

# Course Syllabus

[Jump to Today](#)

 [Edit](#)

## Acknowledgement

*UBC's Point Grey Campus is located on the traditional, ancestral, and unceded territory of the xwməθkwəyəm (Musqueam) people. This land has always been a place of learning for the Musqueam people, who for millennia have passed on their culture, history, and traditions from one generation to the next.*

---

## Course Information

Course Title	Course Code Numbers	Credit Value
Developing Policy to Improve Population Health	SPPH 581/BL1	3.0
	PPGA 591T 001	

---

## Prerequisites

This course is open to graduate students in SPPH and SPPGA. Previous learning in SPPH 527 Social Determinants of Health is an asset, although this could be taken concurrently or after. Graduate students from other programs (e.g., public policy) are welcome if there is space available.

---

## Instructors



Prof. Peter Berman is a Professor at the School of Population and Public Health. He is a health economist who has worked widely in global health for over four decades. In response to the emerging COVID-19 pandemic, he initiated work with a multidisciplinary group of colleagues at UBC and internationally on the important question of how institutional, organizational, governance, and political (IOGP) factors shape government and societal policies and responses and their effectiveness in relation to this acute and multi-dimensional threat to population health.



Prof. Veena Sriram is an Assistant Professor with a joint appointment in the School of Public Policy and Global Affairs (SPPGA) and the School of Population and Public Health (SPPH). Her research sits at the intersection of global health, social science and public policy, and her interests are in understanding power and politics in health policy processes in low- and middle-income countries. Dr. Sriram has conducted extensive research at the national and state level in India, exploring a range of health policy and system questions, including medical specialization, health workforce policy development, and the functioning of national health authorities and emergency care systems.

## Contacts

Course Instructor(s)	Contact Details	Office Location	Office Hours
Peter Berman	<a href="mailto:peter.berman@ubc.ca">peter.berman@ubc.ca</a> ( <a href="mailto:peter.berman@ubc.ca">mailto:peter.berman@ubc.ca</a> )	SPPH 2206 East Mall, Room 117	By appointment
Veena Sriram	<a href="mailto:veena.sriram@ubc.ca">veena.sriram@ubc.ca</a> ( <a href="mailto:veena.sriram@ubc.ca">mailto:veena.sriram@ubc.ca</a> )	Online	By appointment
Andrés Delgado (Teaching Assistant)	<a href="mailto:andres.delgado@cgshe.ubc.ca">andres.delgado@cgshe.ubc.ca</a> ( <a href="mailto:andres.delgado@cgshe.ubc.ca">mailto:andres.delgado@cgshe.ubc.ca</a> )		

Students are invited to use office hours to discuss specific course content, competencies and assignments. In addition, you are invited to dialogue about career aspirations and the role of this course or your degree more generally in advancing your career objectives. Office hours can also be used to consider how the course content may illuminate practicum or thesis opportunities that you may wish to pursue.

## Co-instructors

- Prof. Paul Kershaw (health in all policies, family policy)
- Prof. Charlyn Black (food and nutrition policies and population health)
- Prof. Steve Morgan (health care systems and population health)
- Prof. Milind Kandlikar (climate change policies and health)
- Prof. Daniel Vigo (policies to address specific aspects of the mental health crisis).

---

# Objectives and learning outcomes

This course will provide graduate students in public health and related disciplines an introduction to policy development and analysis with a focus on policies that address population health outcomes and their equity and distribution, including both Canadian and global content.

Upon completion of this course, students will be more familiar with selected specific determinants of population health and the potential for policy development and implementation to improve poor outcomes and equity impacting populations' health. They will also have learned about specific domains of non-medical factors affecting population health, focusing on policy strategies and how policy development and implementation processes involving institutions, politics, and organizational actors may enable or constrain effective policy development and implementation.

A student group project and a final paper will allow students to apply these frameworks and tools to analyze how a population health policy problem has been or could be addressed in terms of policy development, adoption, and implementation.

---

## Course Structure

The course will meet weekly. Each two-hour session will consist of a ~45-minute formal lecture/presentation, followed by small group work and a plenary discussion. The class requires students to engage with prescribed readings and video and audio materials outside the class sessions. The last two sessions of the course will be devoted to student presentations of work in progress for their papers, with feedback from the class and faculty members. Once classes are concluded, we will provide some time for revision, completion, and final submission.

## Learning Activities

Students will be expected to:

- Attend all sessions. No more than one prior-excused absences for cause will allowed/given in order to obtain a passing grade in the course with exception for acute health issues.
- Complete all required assigned readings and material reviews (in some cases assignments may include review of a website or online material) prior to the course session for which they are assigned
- Participate actively in class discussions
- Work collaboratively with other students in project teams and complete a fair share of the team's work as recognized by other team members
- Produce in small group a completed case study report based on a common template by the required submission data.

# Learning Materials

The required readings for each class can be found under [Modules](#).

## Assessments of Learning

Final grade will be based 20% based on attendance and participation, 30% based on mid-term short essay exam and 50% based on grading of the final paper.

