

**PubH 6078  
Public Health Policy as a Prevention Strategy  
Course Syllabus  
Spring 2009**

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<b>Credits:</b>	<b>2</b>
<b>Meeting Days:</b>	<b>Monday</b>
<b>Meeting Time:</b>	<b>3:35-5:30 PM</b>
<b>Meeting Place:</b>	<b>Moos T 1-430</b>
<b>Instructor:</b>	<b>Jean Forster, PhD, MPH</b>
<b>Office Address:</b>	<b>WBOB Room 385 1300 South Second Street</b>
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<b>Office Hours:</b>	<b>By appointment</b>
<b>Assistant:</b>	<b>Amanda Rian (612-626-8870)</b>

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### **I. Course Description**

This course will introduce students to a prevention policy framework; will present the philosophical, ethical, economic, political and efficacy rationale for this approach to prevention; will contrast policy approaches to prevention with individual-based approaches; and will present the historical and current application of this framework in several areas of prevention in public health. This course is intended for second year MPH students who have an interest in prevention or regulatory policy. This course is an intervention course for CHE students, and meets the advocacy competency requirement for MCH students.

### **II. Course Prerequisites**

2nd yr MPH student (CHE or MCH or PubH Nutr or EPI MPH or EPI) or instructor consent

### **III. Course Goals and Objectives**

As a result of this course, students will be able to:

1. Demonstrate a critical understanding of the basic philosophy, models, and assumptions of prevention policy;
2. Understand the health implications of different models of prevention;
3. Critically discuss and compare the history of prevention policies in injury control, tobacco control, and regulation of food supply;
4. Identify a range of policy strategies to address the problems of injury control, tobacco control, and regulation of food supply, and evaluate their potential effectiveness and feasibility;
5. Apply the elements of prevention policy models developed in the course to problems in public health not discussed in class;
6. Understand the ethical and practical limits of prevention policy in addressing various public health problems, and;
7. Identify a range of roles that public health professionals can play in prevention policy.

#### IV. Methods of Instruction and Work Expectations

The course will use a combination of lecture and discussion format to encourage broad participation. Each session will be introduced by a lecture that will serve as a point of departure for class discussion. Students will be asked to bring information from their reading to class discussion.

#### V. Readings

All readings are available on the course website as pdfs.

#### VI. Course Outline/Weekly Schedule

##### Week 1, January 26

*Introduction to the course; introduction to policy as a prevention strategy*

##### Week 2, February 2

*Epidemiological basis for a population approach to prevention policy; criteria for prevention policy strategies*

McKinlay JB, Marceau LD. To Boldly Go... *Am J Public Health* 90(1): 25-33, 2000. Rose G. Sick Individuals and Sick Populations. *Int J Epidemiol* 30:427-432, 2001.

Rose G. Strategy of Prevention: Lessons from Cardiovascular Disease. *BMJ* 282:1847-1851, 1981.

Doyle YG, Furey A, Flowers J. Sick Individuals and Sick Populations: 20 Years Later. *J Epidemiol Community Health* 60:396-398, 2006.

Michels KB. The Promise and Challenges of Population Strategies of Prevention. *Int J Epidemiol* 37:914-916, 2008.

##### Week 3, February 9

*Political and philosophical basis for prevention policy; community as a conceptual basis for public health policy*

Gostin LO. Public Health Law in a New Century: Part I: Law as a Tool to Advance the Community's Health. *JAMA* 283(21): 2837-2841, 2000.

Gostin LO. Public Health Law in a New Century: Part II: Public Health Powers and Limits. *JAMA* 283(22): 2979-2984, 2000.

Gostin LO. Public Health Law in a New Century: Part III: Public Health Regulation: A Systematic Evaluation. *JAMA* 283(23): 3118-3122, 2000.

Forster JL. A Communitarian Ethical Model for Public Health Intervention. *J Public Health Policy* 3(2): 150-163, 1982.

Hermer LD. Personal Responsibility: A Plausible Social Goal, but not for Medicaid Reform. *Hastings Cent Rep* 38(2):16-19, 2008.

Jones MM, Bayer R. Paternalism and its Discontents: Motorcycle Helmet Laws, Libertarian Values, and Public Health. *Am J Public Health* 97(2):208-217, 2007.

##### Week 4, February 16 QUIZ 1 DUE

*The political economy of prevention policy; public health and markets, political ideology and disease causation*

Morone JA. Morality, Politics, and Health Policy. In: Mechanic D, Rogut LB, Colby DC, Knickman JR (eds). *Policy Challenges in Modern Health Care*. New Brunswick, NJ: Rutgers University Press; 2005:13-25.

