Course syllabus for

Public Health Sciences 2, 30 credits
Folkhälsovetenskap 2, 30 hp

This course has been cancelled, for further information see Transitional provisions in the last version of the syllabus.

Please note that the course syllabus is available in the following versions:
Spring2008, Autumn2012, Spring2013

Course code          FHG001
Course name          Public Health Sciences 2
Credits              30 credits
Form of Education    Higher Education, study regulation 2007
Main field of study  Public Health Sciences
Level                G1 - First cycle 1
Grading scale        Fail (U), pass (G) or pass with distinction (VG)
Department           Department of Public Health Sciences
Participating institutions
  • Department of Biosciences and Nutrition

Decided by           Programnämnden kandidatprogrammet i folkhälsovetenskap
Decision date        2007-10-02
Revised by           Programnämnd 5
Last revision        2012-10-29
Course syllabus valid from Autumn 2012

Specific entry requirements

Ma C, En B with at least a Pass grade/3

Objectives

Part 1: Determinants of health and disease/illness, 7.5 HE credits.
On completion of this part, the student should be able to;
•Account for and compare the disease panorama and cost of illness in rich and poor countries, at a general level, and the development over time
•Reflect on the importance of the structure and organisation of the society for the level and distribution of health
•Account for the living habits’ effect on the health at an individual and societal level
• Discuss and apply theoretical models of health, and the origin of diseases and their social distribution in the population
• Analyse determinants of health with regard to ethnicity, gender and social position, independently, and communicate this orally and in writing

Part 2: Anatomy, Physiology and the Origin of Disease, 7.5 HE credits.
The students should be able to identify and discuss around:
• the concepts of disease, national disease, disease classification and cost of illness
• medical treatment and risk factors of the major national diseases

Be able to account for:
• important physiological functions in the body and basic anatomy of organs and structures related to these,
• elementary pathology of the major national diseases,
• the body's metabolism and the relationship between nutrition, physical activity and health,
• basic genetics

Be able to analyse, compare and explain
• the major national diseases both nationally and globally and options for primary, secondary and tertiary prevention of the major endemic diseases according to Gjestland's scheme

Further, the students should be able to:
• search for and evaluate new, relevant knowledge in the area of diseases

Part 3: Disease prevention and health promotion 7.5 HE credits
• be able to describe and understand the use of what is meant by evidence/knowledge-based public health care when planning preventive and health promotion interventions
• Be able to describe important and common actors, roles and arenas in work with interventions
• Explain and account for how planning models for disease preventive and health promotion work can be used, and particularly the model Precede-Proceed, and also be familiar with advantages and disadvantages of the use
• Account for different theories and models of behavioural change around transmission and mobilisation of the local community
• Be able search in different scientific databases and apply retrieved information when planning preventive or health promotion interventions
• Be able to apply different theories and models of behavioural change, dissemination of information and mobilisation when planning preventive or health promotion interventions Understand the importance of ethical problems and values in the implementation of disease preventive and health promotion interventions

Part 4: Health policy, legislation and management, 7.5 HE credits
Theme 1: Health policy, and health systems
• Be familiar with central concepts with connection to public health policy in an international context
• Account for missions, roles, policy instruments and structure for leading over and intergovernmental organisations.
• Account for the contents of important health-political documents, nationally and internationally.
• Explain how the health development - in a single country, or for groups of countries or regions - will be affected by further globalisation regarding
  a) an accelerating privatisation of health care as well as sickness insurances;
  b) management of natural and environmental resources in order to achieve sustainable development for future generations;
  c) a globalised labour market, and the impact of the standard of working environment achieved in Sweden and comparable countries, with regard to i.a. a children, youth and gender aspects;
d) increased free trade;
e) the importance of IT as a boundless and transnational information and communication instrument for patient empowerment and expectations on the health care.
•be able to, on the basis of information in scientific databases, collect, analyse, summarise results and present this both orally and in written form.

Theme 2: Public health aims. control and follow-up
•Be able to account for the importance of international and national legislation and regulation as a complement to other preventive and health promotion approaches.
•Know about legislation and regulation of tobacco.
•Be able to account for strategies and public health aims based on health determinants.
•Be able to account for control mechanisms, and follow-up methods in the public health care.
•Be able to account for decision-making processes and control instruments within WHO and EU.

Theme 3: Political decision-making processes
Basic knowledge about:
•the policy process and political decision making about health-political equal treatment strategies,
•policy and strategies for equality in health, nationally and internationally,
•public health political implementation and follow-up based on determinants and indicators.