The final paper will be submitted as a group project with students working in groups of no more than three. The paper will review and analysis key elements of policy development and implementation of a specific population health outcome in a specific jurisdiction and time period.

Most paper topics will be retrospective, focusing on the development and implementation of a set of population health-focused policies in the last 10 years. A topic could include policy attention to a population health outcome for which there is an active effort over at least five years to promote a set of population health-focused policies that either has not yet succeeded or has failed. The paper will include:

- an identification of the key population health outcomes and their causal association with specific population-health focused policies based on existed data and literature;
- application of course-covered frameworks in a landscaping of key elements and processes in the policy environment such as the 3 I's, agenda-setting and policy streams, and IPOG domains;
- an analysis of what went right or wrong in policy development, agenda-setting, policy adoption, implementation
- what might be strategies based on frameworks such as “Roadmap for advocacy” or “Theory of change” for improving policies and action in the future. (NB: prior work in SPPH 581N Knowledge to Action relevant here.)

The paper will be assessed in terms of the following criteria:

- Scope and rigor of analysis. For an identified jurisdiction and time period, has the paper described a key population health outcome amenable to improvement through policy change? Has the paper incorporated analysis of key ideas in the policy development, adoption, and implementation processes covered in the course. (40%)
- Creativity in seeking evidence and breadth of information sources (30%)
- Development of insights or recommendations that could improve policy development, adoption, and implementation (30%).

## University Policies

UBC provides resources to support student learning and to maintain healthy lifestyles but recognizes that sometimes crises arise and so there are additional resources to access including those for survivors

of sexual violence. UBC values respect for the person and ideas of all members of the academic community. Harassment and discrimination are not tolerated nor is suppression of academic freedom. UBC provides appropriate accommodation for students with disabilities and for religious observances. UBC values academic honesty and students are expected to acknowledge the ideas generated by others and to uphold the highest academic standards in all of their actions.

Details of the policies and how to access support are available on [the UBC Senate website \(https://senate.ubc.ca/policies-resources-support-student-success\)](https://senate.ubc.ca/policies-resources-support-student-success).

## Learning Analytics

Learning analytics includes the collection and analysis of data about learners to improve teaching and learning. This course uses Canvas. This tool captures data about your activity and provides information that can be used to improve the quality of teaching and learning. In this course, we plan to use analytics data to:

- View overall class progress
- Track your progress in order to provide you with personalized feedback
- Review statistics on course content being accessed to support improvements in the course
- Track participation in discussion forums
- Assess your participation in the course

## Copyright

Many materials of this course (course handouts, lecture slides, assessments, course readings, etc.) are the intellectual property of the course Instructors or licensed to be used in this course by the copyright owner. Redistribution of copyrighted materials by any means without permission of the copyright holder(s) constitutes a breach of copyright and may lead to academic discipline.

## Course Summary:

Date	Details	Due
Wed Sep 7, 2022	 <a href="#">Session 1: Course introduction</a>	to do: 8am
Wed Sep 14, 2022	 <a href="#">Session 2: Population Health Policy - Foundational Insights</a>	to do: 8am
Wed Sep 21, 2022	 <a href="#">Session 3: Policy Fundamentals (Part 1)</a>	to do: 8am

<b>Date</b>	<b>Details</b>	<b>Due</b>
Wed Sep 28, 2022	 <a href="#">Session 4: Policy Fundamentals (Part 2)</a>	to do: 8am
Wed Oct 5, 2022	 <a href="#">Session 5: Policy Fundamentals (Part 3)</a>	to do: 8am
Wed Oct 12, 2022	 <a href="#">Session 6: Using the “IPOG” framework to Analyze Policy Development for Population Health</a>	to do: 8am
Tue Oct 18, 2022	 <a href="#">Take-home essay</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1335616">https://canvas.ubc.ca/courses/104710/assignments/1335616</a> )	due by 5pm
Wed Oct 19, 2022	 <a href="#">Session 7: Food and nutrition policies and population health</a>	to do: 8am
Wed Oct 26, 2022	 <a href="#">Session8: Climate and Population Health</a>	to do: 8am
Tue Nov 1, 2022	 <a href="#">Student groups</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1335617">https://canvas.ubc.ca/courses/104710/assignments/1335617</a> )	due by 5pm
Wed Nov 2, 2022	 <a href="#">Session 9: Healthy Child Development Policy</a>	to do: 8am
Tue Nov 8, 2022	 <a href="#">Proposals</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1336694">https://canvas.ubc.ca/courses/104710/assignments/1336694</a> )	due by 4:59pm
Tue Nov 15, 2022	 <a href="#">Read feedback on your proposal</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1340219">https://canvas.ubc.ca/courses/104710/assignments/1340219</a> )	due by 5pm
Wed Nov 16, 2022	 <a href="#">Session 10: Mental Health Policy in the Canadian and global contexts</a>	to do: 8am
Wed Nov 23, 2022	 <a href="#">Session 11: Housing policies and population health</a>	to do: 8am

