

Profile information current as at 03/05/2024 05:57 pm

All details in this unit profile for PBHL20001 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

# **General Information**

# Overview

Understanding Public Health introduces you to ways of thinking and perspectives that form the foundations of public health. These include examining the received wisdom of public health from the last 200 years such as different models of health and theoretical frameworks, and critiquing the approaches used in the past. You will be introduced to the social-ecological model of health that forms the basis of community-based and community-led public health. As such, you will consider the different types of leadership required for various approaches to public health practice and consider your own positionality. You will explore the differences between evidence-based practice and practice-based evidence and how these types of evidence can apply to the various approaches in public health. Finally, you will be introduced to strengths-based and disease prevention approaches as they are applied in public health.

## Details

Career Level: Postgraduate

Unit Level: Level 8 Credit Points: 6

Student Contribution Band: 8

Fraction of Full-Time Student Load: 0.125

# Pre-requisites or Co-requisites

There are no requisites for this unit.

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the <a href="Assessment Policy and Procedure (Higher Education Coursework)">Assessment Policy and Procedure (Higher Education Coursework)</a>.

# Offerings For Term 2 - 2020

- Melbourne
- Online
- Sydney

# Attendance Requirements

All on-campus students are expected to attend scheduled classes – in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

# Website

This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.

# Class and Assessment Overview

# Recommended Student Time Commitment

Each 6-credit Postgraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

# Class Timetable

## **Regional Campuses**

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

#### **Metropolitan Campuses**

Adelaide, Brisbane, Melbourne, Perth, Sydney

# **Assessment Overview**

1. Written Assessment

Weighting: 40% 2. **Group Work** Weighting: 40%

3. Reflective Practice Assignment

Weighting: 20%

# Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the <u>University's Grades and Results Policy</u> for more details of interim results and final grades.

# **CQUniversity Policies**

# All University policies are available on the CQUniversity Policy site.

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the CQUniversity Policy site.

# Previous Student Feedback

# Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

# Feedback from Student and staff feedback

#### **Feedback**

Students need additional support to develop reflective practice.

#### Recommendation

Additional time in tutorials will be dedicated to helping students understand reflective practice and the different levels of reflection.

# Feedback from Student and staff feedback, personal reflection

## **Feedback**

Workbook is helping students develop critical thinking but could be explained further.

#### Recommendation

Critical thinking will be explained more explicitly in tutorials and related to structure of the Workbook.

## Feedback from Personal reflection

#### **Feedback**

Academic integrity not fully appreciated by all students.

#### Recommendation

Academic integrity will be reinforced in explanations of assessments and in tutorial classes.

# **Unit Learning Outcomes**

# On successful completion of this unit, you will be able to:

- 1. Analyse the history of public health and its changing philosophical, theoretical and practice models over the last 200 years
- 2. Critique the ethics associated with different scales and approaches to public health, particularly in relation to First Nations Peoples
- 3. Discuss the impact of a social ecological model of health on public health practice
- 4. Differentiate between transactional and collaborative leadership and the related implications for public health practice
- 5. Reflect on own positionality regarding approach to health practice and relationships with others, especially those from different backgrounds
- 6. Distinguish between practice-based and evidence-based approaches used in public health and relate each to different models of health and approaches to practice
- 7. Justify taking a strengths-based or disease prevention approach to public health practice.

# Alignment of Learning Outcomes, Assessment and Graduate Attributes



# Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes								
	1	2	3		4	5	<b>;</b>	6	7
1 - Written Assessment - 40%	•		•					•	
2 - Group Work - 40%		•			•				•
3 - Reflective Practice Assignment - 20%						•	•		
Alignment of Graduate Attributes to Learning	g Outcon	nes							
Graduate Attributes	_	L	.earn	ing (	Outc	ome	es		
		1	L 2	2	3	4	5	6	7
1 - Knowledge		· ·			0				o
2 - Communication						0	o		
3 - Cognitive, technical and creative skills								0	0
4 - Research								o	
5 - Self-management							0		
6 - Ethical and Professional Responsibility			d	•		٥	٥		
7 - Leadership						٥			
8 - Aboriginal and Torres Strait Islander Cultures									
Alignment of Assessment Tasks to Craduate	Attribut.	0.0							
Alignment of Assessment Tasks to Graduate  Assessment Tasks		පර duate	Attri	bute	s				
	1	2	3	4	5	5	6	7	8
1 - Written Assessment - 40%	o		0	0					
	0	0	0				0	0	
2 - Group Work - 40%									

# Textbooks and Resources

# **Textbooks**

There are no required textbooks.

