

**UNIVERSITY OF PUERTO RICO
MEDICAL SCIENCES CAMPUS
SCHOOL OF HEALTH PROFESSIONS
SCHOOL OF MEDICINE
POST DOCTORAL MASTER IN CLINICAL RESEARCH**

TITLE: **HEALTH DISPARITIES: A TRANSLATIONAL
RESEARCH APPROACH**

CODIFICATION: **INCL 6008**

NUM. OF CREDITS/HOURS: 2 Credits Semester = 54 contact hours

**1 CREDIT DISCUSSION = 18 HRS SEMESTER
(1 CREDIT DISCUSSION = 1 HOUR WEEKLY)**

**1 CREDIT INDEPENDENT STUDY = 36 HRS SEMESTER
(1 CREDIT INDEPENDENT STUDY= 2 HOURS WEEKLY)**

PRE-REQUISITES: None

COREQUISITES: None

COURSE DESCRIPTION:

This course was designed with a multidisciplinary and interdisciplinary focus to address translational research in health disparities. The course will define health disparities taking into consideration the historical context, determinants and theoretical frameworks. It will cover the different components of translational research and its relevance in health disparities, and the role of community engagement as a strategy in translating health research to communities in an effort to reduce health disparities. Students will be able to apply measurements, models and evaluation methods in addressing health disparities, as well as understand the importance of translating and disseminating scientific knowledge into policy and practice in health disparities research. Overall, the course will provide an experiential opportunity through a practical experience that will help students apply translational research to address a health disparity. This course will be taught via distance education modalities.

OBJECTIVES:

At the end of the course the student will be able to:

1. Discriminate the concept of health disparities taking into consideration the historical context, determinants and theoretical frameworks.
2. Distinguish among the different components of translational research.
3. Evaluate the role of socio-cultural factors related to health disparities and translational research.
4. Analyze the role of community-engagement as a strategy in translating health research to communities in efforts to reduce health disparities.
5. Explain how the different sources of disparities apply to different populations.
6. Apply measurements, models and evaluation methods in addressing health disparities.
7. Appraise the importance of translating and disseminating scientific knowledge into policy and practice in health disparities research.

COURSE CONTENT and TIME DISTRIBUTION:

OUTLINE CONTENT	TIME DISTRIBUTION
I. Core Content- Introduction	16 hours
a. <i>Health Disparities: historical context, social determinants and theoretical frameworks.</i>	
b. <i>The role of socio-cultural factors related to health disparities and translational research.</i>	
c. <i>Domains: Health Disparities, research, social epidemiology, ethics and professionalism, communication, cultural competence, community engagement.</i>	
d. <i>Ethical issues in Health Disparities</i>	
II. Health Disparities in Research	(14 hours)
a. <i>Health disparities leading toward</i>	

OUTLINE CONTENT	TIME DISTRIBUTION
<i>economic, cultural, behavior, genetic, provider, social/environmental and biological.</i>	
b. <i>New perspectives in data analysis.</i>	
c. <i>Partnerships for collaborative research, education and care.</i>	
d. <i>Components of translational research.</i>	
e. <i>Community Engagement</i>	
III. Analysis of research in Health Disparities	20 hours
a. <i>Content evaluation to determine the relevance to community engaged research.</i>	
b. <i>Evidence-based interventions to reduce disparities.</i>	
c. <i>Application of principles of community based participatory research (CBPR).</i>	
d. <i>Ethical implications in the design, development and implementation of research as it relates to health disparities.</i>	
IV. Final Paper/ Group Project	4 hours
a. <i>Presentations and discussion from the perspective of cultural competence and community engagement.</i> i. <i>Ethical implications in the design,</i>	

OUTLINE CONTENT	TIME DISTRIBUTION
<p><i>development and implementation of research as it relates to health disparities.</i></p> <p><i>ii. Potential conflicts between practitioners, researchers, health systems organizations and community partnerships.</i></p>	
	(54 hours)

TEACHING STRATEGIES:

The course is taught via distance learning. Teaching modalities include:

- Discussion
- Independent Study
- Teamwork
- Online Lectures

I SPECIAL REQUIREMENTS:

For students

- Laptop
- Internet Access

Physical Facilities and Equipment (provided by institution)

- Learning management system.
- QuickTime, Windows Media Player, or other video streaming software
- Adobe Acrobat Reader
- Word processing application/software, Power Point software, and Publisher software

ASSESSMENT STRATEGIES:

	Weight Evaluation criteria
Online Class participation	10%
2 short quizzes	10%
Reading Review and Critique	30%
Final Paper (Group Projects)	40%
Oral Presentation	10%
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	100%

GRADING SYSTEM

A minimum of 80 % is required in order to approve this course.

