

BCHS 2524 Overview of Minority Health and Health Disparities in the US (3 credits)
Department of Behavioral and Community Health Sciences
Graduate School of Public Health
Spring 2006
Tuesday, 6:00 – 9:00 PM

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Course website: <http://courseweb.pitt.edu>
<http://minority-health.pitt.edu/>

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Course Description:

Understanding health disparities involves a critical analysis of historical, political, economic, social, cultural, and environmental conditions that have produced an inequitable health status for racial and ethnic minorities in the United States. While we also recognize that disparities exist along socio-economic status, gender, sexual orientation and other factors, this class will focus on disparities in racial and ethnic minority communities. Issues of gender, SES and other factors will be examined as they intersect race and ethnicity, and further influence disparities in health. Minority health and health disparities have gained considerable attention from the recent publication of *Healthy People 2010 Report*, which lists as its two goals: 1) improve the quality of life for all citizens, and 2) eliminate health disparities. The purpose of this class is to introduce basic issues that underlie health disparities. We will gain a better understanding of the relationships of social and environmental phenomena and the health of minority communities. This course will include current literature and foster discussions that will examine health disparities, explore social and environmental determinants of those disparities, critically review measurement issues, and determine public health's response to these disparities. Students should seek to critically reflect on their personal and professional roles in eliminating health disparities. By the end of the course, students will be able to:

- ✓ Understand minority health and health disparities from an historical, political, economic, social and environmental perspective;
- ✓ Explore the intersection of race, ethnicity, gender, socio-economic status, sexual orientation and other social factors that may exacerbate disparities;
- ✓ Examine challenges in the measurement of minority health and health disparities;
- ✓ Understand the role of cultural competence in health promotion, and disease prevention; and
- ✓ Identify barriers to health care that contribute to disparities.

Teaching Philosophy

In the classroom, we will explore and apply concepts that help us to understand the context of minority health and health disparities. Active participation through critical reflection in the classroom is essential to learning for us all. I see the class as a partnership between teacher and students in which we each bring experience and perspectives that can enrich our interaction. I encourage each of you to create an atmosphere in which all students can speak freely. With an atmosphere of respect and trust, I believe we can flourish as a learning community.

Effective teaching of any class requires an ongoing assessment of the class activities, readings, and assignments. There is a formal course evaluation conducted by the departmental registrar at the end of the semester. However, I believe feedback from students while the class experience is fresh is valuable for my planning. Therefore, please feel free to provide comments on the class activities, readings, or classroom atmosphere via an appointment or email message. Please consider these questions in your comments: What did you like about the class; what would you change; what did you learn and what concerns/issues do you have. Please remember it is equally helpful to hear positive reactions as well as constructive criticism.

Faculty Availability

I will maintain office hours for those students who have questions, comments or concerns. If it is not possible for you to see me during office hours, please call ___ to set up an appointment.

Academic Integrity

The Provost Office maintains a website that provides details on the Code for Academic Integrity; please see <http://www.pitt.edu/~provost/ai1.html>. This code includes obligations for faculty and students, procedures for violations and other critical information. Please take time to read the code.

Disability

If you have a disability for which you are or may be requesting an accommodation, please contact me as soon as possible. Additionally, you should contact the Office of Disability Resources and Services, 216 Pitt Union, (412) 648-7890 or (412) 383-7355 (TTY) as early as possible in the semester. DRS will verify your disability and assist with determining reasonable accommodations for this course.

Course website

All readings and course material will be found on the Blackboard site for this class. The website for Blackboard is <http://courseweb.pitt.edu>. To login, you must have a Pitt account. Your login ID is the same as your login ID for your Pitt account. Your password is the last four digits of your social security number followed by the middle two numbers. To access the site for this class, double click on the course title, BCHS xxxx: Overview of Minority Health and Health Disparities. The site will contain all readings, power point presentations, assignments, and additional information. The power point presentations and required readings for each class will be found under the course documents in the main menu option. It will be imperative to print out power point presentations and readings before class, as copies will not be available in class.