Date	Details	Due
Wed Nov 30, 2022	 <a href="https://canvas.ubc.ca/courses/104710/assignments/1336805">Session 12: Student presentations</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1336805">https://canvas.ubc.ca/courses/104710/assignments/1336805</a> )	due by 11:59pm
Wed Dec 7, 2022	 <a href="https://canvas.ubc.ca/courses/104710/assignments/1336806">Session 13: Student presentations</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1336806">https://canvas.ubc.ca/courses/104710/assignments/1336806</a> )	due by 11:59pm
Wed Dec 14, 2022	 <a href="https://canvas.ubc.ca/courses/104710/assignments/1336695">Final paper</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1336695">https://canvas.ubc.ca/courses/104710/assignments/1336695</a> )	due by 4:59pm
	 <a href="https://canvas.ubc.ca/courses/104710/assignments/1336696">Participation</a> ( <a href="https://canvas.ubc.ca/courses/104710/assignments/1336696">https://canvas.ubc.ca/courses/104710/assignments/1336696</a> )	

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session 1 Session Brief

**Session Date, Topic, Instructor:**

Sept. 7, Course Intro, Peter Berman and Steve Morgan

**Setting the stage – introductory comments:**

**Learning Objectives:**

Students will be able to:

Review the course plan and syllabus.

Pose and have answers to any questions about the course.

Critically examine and explain the concepts of Population Health and Public Health in terms of what they have in common, how they differ, and the particular emphases study of population health brings to advancing social well-being.

Reflect on the overall importance of social determinants of health in population health outcomes as an intro to the specific foci explored in this course.

Review the concepts and scope of the Health in All Policies (HiAP) movement and Canada's particular contribution to its development.

Examine Canadian health policy in terms of its approaches to medical care, public health, and population health.

**Required preparation materials to be completed in advance:**

Required reading:

Review course syllabus on Canvas

Mikkonen, J. and D. Raphael [Social Determinants of Health: The Canadian Facts](#), pp. 1-10.

Diez-Roux, A. V. "On the Distinction—or Lack of Distinction—Between Population Health and Public Health" *AJPH*, 106:4 No 4, April 2016

Green, L.; Ashton, K.; Bellis, M.A.; Clemens, T.; Douglas, M. 'Health in All Policies'—A Key Driver for Health and Well-Being in a Post- COVID-19 Pandemic World. Int. J. Environ. Res. Public Health 2021, 18, 9468. <https://doi.org/10.3390/ijerph18189468>

Wikipedia: "Ottawa Charter for Health Promotion" (1pp w links)

WHO Europe 2016 "Ottawa Charter for Health Promotion" (5pp)

Required video review:

<https://youtu.be/HQVTMoFL59Q>

(Slides will be available on Canvas)

**Recommended materials for additional investigation:**

1. WHO website on HiAP:

<https://www.who.int/activities/promoting-health-in-all-policies-and-intersectoral-action-capacities>

2. Global Network on HiAP website:

<https://actionsdg.ctb.ku.edu/>

**Suggested self-study and reflection questions:**

Which groups in society – Canada's, other jurisdictions – must be engaged to address the different key social determinants of health?

What research, policy development, and action competencies does a focus on population health require? How do these differ from those that may be more central to policy on medical care or public health?

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session 2 Session Brief

**Session Date, Topic, Instructor:**

Sept. 14, 2022, Population Health Policy – 2 Foundational Insights, Professors Kershaw and Berman

**Setting the stage – introductory comments:**

This early session of the course will explore two key insights about population health policy that will guide all subsequent discussions. The first is that health doesn't start with medical care. It starts where we are born, grow, live, work and age – also known as the social determinants of health. Therefore population health policy will often focus on social issues like income, wealth, education, housing, climate change, etc.

The second is that these social determinants are shaped fundamentally by power dynamics of unearned privilege and oppression related to race, class, sex/gender, sexuality, colonialism, age and more. As a result, population health policy must often focus on policy levers that can disrupt and transform these power dynamics – motivating our disciplinary interest in “health equity.”

**Learning Objectives:**

Students will be able to:

Understand these two foundational insights.

Compare and contrast how these factors may differ in Canada and in the “rest of the world”.

Understand data showing how investment in social determinants of health compares to spending on medical care in Canada, and how this has evolved over the last 45 years.

**Required preparation materials to be completed in advance:**

*Read:* Kershaw, P. (2020). "A 'health in all policies' review of Canadian public finance." [Canadian Journal of Public Health](#)(111): 8-20.

*Read:* McGibbon, Elizabeth & Charmaine McPherson. (2013). Women's Health and Urban Live, Vol 12(2), 63-81.

**Recommended materials for additional investigation:**

Bradley, E. H., et al. (2016). "Variation in Health Outcomes: The role of spending on social services, public health, and health care, 2000-2009." [Health Affairs](#) 35(5): 760-768.

Dutton, D. J., et al. (2018). "Effect of provincial spending on social services and health care on health outcomes in Canada: an observational longitudinal study." Canadian Medical Association Journal **190**(3): E66-71.

