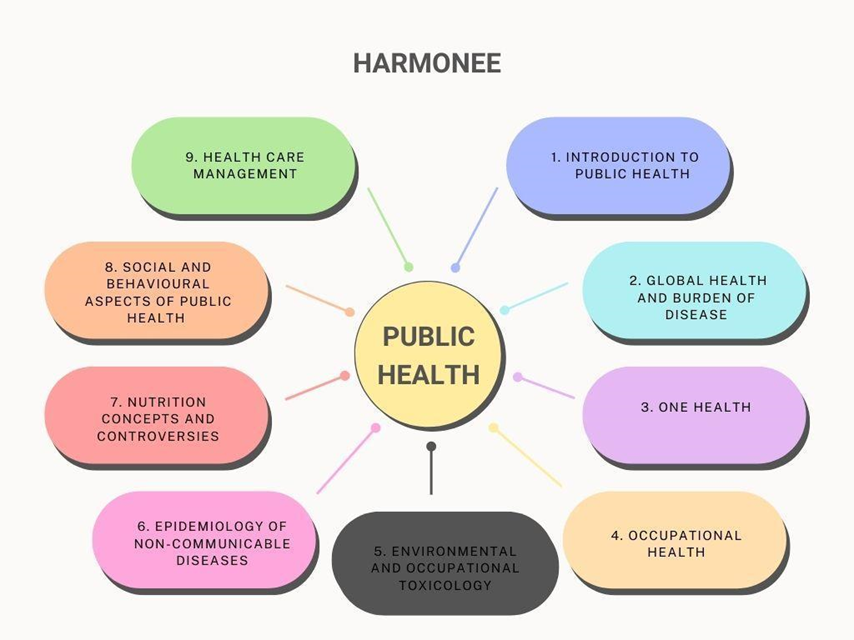
**HARMONEE**

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***MINISTRY OF EDUCATION AND SCIENCE OF THE KYRGYZ REPUBLIC***

***OSH STATE UNIVERSITY***

***INTERNATIONAL MEDICAL FACULTY***

***DEPARTMENT OF PUBLIC HEALTH***

****

**"Approved" -**

*at a meeting of the Department of Public health*

*Prot. №\_\_\_ dated \_\_\_\_\_\_\_ 2022*

*Head of department Turusbekova A.K. \_\_\_\_\_\_\_\_*

**STUDENT PROGRAM**

**(Syllabus)**

**by discipline "** **Social and behavioural aspects of public health"**

**"Master"**

Form of study: evening

Total credits - 4, course -2 semester -4

Total labor intensity - 60 hours, including:

classroom - 30 hours (lectures - 12 hours, practical - 18,

IWM - 30 hours.

Number of midterm controls (RC) - 2, exam - 4 semester

**Compiled by:**Candidate of Medical Sciences, Associate Professor Turusbekova A.K.

**Osh – 2022**

**3. INFORMATION ABOUT THE TEACHER:**

**Djumaev Ravshan Mamadyevich - Candidate of Medical Sciences, Associate Professor, Candidate of Medical Sciences of the Department of Public Health and Health.**

**Contact phones: 0778 89 24 44**

**Email:** jravshan@rambler.ru

**Short course description :**

This course will provide Master students with major concepts of multidisciplinary and interdisciplinary work, social and behavioral aspects of health, as well as give tools for creating behavioral change interventions to improve population health. The main questions that would be addressed by this course are: health promotion, implementation of health promotion tools through creation behavioral change programs.

**Course aim:**

To train local health professionals to understand the contexts and behaviors of communities living and working at human-animal-environment interfaces considered high-risk for virus or bacteria emergence for early disease detection, rapid response, disease control, and risk reduction

**Learning objectives**

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

● Explain behavioral modification theories and change management concept

● Adapt models for individual behavioral change for One Health initiatives across all stakeholders

● Incorporate multidisciplinary cooperation for behavioral change into One Health initiatives

● Demonstrate communication competency and professionalism for leading change

**As a result of mastering the discipline, the undergraduate must:**

**Know:**

* current trends and challenges in the **Social and behavioural aspects of public health**
* know the key concepts of epidemiology and how to use them in solving microbiological and professional problems;
* basic modern research and methods in the prevention of infectious diseases;
* theoretical foundations of informatics in the global burden of health, the use of information computer systems and periodicals.
* Solving clinical problem-situational problems; independent preparation of oral abstract reports on program issues with their subsequent discussion.

