

SOCI 365: Health and Development

Fall 2019
Tuesday and Thursday
10:05 a.m. – 11:25 a.m.
Macdonald Engineering 279

Prof. Shelley Clark

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Course Content:

There is growing recognition that development extends beyond economic growth and that health is one of its integral components. Yet, despite their undisputed strong association with each other, exactly how health and economic development are related to each other remains controversial. The importance of health and population dynamics have been vigorously debated in historical and contemporary arguments about individual prosperity and economic development. Similarly, the role of social and economic status in determining individual and population health, while strongly defended by some researchers, is refuted by others. This course delves into the dynamic and most likely bidirectional relationship. It will begin by examining the theories and conceptual frameworks linking health to economic development and vice versa. The second half of the course will be devoted to examining specific case studies highlighting the relationship between health and socio-economic development. These case studies address traditional topics in global health such as maternal mortality, child survival, tuberculosis, and HIV/AIDS, as well as emerging issues pertaining to sexual and mental health, urbanization, globalization, and climate change.

Learning Outcomes:

1. Understand key measures and methods used to assess global health
2. Identify how major health issues in low income countries differ across regions and within sub-populations.
3. Learn the major theories regarding the links between health and development at both the individual and population level.
4. Understand these relationships from different disciplinary perspectives, including sociology, economics, medicine, public health, and public policy.
5. Examine and evaluate empirical evidence from specific case demonstrating the linkages between health and development.

Assessment

Grading Policy:

40% Midterm	October 15
15% In-class quizzes	Throughout the semester
45% Research paper or report	
➤ Abstract/Executive Summary (10%)	October 29
➤ Annotated bibliography (10%)	November 12
➤ Research paper/report (25%)	November 28

Midterm

An in-class midterm will be given on **October 15, 2019**. It will be comprised of a series of multiple choice, short answer, and long answer questions. You will be responsible for the material contained the readings as well as all information presented in class.

In-class quizzes

In-class quizzes will be administered randomly throughout the semester at the beginning of class to assess participation and engagement. Quiz questions will relate to the broad, overarching take-home message of the readings or clear and memorable facts, not specificities. Hence, to do well you will need to show up to classes regularly, on time, and have read the assigned readings **before class**.

Each quiz will have five multiple choice questions and will be marked on a pass/fail basis. To pass, you must get 3/5 questions correct. Each student will receive two 'free passes' throughout the semester for quizzes. In other words, if you miss or fail two quizzes, these will not affect your final quiz mark. Exceptions to the free pass system will be made for students with extraordinary circumstances that make regular attendance difficult. Please contact me immediately if you fall into such situation – do not wait until the end of the semester.

Research paper or report

You have the option of writing either a final paper or a final report. Students choosing to submit a **research paper** will select a case study that interests you to critically address a specific issue in global health and development. You may use the case studies covered in the second part of this course as examples, but you are required to pick a new topic or develop a perspective which goes significantly beyond the material presented in class. Students who opt to write a **final report** will write a report on a critical issue in health and development for a funding agency or non-governmental organization. Unlike the final paper, the target audience for the final report will be the general public. You must also develop a creative solution to the issue you identified and explain the impact this solution has our will have on your selected issue. You may use reports from your chosen organization as examples, but the ideas and research must be original.

A series of benchmark assignments will be administered to guide your research endeavours and keep you on track for the final submission.

1. Title and Abstract/Executive Summary and due **October 29, 2019**

Research paper: Submit a tentative title and 200-300-word abstract which details who/what/where/when/how/why of your case study. You must identify a clear critical debate or develop a specific research question. In other words, your abstract should not simply identify a topic or be purely descriptive. Instead, the abstract must demonstrate a sharp, critical or analytic focus. In your abstract, highlight your main thesis statement or research question in italics.

Report: Submit a tentative title and 400-5000-word executive summary. The executive summary should clearly identify a critical global health issue, briefly explain why this is an important issue, summarize previous efforts to combat this issue, explain what your organization has done/will do to expand upon these previous efforts, and discuss potential policy implications of your organization's work on this issue.

2. Annotated bibliography due **November 12, 2019**

For both research papers and report, prepare an annotated bibliography with a minimum of ten citations from course readings, grey literature (i.e. project reports, policy papers, legal documents, etc.), and peer-reviewed academic literature. No more than one citation can come from sources outside of these subtypes (i.e. op-eds, news media, etc.). At least five citations must be peer-reviewed.

For each citation, provide a summary of its main findings and relevance to your case study in 200 words or less. Do not simply copy and paste the paper's abstract as your own. You must explain why this citation is relevant to your paper and how you will be using it to substantiate your claim.

