



Boston University Study Abroad London

Health and Wellbeing across the Life Course
SAR HP 522 (*Elective B*)
[Semester] [Year]

Instructor Information

A. Name	Dr Raluca Mattei
B. Day and Time	[to be confirmed]
C. Location	[to be confirmed]
D. BU Telephone	020 7244 6255
E. Email:	[to be added]
F. Office hours	By appointment

Course Description

The course draws on British contributions to theory and research on health and wellness across the life course to promote **social inquiry** into public health challenges facing Britain today, together with an appreciation of issues in **ethical reasoning** posed by the planning and delivery of public health strategies and campaigns on an individual and community level. We will consider current challenges relating to: the nature of health and wellbeing; how health and wellbeing can be measured on an individual and population level; the central public health challenges of aging and chronic ill-health; the key role of life-style factors as determinants of health across the life course; the issue of health inequalities and social determinants of health; and the role of public health departments and national public health bodies in the development of campaigns and strategies to promote health. The ethical dimensions of public health work will be addressed through the course, particularly with reference to the respective roles and responsibilities of individuals, healthcare professionals, public health specialists, and local authorities and the state. We will explore how the tensions and possible resolutions between individual freedoms on the one hand, and the concerns of authorities and the state to protect and promote the public's health as a whole.

The course will also serve to develop skills in **critical thinking**, through the analysis of recent examples of public health research in the UK, and through group work to develop presentations based on current UK campaigns to raise awareness of issues affecting health and wellbeing and promote health. This exercise will be assessed both with respect to content but also in terms of the critical thinking skills demonstrated by students in their presentations. Students will be encouraged to think critically about the planning, execution and evaluation of health promotion campaigns operating at either a national or local level.

Students will also have opportunities through critical reflection on assigned reading to develop skills in evaluating recent research on factors affecting the health and wellbeing of individuals and communities, particularly in the context of life course research, and work on the social determinants of health.

The course will address the role of the World Health Organisation internationally, and provide an overview of the current landscape of public health across the UK. Emphasis will be placed on understanding the role of key national organisations such as the National Health Service, Public Health England and the Royal Society for Public Health in protecting and promoting the public's

health, as well as gaining insights into the work of key UK academics and researchers in the field of life course epidemiology, including Michael Marmot, David Barker, Peter Elwood and Diane Kuh, and the contributions made by British longitudinal cohort studies.

In addition to academic study, students will have the opportunity to learn directly from field visits and meeting people working in communities addressing the health and wellbeing issues discussed in the classroom.

Hub-aligned Course Objectives

Social Inquiry II Learning Outcome 1

Students will evidence their knowledge of the British contributions to an understanding of the biological, social and lifestyle determinants of health and wellbeing across the life course, and their awareness of the contributions of leading British epidemiologists and health researchers. Students will be required to demonstrate their understanding of the methods of research employed, and whether the data presented in the reports considered, support the conclusions drawn.

Social Inquiry II Learning Outcome 2

Students will demonstrate their knowledge and analytic skills in the critical evaluation of the strengths and limitations of selected examples of social inquiry on the determinants of health and wellbeing, and practical campaigns to improve population health. Students will be required to place their analysis in the context of current health policy, and the value of social inquiry in helping to understand current patterns and trends in population health and the success of practical strategies to address challenges.

Ethical Reasoning Learning Outcome 1

Students will be able to identify and debate the major ethical issues arising from the role of the state and local authorities in pursuing initiatives and campaigns to protect and promote public health. Students will be expected to engage with competing perspectives and argue for a position that may be contrary to their own views, in relation to such issues as: chlorination of the water supply; mass vaccination and screening; provision of sex education and free condoms to young people; the control of legal and illegal substances; the role of corporations in relation to food quality and labelling; the role of social media providers in protecting consumers from harmful content.

Ethical Reasoning Learning Outcome 2

Students will demonstrate the skills and vocabulary needed to reflect on the ethical responsibilities that face individuals, communities and authorities as they grapple with public health issues affecting both the communities to which they belong and those in other communities. The extent to which individuals have responsibilities towards themselves, other people in their local communities, and in the wider national and international context will be examined in relation to current and future challenges to health across the life course e.g. the health impact of environmental pollution and climate change, changing patterns of employment during technological and commercial pressures, the role of social media and its potential impacts on mental health. All of these issues are likely to disproportionately affect children and young people with potential consequences across their whole lifespan

Critical Thinking Learning Outcome 1

Students will demonstrate their skills of critical thinking and analysis through the careful evaluation of the arguments, methods, quantitative findings and conclusions drawn in selected examples of recent UK health research.