**Be able to:**

* identify key drivers and trends in **Social and behavioural aspects of public health**
* critically evaluate the various theoretical approaches that exist in the field of the global burden of health.
* apply theoretical knowledge to analyze current problems in global health;
* determine the sources of infection and the mechanism of transmission of infectious diseases;
* to classify infectious diseases to evaluate the manifestations of the epidemic process;
* conducting a primary epidemiological survey of foci of infectious (parasitic) diseases;
* filling out an emergency notification of an infectious disease;
* determine the precursors and prerequisites for infectious diseases;
* draw up algorithms for preventive and anti-epidemic measures in health facilities of various profiles;
* work with original scientific medical texts, adequately interpret medical texts of various doctrinal orientations;
* use educational, scientific, popular science literature, the Internet and an educational portal for professional activities;
* collect, process and generalize information in the field of medicine and apply the main theoretical and methodological approaches;

**Own:**

* a culture of medical thinking in the field of epidemiology, an understanding of the current epidemic realities and the challenges of globalization;
* ways of epidemiological interaction in public medicine, characterized by the presence of significant epidemiological and general medical differences;
* skills of scientific research and analysis of epidemiological problems and processes related to epidemiology and other branches of medicine;
* the main theoretical and methodological approaches in the approach to epidemiology and other branches of medicine in the field of microbiological forecasting.

**8. COURSE REQUIREMENTS**

## The subject of the Social and behavioural aspects of public health , as an academic discipline, is based on the study of public health, epidemiology, global health, general and particular epidemiology by undergraduates and is integrated with these disciplines.

**9.**POST REQUISITES OF THE COURSE

Addressing the global burden of disease.

**10.Technological map of discipline**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Total hours** |  | **Aud. Classes** | **Lecture** | **Prakt. (semin.)** | **SRS** | **Final control (40b.)** | | |  |
|  | **Exam** | | |  |
|  |  |
| **60** |  | **thirty** | **12** | **12** | **thirty** | **40** | | |  |
|  | **Points** | | | | | **40** | | |  |
|  | **Total modules** | | | | | **K1=(30+30+30+30):4=30\*2=60** | **K1=(30+30+30+30):4=30\*2=60** | **I=40b** | |
|  | **Total score** | | | | | **K=K1+I=60+40=100b.** | | | |

**11.Map of scoring per module**

***Graduate student assessment***

* *will be based on five quizzes (one quiz, two modules and one*
* *presentation) and exam*
* *The system for assessing the knowledge of a master student in class:*
* *preliminary (input, selection, initial control);*
* *current (phased, intermediate (thematic);*
* *final (final)*
* *In accordance with the requirements, individual, group and frontal surveys are used.*

***TC score card***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TK1** | **Visit to class** | **oral questioning** | **situational**  **Task** | **Analysis interpretation** | **Quiz /PPT** | **Total** |
| **Topic1** | **5** | **10** | **5** | **5** | **5** | **thirty** |
| **Topic2** | **5** | **10** | **5** | **5** | **5** | **thirty** |
| **Topic3** | **5** | **10** | **5** | **5** | **5** | **thirty** |
| **Topic4** | **5** | **10** | **5** | **5** | **5** | **thirty** |
| **Topic5** | **5** | **10** | **5** | **5** | **5** | **thirty** |
|  | **20** | **50** | **25** | **25** | **25** | **(NT/5)=30** |

**12. SUMMARY OF THE DISCIPLINE**

This program was written taking into account the new requirements of higher education and is intended for undergraduates of the specialty "560100 - Public Health" of higher medical educational institutions. Introduction to the subject Social and behavioural aspects of public health reflects the social problems of all four components of medical practice: prevention, diagnosis, treatment and rehabilitation. The preventive orientation of medicine requires from medical specialists deep knowledge in the field of public health.

