**\*Health Equity Topic Due**

### **Required Readings:**

Chaufan, C., Davis, M., & Constantino, S. (2011). The Twin Epidemics of Poverty and Diabetes: Understanding Diabetes Disparities in a Low-Income Latino and Immigrant Neighborhood. *Journal of Community Health*, 36(6), 1032-1043. doi:10.1007/s10900-011-9406-2

Ford, C. L., & Harawa, N. T. (2010). A new conceptualization of ethnicity for social epidemiologic and health equity research. *Social Science & Medicine*, 71(2), 251-258.

Jones, C. P. (2000). Levels of racism: a theoretic framework and a gardener's tale. *American Journal of Public Health*, 90(8), 1212-1215.

Lukachko, A., Hatzenbuehler, M. L., & Keyes, K. M. (2014). Structural racism and myocardial infarction in the United States. *Social Science & Medicine*, 103, 42-50.

Williams, D. R., & Mohammed, S. A. (2013). Racism and Health I: Pathways and Scientific Evidence. *American Behavioral Scientist*, 57(8), 1152-1173.

### **Recommended:**

Krieger, N. (2008). Does Racism Harm Health? Did Child Abuse Exist Before 1962? On Explicit Questions, Critical Science, and Current Controversies: An Ecosocial Perspective. *American Journal of Public Health*, 98(Supplement\_1), S20-S25.

## **Week 5 (February 12): The Social Determinants of Health Part II: Place and Environmental Conditions**

### **Required Readings:**

- Baptiste, Nathalie. 2018. This Town is so Toxic, They Wiped It off the Map. *Mother Jones*. <http://www.motherjones.com/environment/2018/01/this-town-is-so-toxic-they-want-it-wiped-off-the-map/>
- Bernard, P., Charafeddine, R., Frohlich, K. L., Daniel, M., Kestens, Y., & Potvin, L. (2007). Health inequalities and place: A theoretical conception of neighbourhood. *Social Science & Medicine*, 65(9), 1839-1852.
- Keene, D. E., & Padilla, M. B. (2010). Race, Class and the Stigma of Place: Moving to “Opportunity” in eastern Iowa. *Health & Place*, 16(6), 1216-1223.
- LaViest, Thomas, Gaskin, Darrel, Trujillo, Antonio. (2011). Segregated Spaces, Risky Places: The Effect of Racial Segregation on Health Inequalities. *Joint Center for Political and Economic Studies*. Washington, D.C. <http://jointcenter.org/sites/default/files/Segregated%20Spaces%20Fact%20Sheet.pdf>
- Wegner, Mike. 2012. Place Matters: Ensuring Opportunities for Good Health of All. *Joint Center for Political and Economic Studies*. Washington, D.C. <http://www.racialequitytools.org/resourcefiles/PlaceMattersCommunity.pdf>

### **Recommended:**

- Chitewere, T., Shim, J. K., Barker, J. C., & Yen, I. H. (2017). How Neighborhoods Influence Health: Lessons to be learned from the application of political ecology. *Health & place*, 45, 117-123.
- Srinivasan, S., O’Fallon, L. R., & Dearry, A. (2003). Creating Healthy Communities, Healthy Homes, Healthy People: Initiating a Research Agenda on the Built Environment and Public Health. *American Journal of Public Health*, 93(9), 1446-1450.

## **Week 6 (February 19): The Social Determinants of Health Part III: Federal, State and Local Policies**

- Coburn, David. 2003. “Income Inequality, Social Cohesion, and the Health Status of Populations: The Role of Neoliberalism.” In *Tackling Health Inequities through Public Health Practice*, Richard Hofrichter and Rajiv Bhatia, Editors. Oxford: Oxford University Press, 335-355.
- Gilbert, K. L., & Ray, R. (2016). Why Police Kill Black Males with Impunity: Applying Public Health Critical Race Praxis (PHCRP) to Address the Determinants of Policing Behaviors and “Justifiable” Homicides in the USA. *Journal of Urban Health*, 93(1), 122-140.
- Moynihan, D. P., & Soss, J. (2014). Policy Feedback and the Politics of Administration. *Public Administration Review*, 74(3), 320-332.
- Soss, J., Fording, R., & Schram, S. F. (2011). The Organization of Discipline: From Performance Management to Perversity and Punishment. *Journal of Public Administration Research and Theory*, 21(suppl\_2), i203-i232.

