



GEOGRAPHY 366
MEDICAL & HEALTH GEOGRAPHY
Fall 2016

INSTRUCTOR: Dr. Aleck S. Ostry **Office:** B314 – Social Science and Math Bldg.
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I. PROFESSOR AND COURSE ORGANIZATION

Dr. Aleck Ostry: Condensed Biography

Dr. Ostry is a Professor in the Faculty of Social Sciences at the University of Victoria. He holds a Canada Research Chair in the Social Determinants of Community Health and he is also a Michael Smith Foundation for Health Research Senior Scholar. He has an MSc. in Health Service Planning, an MA in history (specializing in the history of public health), and a PhD in epidemiology. He conducts a broad research and teaching program on the social determinants of health within an historical and geographical framework.

Location of Weekly Lectures and Time Slot: COR A129; 8:30- 9:50am

Dr. Ostry's Office Hours:

Email Dr. Ostry if you'd like an appointment.

Lecture Powerpoint Slides:

These are available on Moodle usually within a day after each lecture.

Course Readings:

There is no textbook for this class. Students are encouraged to obtain the BC Health and Wellness Atlas. P. Keller and L. Foster. Available at <http://www.geog.uvic.ca/wellness/index.swf>. This atlas is a treasure trove of health and health services information illustrated mainly across BC's Health Services Districts. Finally, most lectures have specific reading. These will be made available on Moodle usually the week prior to each class. Students will be expected to read these articles prior to class and be prepared to discuss them during class.

II. COURSE OUTLINE & OVERVIEW:

Geographic focus:

The geographic focus on this course is Canada and the province of British Columbia. Although the focus of the course is on Canada and BC, we will utilize examples from the international literature.

Course Description:

Traditionally, medical geography has focused on studying geographic variation in prevalence of infectious disease. However, given that most diseases of developed societies are chronic and given that distribution of these diseases depend mainly on social and environmental conditions (notwithstanding the importance of genes in the production of disease), it is important for

students to study the geography of these determinants of disease as well as the geography of the diseases themselves. Accordingly, this course provides students with a basic understanding of the geography of the social determinants of health (i.e., the social conditions that determine why some people are healthy and why others are not) and their variation both over time and place within Canada.

In order that health geographers become familiar with the methods used to describe illness and wellness, we provide several sessions discussing basic epidemiology and covering basic information on disease processes and methods researchers use to study health and to make inferences about causation. In this way students will acquire basic tools to learn about health geography. As well, because of the growing role of social media and the influence of the media in general on public attitudes about health and about health geography, we critically follow current media accounts of important health and health geography issues throughout the course.

In terms of content, basic distribution of illness, wellness, and health services are outlined with a focus on Canada and BC. In the latter half of the course we introduce students to rural health. This area of research lends itself particularly well, to a health geographic approach for several reasons. First, differences in health status between urban and rural residents in BC are enormous. Second, the differences in the social determinants of health in rural versus urban regions provides a valuable lesson in both health geography and the social determination of illness. Third, half of Canada's Aboriginal population lives in rural regions and the health of First Nations'. Understanding the health geography of First Nations' people is key to improving overall health status in this country.

Course Objectives:

Students will develop a basic understanding of:

1. the dominant frameworks underpinning medical and health geography inquiry;
2. the social determinants of health;
3. how and why these social determinants of health have varied over time and within Canada and BC
4. the geography of rural and Aboriginal health across British Columbia.

Prerequisites: None. An undergraduate course in statistics or a basic understanding of statistical concepts will be helpful.

Course components for evaluation:

Mid-term Exam #1 (30%)

Mid-term Exam #2 (30%)

Final Exam (40%)

III. COURSE POLICIES

1. **Attendance:** Regular attendance and class participation is expected. Students coming to class late or needing to leave early must minimize disruption. Students are expected to critically read the assigned articles prior to attending lectures.

2. **Lateness Policy:** Unless an extension has been granted in advance, late assignments will be marked down one-third of a letter grade for each day late. An “A” paper that is one day late, for example, will receive an “A-“.
3. **University of Victoria’s Policy on Inclusivity and Diversity:** The University of Victoria is committed to promoting, providing and protecting a positive, supportive and safe learning and working environment for all its members.

4. **Evaluations:**

- **EXAMS:**

There are two mid-terms and one final exam in this course. The first mid-term exam is on October 8th. The second mid-term exam is on November 12th. The date for the final exam is usually announced around the 3rd week of November. The final exam is usually held sometime between Dec 3rd and Dec 21st. Each mid-term is worth 30%. Both mid-terms are scheduled during class time. The final exam is worth 40% of the mark.

****NOTE:*** Attendance for the mid-terms and final examinations are mandatory.

Exceptions will be made only under the following conditions:

- the instructor has been informed in person at least 2- weeks before the time of the exam or due date for the research assignment that the absence will occur.
- the student has proper written documentation of a serious medical or compassionate cause for the absence and presents this to the instructor at least 2-weeks before the exam or due date for the research assignment.

*****NOTE:*** Once exams are marked and grades assigned they are under no circumstances subject to negotiation or change.

- the instructor has been informed in person at least 2- weeks before the time of the exam or due date for the research assignment that the absence will occur.
- the student has proper written documentation of a serious medical or compassionate cause for the absence and presents this to the instructor at least 2-weeks before the exam or due date for the research assignment.

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- **CLASS PARTICIPATION:** Students are expected to come to each class. This is particularly important as this course does not have an assigned text book. The instructor will NOT give out his notes or lectures to students who miss lectures. In addition students are expected to actively participate in class discussions.

5. **Grading Scale:**

A+	A	A-	B+	B	B-	C+	C	D	F
90-100%	85-89%	80-84%	77-79%	73-76%	70-72%	65-69%	60-64%	50-59%	49% or Less

5. Undergraduate Grading Description

<i>Passing Grades</i>	<i>Description</i>
A+ A A-	Exceptional, outstanding and excellent performance. Normally achieved by a minority of students. These grades indicate a student who is self-initiating, exceeds expectation and has an insightful grasp of the subject matter.
B+ B B-	Very good, good and solid performance. Normally achieved by the largest number of students. These grades indicate a good grasp of the subject matter or excellent grasp in one area balanced with satisfactory grasp in the other area.
C+ C C-	Satisfactory, or minimally satisfactory. These grades indicate a satisfactory performance and knowledge of the subject matter.
D	Marginal Performance. A student receiving this grade demonstrated a superficial grasp of the subject matter.
COM	Complete (pass). Used only for 0-unit courses and those credit courses designated by the Senate. Such courses are identified in the course listings.

** As stated in the 2009-2010 Calendar

Course Experience Survey (CES)

I value your feedback on this course. Towards the end of term, as in all other courses at UVic, you will have the opportunity to complete an anonymous survey regarding your learning experience (CES). The survey is vital to providing feedback to me regarding the course and my teaching, as well as to help the department improve the overall program for students in the future. The survey is accessed via MyPage and can be done on your laptop, tablet, or mobile device. I will remind you and provide you with more detailed information nearer the time but please be thinking about this important activity during the course.

IV. COURSE OUTLINE & READING SCHEDULE

Class Date	Topic	Description
Sept 10 th	Introduction	Description of course content; explanation of assignments, exam schedule, and marking. Explanation of readings.
Sept 14 th	What is Medical and What is Health Geography?	What is medical/health geography? Why does epidemiology and the social determinants matter to medical and health geography inquiry? What can a geographic approach offer to understanding health, healthcare policy, and illness?
Sept 17 th	An Historical Approach to the Geography of Health and Illness.	Students are introduced to early classical studies by health geographers/ epidemiologists.
Sept 21 st	An Historical Approach to the Geography of Health and Illness. Part 2	We describe the structure and evolution of Canada's healthcare system from Colonial times to the present with a focus on the political geography of the development of our public health system.
Sept 24 th	The Geography of Health and Illness.	We identify main illnesses of concern for populations in developed nations and map these in several jurisdictions but with a focus on BC. The purpose of this session is to describe the current geography of major human illnesses.
Sept 28 th	An Introduction to the Geography of Health Services in Canada	Focusing on Canada, we introduce students to the geography of health services. The purpose of this session is to give students the basic background they need to understand how health services work, their role in the economy and how they are distributed geographically.

