

**UNIVERSITY OF LETHBRIDGE
FACULTY OF HEALTH SCIENCES
HLSC 2300 – Introduction to Aboriginal Health
Course Outline – Fall 2012**

Instructor: Dr. Cheryl Currie
Class Location: AH175 Anderson Hall
Class Time: Fridays, 9:00 – 11:50 a.m.

Instructor Contact:
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Instructor Office: M3051 Markin Hall
Office Hours: Tuesdays and Thursdays, 9:00–11:30 a.m.

Course Description:

This course will examine Aboriginal health in Canada through a public health lens. Students will learn to critically examine and reflect on the historic, economic, social, cultural, and political determinants of Aboriginal health using a range of theories and frameworks. At the end of the course students will have acquired a broad, critical understanding of the health challenges confronting Aboriginal people in Canada, key determinants shaping these outcomes, and ways forward to strengthen Aboriginal health in this country.

Learning Objectives:

By the end of this course you will be able to:

1. Identify and describe major health challenges confronting Aboriginal Canadians today.
2. Develop a critical understanding of the determinants of Aboriginal health in Canada.
3. Describe ways forward to strengthen Aboriginal health in Canada.

Course Format:

Classes will consist of one session per week. Most classes will begin with an interactive lecture, followed by group work. Some classes will also include guest speakers and video recordings to strengthen student learning. Please refer to Moodle for course lectures, readings and marks. Group assignments will be distributed during class.

Class Assignments	% of Final Grade	Due Date	Submission
Assignment 1	10%	Oct 5, 9:00 a.m.	Submit paper copy
Assignment 2	25%	Nov 16, 9:00 a.m.	Submit paper copy
Assignment 3	35%	Dec 14, 11:59 p.m.	Submit via Moodle
Reflective Writing	15%	Each Thursday, 11:59 p.m.	Personal blog post
Group Assignments	15%	Assigned in class	Completed in class

CLASS ASSIGNMENTS

Assignments 1 - 3 (70%)

The main project for this course will be a paper on a specific Aboriginal health issue of interest to each student. These assignments are expected to be well edited and of a high quality. Quality includes proper spelling, grammar and punctuation. Please use the APA referencing system and page numbers. Late submissions will be penalized at 5% per day. The project will be completed as 3 separate assignments:

Assignment 1: Aboriginal Health Problem (10%)

- Describe the particular segment of the Aboriginal population you will focus on by size, structure and distribution, and why this target population is of interest to you.
- Describe an Aboriginal health problem by person, place and time, and why it is of interest to you.
- 2-3 pages single-spaced, not including title page and references.

Assignment 2: Determinants of Aboriginal Health (25%)

- Resubmit Assignment 1, with edits to the areas I have commented on.
- Next, discuss 3 determinants for this health problem within your target population. Use a theory from the course to explain how these determinants are impacting that health problem.
- 3-5 pages single-spaced not including title page, references, and the Assignment 1 section.

Assignment 3: Taking Action to Improve the Problem (35%)

- Resubmit Assignment 1-2, with edits to the areas I have commented on.
- Next, describe 2 initiatives that if put in place would address the health problem you are focused on within your target population. Initiatives can be new ideas you have developed or actions/policies already in place in other jurisdictions (populations other than the one you are focused on). Spend time explaining why these initiatives would be effective using content and theories from course readings, lectures and group discussions.
- 4-6 pages single-spaced not including title page, references and Assignment 1 and 2 sections. The final paper should read like one continuous paper, with headings separating each section. Additional use of subheadings within your paper is strongly encouraged.

Reflective Writing (15%)

- You will develop a WordPress blog (set to private, with access provided to the instructor) as part of this course, and create a blog post each week. Some weeks you will be asked to reflect on specific topics, but most weeks you can use this space to reflect on class readings, lectures, and group work generally. You are encouraged to use this space to think through your opinions on the different theories/ideas you are learning, and how these theories/ideas are similar or different from your previous thinking about Aboriginal health. You are also encouraged to use this space to brainstorm and shape your ideas for your class project. Pictures, photos, mind maps and other drawings may also be used as methods of expression. Credit will not be given for late posts.
- Marks will be assigned based on the quality of reflections, particularly evidence **that** you are completing and thinking about assigned readings, considering information discussed in class, and thinking about your class project as the week's progress. You will not be marked based on the length of posts, grammar, spelling or punctuation; however, posts should be readable **and** coherent. Class 1 will include an in-class tutorial on WordPress blogging.