Elizabeth McGibbon, ed. (2021). *Oppression: A Social Determinant of Health*, 2<sup>nd</sup> edition. Halifax & Winnipeg: Fernwood Publishing.

Czyzewski (2011). "Colonialism as a Broader Social Determinant of Health." The International Indigenous Policy Journal **2**(1): Article 5.

Brown, T. M. and E. Fee (2014). "Social Movements in Health." Annual Review of Public Health **35**: 385–398.

Kershaw, P., et al. (2017). "A surgical intervention for the body politic: Generation Squeeze applies the Advocacy Coalition Framework to social determinants of health knowledge translation." Canadian Journal of Public Health **108**(2): e199-e204.

**Suggested self-study and reflection questions:**

*Why do Canadians give so much attention to medical care when thinking about health policy?*

*What is the social/medical spending ratio and why does it matter?*

*Why is oppression a determinant of health?*

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session Brief

**Session Date, Topic, Instructor:** September 21 2022, Policy 1, Veena Sriram

**Learning Objectives:**

- 1) Describe policy, public policy and the policy process
- 2) Explain and distinguish between the three 3Is – institutions, ideas and interests – and their role in policy processes
- 3) Discuss the role of interest groups in policy processes using a case study of soda taxes

**Required preparation materials to be completed in advance:**

- 1) Briefing note, NCCHPP, Understanding Policy Developments and Choices Through the “3-i” Framework: Interests, Ideas and Institutions
- 2) Cassola et al. Tensions and opportunities in the roles of senior public health officials in Canada: A qualitative study
- 3) Gastropod, Dirty Tricks and Data: The Great Soda Wars, Part 2, Podcasts, Season 11, December 2018

**Recommended materials for additional investigation:**

- 1) Prof Morgan video intro on public policy analysis
- 2) Eduardo J Gómez, Coca-Cola’s political and policy influence in Mexico: understanding the role of institutions, interests and divided society, Health Policy and Planning, Volume 34, Issue 7, September 2019, Pages 520–528

**Suggested self-study and reflection questions:**

- 1) How do we distinguish between policy and public policy?
- 2) Consider an example of a population health policy and context that is of interest to you (example: tobacco policy in Canada or gun safety policy in the United States) – analyze the example using the 3Is – institutions, ideas and interests – framework

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session Brief

**Session Date, Topic, Instructor: September 28 2022, Policy 2, Veena Sriram**

**Learning Objectives:**

- 1) Identify and describe stages in the policy cycle – agenda setting, policy formulation, policy implementation and policy evaluation
- 2) Explain Kingdon's multiple streams framework
- 3) Recognize different types of policy instruments and analyze their use using a policy case (persuasion, education, spending etc.)

**Required preparation materials to be completed in advance:**

- 1) Connie Hoe, Daniela C. Rodriguez, Yeşim Üzümcüoğlu, Adnan A. Hyder, "Quitting like a Turk:" How political priority developed for tobacco control in Turkey, *Social Science & Medicine*, Volume 165, 2016, Pages 36-45
- 2) Michael Howlett. What is a Policy Tool? An Overview of the Tools Approach to Public Policy. In: *The Routledge Handbook of Policy Tools*, Edited By Michael Howlett (2022)
- 3) Case for classroom discussion: [Why some First Nations reserves don't have clean drinking water.](#)

**Recommended materials for additional investigation:**

- 1) Paul Cairney, Policy Concepts in 1000 Words: Multiple Streams Analysis, Podcast (14 minutes)
- 2) Mauti, J., Gautier, L., De Neve, JW. *et al.* Kenya's Health in All Policies strategy: a policy analysis using Kingdon's multiple streams. *Health Res Policy Sys* **17**, 15 (2019).
- 3) Berlan D, Buse K, Shiffman J, Tanaka S. The bit in the middle: a synthesis of global health literature on policy formulation and adoption. *Health Policy Plan*. 2014 Dec;29 Suppl 3:iii23-34. doi: 10.1093/heapol/czu060
- 4) Howlett, M., McConnell, A. and Perl, A. (2017), Moving Policy Theory Forward: Connecting Multiple Stream and Advocacy Coalition Frameworks to Policy Cycle Models of Analysis. *Australian Journal of Public Administration*, 76: 65-79. <https://doi.org/10.1111/1467-8500.12191>

**Suggested self-study and reflection questions:**

- 1) Consider a policy decision of interest to you that has taken place recently – apply the "multiple streams" to this case and consider the impact of factors in each of the "streams". Does the framework help explain the rise of attention to this policy issue? Or are other factors at play?

2) How do the role of interest groups influence choices in policy tools/instruments?