Link BG, Phelan JC. Fundamental Sources of Health Inequalities. In: Mechanic D, Rogut LB, Colby DC, Knickman JR (eds). *Policy Challenges in Modern Health Care*. New Brunswick, NJ: Rutgers University Press; 2005:71-84.

Adler, NE, Stewart J, et al. (2007). Reaching for a Healthier Life: Facts on Socioeconomic Status and Health in the U.S. The John D. and Catherine T. Macarthur Foundation Research Network on Socioeconomic Status and Health.

## Week 5, February 23

### *Introduction to policy strategies for injury prevention: definitions, epidemiology, importance of study of injuries, and the Haddon matrix*

Grossman DC. The History of Injury Control and the Epidemiology of Child and Adolescent Injuries. *Future Child* 10(1): 23-52, 2000.

Phelan KJ, Khoury J, Kalkwarf H, Lanphear B. Residential Injuries in US Children and Adolescents. *Public Health Rep* 120:63-70, 2005.

Barnett DJ, Balicer RD, Blodgett D, Fewes AL, Parker CL, Links JM. The Application of the Haddon Matrix to Public Health Readiness and Response Planning. *Environ Health Perspect* 113(5):561-566, 2005.

## Week 6, March 2 QUIZ 2 DUE

### *Injury policy continued: strategies for various at risk populations*

Cummings P, Rivara FP, Olson CM, Smith KM. Changes in Traffic Crash Mortality Rates Attributed to Use of Alcohol, or Lack of a Seat Belt, Air Bag, Motorcycle Helmet, or Bicycle Helmet, United States, 1982-2001. *Inj Prev* 12:148-154, 2006.

Rivara FP, Mock C. The 1,000,000 Lives Campaign. *Inj Prev* 11:321-323, 2005.

Centers for Disease Control and Prevention. Strategies to Improve External Cause-of-Injury Coding in State-Based Hospital Discharge and Emergency Department Data Systems Recommendations of the CDC Workgroup for Improvement of External Cause-of-Injury Coding. *MMWR* 2008;57(No. RR-1):1-13.

## Week 7, March 9 PAPER TOPIC REGISTERED

### *Gun violence as an injury problem*

Hemenway D. A Public Health Approach to Firearms Policy. In: Mechanic D, Rogut LB, Colby DC, Knickman JR (eds). *Policy Challenges in Modern Health Care*. New Brunswick, NJ: Rutgers University Press; 2005:85-98.

Miller M, Azrael D, Hepburn L, Hemenway D, Lippmann SJ. The Association Between Changes in Household Firearm Ownership and Rates of Suicide in the United States, 1981-2002. *Inj Prev* 12:178-182, 2006.

Vernick JS, Webster DW. Policies to Prevent Firearm Trafficking. *Inj Prev* 13:78-79, 2007.

Miller M, Hemenway D. Guns and Suicide in the United States. *N Engl J Med* 359(10):989-991, 2008.

Sumner SA, Layde PM, Guse CE. Firearm Death Rates and Association with Level of Firearm Purchase Background Check. *Am J Prev Med* 35(1):1-6, 2008. SPRING BREAK, March 16

## Week 8, March 23 QUIZ 3 DUE

### *Introduction to policy strategies for tobacco control: epidemiology, taxation*

Centers for Disease Control and Prevention. Cigarette Smoking Among Adults — United States, 2007. *MMWR* 57(45):1221-1226, 2008.

Centers for Disease Control and Prevention. Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses — United States, 2000–2004. *MMWR* 57(45):1226-1228, 2008.

Bayer R, Stuber J. Tobacco Control, Stigma, and Public Health: Rethinking Relations. *Am J Public Health* 96(1): 47-50, 2006.

White VM, Gilpin EA, White MM, Pierce JP. How Do Smokers Control Their Cigarette Expenditures? *Nic Tob Res* 7(4): 625-635, 2005

Gospodinov N, Irvine I. Tobacco Taxes and Regressivity. *J Health Econ* Nov 2008 (epub available earlier).

## Week 9, March 30 (guest speaker: Toben Nelson, Ph.D.)

### *Local Alcohol Policy*

Gruley B. How one university stumbled in its attack on alcohol abuse. *The Wall Street Journal*. October 14, 2003.