Readings:

This class will use required readings assigned for specific weeks. Some are in the text listed below; others will be available online through our course website under “Course Documents.” You will find the semester broken into weeks, and the readings for that week are attached.

For many of the online documents, access is free and quite easy even from remote sites off campus. To access the Health Sciences Library system, go to <http://www.hslls.pitt.edu>. Double click on either PubMed or Ovid. If you are accessing the site from a remote site (outside of Pitt), your login will be the same as Pitt account login and your password will be the same as your Pitt account password.

While all public domain or online resources will be available throughout the semester online, there are a few readings that are book chapters or other resources for which we will only be able to maintain an electronic version for one week’s time. We will note those references and you are responsible for retrieving those readings during that week.

Required text:

LaVeist, T. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.

Assignments:

Assignment 1: (20 points; 20 %): Journal Assignment

Throughout this course, we will identify and discuss the broad and specific contexts of minority health and health disparities. However, this journal assignment asks you to critically reflect on your own identity. Often when we understand our own race/ethnicity, gender and sexual orientation and how we interact with others, we can begin to unlock and “unpack” our own biases and prejudices. The next step is to challenge our frames of reference to better understand and confront the spectrum of perspectives of minority health and health disparities. In this journal assignment, you are being asked to address interests, ideas, and issues related to the course material, recurring problems or themes in the literature, responses to instructor-generated questions, responses to student-generated questions, and the important connections being made between the course material--your experiences--your work--your intellectual journey. As a participant-learner, you will begin to watch for practices and other relevant material to discuss and consider for personal and professional development. You are being asked to connect the course material with the real world, as you experience it. This is an exercise that should generate critical reflection and thinking about how we can better incorporate an eco-social perspective of health into our research and practice.

General questions to consider in your reflections:

- ✓ From your viewpoint (racial/ethnic, gender, sexual orientation, SES), what are your reactions to the root causes of disparities or even that the literature discusses broader root causes?
- ✓ How does your race/ethnicity, gender, sexual orientation or SES impact your abilities to work with communities that differ from you?

- ✓ What does it mean to be white, to be African American, to be Latino, etc in America today?
- ✓ What do you bring to this experience that affects you?

You should have at least four journal entries during the semester.

Assignment 2: (15 points; 15%) Participation in Activities to Address Health Disparities

We are asking that you choose one activity from the list below in which to participate. Allow the course readings to guide your understanding of the significance the activity or process has for minority health and health disparities and to add to your level of analysis. Maintain a set of notes to allow you to critically reflect on your orientation within the context of the activity. You are not limited to these activities. However, if you have an activity in which you are interested, please have it approved by the instructor.

Potential activities:

- Attend one meeting of the Center for Minority Health’s Community Research Advisory Board (CRAB)
- Attend one activity of Center for Minority Health’s Healthy Black Family Project
- Attend one meeting of the Center for Minority Health’s Working Groups on the seven key disease areas for health disparities
- Attend the CMH journal club on the last Wednesday of the month
- Attend Birmingham Clinic on Saturday. Interpreters provided by medical students from SALUD (Students And Latinos United Against Disparities). Free clinic serves uninsured patients; 54 9th St., Southside, 10a.m.-1 p.m. (Contact Mary Herbert, herbertmi@ummc.edu)
- Attend SALUD Para Niños (SALUD for Children) – Children’s Hospital Ronald McDonald Caremobile that parks in front of the Birmingham Clinic on Saturdays. The mobile unit has an exam room. (Contact Dr. Diego Chaves-Gnecco, diego.chaves-gnecco@chp.edu)
- Attend a Hispanic Car Seat Check organized by Children’s Hospital, SALUD Para Niños and the Latino Catholic Community. Events are held in Allegheny and Washington Counties. (Contact Dr. Diego Chaves-Gnecco, diego.chaves-gnecco@chp.edu)

Prepare a brief 2-page paper for the activity that addresses the following questions:

1. What is the activity? Briefly describe its history.
2. Where is the activity located?
3. Who are the primary stakeholders? Who is the target audience?
4. What disparity or issue(s) in minority health is being addressed?
5. Reflect on your interaction and reaction to your participation in this activity. Did your race, class, religion or other factor have any impact on your interactions?