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session Brief

**Session Date, Topic, Instructor: October 5 2022, Policy 3, Veena Sriram**

**Learning Objectives:**

- 1) Analyze different factors that influence implementation of policies and programs using the case study of early childhood development in Peru
- 2) Describe and distinguish between “top down” and “bottom up” theories of implementation
- 3) Explain the stage of policy evaluation in the policy cycle

**Required preparation materials to be completed in advance:**

- 1) Prepare case on early childhood development in Peru - Cuna Más: Peru’s Early Childhood Program Struggles to Maintain Quality as it Scales Up
- 2) [Stockton’s Basic Income Experiment Pays Off](#), The Atlantic, 2021
- 3) Storeng, Katerini T et al. When ethics and politics collide in donor-funded global health research The Lancet, Volume 394, Issue 10193, 184 - 186

**Recommended materials for additional investigation:**

Sabatier chapter on top-down and bottom-up  
Lipsky chapter on street level bureaucracy

McConnell, A., 't Hart, P. Inaction and public policy: understanding why policymakers ‘do nothing’. Policy Sci 52, 645–661 (2019)

Podcast – Why Prevention Policies Fail –  
<https://www.policyforum.net/podcast-why-prevention-policies-fail/>

**Suggested self-study and reflection questions:**

- 1) Many population health policy programs struggle in implementation – use top-down and bottom-up approaches to understanding implementation to analyze implementation challenges in a population health issue of interest to you
- 2) What are the consequences of “positive” evaluations of a program? What about “negative” evaluations? What are some of the risks in the conduct of policy evaluation?

-

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session 6 Session Brief

**Session Date, Topic, Instructor:**

October 12, 2022, Using the “IPOG” framework to Analyze Policy Development for Population Health

**Setting the stage – introductory comments:**

Previous sessions have introduced a number of widely used frameworks for understanding policy processes such as the “3i’s”, Kingdon’s “multiple streams”, and “top-down” and “bottom-up” approaches. In response to COVID-19, a research team at UBC has been using a complementary and somewhat integrating framework abbreviated as “IPOG” – Institutions, Politics, Organization, and Governance. This framework encourages more focus on the practical interactions between political and organizational actors in decision-making. This session will clarify some of these concepts as they are used in IPOG and potentially offer another lens that may be useful in the more in-depth exploration of specific population policy areas in forthcoming sessions as well as in your term papers.

**Learning Objectives:**

Students will be able to:

Elaborate the concepts underpinning the use of the terms IPOG in the IPOG framework and link them to concepts in policy frameworks discussed in earlier sessions of the course.

Reflect on examples of how the IPOG framework provided insights into specific government policies and actions in response to the COVID-19 pandemic.

Consider how the IPOG framework could be helpful in understanding other areas of population health policy decision making both retrospectively and prospectively.

**Required preparation materials to be completed in advance:**

Berman, P. et al 2021: “Same disease, similar measures, varied outcomes: Research to improve understanding of why results in curbing COVID-19 has been so different across jurisdictions around the world?” UBCMJ. 2021: 13.1 (7-8)

Scott L. Greer , Elizabeth J. King , Elize Massard da Fonseca & Andre Peralta-Santos (2020): The comparative politics of COVID-19: The need to understand government responses, Global Public Health, DOI: 10.1080/17441692.2020.1783340

Visit [www.governhealth.ca](http://www.governhealth.ca) . For some international perspectives view the following:  
Democracy During a Pandemic: <https://www.youtube.com/watch?v=9UuuhzbdFjk>  
Government Context in COVID-19 response  
<https://www.youtube.com/watch?v=UlrQhKxPjKA&t=10s>  
Hybrid Bureaucracy: Explaining China’s Uneven Response to COVID-19  
<https://www.youtube.com/watch?v=BujrWnkLzbA&t=12s>

**Recommended materials for additional investigation:**

Levi-Faur, D. 2012 “From Big Government to Big Governance?”  
The Oxford Handbook of Governance, D. Levi-Faur (ed).  
DOI: 10.1093/oxfordhb/9780199560530.013.0001

*MacAulay M, et al. Under the spotlight: understanding the role of the Chief Medical Officer in a pandemic* *J Epidemiol Community Health* 2021;0:1–5. doi:10.1136/jech-2021-216850

**Suggested self-study and reflection questions:**

“Institution” and “organization” are often used as synonyms in policy analysis. Can a more nuanced understanding of differences between these terms and concepts be helpful in understanding how and why policies are adopted and how they are implemented?

Consider examples of how “science” has influenced “policy” in relation to population health in Canada or elsewhere. How have IPOG factors shaped this influence and its consequences?

**Week 7**  
**October 19, 2022**

**Food and nutrition policies and population health**

**Charlyn Black MD, ScD**

**Setting the stage:**

*“Eat food.  
Not too much.  
Mostly plants.”*

Source: In Defense of Food, An Eater’s Manifesto. Michael Pollan 2009.

*“Food is the single strongest lever to optimize human health  
and environmental sustainability on Earth.”*

Source: Food in the Anthropocene: The EAT-Lancet Commission on healthy diets from sustainable food systems 2019

Food is part of our everyday existence – we are surrounded by food options and we each make multiple decisions about the food we eat every day. How do our food choices impact our health outcomes and influence the medical care we will need? Why is dietary guidance so confusing? And what does policy have to do with it?