American Medical Association. "A Matter of Degree" Advocacy Initiative. October 2003. Available online at: [http://www.ama-assn.org/ama1/pub/upload/mm/388/amod\\_histories.pdf](http://www.ama-assn.org/ama1/pub/upload/mm/388/amod_histories.pdf)

Week 9, March 30 (continued)

Weitzman ER, Nelson TF, and Wechsler, H. Assessing success in a coalition-based environmental prevention programme targeting alcohol abuse and harms: Process measures from the Harvard School of Public Health "A Matter of Degree" programme evaluation. *Nordisk Alkohol & Narkotikatidskrift (English Supplement)* 20:141-149, 2003.

Weitzman ER, Nelson TF, Lee H, and Wechsler, H. Reducing drinking and related harms in college: Evaluation of the "A Matter of Degree" program. *Am J Prev Med* 21(3):187-196, 2004.

Week 10, April 6

*Tobacco Policy continued: Clean indoor air laws, advertising regulations, warning labels*

Dinno A, Glantz S. Clean Indoor Air Laws Immediately Reduce Heart Attacks. *Prev Med* 45:9-11, 2007.

Glantz SA. Meta-analysis of the Effects of Smokefree Laws on Acute Myocardial Infarction: An Update. (letter to the editor) *Prev Med* 47:452-453, 2008.

Schober Se, Zhang C, Brody DJ, Marano C. Disparities in Secondhand Smoke Exposure – United States, 1988-1994 and 1999-2004. *MMWR* 57(27):744-747, 2008.

Eriksen M, Chaloupka F. The Economic Impact of Clean Indoor Air Laws. *CA Cancer J Clin* 57:367-378, 2007.

Hammond D, Fong GT, McDonald PW, Cameron R, Brown KS. Impact of the Graphic Canadian Warning Labels on Adult Smoking Behaviour. *Tob Control* 12(4): 391-395, 2003.

Week 11, April 13 QUIZ 4 DUE

*Tobacco Policy Continued: litigation, FDA regulation of tobacco*

Campaign for Tobacco Free Kids. A Decade of Broken Promises to Our Children: The 1998 State Tobacco Settlement Ten Years Later. <http://www.tobaccofreekids.org/> November 17, 2008, pg i-xv.

Vernick JS, Rutkow L, Teret SP. Public Health Benefits of Recent Litigation Against the Tobacco Industry. *JAMA* 298(1):86-89, 2007.

Brandt AM. FDA Regulation of Tobacco – Pitfalls and Possibilities. *N Engl J Med* 359(5):445-448, 2008.

Burns Dm, Dybing E, Gray N, Hecht S, Anderson C, Sanner T, O'Connor R, Djordjevic M, Dresler C, Hainaut P, Jarvis M, Opperhuizen A, Straif K. Mandated Lowering of Toxicants in Cigarette Smoke: A Description of the World Health Organization TobReg Proposal. *Tob Control* 117:132-141, 2008.

Week 12, April 20 PAPER PROGRESS REPORT DUE

*Food policy to prevent over-consumption*

Readings TBD

Week 13, April 27 QUIZ 5 DUE Guest Lecture Melissa Nelson Ph.D.

*Increasing physical activity through policy*

Readings TBD

Week 14, May 4

*Putting policy into public health practice*

Freudenberg N. Public Health Advocacy to Change Corporate Practices: Implications for Health Education Practice and Research. *Health Educ Behav* 32(3): 298-319, 2005.

Oliver TR. The Politics of Public Health Policy. *Ann Rev Public Health* 27:195-233, 2006.

Lezine DA, Reed GA. Political Will: A Bridge Between Public Health Knowledge and Action. *Am J Public Health* 97(11):2010-2013, 2007.

Week 15m May 11 FINAL PAPER DUE

## VII. Evaluation and Grading

Students will be evaluated on participation (15%), 5 one-question take-home quizzes (50% total), and three related written assignments (35% total). Both A-F and S-N grading options are available. Plus/minus grades may be given. The basis for assigning grades is the following:

A	4.0	Represents achievement that is outstanding relative to the level necessary to meet course requirements. (95-100 points)
A-	3.67	(90-94 points)
B+	3.33	(87-89 Points)
B	3.00	Represents achievement that is significantly above the level necessary to meet course requirements. (83-86 points)
B-	2.67	(80-82 points)
C+	2.33	(77-79 points)
C	2.00	Represents achievement that meets the course requirements in every respect. (73-76 points)
C-	1.67	(70-72 points)
D+	1.33	(67-69 points)
D	1.00	Represents achievement that is worthy of credit even though it fails to meet fully the course requirements. (60-66 points)
F	0.00	Represents failure and signifies that the work was completed but not at a level of achievement worthy of credit, or work that was not completed and there was no agreement between the instructor and the student that the student should be awarded an "I".
S		≥ 70 points

