

**University of Pennsylvania
School of Medicine
Course Syllabus
NURS 587/PUBH 588: An Inter-professional course in Leadership Skills in Community Health
Spring Semester 2019: Thursday, 5:00 p.m. – 8:00 p.m.
Fagin 110**

Title: An Inter-professional course in Advanced Leadership Skills in Community Health

Course Units: 1 cu

Faculty:

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Pre-requisites: Enrollment in a master's or doctoral program. Undergraduates with permission of the instructor.

Course Overview:

Grounded in a social justice perspective, this inter-professional course aims to provide the medical/nursing/social policy and practice/ public health student with a foundational overview of the field of community health and leadership skills in public health advocacy. Based on an assets-based approach that draws upon the strengths of communities and their leaders this course provides a foundation for community-engagement skill building. The course emphasizes the development of skills and techniques to lead effective, collaborative, health-focused interventions for underserved populations. The major goal of this course is to form inter professional, well informed groups of students to partner with community agencies to address the issues they identify through a collaborative, ongoing process. At the completion of

the semester, students and community partners will come together, present their work and plan for sustainability of projects.

Co-requisites: None

Course Objectives:

The curriculum adopts an integrated framework of leadership and advocacy in the arena of community healthcare and public health advocacy. On completion of this course, students will be expected to demonstrate knowledge and ability to apply critical thinking skills in the following areas:

1. Collaborate with a community agency and develop a specific inter professional project to address a health care issue identified by the community. Students will work with the community agency throughout the semester.
2. Articulate the range of roles and functions carried out by leaders in health care advocacy for marginalized communities.
3. Integrate knowledge of federal and local health policy, the role of values and ideology in shaping legislative policy, and the critical influence of government and financing on health outcomes.
4. Demonstrate the ability to critically evaluate the multifaceted needs of a community through the use of various research methods such as participatory action research, use of existing data, and qualitative methodology.
5. Demonstrate the skills involved in lobbying and advocating for client groups and how lobbying organizations, including public interest groups and professional/industry/trade associations, can influence health system change
6. Assess network opportunities, develop ways to expand and manage network opportunities, and identify ways to work within the system to harness power to achieve health goals.
7. Define principles of community organizing and discuss ways to develop respectful partnerships with community organizations.
8. Demonstrate an understanding of the processes involved in leadership development on individual and organizational levels, and how these processes must be sensitive to the needs of the population.
9. Define a specific advocacy campaign for a health care issue of choice, including media, interest groups, grant writing activities, and legislative advocacy.
10. Develop personal goals and vision statement for future as leader in health care of disadvantaged and marginalized communities

Teaching Methods: Lecture and discussion groups

Course Requirements:

In this seminar course, learning is dependent upon student involvement. A variety of teaching methods will be incorporated including lectures, guest presentations, discussion, and student presentations. Students are **expected** to:

- Read widely from the reading assignments before each class session and be prepared to actively contribute to class discussions. Any readings that are outside the required texts will be available via Canvas or distributed in class.
- Attend class sessions. Attendance and participation are noted and incorporated into the course grade. Students should notify the instructor about planned absences **in advance** by telephone or e-mail and learn what work is needed to make up the missed material. Students whose performance is minimal or failing at midterm will be notified in writing.
- Participate substantively in class discussions; participation in class discussions should reflect critical thinking about the purpose and value of course materials and their applicability to the fields of community healthcare and public health.
- Respect the space of the class. This includes preventing cell phones from ringing and refraining from checking and sending text messages during class time. In the event of an emergency, please excuse yourself from the room to take care of any necessary phone communication. The use of laptops during class time is distracting and, therefore, discouraged. If you have a particular consideration that requires you to take notes on a computer, please contact the course instructors and we can discuss options.
- Follow the guidelines for assignments:
 - A hard copy of written work is due at the beginning of class on the due date. Extensions will be granted only in extenuating circumstances and with adequate notice from the student. Papers turned in late without prior approval will lose points.
 - All written work should be reviewed for clarity of thought, grammar, and spelling. Points will be deducted for failure to do. Please see Penn's Writing Center if you would like help sharpening your writing skills (<http://writing.upenn.edu/critical/wc/>).
 - All written work must be typed and double-spaced, Times New Roman, 12 pt. font, 1" margins on all sides, with appropriate citations and references in AMA style.
 - Papers must fall within the page parameters, excluding title page and references.
 - Students are expected to comply with University policies and regulations outlined in the Penn Book, the University Code of Student Conduct, and the University Code of Academic Integrity.

Academic Integrity:

Students are expected to adhere to the University's Code of Academic Integrity. Care should be taken to avoid academic integrity violations, including: plagiarism, fabrication of information, and multiple submissions (see descriptions below)** Students who engage in any of these actions will be referred to the Office of Academic Integrity, which investigates and decides on sanctions in cases of academic dishonesty.

1. *Plagiarism*: using the ideas, data, or language of another without specific or proper acknowledgment. Example: copying, in part or in its entirety, another person's paper, article, or web-based material and submitting it for an assignment; using someone else's ideas without attribution; failing to use quotation marks where appropriate, etc.
2. *Fabrication*: submitting contrived or altered information in any academic exercise. Example: making up data or statistics, citing nonexistent articles, contriving sources, etc.
3. *Multiple submissions*: submitting, without prior permission, any work submitted to fulfill another academic requirement.

**It is the student's responsibility to consult with the instructor if the student is unsure about whether something constitutes a violation of the Code of Academic Integrity.

Evaluation Methods:	Written Assignments -50%
	Group Project - 30%
	Class Participation-20%

Written Assignments:

There will be five mini-written assignments (1-2 pages in length) which will provide students with opportunities for reflection and integration of class readings and other material from field and practice. These assignments, described in detail below are due on the dates indicated.

1. Discussion threads **(Due throughout the semester)**

Over the course of the semester, submit **3**, 2-3 paragraph reflection pieces that discuss your reactions to the course readings and the questions that the readings generate for you. You may also choose to write and reflect on the content presented by the speaker that week. To receive credit for submission, reflection pieces must be submitted no later than 5 pm on the Sunday after that Thursday's class.

2. Personal vision statement (Due 1/31):

Develop a personal vision statement for your goals in community healthcare or public health advocacy.

3. Stakeholders map (Due 3/7):

Identify a community healthcare or public health issue, and create a visual representation of all of the relevant stakeholders. Stakeholders should include all those impacted by the issue, such as communities (geographic or interest), providers, governments, tax payers, counterfactual groups. Graduate nursing students enrolled in the Global Health Minor should identify a global issue and the international stakeholders.

4. Op-Ed piece (Due 3/28):

Students should review several Op-Ed pieces from the mainstream press (NY Times, Philadelphia Inquirer, etc.) and develop an Op-Ed of their own, on a topic of their choosing. Op-Ed s should be 600-750 words in length and no longer. Op-Ed s should take a position on a particular community healthcare or public health issue, and make a persuasive argument, supported with facts and/or moral or political reasoning. Graduate nursing students enrolled in the Global Health Minor should select an issue related to global health.

5. Community organizing event (Due 4/18):

In consultation with the Instructors, select an opportunity to observe community organizing around healthcare in action. Attend the event and afterwards engage either a participant or a staff person in a conversation to clarify your questions that arise during the event. Afterwards, converse with a participant about how he or she became involved, how he or she viewed the event in terms of quality and success. Students will submit a one-page reflection on the event that describes advocacy strategies used by the community organizers as well as proposes 1-2 new advocacy activities that could be used to effect change.

Examples of events relevant to organizing:

- Attend a rally at City Hall or in Harrisburg organized by a coalition to support a health policy change.
- Attend a Project H.O.M.E. community block captain meeting
- Attend a Southeast Philadelphia Collaborative Community Council meeting

Prior to the beginning of the course, faculty will meet with the Netter Center and representatives from community agencies and area schools at a breakfast meeting to identify potential partners and those health care issues that can be addressed through collaboration with the inter professional student teams.

Potential community partners include

- Netter Center and University Assisted Community Schools
- Puentes de Salud
- Philadelphia Department of Public Health- Healthy Corner Stores Initiative
- Health Federation of Philadelphia- Opioid Initiatives
- Philadelphia Promise Zone Access to Care Committee
- Philly Thrive – *Right to Breathe*
- Frankie’s World- kids with special needs
- Philadelphia Physicians for Social Responsibility- gun policies and health
- Delaware Riverkeeper Network – water quality?

Early in the semester, students will chose a community agency and form an interdisciplinary team. The teams will then meet with the community partners to discuss how the identified community issues will be addressed. Faculty will work with students to approach the issues from the perspective of their disciplines (nursing/medicine/social policy/public health)- giving a wide range of solutions. Students will have a month for planning and then will work at the community agencies bi-weekly.

At the completion of the semester, there will be a program inviting representatives of the community agencies for dinner. Posters will be developed by inter professional/community teams for the program and for presentation at upcoming conferences. Projects will be presented and there will be discussion related to how the projects can be sustained. Community agencies will be asked to provide feedback on the collaboration with the students and the success of the projects. Community organizations will be given gift cards to Fresh Grocer as a token of appreciation.

Group Project (Final Products Due 4/25; presentations 4/18-4/25):

The group project is an opportunity to work collaboratively with a community partner to identify a significant health issue currently impacting their constituents. Students will be matched with a community-based public health organization and will develop a project based on the needs of the community organization. Students will address the following components: Graduate nursing students enrolled in the Global Health Minor should select a project that connects global and local health issues (e.g. access to HIV care, the Water Project, and contrast how policy affects ability to address the issue)

- a. Write a 2-3 page scope brief that includes identification of the health issue to be addressed including background and history, population impact, and significance.
- b. Develop a timeline for advocacy campaign including products to be developed (social media messages, email/letter templates, telephone scripts, op-ed pieces, etc.). Complete Logic Model worksheet for your advocacy campaign.
- c. Create a campaign toolkit for your agency partner that they will be able to roll out if desired. This toolkit will contain a minimum of 4 products.
- d. Develop a presentation documenting your work and identifying future needs for the agency partner in order to roll out the campaign.

The group project is a group grade, however course instructors will monitor individual performance and contributions to the group work and will adjust individual student grades as needed.

Course Readings:

Required Readings will all be posted on Canvas

Reference Texts (helpful but not required):

Farmer, P. (2003). *Pathologies of Power*. University of California Press.

Lustig, S. (2012). *Advocacy Strategies for Health and Mental Health Professionals: From Patients to Policies*. Springer

Levy, B. S. & Sidel, V. W. (2006). *Social injustice and public health*. Oxford Press.

Class Sessions:

Session One (1/17/2019): Introduction to Leadership and Establishing Vision

Speaker: Heather Klusaritz

Assigned Readings:

Berwick, D.M. To Isaiah. *JAMA*. 2012;307(24):2597-2599. Doi:10.1001/jama.2012.6911.
<http://jama.jamanetwork.com/article.aspx?articleid=1199158>

Gostin, L. O., & Powers, M., (2012). What does social justice require for the public's health? Public health ethics and policy. *Health Affairs*, 25(4), 1053-1060 doi: 10.1377/hlthaff.25.4.1053

Farmer, P. (2003). *Pathologies of Power*. Los Angeles, University of California Press.
Forward, Amartya Sen (pp, xi-xvii) and Chapter 5 *Health, Healing, and Social Justice* (pp. 135-159).

Rivkin-Fish, M. (2011). Learning the Moral Economy of Commodified Health Care: "Community Education," Failed consumers, and the shaping of ethical Clinician-citizens. *Cult Med Psychiatry*; 35:183-208 doi: 10.1007/s11013-011-9208-0

Leadership Activity: Leadership Compass Self-Assessment

Session Two (1/24/2019): Respectful Partnerships for Health between Academia and Marginalized Communities

Speaker: Terri Lipman

Assigned Readings:

Hill, L. D., & Madara, J.L. (2005). Role of the urban academic medical center in US health Care. *JAMA*, 294(17); 2219-2220. doi:10.1001/jama.294.17.2219.

Lipman, T. H., Schucker, M.M. , Ratcliffe, S. J., Holmber, T., Baier, S., & Deatricks, J.A. (2011). A partnership between nurse practitioner and high school students. *American Journal of Maternal Child Nursing*, 36(1);56-62. doi: 10.1097/NMC.0b013e3181fc0d06

Schroeder K, Ratcliffe SJ, Perez A, Earley D, Bowman C, Lipman TH. Dance for Health: An Intergenerational Program to Increase Access to Physical Activity. *J Pediatr Nurs*. 2017 Nov - Dec;37:29-34. doi: 10.1016/j.pedn.2017.07.004. Epub 2017 Jul 18.

Suarez-Balcazar, Y., Harper, G.W., & Lewis, R. (2005). An interactive and contextual model of community-university collaborations for research and action. *Health Educ Behav*. 32(1);84-101.

Wolf, M., & Maurana, C. A. (2001). Building effective community-academic partnerships to improve health: a qualitative study of perspectives from communities. *Academic Medicine*, 76(12); 1231.

Wollard, R. F. (2006). Caring for a common future: medical schools' social accountability. *Medical Education*, 40; 301–313. doi:10.1111/j.1365-2929.2006.02416.x

Leadership Activity: IPE Activity
Personal Mission Statement Worksheet

Session Three (01/31/2019): CBPR/I on the ground – the community perspective

Guest Speakers: Ms. Gweny Love, Community Activist, Mauntua Worldwide Community, Inc.
Ms. Felicia Cooper, Medical Student, Pennsylvania State University College of Medicine

Assigned Readings:

Gonzalez, E. R., Lejano, R. P., Vidales, G., Conner, R. F., Kidokoro, Y., Fazeli, B., et al. (2007). Participatory action research for environmental health: Encountering Freire in the urban barrio. *Journal of Urban Affairs*, 29, 77-100.

Johnson, J.C., Hayden, U.T., Thomas, N., et al. (2009). Building community participatory research coalitions from the ground up: the Philadelphia area research community coalition. *Progress in Community Health Partnerships: Research, Education, and Action*, 3(1); 61-72. doi: 10.1353/cpr.0.0052.

Rubin, C. L., Martinez, L. S., Chu, J., et al. (2012). Community-engaged pedagogy: a strengths-based approach to involving diverse stakeholders in research partnerships. *Progress in Community Health Partnerships: Research, Education, and Action*, 6(4);481-90. doi: 10.1353/cpr.2012.0057.

Salimi, Y., Shahandeh, K., Malekafzali, H., et al. (2012). Is Community-based Participatory Research (CBPR) useful? A systematic review on papers in a decade. *International Journal of Preventive Medicine*, 3(6):386-93.

Leadership Activity Via Canvas: Assessing Opportunities for change

Session Four (2/07/2019): Learning to Hear Stories of Health: Eliciting Narrative for Action

Guest Speaker: Dan Gorenstein, Senior Reporter for Marketplace Health Desk

Assigned Readings:

Gorenstein D. Human trafficking and health care parts 1-3. Marketplace. 2016
<https://www.marketplace.org/2016/03/02/health-care/health-care-takes-fight-against-trafficking>

Leadership Activity: A3

Session Five (2/14/2019): Community Assets: Working with Communities to Build Upon Strengths (Community Organizing)

Speaker: Alexa Ross, PhillyTHRIVE

Assigned Readings:

Burns, J. C., Paul, D. P., & Paz, S. R. (2012). Participatory asset mapping: A Community Research Lab Toolbox. Available from:

<http://communityscience.com/knowledge4equity/AssetMappingToolkit.pdf>

Daher, C. M. (2007). Don't sleep with your chickens. *JAMA*. 297(20):2174-2176.
doi:10.1001/jama.297.20.2174.

Glasgow Centre for Population Health (2011). Asset based approaches for health improvement: Redressing the balance. *Briefing Paper 9*. Available from:

http://www.gcph.co.uk/assets/0000/2627/GCPH_Briefing_Paper_CS9web.pdf

Jasek-Rysdahl, K. (2001). Applying Sen's capabilities framework to neighborhoods: Using local asset maps to deepen our understanding of well-being. *Review of Social Economy*, 59(3); 313-29. DOI: 10.1080/00346760110053923

Morgan, A. & Ziglio, E. (2007). Revitalising the evidence base for public health: an assets model. *Global Health Promotion*, 17(2); 17-22. doi: 10.1177/10253823070140020701x

Obama, B. (1990). Why organize? Problems and promise in the inner city. In P. Knoepfle (Ed.), *After Alinsky: Community organizing in Illinois* (pp. 35-40). Retrieved May 22, 2008, from <http://www.edwoj.com/Alinsky/AlinskyObamaChapter1990.htm>

