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**HSC 315:**  
**Public Health**  
**6/10/19**

# AGENDA

## Course Logistics

- Professionalism
- Group Dynamics
- CATME Surveys & Team Grades
- Lectures vs Tutorial Sessions

## Key Topics

- Career Portfolio
- Overview of Public Health
- ASSIGNMENT #1
- Introduction to Problem
- Target Audience
- Content
- Graphics

# ACTION PLAN: Developing an Evidence Base with a **Career Portfolio**

- ▶ A Career Portfolio serves as important documentary evidence of your skills and abilities as well as growth, advancement, and evolution as a professional
- ▶ Allows student to define narrative through statements, resume, recommendations and references
- ▶ Artifacts of academic work, experiential activities, and recognitions of skills/contributions support assertions & aspirations
- ▶ Starting early is important!
  - ▶ **Vision Statement**
  - ▶ Updated resume
  - ▶ Strategic selection of deliverables
  - ▶ Archive of awards/recognitions



**Professional** is not a label you give yourself- it's a description you hope others will apply to you.

- David Maister



# PROFESSIONALISM

# **Professionalism** reflects upon not only individuals, but the profession itself

## **Reputation & Potential**

- ▶ Passion & conviction
- ▶ Trustworthiness
- ▶ Referrals
- ▶ Future opportunities
- ▶ Career advancement

## **Reliability & Accountability**

- ▶ Demeanor
- ▶ Punctuality
- ▶ Presence & Quality
- ▶ Conflict Resolution
- ▶ Impact on collaborators & field

# GROUP DYNAMICS



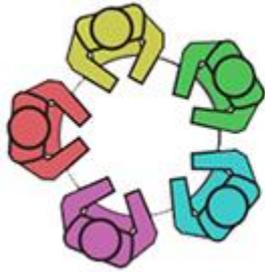
# Team- work is key to PBL

## GROUPS IN THE REAL WORLD

- People and circumstances are unpredictable
- Tension and disagreement are normal in teamwork
- Prior experiences influence current and future partnerships
- **For the most part, individuals do not choose their groups nor the topics and/or projects they work on collaboratively**

## PRACTICING EFFECTIVE TEAM WORK IN HSC 315

- Leave past experiences in the past (good or bad)
- Be aware of presentation of self (verbally and non-verbally)
- Debate positions, not the person (practice “I” statements)
- Respect generational and cultural differences in understanding of collaborative endeavors
- Under-promise and over-deliver
- Bring unresolved conflicts to attention of instructor
- **Team agreements are key in documenting expectations, progress, and outcomes as they serve as a mutual contract**



# CATME

SMARTER Teamwork

In the last week of each module, a survey will be sent to all students. Timely completion is mandatory for assessment of group functioning and outcomes.

***For each survey that is not completed,  
one letter grade will be deducted  
from the student's final grade***

The **score** for **individual contributions** to **team work** for each major assignment will be based on how **s/he functions** relative to **the group**.

### HYPOTHETICAL (EXTREME) EXAMPLE

On a scale of 5, student performs at a “4” level.

#### SCENARIO 1:

Group performs at “5” level:

Individual contribution score:

$4 / 5 = 80\%$

#### SCENARIO 2:

Group performs at “3” level:

Individual contribution score:

$4 / 3 = 133\%$

**HONEST SURVEY RESPONSES ARE KEY TO  
FAIR EVALUATIONS OF INDIVIDUAL CONTRIBUTIONS**

**“WEIGHT” OF INDIVIDUAL CONTRIBUTION SCORES ON EACH ASSIGNMENT  
GRADE INCREASES AS COURSE PROGRESSES**



# Public Health

**The science and art of preventing disease, prolonging life and promoting human health through organized efforts and informed choices of society, organizations, public and private, communities and individuals**

-CEA Winslow (1924)