### Incomplete Contracts

A grade of incomplete "I" shall be assigned at the discretion of the instructor when, due to extraordinary circumstances (e.g., documented illness or hospitalization, death in family, etc.), the student was prevented from completing the work of the course on time. The assignment of an "I" requires that a contract be initiated and completed by the student before the last day of class, and signed by both the student and instructor. If an incomplete is deemed appropriate by the instructor, the student in consultation with the instructor, will specify the time and manner in which the student will complete course requirements. Extension for completion of the work will not exceed one year (or earlier if designated by the student's college). For more information and to initiate an incomplete contract, students should go to: [www.sph.umn.edu/grades](http://www.sph.umn.edu/grades).

### University of Minnesota Uniform Grading and Transcript Policy

A link to the policy can be found at [onestop.umn.edu](http://onestop.umn.edu).

### Course Evaluation

Beginning in fall 2008 the SPH will collect student course evaluations electronically using a software system called CoursEval. The system will send email notifications to students when they can access and complete their course evaluations. Students who complete their course evaluations promptly will be able to access their final grades just as soon as the faculty member renders the grade. All students will have access to their final grades two weeks after the last day of the semester regardless of whether they completed their course evaluation or not. Student feedback on course content and faculty teaching skills are important means for improving our work. Please take the time to complete a course evaluation for each of the courses for which you are registered.

## VIII. Other Course Information and Policies

### Grade Option Change (if applicable)

For full-semester courses, students may change their grad option, if applicable, through the second week of the semester. Grade option change deadlines for other terms (i.e. summer and half-semester) can be found at [onestop.umn.edu](http://onestop.umn.edu).

### Course Withdrawal

Students should refer to the Refund and Drop/Add Deadlines for the particular term at [onestop.umn.edu](http://onestop.umn.edu) for information and deadlines for withdrawing from a course. As a courtesy, students should notify their instructor and, if applicable, advisor of their intent to withdraw.

Students wishing to withdraw from a course after the noted final deadline for a particular term must contact the School of Public Health Student Services Center at [sph-ssc@umn.edu](mailto:sph-ssc@umn.edu) for further information

**Student Conduct, Scholastic Dishonesty and Sexual Harassment Policies**

Students are responsible for knowing the University of Minnesota, Board of Regents' policy on Student Conduct and Sexual Harassment found at [www.umn.edu/regents/polindex.html](http://www.umn.edu/regents/polindex.html).

Students are responsible for maintaining scholastic honesty in their work at all times. Students engaged in scholastic dishonesty will be penalized, and offenses will be reported to the Office for Student Conduct and Academic Integrity (OSCAI) [www1.umn.edu/oscai/](http://www1.umn.edu/oscai/).

The University's Student Conduct Code defines scholastic dishonesty as "plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on academic work; taking, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain dishonestly grades, honors, awards, or professional endorsement; or altering, forging, or misusing a University academic record; or fabricating or falsifying of data, research procedures, or data analysis."

Plagiarism is an important element of this policy. It is defined as the presentation of another's writing or ideas as your own. Serious, intentional plagiarism will result in a grade of "F" or "N" for the entire course. For more information on this policy and for a helpful discussion of preventing plagiarism, please consult University policies and procedures regarding academic integrity: <http://writing.umn.edu/tww/plagiarism/>.

Students are urged to be careful that they properly attribute and cite others' work in their own writing. For guidelines for correctly citing sources, go to <http://tutorial.lib.umn.edu/> and click on "Citing Sources".

In addition, original work is expected in this course. It is unacceptable to hand in assignments for this course for which you receive credit in another course unless by prior agreement with the instructor. Building on a line of work begun in another course or leading to a thesis, dissertation, or final project is acceptable.

If you have any questions, consult the instructor.

**Disability Statement**

It is University policy to provide, on a flexible and individualized basis, reasonable accommodations to students who have a documented disability (e.g., physical, learning, psychiatric, vision, hearing, or systemic) that may affect their ability to participate in course activities or to meet course requirements. Students with disabilities are encouraged to contact Disability Services to have a confidential discussion of their individual needs for accommodations. Disability Services is located in Suite 180 McNamara Alumni Center, 200 Oak Street. Staff can be reached by calling 612/626-1333 (voice or TTY).