# **IT Resources**

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

# Referencing Style

All submissions for this unit must use the referencing style: <u>Harvard (author-date)</u> For further information, see the Assessment Tasks.

# **Teaching Contacts**

Vivian Romero Unit Coordinator

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Rebecca Fanany Unit Coordinator

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# Schedule

Week 1 - 13 Jul 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Introduction		
Week 2 - 20 Jul 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Reflective practice	Jayatilleke, N & Mackie, A 2013, 'Reflection as part of continuous professional development for public health professionals: a literature review', <i>Journal of Public Health</i> , vol. 35, no. 2, pp. 308-312. McKay, F & Dunn, M 2015, 'Student reflections in a first year public health and health promotion unit', <i>Reflective </i> <i>Practice</i> , vol. 16, no. 2, pp. 242-253.	
Week 3 - 27 Jul 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
History of public health: key milestones over past 200 years	Baum (2015) Chapter 2	
Week 4 - 03 Aug 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
History of public health: changes in models	Baum (2015) Chapter 3	
Week 5 - 10 Aug 2020		
Module/Topic	Chapter	Events and Submissions/Topic

Practice implications of medical model in public health	Baum (2015) Chapter 1	
Vacation Week - 17 Aug 2020		
Module/Topic	Chapter	Events and Submissions/Topic
Week 6 - 24 Aug 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Practice implications: community approach in public health	Buchanan, D 2000, An ethic for health promotion: rethinking the sources of human wellbeing. Oxford University Press, New York, pp. 119-132.	
Week 7 - 31 Aug 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Social-ecological model of health		<b>Workbook</b> Due: Week 7 Monday (31 Aug 2020) 11:45 pm AEST
Week 8 - 07 Sep 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Practice implications of social- ecological model of health: ethics	Carter, S, Rychetnik, L, Lloyd, B, Kerridge, I, Baur, L, Bauman, A, Hooker, C & Zask, A 2011, 'Evidence, ethics and values: a framework for health promotion', <i>American Journal of Public Health</i> , vol. 101, pp. 465-472. Schroder-Back, P, Duncan, P, Sherlaw, W, Brall, C & Czabanowska, K 2014, 'Teaching seven principles for public health ethics: towards a curriculum for a short course on ethics in public health programmes', <i>BMC Medical Ethics</i> , vol. 15, no. 73.	
Week 9 - 14 Sep 2020		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
	Mohatt, NV, Thompson, AB, Thai, ND & Kraemer Tebes, J 2014, 'Historical trauma as public narrative: a	
Practice implications of social- ecological model of health: working with First Nations Peoples	conceptual review of how history impacts present-day health', <i>Social Science &amp; Medicine</i> , vol. 106, pp. 128-136. Bainbridge, R, Tsey, K, McCalman, J, Kinchin, I, Saunders, V, Watkin Lui, F, Cadet-James, Y, Miller, A & Lawson, K 2015, 'No one's discussing the elephant in the room: contemplating questions of research impact and benefit in Aboriginal and Torres Strait Islander Australian health research', <i>BMC Public Health</i> , 15:696.	
ecological model of health: working	conceptual review of how history impacts present-day health', <i>Social Science &amp; Medicine</i> , vol. 106, pp. 128-136. Bainbridge, R, Tsey, K, McCalman, J, Kinchin, I, Saunders, V, Watkin Lui, F, Cadet-James, Y, Miller, A & Lawson, K 2015, 'No one's discussing the elephant in the room: contemplating questions of research impact and benefit in Aboriginal and Torres Strait Islander Australian health research', <i>BMC Public Health</i> ,	Events and Submissions/Topic

Reddy, KS, Mathur, M, Negi, S & Krishna, B 2017, 'Redefining public health leadership in the sustainable development goal era', Health Policy and Planning, vol. 32, pp. 757-759. ecological model of health: leadership Carlton, E, Holsinger, J, Riddell, M & Bush, H 2015, 'Full-range public health leadership, part 1: quantitative analysis', Frontiers in Public Health, vol. 3, article 73.

Week 11 - 28 Sep 2020

Practice implications of social-

Chapter **Events and Submissions/Topic** Module/Topic

Practice implications of socialecological model of health: strengthsbased or disease prevention approach

Friedli, L 2013, 'What we've tried, hasn't worked: the politics of assets based public health', Critical Public Health, vol. 23, no. 2, pp. 131-154.

Week 12 - 05 Oct 2020

Reflections on future practice

Module/Topic Chapter **Events and Submissions/Topic** 

> Ledwith & Springett 2010, 'Critical reflection', in Participatory practice: community-based action for

transformative change, Policy Press, Bristol, pp. 151-170.