Critical Thinking Learning Outcome 2

Students will demonstrate their ability to use the tools of critical thinking and analysis successfully with other students, in working towards a presentation on a selected national or local health promotion campaign looking at the evidence basis, the strategies involved, and the outputs and outcomes achieved. This could be the UK national approach to smoking cessation, or campaigns such as Change4Life, One You or Chlamydia Screening, or a more local campaign in London – such as the Go Golborne initiative, or the London Healthy Workplace Charter.

Additional Course Objectives

On completion of this course, students will be able to:

- Demonstrate a knowledge of the landscape of UK health services and public health institutions working to protect and promote population health
- Appreciate the distinctive contributions that British epidemiologists and health researchers have made internationally, particularly to an understanding of the social and personal determinants of health and wellbeing
- Understand the place of historical and technological change and political factors in the generation of developments in public health research and priorities in public health campaigns (e.g. the political commitment to address health inequalities; concern over the health implications of developments in digital technology and social media)
- Show an understanding of the operation and outcomes of planning on a local level to meet population health needs through local Joint Strategic Needs Assessments (JSNA), with a focus on public health planning in the Royal Borough of Kensington and Chelsea
- Evidence improved knowledge of selected social challenges facing Britain today relating to health and wellbeing: the role of healthy and unhealthy life-styles, the wider social determinants of health, technological changes in social media, issues of poverty and debt and their impacts on mental wellbeing; the ageing population in the UK and the growing problem of loneliness

Educational Strategies

The course will encourage critical engagement with the ideological underpinnings, core ideas and methods of health and public health research as a form of social scientific inquiry. It will also raise questions of relevance to contemporary debates around social policy and strategy in addressing pressing health and wellbeing issues affecting communities and individuals in Britain today.

- Each session will start with an interactive review of the course so far, with opportunities to reflect on what has been learned, especially if the previous session involved a visit or visiting speaker.
- Following this, a short lecture presentation will be given, supported by slides, which will start with a statement of the specific objectives to the met within the session.
- Where a film is shown, active learning will be encouraged by providing a framework for watching the film.
- For sessions involving analysis of selected research papers, students read the paper and identify at least two of its strengths and limitations. Then in class, students will share views of the paper in pairs or small groups, before a facilitated whole group discussion to compile a full set of strengths and weaknesses, concluding with an overall measured assessment.
- In exploring ethical issues raised by contemporary public health challenges, formal debates will be facilitated in which students will work in a team and be asked to take opposing stances – for example arguing for and against the role of state intervention in health, or the extent to which individuals should be considered as having primary moral responsibility for their own health.

- A central educational strategy in the course is for students to engage in active learning through small teams from the second session onwards. The aim will be to create group presentations based on the work of organisations such as the NHS, Public Health England, the Royal Society for Public Health, or the local public health department in the Royal Borough of Kensington and Chelsea.
- Educational visits are a valuable component of this course, and they will be organised with the aim of encouraging experiential learning and reflection. All visits will be discussed in class beforehand and afterwards, so that students can share expectations and insights achieved, and be clear about the assessment requirements associated with the visits.
- An element of team-teaching is built into the course, and students are required through the team presentations to teach their peers about the organisation they have researched and engage them in active learning and discussion.
- As a number of the topics discussed are sensitive, trigger warnings will be given. In relation to the sessions on sexuality, and in relation to issues of domestic violence and sharing of sexual issues via social media, students will have the opportunity to discuss ground rules at the start of the session.

Students are expected to:

- Engage actively with the set reading, activities and class discussions
- Respect the guidelines laid down regarding use of mobile phones and laptops
- Respect any ground rules set by the group in connection with discussion of sensitive topics
- Do all the pre-session reading required
- Actively seek clarification on any aspects of course work or assessment that are not clear
- Work in a spirit of positive collaboration with peers
- Practice oral delivery for the presentation in advance to ensure it is clear and engaging
- Proofread work before submitting and ensure that any sources referred to in the text are properly cited

Assessment

Participation and Classroom Etiquette

10% of the overall assessment mark is given for attendance, evidence of preparation through doing the required readings and thoughtful, active participation in discussion, response to peer presentations and synopses and on field trips.