**What we as a society do collectively to assure the conditions in which people can be healthy**

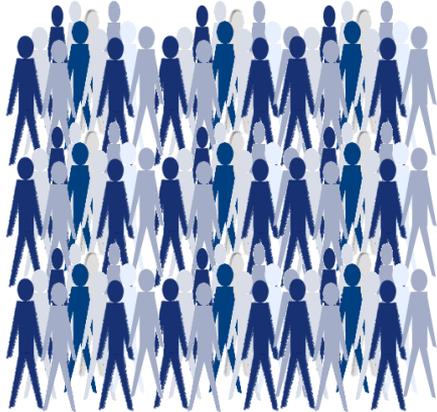
-Institute of Medicine (1988)

# Different approach

**Public Health  
Model**

*VERSUS*

**Medical  
Model**



# Population vs. Individual

## Public Health Model

- Population
- Disease Prevention
- Health Promotion
- Interventions
  - Environment
  - Human behavior
- Government (Some private)

## Medical Model

- Individual
- Diagnosis
- Treatment
- Intervention
  - Medical care
- Private (Some public)

# A Social-Ecological Model

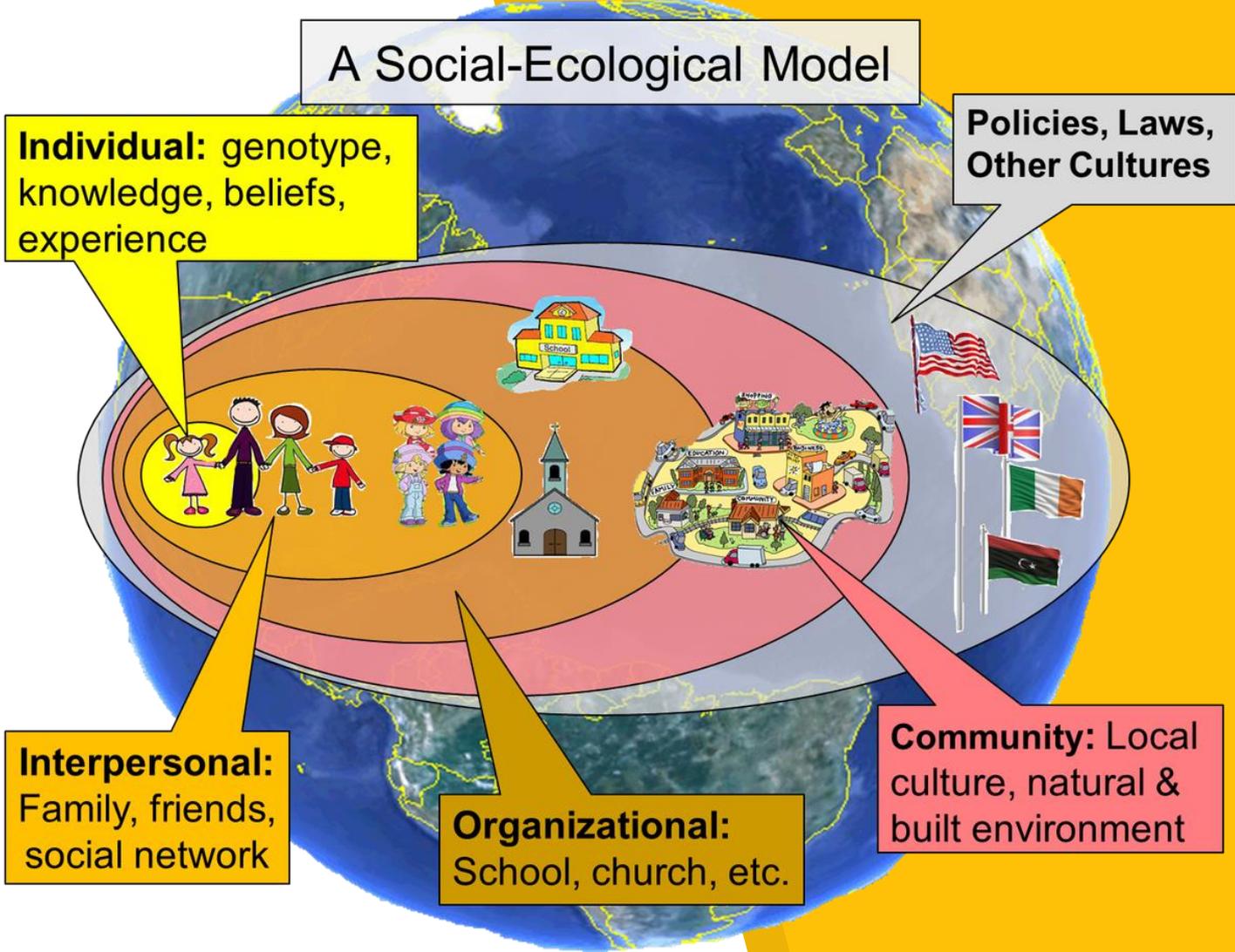
**Individual:** genotype, knowledge, beliefs, experience