Group work Due: Week 12 Monday (5 Oct 2020) 11:45 pm AEST

Review/Exam Week - 12 Oct 2020

Module/Topic Chapter **Events and Submissions/Topic** 

> **Learning Logs** Due: Review/Exam Week Monday (12 Oct 2020) 11:45 pm

Exam Week - 19 Oct 2020

Module/Topic Chapter **Events and Submissions/Topic** 

# **Assessment Tasks**

# 1 Workbook

# **Assessment Type**

Written Assessment

## **Task Description**

A workbook has been written for weeks 3-7 that contains learning activities to support tutorial discussions and to develop critical thinking. You need to complete the pre-tutorial activities prior to attending the tutorial. Based on the discussions held within the tutorials each week, you are required to write a 200 word critique for submission for grading. That is, while you are required to submit your entire Workbook, most of the grading is focused on the critiques at the end of each week.

It is recommended you seek formative feedback on your Workbook from your lecturer in week 5.

Please ensure you follow referencing protocols and acknowledge any sources you access when preparing your critiques.

# **Assessment Due Date**

Week 7 Monday (31 Aug 2020) 11:45 pm AEST

## **Return Date to Students**

Week 9 Monday (14 Sept 2020)

## Weighting

40%

# Minimum mark or grade

Students need to achieve at least 50% on this assessment to pass the unit.

#### **Assessment Criteria**

HD c D

Critiques are comprehensively Critiques are consistent with Critiques are mostly consistent Critiques are sometimes Critiques are not consistent with consistent with tutorial tutorial discussion content each with tutorial discussion content consistent with tutorial tutorial discussions for most discussion content each week discussion across the weeks. weeks. week. across the weeks. (40%).Critiques reflect content for Critiques reflect content across Critiques provide a deeply Critiques provide a consistent Critiques are descriptive only for logical and cohesive analysis of each week but analysis is not the weeks but analysis is analysis of topic each week. topic for each week (40%). superficial. always logical. Completion of all activities each More than 50% of activities not Completion of most activities Completion most activities most Completion of some activities week (20%). each week weeks. most weeks. completed.

## **Referencing Style**

• Harvard (author-date)

## **Submission**

Online

#### **Learning Outcomes Assessed**

- Analyse the history of public health and its changing philosophical, theoretical and practice models over the last 200 years
- Discuss the impact of a social ecological model of health on public health practice
- Distinguish between practice-based and evidence-based approaches used in public health and relate each to different models of health and approaches to practice

#### **Graduate Attributes**

- Knowledge
- Cognitive, technical and creative skills
- Research

# 2 Group work

## **Assessment Type**

**Group Work** 

#### **Task Description**

In weeks 8-11, you will work in small groups to complete a wiki. Each group will have a scenario they will use to complete four pages in their wiki related to: the context of the scenario; the public health ethics associated with that scenario; the potential leadership approaches; and whether a disease-prevention or strengths-based approach is appropriate.

NB There are two issues you need to be aware of related to the marking of this assessment:

- 1) This is a group activity and most of the marking criteria relate to the work your group undertakes. There is one marking criteria related to your individual contribution.
- 2) While the referencing component in the marking criteria is only worth 10%, you must pass the referencing criteria in order to pass this assessment.

# **Assessment Due Date**

Week 12 Monday (5 Oct 2020) 11:45 pm AEST

#### **Return Date to Students**

Exam Week Monday (19 Oct 2020)

# Weighting

40%

## Minimum mark or grade

Students need to achieve at least 50% on this assessment to pass the unit.

# **Assessment Criteria**

HD	D C P		F	
Group criteria				
Context is comprehensively and concisely outlined to provide meaningful background to scenario (10%).	Context is clearly consistent with scenario and provides a useful background.	Context is consistent with scenario but aspects are not always meaningful.	Context is mostly consistent with scenario.	Context is not consistent with scenario or does not add anything useful.
Complexities related to public health ethical issues relevant to scenario are critiqued (20%).	Complexities related to public health ethical issues relevant to scenario are explained.	Relevant public health ethical issues relevant to scenario are described.	Some public health ethical issues relevant to scenario are outlined.	Irrelevant or few public health ethical issues relevant to scenario are outlined.
Complexities related to leadership issues relevant to scenario are critiqued (20%).	Complexities related to leadership issues relevant to scenario are explained.	Relevant public health leadership issues relevant to scenario are described.	Some leadership issues relevant to scenario are outlined.	Irrelevant or few leadership issues relevant to scenario are outlined.