Formative Assessments

Throughout the course, students will be asked to complete short tasks which will allow the tutor to assess their engagement with and understanding of the course content and the requirements of the course assessments. For example: brain storming on key health challenges facing the USA and Britain today; brief evaluative assessments of visits; identification of two strengths and two limitations of assigned research papers for evaluation. The tutor will also work actively with groups in the development of presentations, with feedback on early drafts of slides and comments on the audiovisual resources employed. During the course, students' teams will be given class time to work together and prepare their presentations. Advice and feedback will be provided.

Summative Assessments

The course will be assessed using two forms of summative assessment: a two-hour in-class examination with questions, and a group presentation (of approximately 12 slides, and associated text of the presentation), accompanied by a six double-spaced page personal account from each individual in the group about their contribution to creating the presentation, together with an evaluation of the process of working together in a team and the quality of the presentation delivery. In addition, throughout the course, a range of simple techniques and activities will be employed formatively, to check on student engagement with the material and student learning. An

important principle governing the work of the course is that the reading, critical analysis and discussions undertaken in class and during course visits will be directly linked to the assessments. In addition, emphasis will be placed on student capacities to think and write reflectively, critically and creatively in responding to the material covered in the course – rather than demonstrating, through recall from memory, that students have absorbed, and are able to reproduce, a body of prescribed information.

50% Final examination in two parts

The first part will ask students to demonstrate their capacities for **ethical reasoning** and **critical thinking** in evaluating one of a number of recent examples of British health research and evaluation discussed during the course, and to make suggestions on what further research would be of value to build on the study evaluated. Illustrative examples of research papers on: lifestyles and illness in later life; evaluations of UK national public health campaigns; evaluation of the Go Golborne initiative; research on the value of arts engagement in promoting wellbeing; the development of instruments to assess wellbeing; RSPH research reports on drugs, debt, sleep, social media etc.

The second part will ask students to demonstrate their understanding of **social inquiry** through critically reflecting on their learning, emotional experiences and increased insights following two of the visits organised as part of this course. Students will be asked to consider the contributions that the visit has made to their understanding of the issues addressed during the course, showing evidence of background research. At least three sources should be cited. Illustrative visits include: Dragon Café, The Muslim Heritage Centre, North Kensington; a local food bank; the Claremont Project; The Living Room Project; Choir with No Name, and the Royal Society for Public Health etc. Reflections should:

- Briefly describe the visit and feelings about it
- Outline the principal areas of learning from the visit in relation to issues addressed in the course
- Show evidence of prior preparation and further reflection following the visit by reference to sources consulted
- Conclude with an assessment of how worthwhile the visit was personally and for an understanding of relevant perspectives in psychology

40% A group presentation plus an individual reflection to demonstrate capacities for **ethical reasoning and **critical analysis** in relation to public health strategies and campaigns (six double-spaced pages)**

A presentation of 20 minutes delivered in class on the work of UK national and local health organisations in promoting health and wellbeing. In addition a six double-spaced page report from each individual in the group giving an account of their contribution and an analysis of the work of the team. Presentations should:

- Provide a brief overview of the organisation and its work
- Describe one health campaign or health promotion project the organisation has planned and delivered
- Present details of how the campaign or project has been evaluated
- Make an assessment of the impact of the campaign or project
- Give recommendations for further work needed
- Provide issues or questions for discussion by the whole group

For individuals, 25% of the assessment will be based on their individual contribution and 75% on a personal reflection of their contribution and on how the group worked together. For the presentation, criteria for assessment will be:

- Clearly articulated contribution relevant to the flow of the presentation
- Reference to the material on accompanying slides without too close reliance on the text
- Good engagement with the students listening to the presentation
- Contributing to questions or issues raised for the audience to consider

Individual reflections should:

- Discuss their role and responsibility within the team (and how they came to choose it or it was assigned to them)
- Identify and discuss tools and strategies which enabled communication within the group
- Provide examples of feedback successfully given and/or received during the group's preparation for the presentation (what works and how)
- Build from one example of tools, strategies or feedback successfully given and/or received during the group's presentation to the class

Grading

The following Boston University table explains the grading system that is used by most faculty members on Boston University's Study Abroad London Programmes.