Theme 4: Health communication and mass media
•Understand the role of communication in connection with information about health and un-health.
•Be familiar with how different factors, in particular, mass media influence knowledge, attitudes and behaviours about health and unhealth, based on theories on health behaviour, and the operation, roles and effects of media
•Be able to discuss risk communication based on different stakeholder interests.
•Be able to reflect on preconditions for improved health and risk communication with and without access to mass media.

Theme 5: Organisational Theory and Management
•Understand the role and importance of the organisation and the leadership within healthcare and primary care.
•Be familiar with different theories and models for organising public activities
•Be familiar with how different factors linked to the leadership affect planning and implementation of preventive and health promotion interventions

Content

Part 1: Determinants of health and disease/illness, 7.5 HE credits
The aim of the part is to give the student an introduction to and theoretical basis of health determinants, and some risk factors for disease, and treats the conditions of health based on ethnicity, gender and social position.

Part 2: Anatomy, Physiology and the Origin of Disease, 7.5 HE credits.
This part consists of five weeks and uses different working methods for teaching and learning. The dominating element in the course are the whole-group lectures and, in addition to these, it includes compulsory parts in the form of a seminar, two PBLs and the implementation of study questions in the web-based tool PingPong. Individual knowledge acquisition from the reading list is also included as a working method during the course. The part intends to give the student knowledge of the structure and functions of the body, an understanding of what is meant by disease, various ways of classifying diseases and an insight into how to calculate cost of sickness. In addition to this, you should also learn about the major diseases, both nationally and globally, seen in the form of causes, manifestations and treatment, and the public health perspective on these.
Part 3: Disease prevention and health promotion, 7.5 HE credits.
The course is given during five weeks and starts with an overview of health promotion and disease preventive concepts and work followed by an overview of how different theories and models of behavioural change, transmission and mobilisation (individual, group, local community) may be used for design, implementation and evaluation of health promotion and disease preventive interventions (social analysis, planning models, cross-sectoral work). In addition, the course deals with the concept of evidence-based work with exercise in database search and theoretical application. The course is integrated with further practical exercises with nutrition as an example area.

Part 4: Health policy, legislation and management, 7.5 HE credits
Theme 1: Health policy, and health systems
Theme health policy, and health systems provides basic knowledge of national and international health policy, control instruments, various documents, and the importance of an increased globalisation for public health. An review is made of the concept of health system and its subdivision according to hospitals, care centres, pharmacies and households, and functions such as stewardship (leadership, control, regulation), financing forms, production of resources (staff, drugs and technology) and service.

Theme 2: Public health aims, control and follow-up
The political bases of the public health care with examples of tools and instruments in the form of international and national legislation and the decision-making processes. An overview of strategies, documents, aims and methods for a national follow-up/evaluation

Theme 3: Political decision-making processes
Theme political decision-making processes provides general knowledge of political decision making at the national level in Sweden with a focus on public health political issues. Since equality in health has been one of the general public health political objectives at the national as well as international level for several decades, a some emphasis is placed on this issue. In this theme, a number of theories that, at a general level, describe the different phases of the policy process, are also discussed. Some issues that are discussed:

• What does the distribution of responsibility look like at the national level, when it comes to public health political issues?
• How has one worked with the equality issue in politics at national and international levels?
• How can one describe and explain the different phases of political decision making?

The theme about implementation and follow-up of the public health policy, treats
• The assignment to make a National Public Health Policy Report with the government as a stakeholder,
• Work with determinants and indicators as a prerequisite for follow-up and reporting,
• Implementation of the public health policy at the national, regional and local level,
• Proposals presented by various actors regarding public health actions, and skills and capacity for such actions

Issues that are treated are inter alia
• What requirements should be made on determinants and indicators?
• What options and challenges are actors facing at the national, regional and local levels when public health policy should be carried out and followed up?
• Which health threats are particularly large, why and what can be done to them?
• What do different actors want in terms of capacity for primary health care?

Theme 4: Health communication and mass media
Theme health communication and mass media provides general knowledge of communication, particularly in connection with health, disease and risk, and, in particular, the role of mass media, that has got increased attention in recent years. Some issues that are discussed:
• How do the different roles and functions of the media affect the knowledge of people, attitudes and
behaviours around health, disease and risk?
•What are the advantages and disadvantages of using the media for health promotion e.g. through media advocacy? Can this get in conflict with the other social roles of the media?
•How does health communication and risk communication, respectively, differ from other communication?
•What shortages are there in the communication around health, disease and risk, and how can they be remedied?
The issues are high-lighted based on theory in public health science, behavioural science and media science, and practical experiences as medical journalists and public health workers. The media's treatment of acrylamide and bird flu is used as an example, among others.