## **Week 7 (February 26): Social Justice and Health Equity Theoretical Frameworks**

### **\*Health Disparity Report Due**

### **Required Readings:**

Hawe P. & Potvin L (2009). What is population health intervention research? *Can J Public Health*, 100(1), SupplI8-14.

Plough, Alonzo. (2010.) “Promoting Social Justice through Public Health Policies, Programs and Services.” In Tackling Health Inequities through Public Health Practice, Richard Hofrichter and Rajiv Bhatia, Editors. Oxford: Oxford University Press, 126-140.

Trinh-Shevrin C, Islam NS, Nadkarni S, Park R, Kwon SC (2015). Defining an integrative approach for health promotion and disease prevention: A population health equity framework. *J Health Care Poor Underserved*; 26(Suppl 2): S146-S163.

### **Week 8 (March 5): Promoting Health Equity Part I: The Role of Federal Government Agencies**

#### **Required Readings:**

Healthy People 2020: *Public Health Infrastructure*

<https://www.healthypeople.gov/2020/topics-objectives/topic/public-health-infrastructure>

Meyer, Ann Marie, Davis, Meredith, Mays, Glen. (2012). Defining Organizational Capacity for Public Health Services and Systems Research. *Journal of Public Health Management and Practices*. 8(6), 535-544.

Centers for Disease Control and Prevention – Division of Community Health. (2013). *A Practitioner’s Guide for Advancing Health Equity: Community Strategies for Preventing Chronic Disease*. Atlanta, GA: US Department of Health and Human Services.

### **Week 9 (March 12): Spring Break, No Class**

### **Week 10 (March 19): Promoting Health Equity Part II: The Role of Local County Governments**

#### **Required Readings:**

Bhatia, Rajiv et. Al (2010). Using our Voice: Forging a Public Health Practice for Social Justice. In Tackling Health Inequities through Public Health Practice, Richard Hofrichter and Rajiv Bhatia, Editors. Oxford: Oxford University Press, 296-321.

Rudolph, L., Caplan, J., Ben-Moshe, K., & Dillon, L. (2013). *Health in All Policies: A Guide for State and Local Governments*. Washington, DC and Oakland, CA: American Public Health Association and Public Health Institute.

[http://www.phi.org/uploads/files/Health\\_in\\_All\\_Policies-A\\_Guide\\_for\\_State\\_and\\_Local\\_Governments.pdf](http://www.phi.org/uploads/files/Health_in_All_Policies-A_Guide_for_State_and_Local_Governments.pdf)

Salinsky, Eileen. (2010). Governmental Public Health: An Overview of State and Local Public Health Agencies. *National Health Policy Forum*. Paper 244.

[https://hsrc.himmelfarb.gwu.edu/sphhs\\_centers\\_nhpf/244](https://hsrc.himmelfarb.gwu.edu/sphhs_centers_nhpf/244)

## **Week 11 (March 26): Promoting Health Equity Part III: Inter-sectoral Collaboration**

### **Required Readings:**

- Franz, B., Skinner, D., Kerr, A. M., Penfold, R., & Kelleher, K. (2017). Hospital–Community Partnerships: Facilitating Communication for Population Health on Columbus’ South Side. *Health Communication*, 1-13. doi:10.1080/10410236.2017.1359033
- Koo, D., O’Carroll, P. W., Harris, A., & DeSalvo, K. B. (2016). An Environmental Scan of Recent Initiatives Incorporating Social Determinants in Public Health. *Preventing Chronic Disease*, 13, E86. 1-9.
- National Academy of Sciences. (2017). *Communities in Action: Pathways to Health Equity*. National Academy Press. Chapter 7, 383-446.
- Policy Link. (2016). *The Farm to Plate Investment Program: A 10-Year Roadmap to Revitalizing Vermont’s Food System*.  
[http://www.policylink.org/sites/default/files/VT\\_Farm%20to%20Plate%20Profile\\_FINAL.pdf](http://www.policylink.org/sites/default/files/VT_Farm%20to%20Plate%20Profile_FINAL.pdf)

## **Week 12 (April 2): Strategies for Health Equity Part I: Health Equity Policy Tools**

Alfonso ML, Jackson G, Jackson A, DeShannon H, Gupta A (2015). The Willow Hill community health assessment: Assessing the needs of children in a former slave community. *Journal of Community Health* 40(5), 855-862.