**Policies, Laws, Other Cultures**

**Interpersonal:** Family, friends, social network

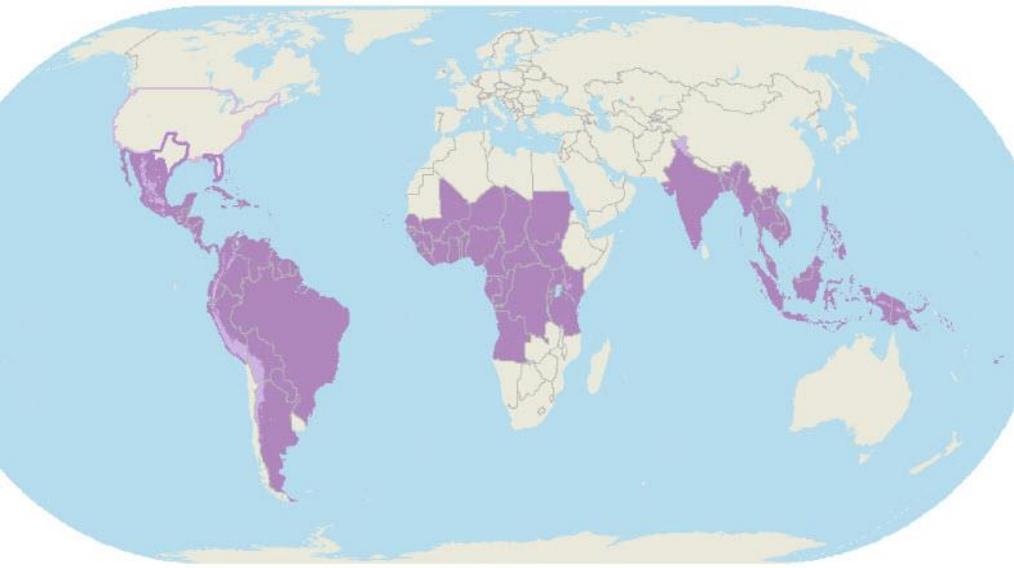
**Organizational:** School, church, etc.

**Community:** Local culture, natural & built environment



# Introduction to Problem





# ZIKA

# OVERARCHING PROBLEM STATEMENT

Zika is an infectious disease of global concern. Once an individual is infected with Zika, there may be severe health consequences for not only that person, but the population(s) with which s/he interacts. Although outbreaks of Zika disease have so far occurred outside of the United States, domestic health agencies are still concerned about the health effects of a potential epidemic. As a member of a government agency, you have been tasked to oversee an action plan for your Department to protect your constituent population from Zika infection and associated health impacts.

# ASSIGNMENT #1: Population Fact Sheet

As a member of your governmental health agency, your team is charged with assessing your constituent population for its risk of a potential Zika epidemic. To do this, it is requested that your team create a population health profile for the areas served by your governmental health agency, and identify specific subgroups within this population that are at-risk for infection and transmission. You are asked specifically to review existing relevant population demographics in your constituent population and apply health research known about Zika to create a fact sheet for program planners and policy makers.

Each group will be assigned to a specific level of government:

- ▶ Local (city or county)
- ▶ State
- ▶ Federal

*Groups will change levels for subsequent assignments*

## PROTECT AND PREVENT ZIKA Virus Infection



• No vaccine to prevent Zika

• No medicine to treat Zika

- Zika can be spread through mosquito bites and through unprotected sex
- Zika is linked to **serious birth defects**



### PREVENT ZIKA INFECTION DURING PREGNANCY

- Use condoms for all sexual activity if partner may have or had Zika
- OR—
- Don't have sex during pregnancy if partner may have or had Zika

### THINKING ABOUT PREGNANCY?

- Talk to your doctor or healthcare provider about the risks of Zika during pregnancy

### BREASTFEEDING

- There are no reports of infants being infected with Zika through breastfeeding



### ZIKA VIRUS SYMPTOMS



### MICROCEPHALY



- Zika spreads from woman to baby during pregnancy
- Zika causes a smaller-than-normal head
- Zika causes poor brain development in babies



### PROTECT AGAINST



### MOSQUITO BITES

- Use EPA-registered insect repellents containing 20%-30% DEET (follow label directions)
- Used properly, EPA-registered insect repellents are safe for pregnant and breastfeeding women

- Dress in light-weight clothing to cover arms and legs (no bright colors, flowery prints)
- Tip 'n Toss: eliminate standing water around your home and yard



Find out what it takes to stop Zika  
Please visit [dph.georgia.gov/zika](http://dph.georgia.gov/zika)



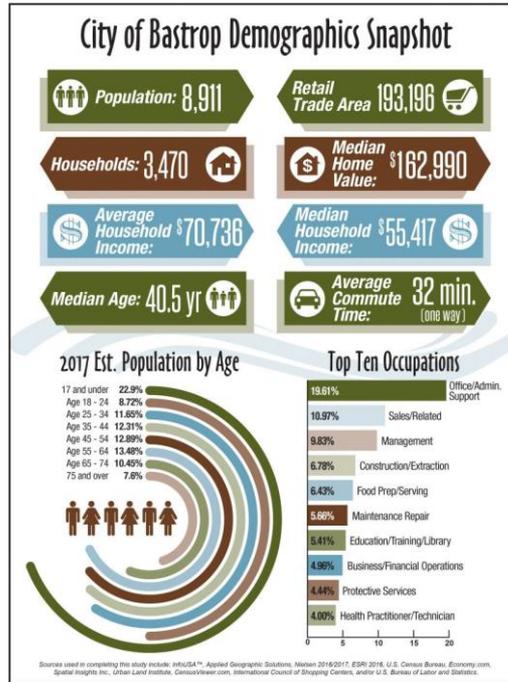
# FACT SHEETS

## FORMAT

- Aesthetically pleasing
- Balance between text and visuals
- Not irrelevant, overwhelming, intimidating, or threatening
- Can be read / reviewed in a short time frame (e.g., “one sitting”)

## SUBSTANCE

- Understand target audience, based on the role of the organization
- Concise & clear (“short & sweet”)
- Must convey a limited number of key messages that are highlighted
- Can be understood in terms of language, logic, and implications
- Should be factual not speculative
- Must conclude with action item(s)
- Information presented should **ONLY** be necessary to achieve these aims



# POPULATION PROFILES

# What is a Population Profile?

- ▶ Characterizes the target population (constituency)
- ▶ Presents data about population segments that are affected and/or at-risk for outcome of concern
- ▶ Features other salient factors (e.g., environmental, political, organizational) that influence the potential risks and rates of the outcome of concern
- ▶ Highlights particular trends or patterns that may be noteworthy for understanding potential risks or rates
- ▶ Should be embedded within narrative of Fact Sheet (textually and visually)
- ▶ At risk population vs. population risks