Theme 5: Organisational Theory and Management
Basic knowledge of organisation cultures and leadership in connection with healthcare and primary health care

Determinants of health and disease/illness, 7.5 hp
Grading scale : VU

Anatomy, Physiology and the Origin of Disease, 7.5 hp
Grading scale : VU

Disease prevention and health promotion, 7.5 hp
Grading scale : VU

Hälsopolitik och hälsosystem, 7.5 hp
Grading scale : VU

Teaching methods

Part 1: Determinants of health and disease/illness, 7.5 HE credits.
Lectures, group assignments and individual assignments that are presented both in writing and in a seminar. In addition to individual knowledge acquisition via the reading list, reviews of articles and critical debates are carried out as a complement to the reading list. Reviews of articles and discussion of the reading list are compulsory, so also group discussions/presentations.

Part 2: Anatomy, Physiology and the Origin of Disease, 7.5 HE credits.
Lectures, seminar, PBL, independent studies and study questions.

Part 3: Disease prevention and health promotion, 7.5 HE credits.
This part consists of lectures, practical exercises (database search, workshop), group assignments and individual knowledge acquisition via reading list..

Part 4: Health policy, legislation and management, 7.5 HE credits.
Lectures, literature studies, project work and seminars.

Examination
Part 1: Determinants of health and disease/illness, 7.5 HE credits. 
Take-home exam with the grades Fail/Pass/Pass with distinction 
Assignments during the course: Poster (Fail/Pass), Essay (Fail/Pass/Pass with distinction), Letter to a 
friend (Fail/Pass), Case-assignment (Fail/Pass/Pass with distinction)

Part 2: Anatomy, Physiology and the Origin of Disease, 7.5 HE credits. 
The examination consists of both approved work in the compulsory parts with achieved course 
objectives, and a Pass grade in a written examination.

In the written examination, the grading scale Fail/Pass/Pass with distinction.
For other compulsory parts (seminar, PBL and study questions) the grading scale Fail/Pass is used.

For this part, the grading scale Fail/Pass/Pass with distinction is used.

Part 3: Disease prevention and health promotion, 7.5 HE credits. This part is examined through a 
take-home exam. An addition, participation in and presentation of group assignments is compulsory.
Absence is compensated for with an individual assignment.

For a take-home exam, the grading system Fail/Pass/Pass with distinction is used.
For compulsory group assignments, the grading scale Fail is used/pass.

In this part, the grades Fail/Pass/Pass with distinction are used.

Part 4: Health policy, legislation and management, 7.5 HE credits.
Written individual examination of the whole course. Active participation in project work and seminars.

Literature and other teaching aids

Caldwell, JC
Population health in transition.

Casterline, JB i; Demeny, P; McNicoll, G
Demographic transition, Encyclopedia of population
Thomson Gale: USA, 2003

Indicators of socioeconomic position (part 1)
Galobardes, B; Shaw, M; Lawlor, DA; Lynch, JW; Smith, GD
JECH, 2006

Interpersonal violence towards women.
Ekblad, S; Kastrup, MC; Eisenman, DP; Arcel, L

Lindencrona, F; Ekblad, S; Johansson Blight, K
Integration och folkhälsa- en kunskapsöversikt. Rapport Integration 2005
Integrationsverket, 2005

Macintyre, S; Hunt, K; Sweeting, H
Gender differences in health: are things really as easy as they seem?
Social Science and Medicine, 1996
Moss, NE
**Gender equity and socioeconomic inequality: a framework for the patterning of women’s health.**

Murray, CD; Lopez, AD
**Summary: the global burden of disease. Global burden of disease and injury series.**
Harvard University Press, 1996
URL: Länk till sammanfattningen

Omran, AR
**The epidemiologic transition: A theory of the epidemiology of population change**
The Milbank Quarterly, 2005

Selected major risk factors and global and regional burden of disease
*Ezzati, M; Lopez, AD; Rodgers, A; Hoorn, AV; Murray, CLJ*
The Lancet, 2002

Sen, G; George, A; Östlin, P
**Engendering health equity: a review of research and policy: Working paper series**
Harvard Center for Population and Development Studies., 2002
URL: Länk till artikeln

Social determinants of health
*Marmot, Michael; Wilkinson, Richard G.*

Weber, Lynn
**Understanding race, class, gender, and sexuality: a conceptual framework**