Grade	Honour Points	Usual %
A	4.0	93-100
A-	3.7	89-92
B+	3.3	85-88
B	3.0	81-84
B-	2.7	77-80
C+	2.3	73-76
C	2.0	69-72
C-	1.7	65-68
D	1.0	60-64
F	0.0	unmarked

Grading Criteria

'Incomplete' or I grades are not permitted because of the obvious difficulty in making up missed work once the student has left the country. All work must be completed on time. We also do allow 'Audits' (AU), 'Withdrawals' (W), or 'Pass/Fail' (P) grades.

The grades reflect the quality of the work. Lecturers and students should use the following criteria for an understanding of what each grade means.

A This exceptional grade is assigned only to work that has persistently outstanding quality in both substance and presentation. Students must demonstrate a sustained capacity for independent thought and extensive study, producing rigorous and convincing analyses in well-ordered prose.

A- Awarded to work that is clearly focused and analytical, and based on wide reading. Students must cover all the principal points of a question and systematically develop a persuasive overall thesis, allowing for one or two venial omissions or inapt expressions.

B+, B, B- This range of grades indicates that the student has shown some evidence of original thought and intellectual initiative. They have cited sources beyond the class materials, and shown a degree of originality in perception and/or approach to the subject. The work will show

thoughtful management of material and a good grasp of the issues. The difference between a B+, a straight B and a B- may reflect poor presentation of material, or mistakes in punctuation, spelling or grammar.

C+, C, C- Work in this grade range is satisfactory, but uninspiring. If the work is simply a recitation of the class materials or discussions, and shows no sign of genuine intellectual engagement with the issues, it cannot deserve a higher grade. Should an essay fail to provide a clear answer to the question as set, or argue a position coherently, the grade will fall within this range.

Quality of presentation can lift such work into the upper levels of this grade range. Work of this quality which is poorly presented, and riddled with errors of grammar, spelling and punctuation, will fall into the lower end of the range. To earn a C, the work must demonstrate that you are familiar with the primary course material, be written well enough to be readily understood, be relevant to the assignment, and, of course, be students' own work except where properly cited.

D A marginal pass can be given where some but not all the elements of the course have been completed satisfactorily.

F The failing grade indicates the work is seriously flawed in one or more ways:

- Obvious lack of familiarity with the material
- So poorly written as to defy understanding
- So brief and insubstantial that it fails to properly address the subject
- Material presented that is no relevant to the assignment
- Demonstrates evidence of plagiarism

Please refer to the Academic Handbook for detailed grading criteria and policies on plagiarism.

*Final grades are subject to deductions by the Academic Affairs Office due to unauthorised absences.

Terms and Conditions

Time will be available in each session for students to raise questions etc. Should students wish to discuss matters in person the tutor will be available during the mid-session break and at the end of the class. Alternatively, questions can be emailed. If problems arise with the availability of course materials (all of which should be available through the library or online), please contact the course tutor by email.

Note: Please turn off all mobile phones in class. Laptops can only be used for note-taking in exceptional circumstances and only after permission has been given in class. For some sessions, laptops will be used for instruction and exercises.

Attendance

Classes

All Boston University London Programme students are expected to attend each and every class session, seminar, and field trip in order to fulfil the required course contact hours and receive course credit. Any student that has been absent from two class sessions (whether authorised or unauthorised) will need to meet with the Directors to discuss their continued participation on the programme.

Authorised Absence

Students who expect to be absent from any class should notify a member of Academic Affairs and

complete an Authorised Absence Approval Form 10 working days in advance of the class date (except in the case of absence due to illness for more than one day. In this situation you should submit the Authorised Absence Approval Form with the required doctor's note as soon as possible). The Authorised Absence Approval Request Form is available from: <http://www.bu.edu/london/current-semester/>

Please note: Submitting an Authorised Absence Approval Form does not guarantee an authorised absence

Students may apply for an authorised absence only under the following circumstances:

- Illness (first day of sickness): If too ill to attend class, the student must phone the BU London Student Affairs Office (who will in turn contact the tutors).
- Illness (multiple days): If the student misses more than one class day due to illness, they must call in to the Student Affairs Office each day you are ill. You must also provide the Student Affairs Office with a completed Authorised Absence Approval Form and a sick note from a local doctor excusing their absence from class.
- Important placement event that clashes with a class (verified by internship supervisor)
- Special circumstances which have been approved by the Directors (see note below).