Assignment 3: (15 points, 15%) Book Critical Review/Reflection

You are asked to choose an alternate text to critically analyze and review. You may choose from the list provided or have another option approved by the instructor. The goal of this assignment

is to broaden your exposure to the minority health and health disparities literature and to take a comprehensive look at health disparities. Please write a 3-4 page review including your responses to the following questions:

1. Please provide a brief abstract of the book (one paragraph).
2. How do the central arguments of the book intersect with the literature on minority health and health disparities today?
3. How has the book advanced your understanding of the context in which minority health and health disparities occur?

Although the books below are suggested readings, they are by no means an exhaustive list of possible books.

- Northington-Gamble, V. (1995). *Making a Place for Ourselves: The Black Hospital Movement, 1920-1945*. New York: Oxford Press.
- Graves, J. L. (2002). *The Emperor's New Clothes: Biological Theories of Race at the Millennium*. New Brunswick: Rutgers University Press.
- Hine, D. C. (1989). *Black Women in White: Racial Conflict and Cooperation in the Nursing Profession, 1890-1950*. Bloomington: Indiana University Press.
- Jones, J. (1993). *Bad Blood: The Tuskegee Syphilis Experiment, 2nd edition*. New York: The Free Press.
- Smith, S (1995). *Sick and Tired of Being Sick and Tired: Black Women's Health Activism in America, 1890-1950*. Philadelphia: University of Pennsylvania Press
- Fadiman, A.(1997). *The Spirit Catches You and You Fall Down*. New York: Farrar, Straus, and Giroux.
- Fullilove, M. (2004). *Root Shock: How Tearing Up Neighborhoods Hurts America, and What We Can Do About It*. New York: Random House Publishing
- Klinenberg, E. (2002). *Heat Wave: A Social Autopsy of Disaster in Chicago*. Chicago: University of Chicago Press
- Whetten-Goldstein, K. & Nguyen, T. (2002). *You're the First One I've Told: New Faces of HIV in the South*. New Brunswick, NJ: Rutgers University Press.
- Bedolla, L. (2005). *Fluid Borders: Latino Power, Identity, and Politics in Los Angeles*. University of California Press.
- Trafzer, C. (2001). *Medicine Ways: Disease, Health, and Survival among Native Americans*. AltaMira Press.
- DuBois, W. *The Health and Physique of the Negro*.

- Bullard, R. (2000). *Dumping in Dixie: Race, Class, and Environmental Quality*. Westview Press; 3rd edition.
- Cole, L. & Foster, S. (2000). *From the Ground Up: Environmental Racism and the Rise of the Environmental Justice Movement*. New York University Press.
- Halperin, R. (1998). *Practicing Community: Class Culture and Power in an Urban Neighborhood*. University of Texas Press.
- Hammerschlag, C. (1989). *The Dancing Healers: A Doctor's Journey of Healing with Native Americans*. HarperSanFrancisco.
- Riversby, S. (2000). *Tuskegee Truths: Rethinking the Tuskegee Syphilis Studies in Social Medicine*. Chapel Hill, NC: The University of North Carolina Press.
- Wailoo, K. (1997). *Drawing Blood: Technology and Disease Identity in Twentieth-Century America*. Baltimore: The Johns Hopkins University Press.
- Wailoo, K. (2001). *Dying in the City of the Blues: Sickle Cell Anemia and the Politics of Race and Health*. Chapel Hill: The University of North Carolina Press.

Assignment 4: (50 points; 50%)

Develop a research paper and presentation that will describe a specific health disparity. This description should include: (1) history of the disparity; (2) who suffers from it? (3) How are race and class being measured; (3) what are the determinants or causal factors? (4) do gender, SES, sexual orientation or other factors intersect with race/ethnicity to affect this issue?; (5) where would be an appropriate place to intervene within a social-ecological model? (6) How much does this disparity account for larger health disparities? You should also discuss how you would intervene, giving consideration to the social ecological model and other lessons from the course.