This session will review the relationship between dietary composition and health outcomes, examine trends in food-related patterns of morbidity, and consider the extent to which changes in these patterns can prevent disease, reduce morbidity and mortality, and potentially even reverse chronic disease. It will also underscore the synergies between dietary patterns that together support human health and address climate change, and outline future changes that will be required to provide a growing global population with healthy diets from sustainable food systems.

From a policy perspective, we will consider our ‘food systems’, together with the many players and interests that influence this landscape, and will consider some of the challenges inherent in influencing food and nutrition policy. We will review some of the food and nutrition policies in Canada, and consider progress and future challenges in this area. We will also consider application of policy analytic frameworks within this area of focus.

**Learning Objectives:**

By the end of this session, you should be able to:

- Understand some of the historical perspectives and challenges in the area of nutrition science and research
- Understand and describe the relationship between human diets and health outcomes, including: health effects of dietary risks across populations (international, national and sub-populations), trends over time, and general recommendations for health maximizing dietary patterns

- Understand the alignment between diets that improve human health while addressing climate change
- Understand the multi-layered influences on food choices and dietary patterns, including potential role of government policy, influence of multiple other players, including 'big food', and the challenges of introducing major policy initiatives
- Become familiar with the many players with interests in Canadian food policy (which have primary responsibility?) and critically assess recent Canadian policy initiatives in the area of food and nutrition

**Required preparation materials to be completed in advance:**

Watch this 2017 video by Dr. Marian Nestle from the World Economic Forum: [Healthy Eating: From Personal Choice to Politics](#). Marian Nestle is the Paulette Goddard Professor of Nutrition, Food Studies and Public Health, *Emerita*, at New York University. In the video, Dr. Nestle focuses on the role of the food industry within a US context, but there are some similarities to Canada. *This video raises issues that you are encouraged to consider as you learn about Canadian approaches to food and nutrition policy.*

*Skim:* Health effects of dietary risks in 195 countries, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. <https://www.thelancet.com/action/showPdf?pii=S0140-6736%2819%2930041-8>.

*Review website and related content:* The EAT-Lancet Commission on Food, Planet, Health: <https://eatforum.org/eat-lancet-commission/>, including the adapted summary of the full report available for download here: <https://eatforum.org/eat-lancet-commission/eat-lancet-commission-summary-report/>.

*Review websites and related content:*  
Health Canada's role in food and nutrition <https://www.canada.ca/en/health-canada/services/food-nutrition.html>.

Agriculture and Agri-Food Canada's focus: <https://agriculture.canada.ca/en/canadas-agriculture-sectors/overview-canadas-agriculture-and-agri-food-sector>.

Canada's Food Policy: <https://agriculture.canada.ca/en/about-our-department/key-departmental-initiatives/food-policy>.

Canada's Food Guide: <https://food-guide.canada.ca/en/>.

**Recommended materials for additional investigation:**

History of modern nutrition science-implications for current research, dietary guidelines, and food policy. <https://www.bmj.com/content/361/bmj.k2392>.

Role of government policy | nutrition-barriers to and opportunities for healthier eating.  
<https://www.bmj.com/content/361/bmj.k2426>.

Food in the Anthropocene: The EAT-Lancet Commission on healthy diets from sustainable food systems. Available for download here:  
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31788-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31788-4/fulltext).

BMJ Food for Thought series:

<https://www.bmj.com/food-for-thought>;

<https://www.bmj.com/Food4Thought20>;

[https://www.swissre.com/institute/conferences/food\\_for\\_thought\\_bmj.html](https://www.swissre.com/institute/conferences/food_for_thought_bmj.html);

CBC The Nature of Things: Food for Thought: <https://www.cbc.ca/natureofthings/episodes/food-for-thought>

### **Suggested self-study and reflection questions:**

What are three key messages you have taken away from your readings and review of materials? Were there any surprises for you in the materials reviewed?

To what extent do you believe that improvements in diet should be the responsibility of individuals, or alternatively, should be influenced by policy that impacts the environments within which individuals live?

What are some of the potential impacts on health and health care systems that might accrue from increased uptake of healthier dietary patterns?

What major policy approaches are likely to influence the adoption of more health-promoting diets?

To what extent do you believe Canada has moved forward to promote policy change that can influence increased uptake of healthier diets? Do you note any conflicts between agencies responsible for food consumption (e.g. Health Canada) and food production (e.g. Agriculture Canada)?

How closely does Canada's food guide align with The Planetary Health Diet from the EAT-Lancet Commission on healthy diets from sustainable food systems?

**Fall Term 2022**  
**SPPH 581Y/BL1 -- PPGA 591T 001:**  
**Developing Policy to Improve Population Health**  
**Session Brief for Session 9 (DRAFT)**

**Session Date, Topic, Instructor:**

November 9, 2022. Healthy Child Development Policy. Professor Paul Kershaw.

**Setting the stage – introductory comments:**

While research is clear that the quality of experiences in early childhood has lasting influences over life-long health, Canada is much less likely to invest early in the life course by comparison with investment in our later years. This age distribution in public investment reflects the power of ideas about “who is vulnerable and deserving” of public investment and ideas about gender roles; along with the power of institutions like Old Age Security and Medical Care, which dominate at Treasury Tables; and the power of interest groups like the Canadian Association of Retired Persons (CARP) and those that articulate concerns about current levels of taxation.

**Learning Objectives:**

Understand how the three “I’s” and “IPOG” play out in this policy area

Examine how movements and knowledge mobilization activities around \$10 a day child care aimed to disrupt the three forms of power to win historic investments in child care by the BC and federal governments.

Explore implications for other population health policy.

**Required preparation materials to be completed in advance:**

Raphael, D., et al. (2020) Social Determinants of Health: The Canadian Facts, 2nd Edition, pp. 31-33.

Hard Truths Podcast (forthcoming). “Road to BC and Federal Child Care Success” with Lynell Anderson from the Coalition of Child Care Advocates of BC.

**Recommended materials for additional investigation:**

Revisit Kershaw, P. (2020). "A 'health in all policies' review of Canadian public finance." Canadian Journal of Public Health(111): 8-20.

**Suggested self-study and reflection questions:**

How did attitudes about the importance of medical care investment influence perceptions of whether child care investments were “affordable” in Canada?

How did gender power dynamics influence the history of child care investments in Canada?

What is the role of social movements in translating evidence into public policy?

Fall Term 2022  
SPPH 581Y/BL1 -- PPGA 591T 001:  
Developing Policy to Improve Population Health  
Session Brief

**Session Date, Topic, Instructor: Daniel Vigo. Mental Health Policy in the Canadian and global context. November 16, 2022**

**Setting the stage – introductory comments:**

An infectious disease (Covid-19) has, paradoxically, brought mental health to the forefront of public policy. Jurisdictions across Canada and beyond have increased funding and made various pledges to support people's mental health. But what does this mean, from a health systems perspective? How is "need" defined in the mental health space? Is substance use included? And if mental health is now being prioritized, is it at the expense of other health related needs? Or will additional societal resources be created to address this newly self-evident need? And importantly, how will these resources be used? What will be the threshold of "evidence" required to roll out programs? Will the population as a whole be the target of preventative and/or early interventions? Or will individuals with high severity clinical presentations (i.e., at high risk of disability and death) be prioritized?

**Learning Objectives:**

Student will be able to:

Understand mental health-related needs in the context of overall health.

Critically appraise different ways to measure needs related to mental health and understand the importance of clinical severity and comorbidity in the determination of need and the selection of intervention targets.

Understand the role of Government mental health expenditures in the context of universal health coverage, as well as the available models for mental health systems planning.

With a focus on BC, examine policymaking, health systems planning, and service delivery in order to shed light on what has been labelled "mental health and substance use crisis".

**Required preparation materials to be completed in advance:**

Required reading:

Vigo D, Thornicroft G, Atun R. Estimating the true global burden of mental illness. *Lancet Psychiatry*. 2016 Feb;3(2):171-8.

Vigo DV, Kestel D, Pendakur K, Thornicroft G, Atun R. Disease burden and government spending on mental, neurological, and substance use disorders, and self-harm: cross-sectional, ecological study of health system response in the Americas. *Lancet Public Health*. 2019 Feb;4(2):e89-e96.

Hofman A, Vandenbroucke JP. Geoffrey Rose's big idea. *BMJ*. 1992 Dec 19-26;305(6868):1519-20. doi: 10.1136/bmj.305.6868.1519.

Ritter A, Mellor R, Chalmers J et al (2019) Key considerations in planning for substance use treatment: estimating treatment need and demand. *Journal of Studies on Alcohol and Drugs, Supplement (s18):22–30*.

Krausz, R.M., Westenberg, J.N., Mathew, N. et al. Shifting North American drug markets and challenges for the system of care. *Int J Ment Health Syst* 15, 86 (2021).

Stephanie Nolen, Fentanyl From the Government? A Vancouver Experiment Aims to Stop Overdoses, July 26, 2022, *New York Times*,  
<https://www.nytimes.com/2022/07/26/health/fentanyl-vancouver-drugs.html?referringSource=articleShare>

#### **Recommended materials for additional investigation:**

Yolande Cole, Vancouver police and mayor issue recommendations to address mental health “crisis”, the *Georgia Straight*, Sept 11, 2013  
<https://www.straight.com/news/424456/vancouver-police-and-mayor-issue-recommendations-address-mental-health-crisis>

Carter C & Macpherson D. Alternatives to Prohibition; Chapter 7, *The Criminalization of Drugs in Canada*, in “Getting to tomorrow: a report on Canadian drug policy”, pages 87-90, 2013, Published by the Canada Drug Policy Coalition

Vigo D, Jones L, Thornicroft G, Atun R. Burden of Mental, Neurological, Substance Use Disorders and Self-Harm in North America: A Comparative Epidemiology of Canada, Mexico, and the United States. *Can J Psychiatry*. 2020 Feb;65(2):87-98.

Vigo D, Jones W, Dove N, Maidana DE, Tallon C, Small W, Samji H. Estimating the Prevalence of Mental and Substance Use Disorders: A Systematic Approach to Triangulating Available Data to Inform Health Systems Planning. *Can J Psychiatry*. 2022 Feb;67(2):107-116.

Vigo D, Jones L, Atun R, Thornicroft G. The true global disease burden of mental illness: still elusive. *Lancet Psychiatry*. 2022 Feb;9(2):98-100.

Vigo DV, Kazdin AE, Sampson NA, Hwang I, Alonso J, Andrade LH, Ayinde O, Borges G, Bruffaerts R, Bunting B, de Girolamo G, Florescu S, Gureje O, Haro JM, Harris MG, Karam EG, Karam G, Kovess-Masfety V, Lee S, Navarro-Mateu F, Posada-Villa J, Scott K, Stagnaro JC, Have MT, Wu

CS, Xavier M, Kessler RC. Determinants of effective treatment coverage for major depressive disorder in the WHO World Mental Health Surveys. *Int J Ment Health Syst.* 2022 Jun 23;16(1):29.

**Suggested self-study and reflection questions:**

What usually guides the creation and allocation of societal resources (including human and economic resources) with respect to mental health services? Market considerations? Ethical considerations? Clinical considerations? Political considerations? Personal preference? Think of examples in BC where each of these considerations seem dominant

What is, in your view, the most relevant obstacles to effectively addressing the “mental health crisis” and the “opioid use crisis” in BC?

**Fall Term 2022**  
**SPPH 581Y/BL1 -- PPGA 591T 001:**  
**Developing Policy to Improve Population Health**  
**Session Brief for Session 10 (DRAFT)**

**Session Date, Topic, Instructor:**

November 16, 2022. Housing policies and population health. Professor Paul Kershaw.

**Setting the stage – introductory comments:**

Housing is a well-acknowledged determinant of health. Think of the many ways in which population health professionals will come across the phrase “housing first” as it relates to issues of mental health, substance use, etc. This session will explore the variety of policy issues at play in addressing the problem of “housing unaffordability” – exploring the links between unaffordability of housing for well-educated young people through to homelessness. We will also explore barriers that impede making policy adaptations to address the root causes of the growing gap between home prices and local earnings. This will include exploring the power of cultural ideas on public dialogue about “who is to blame” for housing unaffordability; the growing gap between what is viewed as “politically safe” in the world of politics and Canadian public opinion; and the role of interest groups in promoting and resisting policy changes to the status quo.

**Learning Objectives:**

Awareness of the broad range of policy tools at play in this social determinant of health.

Understand how the three “I’s” and “IPOG” play out in this policy area

Examine the role that shaping opinion and framing ideas plays in translating evidence into policy, and understand why interest groups compete for their preferred framing to win out in the world of politics and public opinion.

**Required preparation materials to be completed in advance:**

- Raphael, D., et al. (2020) Social Determinants of Health: The Canadian Facts, 2nd Edition, pp. 38-41.
- Kershaw, P (forthcoming). “Canada’s tax system fuels a cultural addiction to high and rising home prices.” *Canadian Tax Journal*.
- Generation Squeeze. (no date). “Housing Affordability Solutions.” Available at: <https://www.gensqueeze.ca/housing-plan> Accessed August 11, 2022.
- James Wood. (2022). CMHC giving \$200,000 more to home equity tax advocates. Canadian Taxpayers’ Federation. Available at: <https://www.taxpayer.com/newsroom/cmhc-giving-200,000-more-to-home-equity-tax-advocates> Accessed August 11, 2022.

**Recommended materials for additional investigation:**

- Government of Canada. (no date). National Housing Strategy: <https://www.placetocallhome.ca/>
- Government of BC. (2018) “Homes for B.C.: A 30-point plan for housing affordability in British Columbia.” [https://www.bcbudget.gov.bc.ca/2018/homesbc/2018\\_homes\\_for\\_bc.pdf](https://www.bcbudget.gov.bc.ca/2018/homesbc/2018_homes_for_bc.pdf) Accessed August 11, 2022.

- Kershaw, P (2021). "Wealth and the Problem of Housing Inequity across Generations: A Solutions Lab." Vancouver, BC: Generation Squeeze Lab. Available at: [https://d3n8a8pro7vhm.cloudfront.net/gensqueeze/pages/6403/attachments/original/1639772589/GenSqueeze\\_Nov26.dat?1639772589](https://d3n8a8pro7vhm.cloudfront.net/gensqueeze/pages/6403/attachments/original/1639772589/GenSqueeze_Nov26.dat?1639772589) Accessed August 11, 2022.

**Suggested self-study and reflection questions:**

Why do cultural norms that support Canadians to think the cause of housing unaffordability rests with "others" reinforce the problem of unaffordability.

How can population health leaders disrupt political and cultural norms as part of a process to move evidence into policy action? Why might this be important work for population health practitioners?