Group Assignments (15%)

- Group assignments will be used to stimulate discussion and active engagement with the course material. Please complete assigned readings before class to ensure you can contribute to group work. Each student will be allotted 1 absence from class without penalty to their mark. Otherwise, students must be present in class to receive credit for these assignments.

Classroom Etiquette:

Students are expected to attend all classes, to come to class prepared, arrive on time, and stay for the duration of class. Students are encouraged to participate in discussions during class. However, please refrain from talking while someone else is speaking, sharing information that is not related to the course material, or dominating classroom and small group discussions. Turn cell phones to silent. Portable electronic devices may be used for course-related activity.

Grading Breakdown:

The grading system for this course is consistent with that established in the Faculty of Health Sciences, effective May, 2002.

Letter	GPA	Percent	Letter	GPA	Percent
A+	4.0	95 - 100%	C+	2.3	71 - 74.9%
A	4.0	91 - 94.9%	C	2.0	67 - 70.9%
A-	3.7	87 - 90.9%	C-	1.7	63 - 66.9%
B+	3.3	83 - 86.9%	D+	1.3	59 - 62.9%
B	3.0	79 - 82.9%	D	1.0	55 - 58.9%
B-	2.7	75 - 78.9%	F	0	0 - 54.9%

Students are referred to *The University of Lethbridge Calendar* regarding academic offenses. Specifically:

1. Plagiarism

- a. No student shall represent the words or ideas of another person as his or her own. This regulation will affect any academic assignment or other component of any course or program of study, whether the plagiarized material constitutes a part or the entirety of the work submitted.
- b. Upon submission of evidence that the student has represented another person's words or ideas as his or her own, the student shall bear the burden of proving that there was no intent to deceive.

2. Cheating

- a. In the course of an examination, no student shall obtain or attempt to obtain information from another student or other unauthorized source, or give or attempt to give information to another student, or knowingly possess, use or attempt to use any unauthorized material.
- b. No student shall represent or attempt to represent oneself as another or have or attempt to have oneself represented by another in the taking of an examination, preparation of a paper or other evaluated activity.

Plagiarism Statement:

The University of Lethbridge subscribes to Turnitin.com, a plagiarism detection service. Please be advised that student work submitted for credit in this course may be submitted to this system to verify its originality. Students must be able to submit both electronic and hard copy versions of their work upon request.

Accommodations for Students with a Disability:

Reasonable accommodations are available for students who have a documented disability. If you have been diagnosed with a disability, there is no need to face the challenge of University without support. Please contact the Counselling Services/Students with Disabilities Resource Centre at 403-329-2766 <http://www.uleth.ca/ross/counselling/index.html> to set up an appointment. After registering with the Disabilities Resource Centre, your instructor will be notified by a formal letter of any accommodations you require. In addition, students are responsible for requesting accommodations from the instructor at least ***two weeks*** in advance of the evaluation date. The instructor and student are jointly responsible for arranging the resources needed for the evaluation process.