The Directors will only in the most extreme cases allow any student to leave the programme early or for a significant break.

Unauthorised Absence

Any student to miss a class due to an unauthorised absence will receive a **4% grade penalty** to their final grade for the course whose class was missed.

This grade penalty will be applied by the Academic Affairs Office to the final grade at the end of the course. As stated above, any student that has missed two classes will need to meet with the Directors to discuss their participation on the programme as excessive absences may result in a 'Fail' in the class and therefore expulsion from the programme.

Religious Holidays

Boston University's Office of the University Registrar states:

'The University, in scheduling classes on religious holidays and observances, intends that students observing those traditions be given ample opportunity to make up work. Faculty members who wish to observe religious holidays will arrange for another faculty member to meet their classes or for cancelled classes to be rescheduled.'

Special Accommodations

Students will need to contact Disability and Access Services to request accommodations for the semester that they are abroad. Students are advised by BU-DAS not to expect the same accommodations as you receive on campus.

BU London can only uphold special accommodations if we have received the appropriate documentation from BU-DAS. We cannot accept letters from other universities/centres.

All disabilities need to be known to DAS in Boston if they are to be used as a reason for requiring a change in conditions, i.e. reduced internship hours or special accommodations for the internship schedule.

Lateness

Students arriving more than 15 minutes after the posted class start time will be marked as late. Any student with irregular class attendance (more than two late arrivals to class) will be required

to meet with the Associate Director for Academic Affairs and if the lateness continues may have his/her final grade penalised.

Course Chronology

NB: The sequence of sessions may vary with each run of the course, dependent upon the dates when course visits can be arranged.

Session One

The WHO contribution to a global understanding of health and health promotion

1. The foundation of the WHO and the formulation of its definition of health in the preamble to the 1946 constitution
2. Discussion of the criticisms of this definition and proposals for a reformulated definition from Huber et al. (2011)
3. Short film on anniversary of the Ottawa Charter, and subsequent WHO reports on global health
4. A discussion of the WHO perspective on ethical dimensions of public health practice

WHO definition of health

<http://www.who.int/about/definition/en/print.html>

Huber et al. (2011) How should we define health?

<http://www.bmj.com/content/343/bmj.d4163>

Ottawa Charter

http://www.euro.who.int/_data/assets/pdf_file/0004/129532/Ottawa_Charter.pdf

Ottawa to 2020 video

<http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/past-sessions/sixty-first-session/multimedia/video-25-years-of-ottawa-charter>

World Health Statistics 2018

https://www.who.int/gho/publications/world_health_statistics/2018/en/

WHO Resources on Global Health Ethics

<https://www.who.int/ethics/en/>

<https://www.who.int/bulletin/volumes/86/8/en/>

Session Two

Concepts of life course health development / life course epidemiology

1. Introduction to the idea of the life course and the role of multiple factors in determining health outcomes from birth to death
2. Discussion of the LCHD framework developed by Halfon and Hochstein (2004) and an extract from a video presentation by Halfon
3. Contributions to life course epidemiology in the UK and models of health development trajectories

Halfon, N. and Hochstein, M. (2002) Life course health development: an integrated framework for developing health, policy and research, *The Milbank Quarterly*, 80, 3, 433-479

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2690118/>

Ben-Shlomo, Y., Cooper, R. and Kuh, D. (2016) The last two decades of life course epidemiology, and its relevance for research on ageing, *International Journal of Epidemiology*, 973-988. <https://academic.oup.com/ije/article/45/4/973/2951730>

Diane Kuh talking about life course epidemiology and introducing British cohort studies
<https://www.youtube.com/watch?v=JqN5VqXCyMk>

Halfon, N. et al. (2014) Life course health development: Past, present and future. *Maternal Child Health Journal*, 18, 344-365. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3890560/>