REASONABLE ACCOMMODATION POLICY (Statement of PR Law 51):

Students with a health condition or situation that, according to the law, makes them eligible for reasonable accommodation have the right to submit a written application to the professor and the Dean of their Faculty, according to the procedures established in the document, ***Submittal Process for Reasonable Accommodation of the Medical Sciences Campus***. A free copy of this document may be obtained at the Office of the Dean for Student Affairs, second floor of the School of Pharmacy building. A copy may also be obtained at the Office of the faculty Deans as well as in the MSC web page. The application does not exempt students from complying with the academic requirements pertaining to the programs of the Medical Sciences Campus.

ACADEMIC INTEGRITY

The University of Puerto Rico promotes the highest standards of academic and scientific integrity. Article 6.2 of the UPR Student Bylaws (Certification JS 13 2009–2010) states that "academic dishonesty includes but is not limited to: fraudulent actions, obtaining grades or academic degrees using false or fraudulent simulations, copying totally or partially academic work from another person, plagiarizing totally or partially the work of another person, copying totally or partially responses from another person to examination questions, making another person to take any test, oral or written examination on his/her behalf, as well as assisting or facilitating any person to incur in the aforementioned conduct". Fraudulent conduct refers to "behavior with the intent to defraud, including but not limited to, malicious alteration or falsification of grades, records, identification cards or other official documents of the UPR or any other institution." Any of these actions shall be subject to disciplinary sanctions in accordance with the disciplinary procedure, as stated in the existing UPR Student Bylaws.

DISCLAIMER: The above statement is an English translation, prepared at the Deanship of Academic Affairs of the Medical Sciences Campus, of certain parts of Article 6.2 of the UPR Student Bylaws "Reglamento General de Estudiantes de la Universidad de Puerto Rico", (Certificación JS 13 2009-2010). It is in no way intended to be a legal substitute for the original document, written in Spanish.

BIBLIOGRAPHY:

Required: (No textbook is required)

1. Baquet CR, Commiskey P, Mullins CD, Mishra SI. Recruitment and participation in clinical trials: Sociodemographic, rural/urban, and health care access predictors. *Cancer Detection and Prevention*. 2006;30(1). Pages 24-33.
2. Becker, Gary. 2002, "The Economic Way of Looking at Life", *Nobel Prize Lecture*
3. Betancourt, H. and Flynn, P. (2010). The Psychology of Health. Physical Health and the Role of Culture and Behavior. CHAP 20.
4. Braveman, P. (2006). HEALTH DISPARITIES AND HEALTH EQUITY: Concepts and Measurement. *Annu. Rev. Public Health* 2006. 27:167–94
5. Braveman, P, Cubbin, C., Egerter, S. Williams, D., and Pamuk, E. (2010). Socioeconomic Disparities in Health in the United States: What the Patterns Tell Us. Research and Practice. *American Journal of Public Health | Supplement 1*, 2010, Vol 100, No. S1
6. Dankwa-Mullan et al. (2010) Moving Toward Paradigm-Shifting Research in Health Disparities Through Translational, Transformational, and Transdisciplinary Approaches Supplement 1, 2010, Vol 100, No. S1 | *American Journal of Public Health* 100:S19–S24. doi:10.2105/ AJP.2009.189167)
7. *Israel, B. (2008) Community-based Participatory Research: From Process to Outcomes (2nd edition). Meredith Minkler, Nina Wallerstein (eds), San Francisco: jossey- Bass, 2008, pp. 48-56.*
8. Whitehead, M. Concepts and principles for tackling social inequities in health: *Levelling up Part 1*. WHO Collaborating Centre for Policy Research on Social Determinants of Health, University of Liverpool.

Additional Readings and or Online Resources:

1. Booske BC, Rohan AM, Kindig DA, Remington PL. Grading and reporting health and health disparities. *Prev Chronic Dis* 2010;7(1).
http://www.cdc.gov/pcd/issues/2010/jan/08_0235.htm.
2. Cornett, S., (Sept. 30, 2009) "Assessing and Addressing Health Literacy" *OJIN: The Online Journal of Issues in Nursing* Vol. 14, No. 3, Manuscript 2. Available: [www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/Table of Contents/Vol142009/No3Sept09/Assessing-Health-Literacy.aspx](http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/Table%20of%20Contents/Vol142009/No3Sept09/Assessing-Health-Literacy.aspx)
3. Kindig, D and Mullahy, Comparative Effectiveness_of What?: Evaluating Strategies to Improve Population Health. *JAMA*. 2010;304(8):901-902 (doi:10.1001/jama.2010.1215)
<http://jama.ama-assn.org/cgi/content/full/304/8/901>
4. Osypuk, T. & Acevedo-Garcia, D., (July 16, 2010) Beyond individual neighborhoods: A geography of opportunity perspective for understanding racial/ethnic health disparities. <http://www.journals.elsevier.com/health-and-place/>
5. Weissman, J., & Hasnain-Wynia, R., (June 16, 2011) Advancing Health Care Equity through Improved Data Collection, *N Engl J Med* 2011; 364:2276-2277.
<http://www.nejm.org/doi/full/10.1056/NEJMp1103069>

Approved by Curriculum Committee: January 24, 2012