This transdisciplinary course provides an overview of quantitative and descriptive methods and their application to the study of Social and behavioural aspects of public health. The scope of the area includes three main categories of Social and behavioural aspects of public health, including mental and behavioral disorders, communicable diseases, non-communicable medical diseases. Topical areas include maternal and child health, social determinants of health, environment and health.

The course focuses on the causes and consequences of mortality and disability, as well as comparative risk assessment. Students will learn the main methods used for global health research and the main global, regional and national trends in these areas, and will be able to apply knowledge about measurements to predict the global, regional, national burden of specific diseases, develop the necessary policy recommendations and develop prevention strategies and strategies. country-specific interventions. or regions using a transdisciplinary approach. Students will also explore aspects of the sociocultural, economic and environmental factors that influence the global and regional distribution of major disease categories, and how how the burden of disease is linked to the global economy, politics and the environment. The interdisciplinary knowledge and practical skills gained during this course will enable students to develop an interest in health research and practice in both the international and local arena. This course will introduce undergraduates to the basic concepts of interdisciplinary work, social and behavioral aspects of health, and provide tools for developing behavior change interventions to improve population health.

**10. Calendar-thematic plan of discipline by type of occupation**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Day | Activity | ECTS/Hours | | Comments and materials |
| In class (hour) | Online  (hour) |
| **1 day Topic: Introduction** | | | | |
| 1 | Introduction to syllabus  Google classroom platform  Use of forum | 0,5 |  |  |
|  | Introduction of participants | 0,5 |  |  |
|  | Creation of whatsapp group and Instagram  Explanation of team activities, project activities, offline and online activity | 0,5 |  |  |
|  | Teaching activity:  Interactive lecture “Health behavior change models” | 1 |  | In class face-to-face interactive lecture  Find book or article  <https://www.sciencedirect.com/science/article/pii/S0145213421005081>    <https://bmcpublichealth.biomedcentral.com/articles/10.1186/1471-2458-7-104>    Нужно найти для бесплатного скачивания<https://www.wiley.com/en-us/Health+Behavior:+Theory,+Research,+and+Practice,+5th+Edition-p-9781118628980> |
|  | Brainstorm activity (on flip chat):   * do you know any examples of behavioral change intervention in your village\city\country * ideas for projects * PICO|PECO | 1 |  | Find article short good examples  Vidoes |
|  | Documenting brainstorm activity. Upload picture of brainstorm chat on google classroom | 0,25 |  | * Take picture of your flip chat * Upload pictures to google classroom assignment |
|  | Team work   * Divide by 2-4 people for project group | 0,5 |  |  |
|  | Team work   * Discuss and present * Topic * population | 0,5 |  | Discuss in teams and make presentation on chosen topic and population |
|  | Documenting activity and upload presentation to google classroom task. | 0,25 |  | Upload presentations from previous activity to moodle forum |
| Home work | | | | |
|  | 1. Read articles | 2 |  | Articles with examples for each behavior change theory |
|  | 2. Team work   * Discuss methods of needs assessment for your population * Contact your population | 0,5 | 0,5 |  |
|  | 3. Individual work  Post infographics on any project you liked from articles  Post it on instagram using #CAHarmoneeOneHealth |  | 1 |  |
|  | *Total* | *7,5* | *1,5* |  |
| **2 day. Topic: Behavioral change project. Population needs assessment. Part 1** | | | | |
| 2 | Quiz on read material (individual, team) | 0,25 |  | Before class reading \* |
|  | Work – shop. Team building exercise. | 1 |  | <https://www.psyoffice.ru/4-0-3455.htm>  Desert island |
|  | Teaching activity:  Lecture: how to conduct needs assessment | 0,75 |  |  |
|  | Team work:   * Invite at least 1 representative from your population * Discuss needs assessment tools and how you will do needs assessment | 2 |  | In class face-to-face lecture |