Leadership Activity: Asset Mapping

Session Six (2/21/2019): Networking & Coalition Building

SITE DAY – THIS CLASS SESSION IS RESERVED FOR WORK AT YOUR COMMUNITY SITE

Assigned Readings:

Community Catalyst. (August 2003). *Strength in Numbers: A Guide to Building Community Coalitions*. www.communitycatalyst.org

Developing Effective Coalitions: An 8 Step Guide. *Prevention Institute*>
<http://www.countyhealthrankings.org/sites/default/files/eightstep.pdf>

Community Toolbox: Sections 5 & 6

<http://ctb.ku.edu/en/table-of-contents/assessment/promotion-strategies/start-a-coalition/main>

Khare MM, Núñez AE, James BF. (2015). Coalition for a Healthier Community: Lessons learned and implications for future work. *Eval Program Plann*;51:85-8. doi: 10.1016/j.evalprogplan.2015.01.001. Epub 2015 Jan 13.

Merzel, C., & D'Aflittl, J. (2003). Reconsidering community-based health promotion: Promise, performance, and potential. *American Journal of Public Health*, 93(4), 557-574.

Robles-Schrader GM, et al. (2012). Differential challenges in coalition building among HIV prevention coalitions targeting specific youth populations. *J Prev Interv Community*. 2012;40(2):131-48. doi: 10.1080/10852352.2012.660124.

Truiett-Theodorson R et al. (2014). Building effective partnerships to improve birth outcomes by reducing obesity: The B'more Fit for healthy babies coalition of Baltimore. *Eval Program Plann*. 2015 Aug;51:53-8. doi: 10.1016/j.evalprogplan.2014.12.007.

Leadership Activity: Stakeholder Analysis

Session Seven (2/28/2019): Media Advocacy

Guest Speaker: Giang T. Nguyen, MD, MPH, MSCE Director, Student Health Services, UPENN; Founder of Penn Asian Health Initiatives

Assigned Readings:

American Public Health Association *Media Advocacy Manual*. Available from: <http://nyspha.roundtablelive.org/Resources/Documents/2013%20APHA%20Affiliate%20Mtg/Policy%20Framework%20and%20Tools/APHA%20Media%20Advocacy%20Manual.pdf>
Trust for America's Health. 5 easy steps to making health advocacy hometown news: advocating for better health in your community through media attention. Available from: <http://healthyamericans.org/reports/files/mediaguide.pdf>

Wallack, L., & Dorfman, L. Media Advocacy: A Strategy for Advancing Policy and Promoting Health *Health Education and Behavior*.1996; 23: 293-317

Leadership Activity: Developing a Persuasive Argument

SPRING BREAK (3/07/2019)

Session Eight (3/14/2019):

SITE DAY – THIS CLASS SESSION IS RESERVED FOR WORK AT YOUR COMMUNITY SITE

Assigned Readings: TBD

Leadership Activity:

Session Nine (3/21/2019): Leadership for Health and Budgeting Personnel

Speaker: Walter Tsou

Assigned Readings:

Brownson RC, Malone BR. Communicating public health information to policy makers, chapter 7. In: Nelson DE, Brownson RC, Remington PL, Parvanta C, editors. Communicating public health information effectively: a practical guide for practitioners. Washington: American Public Health Association; 2002. p. 96-114.

Leadership Activity:

Session Ten (3/28/2019): IPE for Community Health

Speaker: Terri Lipman

Assigned Readings:

Leadership Activity: Getting and Giving Support

Session Eleven (4/04/2019):

SITE DAY – THIS CLASS SESSION IS RESERVED FOR WORK AT YOUR COMMUNITY SITE

Assigned Readings:

Leadership Activity: Creating a Culture of Empathy

Session Twelve (4/11/2019):

SITE DAY – THIS CLASS SESSION IS RESERVED FOR WORK AT YOUR COMMUNITY SITE

Assigned Readings:

Leadership Activity: Re-assessing Personal Vision

Session Thirteen (4/18/2019): Student Presentations

Session Fourteen (4/25/2019): Student Presentations & Institutionalizing Change