**CENSUS 2016** An Age Profile of Ireland 

Average Age of Population



## Population By Age Group

Children	Pre-school	Primary	Secondary
	331,515 ↓ down 7.0%	548,693 ↑ up 8.8%	371,588 ↑ up 7.7%
Adults	19-24 years	25-64 years	Over 65 years
	331,208 ↓ down 6.5%	2,541,294 ↑ up 1.9%	637,567 ↑ up 19.1%

## 392,119 Children Living In Rented Accommodation

FOR RENT
127,098 aged 0-4 up 3.5%
168,878 aged 5-12 up 17.3%
96,143 aged 13-18 up 18.6%



## Top 5 Youngest Towns

Town	Average Age
Balbriggan	30.8
Maynooth	31.9
Ashbourne	32.2
Navan	33.1
Portlaoise	33.2

## Top 5 Oldest Towns

Town	Average Age
Killarney	40.9
Wexford	39.4
Malahide	38.6
Clonmel	38.5
Sligo	38.5

## 76,207 Children Living In Flats And Apartments

31,891 aged 0-4 up 24.3%	
29,689 aged 5-12 up 62.6%	
14,627 aged 13-18 up 45.9%	

# HOW WOULD YOU BEGIN TO GENERATE NECESSARY INFORMATION?

- ▶ Who is at risk?
- ▶ What individual, interpersonal, and social characteristics are of particular concern?
- ▶ What types of environmental factors potentially influence the increased likelihood of disease?
- ▶ **What information is needed to substantiate this information for the target population (constituency)?**

what's the  
opposite of  
contemplate?



disregard, forget, slight,  
neglect, ignore, reject,  
discard, scorn, look away,  
overlook



 Thesaurus.plus

# Things to Consider...



# **ASSIGNMENT 1: FACT SHEET (not a flyer!)**

# The **Fact Sheet** is meant to provide **clear and relevant** information to **target audience**

## Questions to consider:

- ▶ Who is the target audience?
- ▶ What are they responsible for?
- ▶ Who are they accountable to?
- ▶ **What specific information would help them to advance their priorities? What have they asked for?**

# The **Fact Sheet** is meant to provide **clear and relevant** information to **target audience**

## What should be included?

- ▶ Data that addresses the goal of deliverable
- ▶ Information that is not readily available
- ▶ Clarity about issues that are difficult to understand, not intuitive, or lack evidence or support
- ▶ Specific regional factors

## What should not be included?

- ▶ Elementary or superficial information (e.g. “Zika 101”)
- ▶ Data that is irrelevant or tangential to deliverable goal
- ▶ Evidence that requires more outside research to understand completely
- ▶ Information that does not aid target audience for their unit on analysis

# The **Fact Sheet** is meant to provide **clear and relevant** information to **target audience**

## **Appropriate Use of Graphics (Non-Textual Information)**

- ▶ Must contribute to desired goal of deliverable
- ▶ Must have a point or meaning that can't or is poorly captured or represented in narrative; should not be superficial
- ▶ Should be ideally used to depict information instead of text

# Prevent Childhood Lead Poisoning

Exposure to lead can seriously harm a child's health.



Damage to the brain and nervous system



Slowed growth and development



Learning and behavior problems



Hearing and speech problems

This can cause:

- Lower IQ
- Decreased ability to pay attention
- Underperformance at school



Lead can be found throughout a child's environment.

## Anxiety

+ YOUNG PEOPLE



Anxiety disorders are characterised by excessive fear and worry, which can seriously reduce a young person's ability to function in their day-to-day lives. Anxiety disorders are common – around 15% of Australians aged 16–24 experience an anxiety disorder each year.

There's no single cause for anxiety, but a number of factors can contribute, such as family history, genetic factors, personality traits, coping styles and the experience of stressful and traumatic life events (for example, bullying or the death of someone close).

Anxiety is treatable, and there are many resources available, including websites, self-help books and professional supports. Treatment helps young people learn to manage anxiety so that it has less of an effect on life.