Presentation:

You can use your creative genius to present your research from the paper above. You can use this paper to articulate an argument to a policy maker on the importance of addressing health disparities. You may do a traditional presentation on your research paper. Or, you may present of a recurring theme/issue found in your research that is part of the larger discussion of the health disparity you have chosen, for example you may focus on diabetes in an urban housing project, but part of eliminating the disparity in your view may be to organize a community organization. You may focus your attention for the presentation on how to organize a community organization around a central issue that will help eliminate your health disparity. Each student will be asked to complete in class a very short, feedback report for each presentation.

Grade scale:

A	90-100
B	89-80

C	79-70
D	69-60
F	59 and below

Below you will find the title, date, objectives, activities and readings for each class. Please note that these may be subject to change with appropriate notice to you.

Class 1: Overview of Health Disparities

By the end of this class, each student will be able to:

- Define health disparities;
- Identify the seven priority areas outlined in Healthy People 2010

Class Activities:

- Introductions
- Brief lecture and discussion
- Course expectations and organization including introduction to courseweb.
- Review of the syllabus

Required readings:

- LaVeist, Thomas A. Introduction. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Byrd, W. M., & Clayton, L. A. (2000). Introduction. In *An American Health Dilemma: Volume One, A Medical History of African Americans and the Problem of Race: Beginnings to 1900* (Vol. 1, pp. 1-23). New York: Routledge.

Optional readings:

- Byrd, W. M., & Clayton, L. A. Introduction: Race, Medicine and Health Care: A Problematic American Relationship. In *An American Health Dilemma: Volume II, Race, Medicine, and Health Care in the United States 1900-2000* (Vol. II, pp. 1-31). New York: Routledge.
- Fiscella K., Franks, P., Doescher M.P., Saver, B.G. Disparities in Health Care by Race, Ethnicity, and Language Among the Insured: Findings from a National Sample. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Williams, D. R., Neighbors, H. W., & Jackson, J. S. (2003). Racial/Ethnic Discrimination and Health: Findings from Community Studies. *American Journal of Public Health*, 93(2), 200-208.

Class 2: Health Disparities Overview and History of Minority Health

By the end of this class, each student will be able to:

- Understand the history of minority health;
- Describe lessons that are relevant to eliminating health disparities today.

Class Activities:

- Lecture/discussion
- Historical exercise or video

Required readings:

- Couto, R. A. (1991). Health Contexts and Cures. In *Ain't Gonna Let Nobody Turn Me Around: The Pursuit of Racial Justice in the Rural South* (pp. 253-285). Philadelphia: Temple University Press.
- Gamble, V. N. Under the Shadow of Tuskegee: African Americans and Health Care. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader* (pp. 34-46). San Francisco: Jossey-Bass.
- Krieger, N. Shades of Difference: Theoretical Underpinnings of the Medical Controversy on Black-White Differences in the United States, 1830-1870. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Quinn, S. C. (2001). The National Negro Health Movement: Lessons for Eliminating Health Disparities Today. *Minority Health Today*, 2(3), 42-49.

Optional readings:

- Byrd, W. M., & Clayton, L. A. (2000). Race, Biology, and Health Care in the United States: Reassessing a Relationship. In *An American Health Dilemma: Volume One, A Medical History of African Americans and the Problem of Race: Beginnings to 1900* (Vol. 1 pp. 25-144). New York: Routledge.
- Ibrahim, S. A., Thomas, S. B., & Fine, M. J. (2003). Achieving Health Equity: An Incremental Journey. *American Journal of Public Health*, 93(10), 1619-1621.

Class 3: Part I: Government's Role in Health Disparities

By the end of this class, each student will be able to:

- Understand the role of government in reducing and eliminating health disparities.
- Describe the implications of these initiatives for research and practice
- Explain the historical and current role of Offices of Minority Health and policy implications for health disparities.

Class Activities:

- Lecture/Discussion

Required readings:

- Bloche, M. G. (2004). Health Care Disparities--Science, Politics, and Race. *New England Journal of Medicine*, 350(15), 1568-1570.
- Petticrew, M., Whitehead, M., McIntyre, S. J., Graham, H., & Egan, M. (2004). Evidence for public health policy on inequalities:1: The reality according to policymakers. *Journal of Epidemiological Community Health*, 58, 811-816.

- Steinbrook, R. (2004). Disparities in Health Care--From Politics to Policy. *New England Journal of Medicine*, 350(15), 1486-1488.
- Whitehead, M., Petticrew, M., Graham, H., McIntyre, S. J., Bambra, C., & Egan, M. (2004). Evidence for public health policy on inequalities:2: Assembling the evidence jigsaw. *Journal of Epidemiological Community Health*, 58, 817-821.
- Healthy People 2010 Goals, pp.7-11.
- Heckler. Executive Report, Report from the Secretary's Task Force on Black and Minority Health.
- Roubideaux, Y. (2002). Perspectives on American Indian Health. *American Journal of Public Health*, 92 (9), 1401-1403.

Optional Readings:

- Lillie-Blanton, M & Hudman, J. (2001). Untangling the Web: Race/Ethnicity, Immigration and the Nation's Health. *American Journal of Public Health*, 91 (11), 1736-1738.

Class 4: Who experiences health disparities?

By the end of this class, each student will be able to:

- Articulate which minority health groups experience disparities;
- Understand barriers in minority health;
- Understand the effects of discrimination.

Class Activities:

- Lecture/discussion

Required readings:

- Franzini, L., Ribble, J.C., Keddie, A.M. Understanding the Hispanic Paradox. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Williams, D. R. (1996). Introduction: Racism and Health: A Research Agenda. *Ethnicity and Disease*, 6(Winter/Spring).
- Amaro, H. & de la Torre, A. (2002). Public Health Needs and Scientific Opportunities in Research on Latinas. *American Journal of Public Health*, 92 (4), 524-529.

Optional readings:

- Hayes-Bautista, D.E., Chapa, J. Latino Terminology: Conceptual Bases for Standardized Terminology. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.

Class 5: Social Epidemiology and its contribution to health disparities

By the end of this class, each student will be able to:

- Understand Social Epidemiology as a theoretical frame of reference for minority health and health disparities;
- Articulate the key variables used by social epidemiologists to study health disparities;
- Describe the challenges of race and ethnicity as measurement categories;
- Understand the value of quantitative and qualitative methods in addressing health disparities.

Class Activities:

- *Lecture/discussion*

Required readings:

- Jones, C. P. (2001). Invited Commentary: "Race," Racism, and the Practice of Epidemiology. *American Journal of Epidemiology*, 154(4), 299-304.
- Jones, C. P., LaVeist, T. A., & Lillie-Blanton, M. (1991). "Race" in the Epidemiologic Literature: An Examination of the American Journal of Epidemiology, 1921-1990. *American Journal of Epidemiology*, 134(10), 1079-1084.
- Krieger, N. (1999). Embodying Inequality: A Review of Concepts, Measures, And Methods for Studying Health Consequences of Discrimination. *International Journal of Health Services*, 29(2), 295-352.
- Krieger, N. (2001). Historical Roots of Social Epidemiology: Socioeconomic gradients in health and contextual analysis. *International Journal of Epidemiology*, 30, 899-900.
- Krieger, N. (2001). Theories for social epidemiology in the 21st century: An ecosocial perspective. *International Journal of Epidemiology*, 30, 668-677.
- Krieger, N., & Smith, G. D. (2004). "Bodies Count," and Body Counts: Social Epidemiology and Embodying Inequality. *Epidemiological Reviews*, 26, 92-103.

Optional readings:

- Hunt, L. M., Schneider, S., & Comer, B. (2004). Should "acculturation" be a variable in health research? A critical review of research on US Hispanics. *Social Science & Medicine*, 59, 973-986.

Class 6: Root causes of disparities

By the end of this class, each student will be able to:

- Understand fundamental causes of health disparities from multiple perspectives;
- Describe the impact of the broader social and environmental factors on health disparities.

Class Activities:

- Lecture and discussion

Required readings:

- Byrd, W. M., & Clayton, L. A. Black and Disadvantaged Health, Health Reform, and the Future. In *An American Health Dilemma: Volume II, Race, Medicine, and Health Care in the United States 1900-2000* (Vol. II, pp. 569-587). New York: Routledge.

- Krieger, N. (2003). Does Racism Harm Health? Did Child Abuse Exist Before 1962? On Explicit Questions, Critical Science, and Current Controversies: An Ecosocial Perspective. *American Journal of Public Health*, 93(2), 194-199.
- Link, B. G., & Phelan, J. C. (2002). McKeown and the Idea of That Social Conditions are Fundamental Causes of Disease. *American Journal of Public Health*, 95(2), 730-732.
- Williams, D.R., Collins C. Racial Residential Segregation: A Fundamental Cause of Racial Health Disparities. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass

Optional readings:

- LaVeist, T.A. Segregation, Poverty, and Empowerment: Health Consequences for African Americans. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Miranda, J., Lawson, W., & Escobar, J. (2002). Ethnic Minorities. *Mental Health Services Research*, 4(4), 231-237. Link, B. G., & Phelan, J. C. (1995). Social Conditions as Fundamental Causes of Disease. *Journal of Health and Social Behavior*, 80-94.

Class 7: The question of “Race and Ethnicity vs. Race or Ethnicity”: Issues of measurement

By the end of this class, each student will be able to:

- Understand the impact of racism on health disparities;
- Articulate the challenges of measuring race and ethnicity;
- Determine if race is a social construction useful in the elimination of health disparities.

Class Activities:

- Lecture and discussion

Required readings:

- James, S.A. John Henryism and the Health of African Americans. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- LaVeist, T. (1996). Why We Should Continue to Study Race...But Do a Better Job: An Essay on Race, Racism and Health. *Ethnicity and Disease*, 6(Winter/Spring), 21-29.
- Thomas, S. B. (2001). The Color Line: Race Matters in the Elimination of Health Disparities. *American Journal of Public Health*, 91(7), 1046-1048.
- Mays, V., Ponce, N., Washington, D. & Cochran, S. (2003). Classification of Race and Ethnicity: Implications for Public Health. *Annual Review of Public Health*, 24, 83-110.

Optional readings:

- LaVeist T.A. Beyond Dummy Variables and Sample Selection: What Health Services Researchers Ought to Know About Race as a Variable. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Stewart, A. L., & Napoles-Springer, A. M. (2003). Advancing Health Disparities Research: Can We Afford to Ignore Measurement Issues. *Medical Care*, 41(11), 1207-1220.

- Klonoff, E.A. Landrine, H. Is Skin Color a Marker for Racial Discrimination? Explaining the Skin-Color-Hypertension Relationship. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Amaro, H. & Zambrana, R. (2000). Criollo, Mestizo, Mulato, LatiNegro, Indigena, White or Black? The US Hispanic/Latino Population and Multiple Responses in the 2000 Census. *American Journal of Public Health*, 90 (11), 1724-1727.

Class 8: Socioeconomic Status: Issues of Measurement, and the Intersection between Class & Race

By the end of this class, each student will be able to:

- Understand the impact of SES on health disparities;
- How we measure (quantitative and qualitative) SES;
- Understand the relationship between race and SES.

Class Activities:

- Lecture and discussion

Required readings:

- Phelan, J. C., Link, B. G., Diez-Roux, A., Kawachi, I., & Levin, B. (2004). "Fundamental Causes" of Socioeconomic Inequalities in Mortality" A Test of the Theory. *Journal of Health and Social Behavior*, 45(September), 265-285.
- Weinick, R. M., Jacobs, E. A., Stone, L. C., Ortega, A. N., & Burstin, H. (2004). Hispanic Healthcare Disparities: Challenging the Myth of a Monolithic Hispanic Population. *Medical Care*, 42(4), 313-320
- Williams, D.R., Collins C. U.S. Socioeconomic and Racial Differences in Health: Patterns and Explanations. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.

Optional readings:

- Subramanian, S. V., & Kawachi, I. (2003). Income Inequality and Health: What Have We Learned So Far? *Epidemiological Reviews*, 26, 76-91.

Class 9: Distinguishing between health disparities and health care disparities

By the end of this class, each student will be able to:

- Describe the impact of race, class and ethnicity on patient-provider relationships;
- Understand the differences between health care access and utilization.

Class Activities:

- Lecture and discussion
- Group activity

Required readings:

- Bach, P. B., Pham, H. H., Schrag, D., Tate, R. C., & Hargraves, J. L. (2004). Primary Care Physicians Who Treat Blacks and Whites. *The New England Journal of Medicine*, 351(6), 575-584.
- Becker, G., & Newsom, E. (2003). Socioeconomic Status and Dissatisfaction with Health Care Among Chronically Ill African Americans. *American Journal of Public Health*, 93(5), 742-748.
- Fiscella K., Franks, P., Doescher M.P., Saver, B.G. Disparities in Health Care by Race, Ethnicity, and Language Among the Insured: Findings from a National Sample. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Mayberry, R.M., Mili, F., Ofili E. Racial and Ethnic Differences in Access to Medical Care. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Stevens, G. D., & Shi, L. (2003). Racial and Ethnic Disparities in the Primary Care Experiences of Children: A Review of the Literature. *Medical Care Research and Review*, 60(1), 3-30.
- US General Accountability Office (2005). *Indian Health Service: Health Care is Not Always Available to Native Americans*. Available online at <http://www.gao.gov/new.items/d05789.pdf>

Optional readings:

- Dougherty, R. H. (2004). Reducing Disparity in Behavioral Health Services: A Report from the American College of Mental Health Administration. *Administration and Policy in Mental Health*, 31(3), 253-263.
- Morrison, R.S., Wallenstein, S., Natale, D.K., Senzel, R.S., Huang, LL. “We Don’t Carry That”: Failure of Pharmacies in Predominantly Nonwhite Neighborhoods to Stock Opioid Analgesics. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Saha, S., Komaromy, M., Koepsell T.D., Bindman, A.B. Patient-Physician Racial Concordance and the Perceived Quality of Health Care. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Schulman, K.A. et. al. The Effect of Race and Sex on Physicians’ Recommendations for Cardiac Catherization. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.
- Lillie-Blanton, M. & Roubideaux, Y. (2005). Understanding and Addressing the Health Care Needs of American Indians and Alaska Natives. *American Journal of Public Health*, 95 (5), 759-761.

Class 10: Geographic and Environmental Health Disparities

By the end of this class, each student will be able to:

- Understand the impact of environment on health disparities;
- Delineate the challenges of measuring the impact of environmental factors on health disparities;
- Understand the intersection between social conditions and environmental conditions.

Class Activities:

- Lecture
- Video (or speaker by distance—Gary Grant and Steve Wing)

Required readings:

- Bent, K. N. (2003). Culturally Interpreting Environment as Determinant and Experience of Health. *Journal of Transcultural Nursing*, 14(4), 305-312
- Horowitz, C. R., Colson, K. A., Hebert, P. L., & Lancaster, K. (2004). Barriers to Buying Healthy Foods for People With Diabetes: Evidence of Environmental Disparities. *American Journal of Public Health*, 94(9), 1549-1554.
- Krieger, N. (2003). Place, Space, and Health: GIS and Epidemiology. *Epidemiology*, 14(4), 384-385.
- Probst, J., Moore, C., Glover, S. & Samuels, M. (2004). Person and Place: The Compounding Effects of Race/Ethnicity and Rurality on Health. *American Journal of Public Health*, 94 (10), 1695-1703.
- LaVeist, T. A. (2003). Racial Segregation and Longevity among African Americans: An Individual-Level Analysis. *Health Services Research*, 38(6), 1719-1733.
- Oakes, J. M. (2004). The (mis)estimation of neighborhood effects: causal inference for a practicable social epidemiology. *Social Science & Medicine*, 58, 1929-1952.
- Pearl, M., Wing, S., Diex Roux, A., Poole, C. Neighborhood Characteristics Associated with the Location of Food Stores and Food Service Places. In LaVeist, T. A. (Ed.). (2002). *Race, Ethnicity, and Health: A Public Health Reader*. San Francisco: Jossey-Bass.

Optional Readings:

- Krieger, N., Chen, J. T., Waterman, P. D., & Soobader, M.-J. (2002). Geocoding and Monitoring of US Socioeconomic Inequalities in Mortality and Cancer Incidence: Does the Choice of Area-based Measure and geographic Level Matter? *American Journal of Epidemiology*, 156(5), 471-482.
- St. George DM, Wing SB, Lewis DR (2000). Fouling our nest. Geographic and temporal patterns of toxic industrial chemicals released in North Carolina, 1988-1994. *North Carolina Medical Journal*, Jan/Feb 61(1), 369-400.

Class 11: Race and Genetics

By the end of this class, each student will be able to:

- Understand the continuing challenges around race and genetics;
- Examine the role of race and genetics on health disparities.

Class Activities:

- Lecture/discussion
- Demonstration by Genetic Counseling students

Required readings:

- Bonham, VL, Warshauer-Baker, E, Collins FS. (2005) Race and ethnicity in the genome era: the complexity of the constructs. *American Psychology*, Jan 60(1), 9-15

- Braun, M. (2002). Race, Ethnicity, and Health: Can Genetics Explain Disparities? *Perspectives in Biology and Medicine*, 45(2), 159-174.
- Condit, C. M., R.L., P., Bates, B. R., Bevan, J. L., & Achter, P. J. (2004). Exploration of the impact of messages about genes and race on lay attitudes. *Clinical Genetics*, 66, 402-408.
- Goodman, A. H. (2000). Why Genes Don't Count (for Racial Differences in Health). *American Journal of Public Health*, 90(11), 1699-1702.
- Schulz, A., Caldwell, C., & Foster, S. (2003). "What Are They Going to Do With the Information?" Latino/Latina and African American Perspectives on the Human Genome Project. *Health Education & Behavior*, 30(2), 151-169

Class 12: Cultural Competence: Social and Cultural Factors

By the end of this class, each student will be able to:

- Identify methods, models and approaches to achieve a culturally competent method of working with minority communities.

Class Activities:

- Lecture/discussion

Required readings:

- Anderson, L. M., Scrimshaw, S. C., Fullilove, M. T., Fielding, J. E., & Normand, J. (2003). Culturally Competent Healthcare Systems: A Systematic Review. *American Journal of Preventive Medicine*, 24(3S), 68-79.
- Resnicow, K., Braithwaite, R., Ahluwalia, J., & DiIorio, C. (2001). Cultural Sensitivity in Public Health. In R. Braithwaite & S. Taylor (Eds.), Health Issues in the Black Community (2nd ed., pp. 516-542). San Francisco: Jossey-Bass.

Optional readings:

- Gathers, D. (2003). Diversity Management: An Imperative for Healthcare Organizations. *Research and Perspectives on Healthcare*, 81(3), 14-20.
- Swanson, J. W. (2004). Diversity: Creating an Environment of Inclusiveness. *Nursing Administrative Quarterly*, 28(3), 207-211.

Class 13: Cultural Competence: Social and Cultural Factors

By the end of this class, each student will be able to:

- Identify methods, models and approaches to achieve a culturally competent method of working with minority communities.

Class Activities:

- Small group exercises
- discussion

Class 14: Class Presentations

By the end of this class, each student will be able to:

- Present research on minority health and health disparities.

Class Activities:

- Group presentations

Class 15: Class Presentations Final Reflections, and Evaluation

By the end of this class, each student will be able to:

- Present research on minority health and health disparities.

Class Activities:

- Group presentations
- Course evaluation