Whitehead, M; Dahlgren, G
**Levelling up (Part 1): a discussion paper on concepts and principles for tackling social inequalities in health**
WHO Collaborating Centre for Policy Research on Social Determinants of Health, 2006

Whitehead, M; Dahlgren, G
**Levelling up (Part 2): a discussion paper on concepts and principles for tackling social inequalities in health**
WHO Collaborating Centre for Policy Research on Social Determinants of Health, 2006

Barnmedicin
*Lindberg, Tor; Lagercrantz, Hugo*
ISBN:91-44-04469-0 LIBRIS-ID:10275612

Henriksson, O; Rasmusson, M
Fysiologi
Invärtesmedicin : sjukdomslära och vårdaspekter
Agardh, Carl-David; Hedner, Pavo; Forss, Kalle; Palmgren, Anders

Svanström, Leif
Sjukdomslära
ISBN:91-44-02883-0 (inb.) LIBRIS-ID:9167740

Antonovsky, Aaron
Hälsans mysterium

Chan, B. C.; Ryan, D. A. J; Tudor-Locke, C
Health Benefits of a Pedometer-based Physical Activity Intervention in Sedentary Workers
Preventive Medicine, 2004

Farley, C
The promotion of Safe Behaviours at the Community Level. Evaluation of a Bicycle Helmet-Wearing Campaign among 5- to 12- Year-Old Children
Doctoral thesis. Stockholm: Karolinska Institutet, Department of Social Medicine., 2003

Glanz, K; Rimer, B
Theory at a Glance. A Guide For Health Promotion Practice
URL: Link to pdf

Hedin, A; Källestål, C
Kunskapsbaserat folkhälsoarbete. Del 1. Handbok för framställning av kunskapsöversikter om interventioner inom folkhälsoområdet
Stockholm: Statens folkhälsoinstitut., 2002

Hedin, A; Källestål, C
Kunskapsbaserat folkhälsoarbete. Del 2. Handbok för framställning av kunskapsöversikter om interventioner inom folkhälsoområdet
Stockholm: Statens folkhälsoinstitut., 2004

Public Health Nutrition Strategies for Intervention at the Ecological Level, Kap 5 i Public Health Nutrition
Reynolds, K. D; Klepp, K. I.; Yaroch, A. L.; In Gibney, M. Margetts, B. M. Kearney, J. M. & Arab, L.
Oxford, UK; Ames, Iowa : Blackwell Science, 2004
Raphael, D
The Question of Evidence in Health Promotion
2000
URL: Link to the article

Tones, Keith; Green, Jackie
Health promotion : planning and strategies
Library search

WHO
WHOs constitution (Preamble + chapter 1-3 och 4; 4 sid. och organogram (www.who.int
URL: Länk till kurswebben för hälsofrämjande arbete där ytterligare material finns att tillgå

Backe, S
Systematiskt kommunbaserat säkerhetsarbete : samlad kunskap om hinder och möjligheter för en uthållig programledning och skaderegistrering
Arbetsrapport : 2003

Bokedal, C
Stockholm: Statens folkhälsoinstitut, 2002

Johannisson, K
Att bygga ett folk.
Socialmedicinsk tidskrift, 1993

Kickbush, I
The contribution of the World Health Organization to a New Public Health and Health Promotion

Socialdepartementet
Aktörer och roller i folkhälsoarbetet. I Hur skall Sverige må bättre? - första steget mot nationella folkhälsmål

Tones, Keith; Green, Jackie
Health promotion : planning and strategies
Library search

Epidemiology and risk factors; Immigrant Medicine
Jaranson, JM; Ekblad, S; Kroupin, GV; Eisenman, DP; Walker, PF, Barnett ED, (eds)
Sunders, 2007

Global and regional burden of disease and riskfactors, 2001: Systematic analysis of population health data.
Lopez, AD; Mathers, CD; Ezzati, M; Murray, CIL
Lancet, 2006
Indicators of socioeconomic position (part 2)
Galobardes, B; Shaw, M; Lawlor, DA; Lynch, JW; Smith, GD
JECH, 2006

Lemaitre, G

The integration of immigrants into the labourmarket: the case of Sweden
OECD social, employment and migration working papers. DELSA/ELSA/WD/SEM, 2007

Lopez, AD; Mathers, CD

Annals of tropical medicine and parasitology, 2006

Sand, Olav

Människokroppen : fysiologi och anatomi
ISBN:9147084359 (inb.) LIBRIS-ID:10455726

Library search