### What is anxiety and when is it ill-health?

Anxiety is a feeling of worry or nervousness. It's an unpleasant emotion that everyone feels when faced with challenges or danger.

Anxiety can be useful because it helps us prepare for and perform tasks.

Anxiety becomes a problem when it is intense, causes distress, lasts for a prolonged period of time and affects day-to-day living. Anxiety disorders can cause changes in a person's thinking, bodily sensations, behaviour and in how they respond to things. Young people can miss out on a lot of activities they enjoy because of anxiety, and it can get in the way of school, work, relationships and other important activities. Getting the right help can reduce the effect that anxiety has on a young person's quality of life.

### Symptoms of anxiety

Common symptoms of anxiety include:

- persistent worry
- excessive fearfulness
- inability to relax
- problems with sleep
- avoidance of feared situations
- excessive shyness
- social isolation and problems with relationships
- difficulty concentrating and making decisions
- fear of social embarrassment
- problems with work, social, or family life
- physical symptoms, such as stomach-aches, headaches, muscle soreness, sweating, nausea and diarrhoea
- nightmares
- panic attacks.

### What are panic attacks?

To prepare us for challenging situations – like for an exam, a gig, public speaking or finding a spider in our bedroom – our bodies have a natural 'fight or flight' response. This response increases our heart rate and muscle tension and we may also experience sweating, shaking and feeling butterflies in the stomach.

For a person with anxiety, these physical sensations occur more frequently and sometimes aren't connected to common anxiety-provoking situations. Young people with anxiety experience these symptoms regularly, and they can come on suddenly, unexpectedly and in many situations. If these physical sensations are intense and thoughts about fear of losing control or 'going crazy' accompany them, this can be described as a 'panic attack'.

### What to look for?

If you're worried someone you know is experiencing anxiety, you can look for symptoms including:

- persistent worrying and excessive fear
- inability to relax

- seeking excessive reassurance, avoiding making decisions
- difficulty in concentrating, appearing distracted
- avoiding situations, not spending time with friends or family
- increased alcohol or other drug use
- poor sleep, physical ill-health, medically unexplained symptoms
- expressing anxious thoughts about themselves, their situation or future. For example, 'I can't cope', 'I'll make a fool of myself', 'They won't like me', 'What if something bad happens?', 'I might get hurt' etc.

### What are the common anxiety disorders?

#### Social anxiety disorder

Social anxiety disorder is an intense and persistent fear of being humiliated, judged, or embarrassed in social situations. For example, a person with social anxiety disorder might feel extreme anxiety when having conversations, meeting new people, being observed, or performing in front of others. Often young people will fear or avoid social situations even though they recognise their anxiety and worry is unreasonable, excessive and significantly interferes with their life.