Corburn, Jason. (2011). Lessons from San Francisco: Health Impact Assessments Have Advanced Political Conditions for Improving Population Health. (w. R. Bhatia). *Health Affairs*. 30 (12) :2410-2418.

Cristancho S, Garces DM, Peters KE, Mueller BC (2008). Listening to rural Hispanic immigrants in the Midwest: A community based participatory assessment of major barriers to health care access and use. *Qualitative Health Res*; 18(5): 633-646.

Health Impact Assessment: A Tool to Help Policymakers Understand Health Beyond Health Care. *Annual Review of Public Health* 28, 393-412.

Levy SR, Anderson EE, Issel LM et al. (2004). Using multilevel, multisource needs assessment data for planning community interventions. *Health Promotion Practice*; 5(1): 59-68.

## **Week 13 (April 9): Strategies for Health Equity Part II: Policy Interventions**

### **Required Readings:**

Fletcher, Jason M., David E. Frisvold, and Nathan Tefft. (2011). Are soft drink taxes an effective mechanism for reducing obesity? *Journal of Policy Analysis and Management* 30, 655-662.

Chaloupka, Frank J., Lisa M. Powell, and Jamie F. Chriqui. (2011). Sugar-sweetened beverages and obesity: The potential impact of public policies." *Journal of Policy Analysis and Management* 30, no. 3, 645-665.

Brownell, Kelly D., Thomas Farley, Walter C. Willett, Barry M. Popkin, Frank J. Chaloupka, Joseph W. Thompson, and David S. Ludwig. (2009). The public health and economic benefits of taxing sugar-sweetened beverages, *The New England Journal of Medicine*, 1599-1605.

### **Week 14 (April 16): Strategies for Health Equity Part III: Place Based Strategies**

#### **Required Readings:**

Norris, David, Rogers, Christy, Martin, Matt, Reece, Jasin, Rose, Kalima (2015). Strengthening the Pine Ridge Economy: A Regional Equity and Opportunity Assessment. Kirwan Institute Research Report.

[http://www.policylink.org/sites/default/files/PineRidge\\_FINAL.pdf](http://www.policylink.org/sites/default/files/PineRidge_FINAL.pdf)

Malekafzaliv, Shireen, Bergstrom, Danielle. (2011). Healthy Corridor for All: A Community Health Impact Assessment of Transit-Oriented Development Policy in Saint Paul, Minnesota. Policy Link.

[http://www.policylink.org/sites/default/files/HEALTHYCORRIDOR\\_SUMMARY\\_FINAL\\_20111.PDF](http://www.policylink.org/sites/default/files/HEALTHYCORRIDOR_SUMMARY_FINAL_20111.PDF).

#### **Recommended Readings:**

Change Lab Solutions. (2012) *Getting to Grocery Tools for Attracting Healthy Food Retail to Underserved Neighborhoods*.

[http://changelabsolutions.org/sites/default/files/documents/Getting\\_to\\_Grocery\\_FINAL\\_20120514.pdf](http://changelabsolutions.org/sites/default/files/documents/Getting_to_Grocery_FINAL_20120514.pdf)

### **Week 15 (April 23): Strategies for Health Equity Part IV: Community Based Participatory Research**

#### **Required Readings:**

Cacari-Stone, L., Wallerstein, N., Garcia, A. P., & Minkler, M. (2014). The Promise of Community-Based Participatory Research for Health Equity: A Conceptual Model for Bridging Evidence With Policy. *American Journal of Public Health*, 104(9), 1615-1623.

Devia, C., Baker, E. A., Sanchez-Youngman, S., Barnidge, E., Golub, M., Motton, F., . . . Wallerstein, N. (2017). Advancing system and policy changes for social and racial justice: comparing a Rural and Urban Community-Based Participatory Research Partnership in the U.S. *International Journal for Equity in Health*, 16(1), 17.

Wallerstein, Nina, Duran, Bonnie, Oetzel, John, Minkler, Meredith (2018) Community Based Participatory Research for Health. Chapter 2, 17-29; Chapter 6, 77-93; Chapter 9, 124-135.

### **Week 16 (April 30): Class Presentations**

### **Week 17 (May 7): Final Projects Due**