Oct 1 st	Epidemiology and Geography	Students are given basic information on prevalence, incidence, rates, confounding, and some background on the type of study designs used in health geography investigations
Oct 5 th	Mid-Term REVIEW	Mid-Term Review
Oct 8 th	1st Mid-term exam	1st Mid-term exam
Oct 12 th	THANKSGIVING HOLIDY	

Oct 15th	What are the Social Determinants of Health?	If social and environmental factors largely determine geographical patterns of ill health which social and environmental factors are the most important to study? We identify these.
Oct 19 th	The Geography of the Social Determinants of Health in BC Part 1	In this session we map the distribution of these “determinants” of illness in BC
Oct 22 nd	The Geography of the Social Determinants of Health in BC Part 2	We continue our discussion of the social determinants of health in the province of BC
Oct 26th	Introduction to Geography of Urban vs Rural Health in Canada	One of the most important geographic issues in providing healthcare services and in terms of differences in health status across populations arises across the urban/rural continuum. We outline in this introductory session the basic geography of rural compared to urban health services distribution and health status in Canada.
Oct 29th	Geography of Urban vs Rural Health in BC	We shift our focus on differences in health status between urban and rural British Columbians.
Nov 2nd	Rural Health in BC Part 2	In this session we delve deeper into the differences in health status and service delivery across various rural regions of BC.

Nov 5th	Mid-term Review	Mid-term Review
Nov 9 th	Remembrance Day No Class	Remembrance Day No Class
Nov 12 th	2nd Mid-Term Exam	2nd Mid – Term Exam
Nov 16 th	First Nations People’s Health in Canada	We have described differences in both health services and health status across the urban/rural continuum in Canada and in BC. In this session we introduce students to the basic health situation facing Aboriginal people in Canada
Nov 19 th	Aboriginal Health in BC Part 1	In this session we introduce students to the geography of Aboriginal People’s health in BC
Nov 23 rd	Aboriginal Health in BC Part 2	This session is focused on better understanding the social determinants of Aboriginal People’s health in BC
Nov 26 th	Aboriginal Health in BC Part 3	We introduce our research on Aboriginal Health in North-Central BC to students.
Nov 30 th	Aboriginal Health in BC Part 4	We continue discussion about our current research in BC on Aboriginal health.
Dec 3 rd	Final Review	Final Review

Additional Suggested Readings:

BC Health Atlas. First Edition. www.chspr.ubc.ca/healthatlas/2002.

BC Health Atlas. Second Edition. www.chspr.ubc.ca/healthatlas/2004.

The Black Report and Beyond What are the Issues? Macintyre S. *Social Science & Medicine*. 44(6):723-745, 1997.

Canadian Institute for Health Information Web site: <http://secure.cihi.ca/cihiweb/splash.html>.

Canadian Population Health Initiative Web site:
http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=cphi_e

Canadian Public Health Agency Web Site: www.phac-aspc.gc.ca/new_e.html.

Change and Continuity in the Canadian Health Care System. Ostry A. Ottawa: Canadian Healthcare Association, 2006.

Determinants of Health: A New Synthesis. John Frank. *Current Issues in Public Health*, 1:233-240, 1995.

Health Inequalities Among British Civil Servants: The Whitehall II Study Marmot M, Davey-Smith G, Stansfeld S, et al. *Lancet*, 337, June 8th: 1387-1393, 1991.

Healthier Societies: From Analysis to Action. Editors (Jody Heymann, Clyde Hertzman, Morris L. Barer, Robert G. Evans) Oxford University Press: Oxford, 2005

Unhealthy Societies: The Afflictions of Inequality. Wilkinson, R.G. 1996. London: Routledge.

Why are Some People Healthy and Others Not? The Determinants of the Health of Populations. Editors (Robert G. Evans, Morris Barer, and Theodore Marmor) Aldine De Gruyter; 1994.

Suggested Health Geography Journals of Interest:

Health & Place

(http://www.elsevier.com/wps/find/journaldescription.cws_home/30519/description#description)

Social Science & Medicine

(http://www.elsevier.com/wps/find/journaldescription.cws_home/315/description#description)