Neil Halfon talking about life course health development
<https://www.youtube.com/watch?v=rvc5KE6ZrEc>

Session Three

Concepts and measures of wellbeing and happiness and the UK national wellbeing indicators

1. An examination of different approaches to the definition of wellbeing – focusing on the distinction between eudaimonic and hedonic wellbeing
2. The Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) – a critical examination.
3. International developments in the assessment of ‘national happiness’ and work in the UK on national wellbeing indicators and its findings
4. The work of the What Works Wellbeing Centre
5. Debate on the national measurement of wellbeing in the UK: Example proposition – This house believes that the UK approach to measuring population wellbeing is fundamentally flawed

Ryff, C.D., Singer, B.H. and Love, G.D. (2004) Positive health: connecting well-being with biology, *Philosophical Transactions of the Royal Society, London*, 359, 1383-1394.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1693417/pdf/15347530.pdf>

Helliwell, J.F., Layard, R. and Sachs, J. (2019) The World Happiness Report 2018. (Focus on migration)
https://s3.amazonaws.com/happiness-report/2018/WHR_web.pdf

The Global Council for Happiness and Wellbeing (2019) Global Happiness and Wellbeing Policy Report 2019, New York: Sustainable Development Solutions Network.
<https://s3.amazonaws.com/ghwbpr-2019/UAE/GHWPR19.pdf>

Development and uses of the WEMWBS scale
<https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs>
<http://www.healthscotland.scot/tools-and-resources/wemwb-scale-and-mental-health-indicators/wemwbs>

The UK national wellbeing indicators
<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuringnationalwellbeing/internationalcomparisons2019>

What Works Wellbeing Centre
<https://whatworkswellbeing.org/>

Session Four

British Cohort Studies

1. An introduction to the cohort studies conducted in the UK since the 1940s onwards and the work of the UCL Centre for Longitudinal Research
2. Discussion of the value of cohort studies and their limitations
3. Examination of selected examples of studies and the impact they have had on policy and practice in healthcare provision – with reference to ethical dimensions and critical thinking
4. Exercise applying the concepts introduced so far, to a documentary in the 7UP series charting the development of individuals from the age of 7 to the current day

Pearson, H. (2016) *The Life Project*. London: Allen Lane

Talk by Helen Pearson at the Royal Society for Arts

<https://www.thersa.org/discover/videos/event-videos/2016/08/helen-pearson-on-the-life-project>

University College London Centre for Longitudinal Studies

<https://cls.ucl.ac.uk/>

The Up Series – Wikipedia article https://en.wikipedia.org/wiki/Up_Series

Session Five

The Barker hypothesis and the role of life-style factors in health

1. The origins and claims of the Baker hypothesis on the role of prenatal factors in health
2. A critical look at the current status of the ‘foetal hypothesis’ and the ethics of early intervention
3. The role of life-style factors, healthy living and risks as determinants of health in mid-life onwards
4. The work of Peter Elwood and the Caerphilly cohort study and ethical issues around the promotion of ‘healthy lifestyles’
5. Debate on the promotion of healthy lifestyles: Example proposition – The UK government has failed to invest in health promotion to improve healthy lifestyles in adults

Almond and Currie (2011) Killing me softly: The foetal origins hypothesis. *Journal of Economic Perspectives*.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4140221/pdf/nihms443660.pdf>

Elwood P, Galante J, Pickering J, Palmer S, Bayer A, et al. (2013) Healthy Lifestyles Reduce the Incidence of Chronic Diseases and Dementia: Evidence from the Caerphilly Cohort Study. *PLoS ONE* 8, 12: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0081877>

Peter Elwood talking about the Caerphilly study:

<https://www.youtube.com/watch?v=U6Uj6K9MFKg>

BBC radio documentary on pre-birth influences on health - ‘In the womb’:

<https://www.bbc.co.uk/programmes/b0139623/episodes/player>

Session Six

Social determinants of health and health inequalities in the UK – the work of Danny Dorling and Michael Marmot

1. An introduction to the concept of social determinants of health and health inequalities through the work of Danny Dorling
2. The work of Sir Michael Marmot on health inequalities globally and in Europe
3. The 2010 *Fair Society, Healthy Lives* report on health inequalities in England
4. An update on work by the Marmot group since the 2010 report

Dorling, D. (2013) *Unequal Health: The scandal of our times*. Policy Press.

Dorling, D. (2016) *A Better Politics: How government can make us happier*. London: Policy Press
<http://www.dannydorling.org/books/betterpolitics/dorling-betterpolitics.pdf>

Danny Dorling talking about the issues he addresses in this book:
<http://www.dannydorling.org/?p=5988>

Marmot, M. (2010) *Fair Society, Healthy Lives*. London: University College London
<http://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

UCL Institute of Health Equity <http://www.instituteofhealthequity.org/home>

Session Seven

The work of the NHS, Public Health England and the Royal Society for Public Health (RSPH) in promoting health

1. The work of the NHS and Public Health England, and campaigns to promote health e.g. One You, Change4Life
2. Exercise to monitor and reflect on levels of exercise and healthy eating (students to record their exercise and eating patterns over two weeks prior to this session)
3. Royal Society for Public Health, policy work and campaigns e.g. social media and young people, substance use and health, healthy high street, debt and mental health

For details of the work of Public Health England:
<https://www.gov.uk/government/organisations/public-health-england>

Change4Life programme: <https://www.nhs.uk/change4life>

For details of the work of the Royal Society see: www.rsph.org.uk

The Chief Executive of RSPH Shirley Cramer, gives an overview of developments in 2018 here:
<https://www.rsph.org.uk/about-us/news/rsph-ceo-shirley-cramer-gives-her-overview-of-2018.html>

Campaign and policy work undertaken by RSPH
<https://www.rsph.org.uk/our-work.html>

Session Eight

Public Health in the Royal Borough of Kensington and Chelsea (RBKC)

1. The work of the Public Health department in RBKC
2. The Joint Strategic Needs Assessment (JSNA) for RBKC
3. The RBKC population health profile and priorities
4. The Go Golborne Project – promoting healthy eating and exercise among children

Government guidance on Joint Strategic Needs Assessments
<https://www.gov.uk/government/publications/joint-strategic-needs-assessment-and-joint-health-and-wellbeing-strategies-explained>

Public Health in RBKC – reports and strategy documents
<https://www.rbkc.gov.uk/health-and-social-care/public-health-services/public-health-strategy-policies-and-reports>

The Go Golborne Campaign

<https://www.rbkc.gov.uk/subsites/citylivinglocalife/gogolborne.aspx>

Session Nine

Loneliness and Mental Wellbeing in the UK

1. An examination of loneliness through the lifespan and the impact it can have on mental and physical health
2. Consideration of different theoretical perspectives on loneliness and its possible benefits.
3. Discussion of the findings from a major global survey of loneliness conducted by the BBC
4. What can be done to tackle loneliness in older age? – the UK End Loneliness Campaign

All in the Mind account of the BBC survey of loneliness:

<https://www.bbc.co.uk/programmes/b09r6fvn>

UK Campaign to End Loneliness

<https://www.campaigntoendloneliness.org/>

Van Roekel, R, Goosens, L., Wouters, S, Rutger, E.M.E. & Scholte, R.H.J. (2014) Loneliness, affect, and adolescents' appraisals of company: An experience sampling method study. *Journal of Research on Adolescence*, 24, 2, 350–363.

Session Ten

Group Presentations

Students will work in groups to present on a UK health campaign of their choosing. This can be national or local in scope. The presentation should show a capacity for **ethical reasoning** and demonstrate **critical thinking** in relation to the material discussed. Each group will be allocated 20 minutes for their presentation and 10-15 minutes for questions and discussion with the whole group.

Guidelines on the preparation and delivery of the presentation:

1. Work in a small group to plan a short presentation on a substantial health campaign or service addressing a major public health issue
2. Describe the aims, objectives and strategies of the campaign or service
3. Describe how the campaign has been evaluated in terms of outputs and outcomes
4. Use Google Slides to prepare an engaging ten-slide presentation of 20 minutes in length
5. Use appropriate audio-visual material to illustrate the presentation
6. Use methods to actively engage the audience through activity and discussion points

For details of the assessment of the presentation and associated written work, see the section on assessment above.

