

HEALTH CARE OF WOMEN**CHSC 642 Fall 2003****Friday 3:30-5:00 Tidewater Room 1203**

Professor Jeanette H. Magnus MD, PhD

This interdisciplinary course, structured around the needs and interests of the students, will explore women's health issues from a biocultural perspective. This perspective considers the interface between biology and culture as the proper context in which to examine human health experiences. In this way, the importance of gender, age, race and class roles in women's health status can be fully acknowledged and understood.

One purpose of this course is to promote an understanding of what women need to know to be "healthy." This is a time to interact with fellow students, professor, and guests: to consider, develop, challenge, and evaluate ideas and views across the scientific, clinical, economic, political, and ethical/legal aspects of each issue. Each student's views and attitudes are an integral part of the course and each student is expected to engage actively in each class.

This course includes an integrated approach to women's health that analyzes biological, social and economic influences on women's physical and mental health.

GOAL To enhance each student's ability to understand the key aspects of women's health issues in a public health setting and to be able to synthesize the key points in crisp, cogent, and concise language — either verbal or written

COURSE OBJECTIVES

At the completion of this semester, each student should be able to:

1. To demonstrate understanding of health as not only the absence of disease, but encompassing physical, mental and social well-being as defined by the World Health Organization (WHO).
2. To become familiar with the bio-psycho-social indices that influence wellness and illness in women.
3. To understand some of the factors of race, ethnicity, class, education, age, income and gender differences on health status and health care in women.
4. To become sensitive to the interaction of health status, health belief and use of health services.
5. To review interventions and programs designed to respond to the health needs of women.
6. To develop critical thinking abilities and apply them to the promotion and planning of an effective women's health intervention program.

STUDENT EVALUATION

GRADES

Grades are based on the following:

- Three page literature review 20%
- Three page report 15%
- Group briefing paper 15%
- Group members evaluation 5%
- Project presentation 15%
- Class participation Pass or fail
- Final group project 30%

Numerical Scores:

A	4.0
A-	3.67
B+	3.33
B	3.0
B-	2.67
C	2.0
F	0

Participation: Attendance is a crucial part of this class. Students cannot complete this course without participating/speaking in classes. Class participation will be graded on a pass/fail basis. A student cannot complete this course without a pass grade in participation despite good grades on the written assignments. With more than 20% absence the participation grade will be “fail”. Each student is to come to class prepared to examine and discuss each topic from a scientific, clinical, economic, political, and ethical/legal perspective. Read the assigned materials and enhance your perspective by utilizing the library materials, websites, (<http://www.mchirc.net/>), local experts, and media. See: *Preparing for Each Class* on page 4.

Group work: You will be placed in groups. Within the area of public health you will most certainly work in teams and face the challenges and benefits of working with other health professionals. Each group will investigate a specific aspect of public health initiatives in women’s health and will design a disease prevention and/or health promotion program plan.

Literature Review: Each student is required to write and submit a literature review on his/her **part** related to the group project according to the briefing paper outline. The professor should be able to read a comprehensive review of the group project when having read all the individual papers. See *3-page Paper Instructions* on page 6.

Service Learning Report: Interview and Report. An objective of this course is to create a more socially-conscious professional. A service learning activity will be incorporated to help facilitate the development of social awareness. It is hoped that this activity will have a meaningful and lasting effect on each participant. Key informant interviews are often used prior to program development in Public Health. You will interview with a relevant agency, health professional or public health professional providing service in your team’s health topic area.

You will submit a three (3)-page, typed briefing paper that reflects the meaningfulness of this activity. This paper should explain your goals and objectives prior to the interview, the issues addressed at the interview, your reactions to the experience and some consideration on how the information gathered can facilitate the development of the program you are planning with your team. This activity requires you to process. Possibilities are limitless. This activity should incorporate some of the knowledge, skills, and attitudes you have developed as a student in the School of Public Health.

Group Concept Paper: The briefing paper is supposed to be the first “sell” to your supervisors or potential funding agency review panel. A three page briefing document covering the rational, goals and objectives of your group project. Use the briefing paper outline. See *3-page Paper Instructions* on page 5.

Group Project Paper: The written report will include a rationale for the development of the program, review of literature, examination of actual programs/initiatives, and a brief program plan with examples of elements crucial to the program. The written report (13-15 pages in length) is due on the date given on E-mail to the professor jmagnus@tulane.edu

Group Project Presentation: The program presentation is supposed to represent the presentation of the pilot project to the **intended subjects** of your program. Remember to define the “stage”, perceived level of education etc. The oral presentation will provide each group with an opportunity to practice professional presentation skills. The presentation will include an audio-visual component developed with presentation software (i.e., Power Point), a handout for class members, and some sort of interactive element. The full presentation, handouts etc. are due 24 hours prior to the oral presentation on E-mail to the professor jmagnus@tulane.edu The presentation will be evaluated and graded by the audience according to criteria defined by the class.

Note: Each group must provide the instructor with one (1) copy of all slides, handouts, and literature review via email at least 24 hours prior to in-class presentation.

Group Member Evaluation: Each member of the group **MUST** be actively involved in the presentation. The group members will assess the other’s participation/performance in the group during the semester. *See page 4.*

NOTE: If you are uncertain, concerned, or distressed about an assignment, your performance, the presenters, or anything related to class, talk to your professor. Do not wait until there is a crisis. Thoughtful commentary and suggestions about the class direction and overall approach is always welcome!

GRADING GROUP MEMBER'S PARTICIPATION

In the syllabus: five (5) points of your class grade for the balance of your participation in the group work during the semester and performance according to your group members

Number of members in the group:

Group:

Your name:

Give each of the other of your group members a grade on a scale from

1 = no participation, no contribution - to

10 = active participation, major contribution; enhancing your learning.

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____



PREPARING FOR EACH CLASS

The following represent some of the ways to prepare for a discussion on any topic. These suggestions are just that, suggestions. They are not intended to limit your thinking or preparation. You should seek to develop the ability to fully participate in a discussion based upon what works for you and those with whom you are communicating. In short, is what you are intending to communicate (sending) being appropriately understood (received) by the receiver? The key to a successful discussion is preparation and understanding. Come to class prepared and enhance your understanding with additional information and insights. **If you are present in class this semester but do not make any vocal contribution during classes you will receive a C for participation.**

Preparation

- Begin your preparation by assuring that you understand the topic.
- Read and understand the articles for the class.
- Go to the library and read additional articles relevant to the topic.
- Review the articles and jot down any issues or words you do not understand.
- Use reference books to enhance and clarify words or concepts that you do not understand.
- Discuss ahead of time with faculty and colleagues issues or concepts that will enhance your understanding.
- Consider and formulate issues and/or questions raised during your reading.

Discussion

- Identify the major theme(s) of the topic/discussion/article.
- As relevant, pose one of your questions to the presenter or class.
- Restate the idea or concept to assure that you understand it.
- Give an example to clarify the meaning.
- Pose a provocative question to seek additional perspective.
- Ask another group member to clarify or provide an example.
- Ask for clarification on points unclear to you.
- Ask for an example to enhance the meaning.
- If participants seem to be confused or at odds, restate the question or issue.
- Pose relevant questions or provide example to lessen the confusion.
- Write topic sentences or key points on the board to clarify ideas.
- Summarize your understanding the key issues to determine whether you have grasped the essence of the discussion.
- Ask the presenter/group to state the essential elements of the presentation.
- Phrase questions such that the discussants can understand how this topic fits in with the overall perspective.

3-PAGE BRIEFING PAPER (BRIEFING DOCUMENT)

Goal: To assist you in your ability to evaluate and synthesize material in a crisp, concise, and cogent manner in writing.

You are to complete and turn in a 3-page paper (briefing document) in this class. Often, working in public health, you will be asked to do just that for any number of reasons: briefing a supervisor, a legislative or scientific briefing, conducting a media interview, or others. You will not have the luxury of preparing a multi-page tome complete with lengthy explanations. Furthermore, mostly none will have time to read a multi-page on every issue that needs to be addressed in connection with your future position.

In this type of paper, or briefing document, you should set down the explicit ideas briefly, support them with appropriate material and then summarize your major points. Some key points that might be included in the paper are listed. Use them as a guide not as “absolutely must haves.” Indeed, remember the old newspaper writer’s dictum: **who, what, why, where, and when**. Use your sense and sensibility to deliver your key points so that the reader will understand and be able to act. The Professor will read the papers as if to use them in a briefing situation in front of key public health officials.

Some Key Points for Inclusion:

Executive Summary - 1 paragraph maximum

- I. Introduction and Scope of Issue -- Why is this important and to whom
- II. Relevant data: morbidity and mortality data, legislative information, media coverage, earlier programs and any other pertinent data
- III. Discussion of topic including strengths and weaknesses
- IV. Summary
- V. Bibliography (Cited appropriately. CHS department requires you to use the APA manual format!)

Grading the paper

A. Writing (30%)

- Meeting requirements of the paper
- Spelling/grammar
- Language

B. Concept (30%)

- Scope presentation
- Logic
- Frame

C. Integration and Consistency (40%)

- Data presentation
- Reference use
- Discussion
- Recommendation congruent with data presented and frame of the paper

Health Care of Women Schedule Fall 2003

August 29:	Why Women's Health? - Breast Health and beyond	Dr. Magnus
September 5:	Mortality of Women - CVD and Cancer	Dr. Magnus
September 12:	Morbidity of Women - Depression and Pain	Dr. Magnus
September 19:	Women in childbearing years - Pregnancy and Family planning	Dr. Weisman
September 26:	Gynecology and Women's Health	Dr. Magnus
October 3:	Mid life women - Menopause and HRT	Dr. Magnus
October 10:	Senior Women and Aging - Dementia and Osteoporosis	Dr. Magnus
October 17:	Women on the edge - ??????	TBA
October 24:	Cultural competency - A skill needed in women's health?	Dr. Lazarus
What are we looking for in a presentation? How will we grade the student presentations?		
October 31:	Presentation Programs Team B+D	Dr. Magnus
November 7:	Presentation Programs Team E+C	Dr. Magnus
November 14:	Adolescent women - Sexual Health and STD	Dr. Abdallian
November 21:	Presentation Programs Team A+F	Dr. Magnus
December 5:	Fiction or reality? -Barriers in Women's Health	Dr. Magnus

COURSE EVALUATION

Programs in Health Care of Women

Be creative and identify a clinical, community based, policy or state based program related to health care of women that you and your team members would like to learn more about.

Assignments:

Individually you:

1. Write a three-page literature review on your part related to the group project according to the briefing paper outline. **Deadline September 26th at 3:00 PM.**
2. Write a three-page report on a key informant interview you do by yourself related to the group project. **Deadline October 10th at 3:00 PM.**

In groups you:

1. Define the rationale, goals and objectives of your group project and write up a 3 page-briefing document as a group. **Deadline: September 12th at 3:00 PM.**
2. Write a project paper that includes the rationale for the development of a program related to the topic, review of literature, examination discussion and critique of actual programs/initiatives, and a plan of your proposed program with examples of elements crucial to the program. The evaluation of the program development and implementation needs to be addressed. Please consider the whole program development that takes place in your group as the first phase of evaluation. **Deadline October 24th at 3:00 PM**
3. Prepare and present your projects as pilot project. The class will serve as a group of the intended subjects of your program. Remember to define the “stage”, perceived level of education etc. Electronic copy of your presentation, any handouts etc. are due 24 hours prior to your class presentation. jmagnus@tulane.edu

Reading List

Why Women's Health? Breast Health and Beyond

Thorne, S. E., Murray, C. (2000). Social constructions of breast cancer. *Health Care for Women International*. 21:141-159.

US Preventive Services Task Force (2002). Screening for breast cancer: Recommendations and Rationale. *Annals of Internal Medicine*. 137 (5):344-346.

Sox, H. (2002). Screening mammography for younger women: Back to basics. *Annals of Internal Medicine*. 137 (5):361-2.