Complexities related to strengths/disease approach relevant to scenario are critiqued (20%).  Sources are always acknowledged and reference list is complete. A minimum of 15 references used (10%).	Complexities related to strengths/disease approach relevant to scenario are explained. Sources are always acknowledged and reference list is complete. Between 10-15 references used.	Relevant strengths/disease approach issues relevant to scenario are described. Sources are always acknowledged and reference list is complete. Between 7-9 references used.	Some strengths/disease approach issues relevant to scenario are outlined.  Sources are always acknowledged and reference list is complete. Between 5-6 references used.	Irrelevant or few strengths/disease approach issues relevant to scenario are outlined. Sources are <b>not</b> always acknowledged or reference list is incomplete OR fewer than 5 references used.
Individual criteria				
Instigated ideas and made thoughtful contributions throughout all pages of wiki (20%).	Contributed in meaningful way throughout all pages of the wiki.	Contributed useful ideas but not consistently or across all pages of wiki.	Contributions primarily superficial with some useful ideas provided on most pages.	Contributions are superficial and/or limited to 1-2 pages of wiki.

# **Referencing Style**

• Harvard (author-date)

## **Submission**

No submission method provided.

## **Submission Instructions**

Wiki does not need to be submitted as it is already in Moodle.

## **Learning Outcomes Assessed**

- Critique the ethics associated with different scales and approaches to public health, particularly in relation to First Nations Peoples
- Differentiate between transactional and collaborative leadership and the related implications for public health practice
- Justify taking a strengths-based or disease prevention approach to public health practice.

## **Graduate Attributes**

- Knowledge
- Communication
- Cognitive, technical and creative skills
- Ethical and Professional Responsibility
- Leadership

# 3 Learning Logs

# **Assessment Type**

Reflective Practice Assignment

# **Task Description**

Throughout the term you are encouraged to make a learning log entry each week. You need to select and submit five learning log entries that demonstrate your learning relative to:

- Your own health practice;
- Your relationship with others.

Each learning log should be around 400-500 words. Your total across the five entries should be no more than 2500 words. You should submit entries from different times in the term.

NB While the referencing component in the marking criteria is only worth 10%, you must pass the referencing criteria in order to pass this assessment.

# **Assessment Due Date**

Review/Exam Week Monday (12 Oct 2020) 11:45 pm AEST

## **Return Date to Students**

Exam Week Friday (23 Oct 2020)

# Weighting

20%

## Minimum mark or grade

Students need to achieve at least 50% on this assessment to pass the unit.

#### **Assessment Criteria**

HD	D	С	P	F
Deep reflexivity apparent through critical examination of thoughts and perspectives relative to own health practice (30%).	Reflexivity apparent through examination of thoughts and perspectives relative to own health practice.	Reflexivity apparent through identification of thoughts and perspectives relative to own health practice.	Reflexivity attempted but mostly own health practice described without insight into own thoughts and perspectives.	No reflexivity apparent. Own health practice described or absent.

Deep reflexivity apparent through critical examination of thoughts and perspectives relative to relationship with others (30%).

Set readings and other literature used judiciously to deepen reflexivity (30%).

Sources are always references used (10%). Reflexivity apparent through examination of thoughts and perspectives relative to relationship with others.

Set readings and other literature drawn upon to deepen reflexivity.

Sources are always references used.

Reflexivity apparent through identification of thoughts and perspectives relative to relationship with others.

Set readings and other literature cited but not always clear how they have been used to deepen reflexivity.

Sources are always references used.

Reflexivity attempted but mostly relationship with others described without insight into own thoughts and perspectives.

Some references cited but not clearly linked to reflexivity.

Sources are always acknowledged and reference list is complete. A minimum of 10 is complete. Between 8-9 is complete. Between 6-7 is complete. Between 4-5 is incomplete. Betwe references used.

No reflexivity apparent. Relationship with others described or absent.

No references or not related to

Sources are **not** always references used.

## **Referencing Style**

• Harvard (author-date)

#### **Submission**

Online

## **Learning Outcomes Assessed**

• Reflect on own positionality regarding approach to health practice and relationships with others, especially those from different backgrounds

## **Graduate Attributes**

- Communication
- Self-management
- Ethical and Professional Responsibility

# **Academic Integrity Statement**

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the **Student Academic Integrity Policy and Procedure**. This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

# What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

## Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

## Where can I get assistance?

For academic advice and guidance, the <u>Academic Learning Centre (ALC)</u> can support you in becoming confident in completing assessments with integrity and of high standard.

## What can you do to act with integrity?



#### **Be Honest**

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



#### Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



## **Produce Original Work**

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem