

TIME: Mondays 14:00 - 17:00 [Term 2: January 8 – April 8, 2024]

LOCATION: Liu Centre, Case Room. 6476 NW Marine Drive, UBC Vancouver Campus + virtual

INSTRUCTOR	<b>Dr. Jerry M. Spiegel</b> jerry.spiegel@gmail.com	<u>TEACHING ASSISTANT</u> <b>Dr. Samuel Kenston</b> sam.kenston@ubc.ca
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OFFICE HOURS	E-mail for appointment	E-mail for appointment

### Acknowledgement

UBC's Point Grey Campus is located on the traditional, ancestral, unceded territory of the xwməθkwəyəm (Musqueam) people. This land it 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 on this site, *before global forces evolved to infringe on such relationships of peoples to their land and affect their wellbeing.*

### Course overview

*In line with the acknowledgement above, this course examines how global forces impact health equity.* The COVID-19 pandemic, for example, thoroughly disrupted settled ideas about what *security* means for a country and its population! *Human security*, a framework put forward in the 1990s as an alternative to traditional framings of *national security* argues that *security* should more appropriately focus on the status of *people* and not *borders* – and sees health as being both essential and instrumental. *Human security* in fact holds that a *people-centered* view of security is necessary for national, regional and global stability. This multi-dimensional *social* perspective also provides an alternative to narrowly constructed technical global health narratives, by not only considering access to health services but also valuing wider influences on wellbeing and health equity in a more holistic context.

As we entered the 21st century, despite the promise of “globalization”, it was undeniable that about half the world’s population was being left behind, especially children and women. With widening global disparities and concerns over emerging infectious diseases in an increasingly interconnected world, global health began receiving increased attention and funding. The World Health Organization (WHO) estimated that, given existing global knowledge, technologies and resources, more than 40% of the world’s deaths each year are avoidable. Many of these deaths can be prevented only by reaching people trapped in poverty or conflict and by addressing other sources of insecurity. In this context, attention to Global Health grew exponentially.

The adoption of the Millennium Development Goals (MDGs) in September 2000 represented a global attempt by the international community to address this challenge. However, the events of September 11, 2001 prompted a resurgence of “national security” orientations to international relations, undermining “human security” pursuits. In 2015, the international community then adopted Sustainable Development Goals to consider more comprehensive factors, alongside the struggle to achieve recognition of climate change as a prominent threat to global health and security.

This course aims to *develop students’ competencies for critically analyzing and discussing circumstances that affect global health, as well as related intervention strategies and their effects on health equity worldwide.* It examines issues in global health that are fundamental to achieving human security but generally lie outside the scope of international security studies and explores global driving forces and policy issues that have great influence on health but generally lie outside of examinations of health status. In doing so, the course especially considers the role of *sovereignty* and *capacities* as factors that call for greater examination—and in particular, reflects on ethical and political issues related to Canada’s international engagement. Specific topics covered in this course include poverty, equity and the *social determination* of health; global change and neglected diseases; environmental and occupational health accompanying growth; conflict and diplomacy, war and public health; and the challenges of global governance.

## Summary of Modules

- A. Framework for understanding global health and human security (Week 1, 2, 3, 4)
- B. Global drivers, burden of disease, conflict and capacities (Week 5, 6, 7,8)
- C. Global Governance & Wrap Up (Week 9,10, 11, 12)

## Learning objectives

To be able to:

- Discuss *core concepts* concerning “global health” & “human security”;
- Critically analyze *different approaches* to addressing global health concerns;
- Identify & explain *threats* (types, direct and indirect effects) to Global Health Security; and
- Present & critically discuss *strategies* for promoting human security from a health perspective.

## Structure

Each session will generally include

- a) a presentation by the instructor or experts in different areas, together with Q&A
- b) an interactive or student led session (sometimes this will precede lecture sessions)
- c) A discussion of the week’s assigned readings;

## Grading & Assessment

- i) Reflective Journal (20%) Over the course of the term, each student will be expected to submit a total of ten 350-word (max) reflection entries on the discussion board. You may respond to a peer’s post. Grading will assess the conscientiousness of the reflection on “designated questions” or an issue or question that you may raise, referring to readings, lectures and/or other “reference points”. There are no “right or wrong” answers here. Each entry will be due on Sunday at 11.59 pm.
- ii) World Cafe discussion convening (15%) Each student will be a convenor for one session. This will involve “refining” session questions (in line with a critical introduction of 1 or more readings) and facilitating the session -and possibly also frame a question for the week’s lecturer to consider. Each pair of students will prepare a 750-word (max) summary of main points covered and will submit that as the output for this assignment.
- iii) Presentation on a selected topic (15%) For this assignment you will make a presentation that is targeted to a designated “stakeholder/actor” of student’s choice – to inform/provide background/convince of a position etc. You will have 15 minutes to present and 5 minutes for Q &A.
- iv) Essay/research paper on a selected topic (30%) The paper should relate to a topic of interest in regard to one of the themes in the course. It should be 15 pages long (max) excluding references and double-spaced). While creativity is encouraged, the paper may focus on the same topic chosen for student’s class presentations. An option is to frame this paper as the introduction to a larger research project, providing a theoretical background, introducing a research question and outlining a conceptual approach to investigating the research question.
- v) Participation (20%) Participation in class discussion is key. Full attendance and optimal active participation are called for to receive full marks.

## Reading materials

There are 2 core texts where chapters will be drawn for weekly assignments alongside other designated articles

- Labonte, R., & Ruckert, A. (2019). Health Equity in a Globalizing Era: Past Challenges, Prospects (Illustrated edition). Oxford University Press [e-copies available from UBC library].
- Global Health Watch 6, Bloombury Press [e-copies available from UBC library].
- All other reading materials will be available on Canvas;
- a full set of readings will also be provided in digital form for your convenience.

## Course Schedule

Date	Topic	Speaker
Jan 8 Week 1 Liu Case Room	<b>CHALLENGES OF GLOBAL HEALTH &amp; HUMAN SECURITY</b> <i>A look at basic concepts &amp; frameworks (Outline of the course)</i> What are key challenges that characterize global health in 2023?	<b>Dr. JERRY SPIEGEL</b> <i>SPPH / Global Health Research Program/ UBC</i>
Jan 15 Week 2 Liu Case Room	<b>FOREIGN &amp; DOMESTIC POLICY WITH A GLOBAL HEALTH LENS</b> <i>A look at different approaches in the name of security &amp; health</i> What “capacities” need strengthening? How does sovereignty fit in?	<b>Dr. JERRY SPIEGEL</b> <i>SPPH / Global Health Research Program/ UBC</i>
Jan 22 Week 3 Liu Case Room	<b>THE PANDEMIC &amp; GLOBAL HEALTH ISSUES</b> <i>A look at emerging challenges &amp; current governance and technical capacities</i> Are we up to the task of promoting health equity?	<b>Dr. VEENA SRIRAM</b> <i>SPPH</i> <b>Dr. RYAN HOSKINS</b> <i>Physician active in global health</i>
Jan 29 Week 4 Liu Case Room	<b>PARTNERSHIPS, DISPARITY AND SECURITY</b> <i>A look at social determination of populations’ health and wellbeing</i> What partnerships can make a difference? ...applying what principles? What can we learn from applying an “indigenous health” perspective	<b>Dr. ANNALEE YASSI</b> <i>UBC</i> <b>Dr. ANGELA McINTYRE</b> <i>UBC</i>
Feb 5 Week 5 Liu Case Room	<b>DISEASE &amp; SECURITY (HIV/AIDS &amp; SEPSIS)</b> <i>A look at global health challenges &amp; why framing matters...</i> Are we adequately strengthening capacities for addressing global health challenges and opportunities?	<b>Dr. DAVID MOORE</b> <i>BC Centre for Excellence in HIV/AIDS</i> <b>Dr. NIRANJAN (“TEX”) KISSOON (tbc)</b> <i>Centre for Int’l Child Health, BC Children’s &amp; Women’s Hosp</i>
Feb 12 Week 6 GEOG 109	<b>WAR, PUBLIC HEALTH &amp; HUMANITARIAN AID</b> <i>A look at how lack of physical safety &amp; security affects health.</i>	<b>Dr. MAUREEN MAYHEW</b> <i>UBC</i>
Feb 19		
Feb 26 Week 7 GEOG 109	<b>GROWTH AND HEALTH - Worker &amp; Environmental Health</b> <i>A look at problems of growth and globalization... / China.</i> Does increased prosperity ensure improved health?	<b>CATHY WALKER</b> <i>trade union health and safety expert</i> <b>Dr. SAM KENSTON</b>
Mr 4 Week 8 GEOG 109	<b>HEALTH SYSTEMS, DISEASE BURDEN &amp; POVERTY</b> <i>A look at health and security support systems.</i> Do “vertical” aid interventions necessarily improve health systems?	<b>Dr. ANGELI RAWAT</b> <i>UNICEF</i> <b>Dr SIAN TSUEI</b> <i>Harvard School of Public Health</i>
Mar 11 Week 9 GEOG 109	<b>PREPAREDNESS/ BIO-SECURITY</b> <i>A look at how global health &amp; human security are addressed day to day.</i> How have “security” priorities since 2001 helped or hindered health equity?	<b>Dr. BONNIE HENRY (tbc)</b> <i>SPPH &amp;</i> <i>BC Medical Officer of Health)</i>
Mar 18 Week 10 Liu Case Room	<b>THE CHALLENGE OF CLIMATE CHANGE</b> <i>Taking stock of implications of “existential” ecological threats.</i> Should climate change be framed as “climate emergency”?	<b>Dr. TIM TAKARO</b> <i>SFU</i> <b>Ms LUCY EVERETT</b>
Mar 25 Week 11 Liu Case Room	<b>TRADE/ECONOMIC POLICY</b> <i>Taking stock of “commercial determinants of health”.</i> Has globalization been a vector for promoting health security or insecurity?	<b>Dr. JOHN CALVERT</b> , <i>Simon Fraser University</i>
Apr 1	<b>Easter Monday</b>	
April 8 Week 12 GEOG 109	<b>GLOBAL HEALTH GOVERNANCE &amp; DIPLOMACY</b> <b>DECOLONIZING GLOBAL HEALTH</b> <i>Taking stock of how our global governance systems work.</i> Are current governance mechanisms adequate for improving health equity? <b>WRAP-UP</b> What does the concept of human security add to understanding global health?	

Teaching Ends: April 12

*speakers still to be confirmed (tbc) in italics*

Papers due by April 17

**CLASSROOMS:** - LIU Case Room, 6476 NW Marine Drive – Jan. 8, 15, 22, 29 March 18, 25  
- - GEOG 109 (Geography), 1984 West Mall – Feb. 5, 12, 26 March 4 and 11, April 8