|  | Panel discussion   * Teams present how they will conduct needs assessment in their population groups * Discussion in big group how you will provide needs assessment | 1 |  |  |
|  | Document activity:   * Main bullet points on flip chat |  |  | Upload foto of flip chat to google classroom |
| Home work | | | | |
|  | Teamwork   * Meet with your population * Conduct needs assessment | 3 |  | Manual. How to talk to your population  Procedure. Needs assessment |
|  | Office hours. Offline consultations with teams. | 1 |  | If students have question, they can stay for office hour and discuss it with teacher |
|  | *Total* |  |  |  |
| **3 day. Topic: Behavioral change project. Population needs assessment. Part 2** | | | | |
|  | Teaching activity:  Work-shop on creating intervention program | 2 |  |  |
|  | Team work:   * Present on progress for needs assessment * Brainstorm ideas for intervention | 1 |  |  |
|  | Homework: |  |  |  |
|  | Reading | 2 |  | Guide to intervention planning<https://ctb.ku.edu/en/developing-intervention> |
|  | Teamwork   * Discuss and choose your intervention based on needs assessment | 2 | 2 |  |
|  | Total | 7 | 2 |  |
|  | **4 day. Topic: Behavioral change project. Intervention plan** |  |  |  |
|  | Teaching activity:  Panel discussion on Social determinants of health | 2,5 |  | Show videos of interventions  Discuss intervention models |
|  | Team work:   * Present needs assessment results * Work on intervention plan | 2 |  |  |
|  | Homework |  |  |  |
|  | Teamwork:   * Create infographic on needs assessment results * Post infographic on instagram using #CAHarmoneeOneHealth * Work on intervention tools * Identify intervention success measures | 2 | 2,5 |  |
|  | Total | 6,5 | 2,5 |  |
| **5 day. Topic: Behavioral change project. Developing intervention prototype** | | | | |
|  | Teaching activity:  Qualitative research. Measuring success of intervention | 1 |  | Video  Article discussion |
|  | Teamwork:   * Develop prototype of intervention * Develop tools for measuring success | 3,5 |  |  |
|  | Home work |  |  |  |
|  | Teamwork:   * Finalize prototype of intervention * Create presentation on prototype * Post your presentation in google classroom | 2 | 2,5 | Manual. How to create a prototype |
|  | Total | 6,5 | 2,5 |  |
| **6 day. Topic: Behavioral change project. Implementation of intervention. Part 1** | | | | |
|  | Panel discussion   * presenting prototypes * Discussion and peer review of prototypes | *2* |  |  |
|  | Team work (classwork +homework) :   * Go to your population groups and start implementation of intervention | *7,5* |  |  |
|  | Total | *9,5* |  |  |
| **7 day Topic: Behavioral change project. Implementation of intervention. Part 2** | | | | |
|  | Team work:  Go to your population groups and start implementation of intervention | *8,5* |  | Work in teams  Implementation work with population groups  Teacher needs to guide groups |
|  | Office hours. Offline consultations with teams. | 1 |  | If students have question, they can stay for office hour and discuss it with teacher |
| **8 day Topic: Behavioral change project. Reporting intervention results** | | | | |
|  | Teach activity  Reporting framework for intervention implementation | *2* |  |  |
|  | Team work:   * Go to your population groups and start implementation of intervention * Progress report | *6* | *1,5* |  |
| **9 day Topic: Behavioral change project. Peer review** | | | | |
|  | Teaching activity  Peer review framework | *2* |  |  |
|  | Team work:   * Presentation of the results * Create infographic on your results and post in instagram using #CAHarmoneeOneHealth * Upload presentation to google classroom | *6* | *1,5* |  |
| **10 day Topic: Behavioral change project. Final presentation** | | | | |
|  | Panel discussion:  Invite student NGOs and population representatives to discuss results and give peer feedbacks | 3 | 2 | Online preparation for panel discussion |
|  | Team work:   * Each team create instagram post on your panel discussion and feedback using #CAHarmoneeOneHealth | 2,5 | 2 | Online work with team for creating infographic |
|  | *Total* | *4,5* | *3* |  |
| **Final exam** | | | | |
|  | Feedback from population |  | 1,5 | Upload feedbacks from your population and peer team to google classroom |