COURSE SCHEDULE

CLASS	DATE	TOPIC	ASSIGNED READINGS
1	Sep 7	Introduction to Aboriginal Health	Waldram JB, et al. (2007) <i>Aboriginal Health in Canada</i> . Toronto: University of Toronto Press (Chapter 1 - Overview of Aboriginal Peoples in Canada: pp. 3-23).
2	Sep 14	Aboriginal Peoples & Health Before Colonization	Mann CC. (2011). <i>1491</i> . New York: Vintage (Chapter 1: Holmberg's mistake, pp. 4-31). Martin DL, Goodman AH (2002). Health conditions before Columbus: paleopathology of native North Americans. <i>Culture and Medicine</i> , 176, 65-68. Waldram JB, et al. (2007) <i>Aboriginal Health in Canada</i> . Toronto: University of Toronto Press (Chapter 5 - Medical traditions in Aboriginal cultures, pp. 126-152).
3	Sep 21	Contact & Disease	Waldram JB, et al. (2007) <i>Aboriginal Health in Canada</i> . Toronto: University of Toronto Press (Chapter 3 -Contact and disease, pp. 48-72).
4	Sep 28	Aboriginal Health in Canada Today	Adelson N. (2005). The embodiment of inequity: Health disparities in Aboriginal Canada. <i>CJPH</i> , 96, s45-60. Satzewich V, Liodakis N (2010). <i>'Race' and Ethnicity in Canada</i> . Oxford: Oxford University Press (Chapter 7 - Aboriginal and non Aboriginal relations, pp. 238-260)
5	Oct 5	Genetics, Epigenetics & Aboriginal Health	Paradies YC, et al. (2007). Racialized genetics and the study of complex diseases: The thrifty genotype revisited. <i>Perspectives in Biology and Medicine</i> , 50(2), 203-227.
6	Oct 12	Colonization & Aboriginal Health Today	Aboriginal Healing Foundation (AHF) (2004). <i>Historic trauma and Aboriginal healing</i> . Ottawa: Author (pp. 65-84). Chansonneuve D. (2007). <i>Addictive Behaviours Among Aboriginal People in Canada</i> , AHF. Ottawa: Author (pp. 5-28).
7	Oct 19	Health Theories & Frameworks	Brunner E, Marmot M. (2006). Social organization, stress and health. In M Marmot & RG Wilkinson (Eds.), <i>Social Determinants of Health</i> , 2 nd Oxford: Oxford University Press. (pp. 6-30). Crawford R. (2005). You are dangerous to your health: The ideology and politics of victim blaming. In N Krieger (Ed) <i>Embodying inequality: Epidemiologic perspectives</i> . New York: Baywood Publishing Company (pp. 79-98).
8	Oct 26	Structural Determinants of Aboriginal Health	Wilson D, Macdonald D (2010). <i>The income gap between Aboriginal peoples and the rest of Canada</i> . Ottawa: CCPA. NCCAHA (2009). <i>Housing as a determinant of First Nations, Inuit and Métis health</i> . Prince George, BC: Author. NCCAHA (2009). <i>Poverty as a social determinant of First Nations, Inuit and Métis health</i> . Prince George, BC: Author

CLASS	DATE	TOPIC	ASSIGNED READINGS
9	Nov 2	Racial Discrimination as a Determinant of Aboriginal Health	<p>Bourassa C, et al. (2004). Racism, sexism, and colonialism: The impact on the health of Aboriginal women in Canada. <i>Canadian Woman Studies</i>, 24(1), 23-29.</p> <p>Currie et al. (2012). Racial discrimination experienced by Canadian Aboriginal university students. <i>Canadian Journal of Psychiatry</i>, 57(10).</p>
10	Nov 9	Culture as a Determinant of Aboriginal Health	<p>Fleming J, Ledogar RJ (2008). Resilience and Indigenous spirituality: A literature review. <i>Pimatisiwin</i>, 6(2):47-64.</p> <p>Currie et al. (2011). Enculturation and alcohol use problems among Aboriginal university students. <i>Canadian Journal of Psychiatry</i>, 56(12), 735-742.</p> <p>Earle L (2011). Traditional Aboriginal diets and health. Prince George, BC: NCCAH.</p>
11	Nov 16	Aboriginal Community Health	<p>York G (1989). <i>The dispossessed</i>. Toronto: McArthur & Company (Chapter 3 – Inside the reserves, pp. 54-87).</p> <p>Chandler MJ, Lalonde CE (2008). Cultural continuity as a protective factor against suicide in First Nations youth. <i>Horizons</i>, 10 (1), 68-72.</p> <p>Voyageur C, Calliou B (2011). Aboriginal economic development and the struggle for self-government. In MJ Cannon & L Sunseri (Eds.) <i>Racism, colonialism, and Indigeneity in Canada</i>. Toronto: Oxford University Press (p. 203-212).</p>
12	Nov 23	Health Care Access & Cultural Safety	<p>NCCAH (2011). Access to health services as a social determinant of First Nations, Inuit and Métis health. Prince George, BC: Author.</p> <p>Lavoie et al. (2012). The Aboriginal health legislation and policy framework in Canada. Prince George, BC: NCCAH.</p> <p>NAHO (2008). Cultural competency and safety. Ottawa: Author.</p>
13	Nov 30	Aboriginal Child & Youth Health	<p>Postl B, Cook C, Moffatt M (2010). Aboriginal child health and the social determinants. <i>Healthcare Quarterly</i>, 14, 42-51.</p> <p>NCCAH (2009). Fact sheet: Aboriginal and non-Aboriginal children in child protective services. Prince George, BC: Author.</p> <p>Currie C, Wild T. Adolescent use of prescription drugs to get high in Canada. <i>Canadian Journal of Psychiatry</i>, 57(12).</p>
14	Dec 7	Next Steps	<p>Canada (1996). Highlights from the Report of the Royal Commission on Aboriginal Peoples. Ottawa: Minister of Supply and Services.</p>