Session ten will also include an opportunity to review the requirements of the examination, and assisted students in examination preparation.

Course Examination

Examination times and locations will be posted on the BU London Programmes Blackboard course page and will be emailed to students, a week before the final exam.

Suggested Sources

Group work

Oakley, B. et al., (2004) Turning student groups into effective teams, *Journal of Student Centred Learning*, 2, 1, 9-23.

Salas, E. et al. (2005) Is there a “Big Five” in teamwork? *Small Group Research*, 36, 5, 555-559.

Salas, E. et al. (2018) The science of teamwork: Progress, reflections, and the road ahead. *American Psychologist*, 73, 4, 593-600.

Effective team working skills: <https://www.skillsyouneed.com/ips/team-working.html>

Public Health Ethics

Holland, S (2014) Public Health Ethics. London: Polity Press.

Law, B (2009) Public Health and Public Values. London: King’s Fund
<https://www.kingsfund.org.uk/sites/default/files/Public-Health-and-Public-Values-Kings-Fund-August-2009.pdf>

Nuffield Council (2007) Public Health Ethical Issues
<http://nuffieldbioethics.org/wp-content/uploads/2014/07/Public-health-ethical-issues.pdf>

UK Public Health Agencies (2017) Public Health Ethics in Practice. London: Public Health England
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/609620/PHSKF_public_health_ethics_in_practice.pdf

Critical Thinking

Sharples et al. (2017) Critical thinking in health and education. *British Medical Journal*
<https://www.bmj.com/content/bmj/357/bmj.j2234.full.pdf>

UCL Library (2017) Critical appraisal of a journal article. London: University College London Library
https://www.ucl.ac.uk/child-health/sites/child-health/files/library_critical_appraisal_handout.pdf

Public Health Campaigns Evaluation

NHS Stop Smoking Services

NHS website for smoking cessation services
<https://www.nhs.uk/live-well/quit-smoking/nhs-stop-smoking-services-help-you-quit/>

The Smokefree service
<https://www.nhs.uk/smokefree>

Kuipers, M.A.G. et al. (2018) Associations between tobacco control mass media campaign expenditure and smoking prevalence and quitting in England: a time series analysis. *British Medical Journal: Tobacco Control*
<https://tobaccocontrol.bmj.com/content/tobaccocontrol/27/4/455.full.pdf>

Song, F. et al. (2019) Impact of the NHS Stop Smoking Services on smoking prevalence in England: a simulation modelling evaluation. British Medical Journal
<https://tobaccocontrol.bmj.com/content/tobaccocontrol/early/2019/04/11/tobaccocontrol-2018-054879.full.pdf>

Change4Life

Change4Life website
<https://www.nhs.uk/change4life#>

National Social Marketing Centre (NSMC) analysis
<https://www.thensmc.com/resources/showcase/change4life>

Crocker, H. et al. (2012) A cluster randomised controlled trial to evaluate the ‘Change for Life’ campaign in the UK. BMC Public Health, 12, 404
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3541256/pdf/1471-2458-12-404.pdf>

One You

One You website
<https://www.nhs.uk/oneyou/>

Campaign details
<https://www.campaignlive.co.uk/article/govt-focuses-stressed-40-60-year-olds-6m-one-you-campaign/1386257>

Public Health England Social Marketing Strategy 2017-2020
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/646715/public_health_england_marketing_strategy_2017_to_2020.pdf

Public Health England One You Campaign
<https://campaignresources.phe.gov.uk/resources/campaigns/44-one-you>

Promoting sexual health

Family Planning Association
<https://www.fpa.org.uk/working-together/national-health-promotion-programme-sexual-and-reproductive-health-information>

NHS Chlamydia site
<https://www.nhs.uk/conditions/chlamydia/>

Sexual Health London (free testing service)
<https://www.shl.uk/>

Public Health England – Evaluation of Sexual Health Interventions
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/716225/Evaluation_of_sexual_health_interventions.pdf

Public Health in Kensington and Chelsea

Public Health Department – vision strategies and reports

<https://www.rbkc.gov.uk/health-and-social-care/public-health-services/public-health-vision-0>

Go Golborne

<https://www.rbkc.gov.uk/subsites/citylivinglocalife/gogolborne.aspx>