**11. Educational technologies**

Interactive teaching methods:

1. Visualization LP Lecture
2. MS brainstorming
3. ATD-activation of creative activity
4. COP-use of computer training programs
5. T-tests
6. RK teamwork
7. Kst-case study
8. PM search method
9. IM research method

**13. Scoring Policy.**

A master's student can score points in all types of classes. At lectures and seminars - for activity, attendance and availability of notes. At the boundary control - a maximum of 30 points: for solving a situational problem, for solving tests or a written answer. For the implementation of the CPM - points separately according to the plan.

Assessment of students' knowledge is carried out according to a 100 point system as follows:

Grading of exams is carried out on the basis of the principles of objectivity, fairness, a comprehensive analysis of the quality of students' knowledge, and

|  |  |  |  |
| --- | --- | --- | --- |
| *Rating (points)* | *Grading by letter system* | *Evaluation digital equivalent* | *Assessment according to the traditional system* |
| *87 - 100* | *A* | *4.0* | *Great* |
| *80 - 86* | *IN* | *3.33* | *Fine* |
| *74-79* | *WITH* | *3.0* |
| *68-73* | *D* | *2.33* | *Satisfactorily* |
| *61-67* | *E* | *2.0* |
| *31-60* | *FX* | *0* | *unsatisfactory* |
| *0 - 30* | *F* | *0* |

Evaluation- this is the final stage of the student's educational activity, aimed at determining the success of training.

Grade by disciplineis set as the sum of the marks for the modules into which the academic discipline is structured (60 points), and from the marks during the final control - exam (40 points).

Grade per moduleis defined as the sum of assessments of current educational activities and assessments of midterm module control, expressed on a multi-point scale (60 points)

**15. Educational, methodological and information support of the course.**

Video materials, materials from the Internet:

www.medline.com

1. Projection computer installation

2. Projector for demonstrating slide presentations

3. TV- for demonstration of educational files

**Main literature:**

1. Framework for Action on the Social Determinants of Health

<https://www.who.int/publications-detail-redirect/9789241500852>

1. Reducing health inequities through action on the social determinants of health  
   <https://apps.who.int/iris/bitstream/handle/10665/2257/A62_R14-en.pdf?sequence=1&isAllowed=y>
2. In Russian <https://apps.who.int/iris/bitstream/handle/10665/4384/A62_R14-ru.pdf?sequence=1&isAllowed=y>
3. Association of Food and Nonalcoholic Beverage Marketing With Children and Adolescents’ Eating Behaviors and Health <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2791859>
4. Launch of NCD Investment Case in Mongolia <https://www.who.int/news-room/feature-stories/detail/launch-of-ncd-investment-case-in-mongolia>
5. Government of Uzbekistan prioritizes action on NCDs for national development <https://www.who.int/news/item/01-12-2017-government-of-uzbekistan-prioritizes-action-on-ncds-for-national-development>
6. NCDs cost Kyrgyzstan nearly 4% of gross domestic product <https://www.who.int/news/item/20-09-2017-ncds-cost-kyrgyzstan-nearly-4-of-gross-domestic-product>
7. Martin, K. J., Nause, K., Greiner, M. v., & Beal, S. J. (2022). Modeling changes in adolescent health risk behaviors approaching and just after the time of emancipation from foster care. *Child Abuse & Neglect*, *124*, 105439. <https://doi.org/10.1016/J.CHIABU.2021.105439>
8. Munro, S., Lewin, S., Swart, T., & Volmink, J. (2007). A review of health behaviour theories: How useful are these for developing interventions to promote long-term medication adherence for TB and HIV/AIDS? *BMC Public Health*, *7*(1), 1–16. <https://doi.org/10.1186/1471-2458-7-104/TABLES/2>
9. *Игра «Необитаемый остров»*. (n.d.). Retrieved July 6, 2022, from https://www.psyoffice.ru/4-0-3455.htm