Goodman, S. N. (2002). The mammography dilemma: A crisis for evidence-based medicine? *Annals of Internal Medicine*. 137 (5):363-5.

Mortality of Women: CVD, Cancer and Stroke

Seltzer, V. (2000). Cancer in women: Prevention and early detection. *Journal of Women's Health and Gender-Based Medicine*. 9 (5):483-488.

Gorman, C., & Bjerklie, D. (2003). The no. 1 killer of women. *Time*. April 28, 2003, pg. 60.

Roquer, J., Campello, A. R., & Gomis, M. (2003). Sex differences in first-ever acute stroke. *Stroke*. 34:1581-1585.

Morbidity of Women: Depression and Pain

Bertakis, K. D., Helms, L. J., Callahan, E. J., Azari, R., Leigh, P., & Robbins, J. A. (2001). Patient gender differences in the diagnosis of depression in primary care. *Journal of Women's Health and Gender-Based Medicine*. 10 (7):689-697.

Young, S. (2002). Depression in women of reproductive age. *Postgraduate Medicine*. 112 (3):45-51.

Hart, B. & Grace, V. M. (2000). Fatigue in chronic fatigue syndrome: A discourse analysis of women's experiential narratives. *Health Care for Women International*. 21 (3):187-202.

Adolescent Women: Sexual Health, STDs and Health Behaviors

Felton, G., & Bartoces, M. (2002). Predictors of initiation of early sex in black and white adolescent females. *Public Health Nursing*. 19 (1):59-67.

Gollub, E. L., French, P., Latka, M., Rogers, C., & Stein, Z. (2001). Achieving safer sex with choice: Studying a women's sexual risk reduction hierarchy in an STD clinic. *Journal of Women's Health and Gender-Based Medicine*. 10 (8):771-783.

Slomski, A. (2003). Waiting to inhale. *Access*. May-June 2003, pg. 40-49.

Women in Childbearing Years: Pregnancy and Family Planning

Hampton, N. (2001). Choice of contraception. *Current Obstetrics & Gynaecology*. 11:50-3.

Webb, A. M. C. (2003). Emergency Contraception. *British Medical Journal*. 326:775-6.

Mid Life Women: Menopause and HRT

Writing Group for the Women's Health Initiative. (2002). Risks and benefits of estrogen plus progestin in healthy postmenopausal women. *JAMA*. 288 (3):321-333.

Stevenson, J. C., & Whitehead, M. I. (2002). Hormone replacement therapy. *British Medical Journal*. 325:113-4.

US Preventive Services Task Force (2003). Postmenopausal hormone replacement therapy for the primary prevention of chronic conditions recommendations and rationale. *American Family Physician*. 67 (2):358-365.

Senior Women and Aging: Dementia and Osteoporosis

Shumaker, S. et al. (2003). Estrogen plus progestin and the incidence of dementia and mild cognitive impairment in postmenopausal women. *JAMA*. 289 (20):2651-2662.

Reynolds, E. H. (2002). Folic acid, ageing, depression, and dementia. *British Medical Journal*. 324:1512-5.

Ribeiro, V., Blakeley, J., & Laryea, M. (2000). Women's knowledge and practices regarding the prevention and treatment of osteoporosis. *Health Care for Women International*. 21 (4):347-53.

Gynecology and Women's Health

Funkhouser, E., Pulley, L., Lueschen, G., Costello, C., Hook, E., & Vermud, S. H. (2002). Douching beliefs and practices among black and white women. *Journal of Women's Health and Gender-Based Medicine*. 11 (1):29-37.

Moynihan, R. (2003). The making of a disease: Female sexual dysfunction. *British Medical Journal*. 326:45-7.

Wakley, G. (2002). Sexual dysfunction. *Current Obstetrics and Gynaecology*. 12:35-40.

Barriers in Women's Health: Fiction or Reality?

Plichta, S. B., & Abraham, C. (1996). Violence and gynecologic health in women < 50 years old. *American Journal of Obstetrics and Gynecology*. 174:903-7.