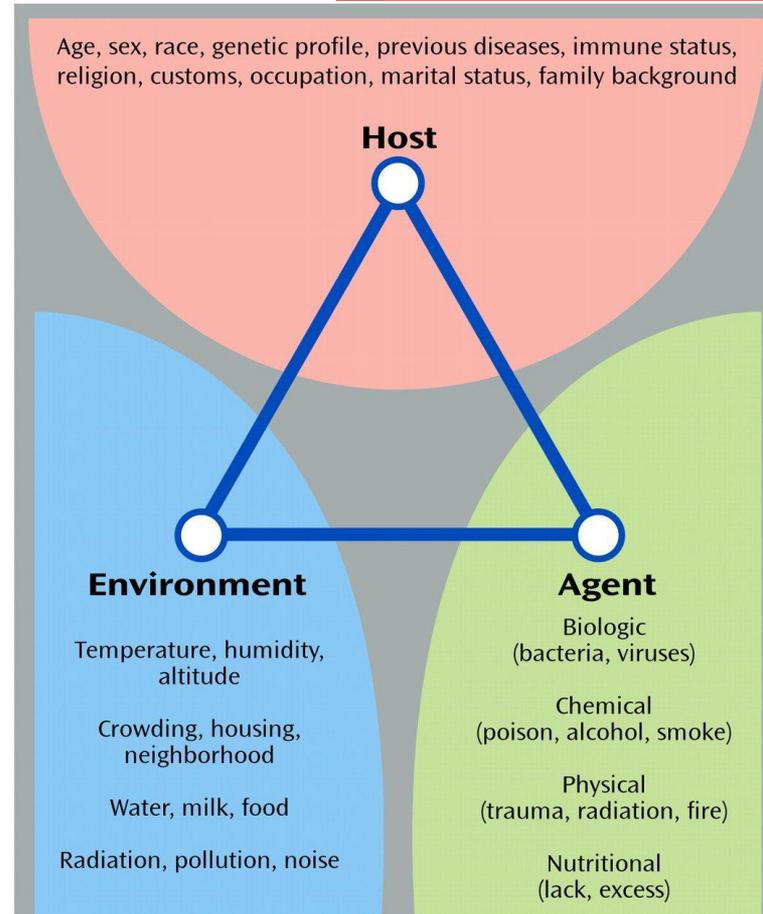
#### Panic disorder

A panic disorder is characterised by recurring and unexpected panic attacks. A panic attack is a surge of intense fear or discomfort that reaches a peak within minutes and leads to symptoms like heart palpitations, sweats, shaking, trouble breathing, chest pain, nausea, chills or feeling hot, feeling numb or detached, feeling dizzy or faint. Often, the physical symptoms are accompanied by thought about fear of losing control, 'going crazy', having a heart attack, dying or worry about having another panic attack. This can result in a young person avoiding certain situations and places to prevent themselves having a panic attack.

# EPIDEMIOLOGICAL TRIAD (TRIANGLE)

## Identify factors that are specific to the constituency of the organization:

- ▶ For agent, it is important to identify the vector(s) or vehicle(s) of concern
- ▶ Environment is not limited to external physical or natural surroundings
- ▶ For populations of human hosts, emphasis should be placed on shared characteristics that affect likelihood of infectious disease risks and outcomes



# Risk Factors vs. At-Risk Populations

## Risk Factors

- ▶ Identification of specific and relevant:
  - ▶ Susceptibility
  - ▶ Exposures
  - ▶ Behaviors
  - ▶ Environments
  - ▶ Dynamics of Transmission
  - ▶ Screening and Treatment

## At-Risk Populations

- ▶ Individuals, communities, and populations who have greater likelihood of exhibiting one or more risk factors for an outcome
- ▶ Evidence must be presented that supports the claim that certain groups are disproportionately affected by certain risk factors

# Moving forward, each group should keep in mind...

- ▶ **Length of assignment:** Fact Sheet should be maximum of two pages, excluding references
  - ▶ Limited space to synthesize large volumes of information and present in appropriate manner
  - ▶ Text and graphics should have substance that reflects a specific point and relevant argument for target population
- ▶ **Focus on key messages:** This assignment does not involve providing recommendations or directions for research and practice
  - ▶ Rather, it should emphasize the segments of the population that are at risk and the conditions that contribute to a potential epidemic

# FINAL THOUGHTS ABOUT STUDENT ENGAGEMENT

- ▶ **Attendance is MANDATORY**
  - ▶ Tardiness in LECTURE or ACTIVITY SECTION not acceptable
  - ▶ Not adhering to these expectations will drop student grades considerably and may impact likelihood of passing course (HSC 315 is ONLY offered Fall Semesters)
- ▶ **Group PARTICIPATION**
  - ▶ Team member engagement happens in varied forms
  - ▶ Some individuals engage vocally; others may need to reflect and provide input & feedback in different forms and times
  - ▶ Process-orientation vs. outcome-orientation
  - ▶ Effective dynamics require understanding and reasonably accomodating all types of individual engagement in group settings and communication processes

**For Module 2,  
start reading  
assigned  
chapters**