3. Research paper or report due by 5:00 p.m. on **November 28, 2019**

The final research paper or report will be a minimum of 3,500 and a maximum 4,000 words, including the abstract/executive summary but excluding references. Times New Roman 12-point is preferred. Presentation and clarity of organization matter for both the research paper and report, but reports (unlike research papers) may wish to be a more "eye-catching". Further instructions will be provided during the course. All final papers and reports will be submitted online via MyCourses. Late submissions will receive a 15% penalty for each day not submitted.

Practices and Policies

Language policy:

In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded. (approved by Senate on 21 January 2009 - see also the section in this document on Assignments and evaluation.)

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

Laptops are NOT permitted to be used in the classroom

Plagiarism:

McGill University values academic integrity. Therefore all students must understand the meaning and consequences of cheating, plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures

(see www.mcgill.ca/students/srr/honest/ for more information). (approved by Senate on 29 January 2003)

L'université McGill attache une haute importance à l'honnêteté académique. Il incombe par conséquent à tous les étudiants de comprendre ce que l'on entend par tricherie, plagiat et autres infractions académiques, ainsi que les conséquences que peuvent avoir de telles actions, selon le Code de conduite de l'étudiant et des procédures disciplinaires (pour de plus amples renseignements, veuillez consulter le site www.mcgill.ca/students/srr/honest/ www.mcgill.ca/integrity/).

Students with Disabilities:

If you have a disability please contact the instructor to arrange a time to discuss your situation. It would be helpful if you contact the Office for Students with Disabilities at 398-6009 before you do this.

Course schedule

Articles and Chapters: ***preceding an article or chapter indicates that this is a suggested reading. The syllabus posted on MyCourses contains hyperlinks to selected articles available in electronic journals or on the web. If an article or chapter is not available on the web, it will be posted on MyCourses under Readings.

PART 1: OVERVIEW OF HEALTH AND DEVELOPMENT

September 3: *Introduction to the Dynamic Relationships between Development and Health*

September 5: *The Meaning of Development*

- Schafer, J., Haslam, P., & Beaudet, P. (2012). What is development? Meaning, measurement, and morality in international development. In *Introduction to International Development: Approaches, Actors, and Issues* (2nd ed.). Ontario: Oxford University Press. Posted on MyCourses
- Sen, A. (1999). The ends and means of development. In *Development as Freedom* (p. 45-60). New York: Knopf. Posted on MyCourses
- *** Rist, G. (2014). The invention of development. In *The History of Development: From Western Origins to Global Faith* (p. 69-79). New York: Zed Books. Posted on MyCourses

September 10: *Health and the Sustainability Development Goals*

- Explore the SDG website: <https://sustainabledevelopment.un.org/>
- Buse, K. & Hawkes, S. (2015). Health in the Sustainable Development Goals: Ready for a Paradigm Shift? *Globalization and Health*, 11(13), 1-8. <http://link.springer.com/article/10.1186/s12992-015-0098-8>
- Friedman, E. & Gostin, L. (2016). The United Nations Sustainable Development Goals: Achieving the vision of global health with justice. *The Georgetown Public Policy Review*, 21(1), 1-27. <https://scholarship.law.georgetown.edu/facpub/1777/>
- ***Thematic Group on Health for All (2014). Health in the framework of sustainable development: Technical report for the post-2015 development agenda. Sustainable Development Solutions Network: A Global Initiative for the United Nations. *Posted on MyCourses*

September 12: *Measuring Disparities in Health Outcomes*

- Koplan, J.P., Bond, T.C., Merson, M.H., et al. (2009). Towards a common definition of global health. *Lancet*, 373, 1993-95. [DOI:10.1016/S0140-6736\(09\)60332-9](https://doi.org/10.1016/S0140-6736(09)60332-9)
- Skolnik, R. (2008). Health determinants, measurements, and trends. In *Essentials of Global Health* (p. 17-40). Sudbury, Massachusetts: Jones and Bartlett Publishers. *Posted on MyCourses*.

September 17: *DALYs and the Global Burden of Disease*

- Murray, C., et al. (2012). Disability-adjusted life years (DALYs) for 291 diseases and injuries in 21 regions, 1990–2010: A systematic analysis for the Global Burden of Disease Study 2010. <https://www.sciencedirect.com/science/article/pii/S0140673612616894>
- Murray, C., & Lopez, A. (2013). Measuring the global burden of disease. *New England Journal of Medicine*, 369, 448-457. <https://www.nejm.org/doi/full/10.1056/NEJMra1201534>

PART 2: HOW SOCIO-ECONOMIC DEVELOPMENT SHAPES HEALTH AND POPULATION DYNAMICS

September 19: *What are the Socio-Economic Determinants of Health and Mortality?*

- Blane, D. (2006). The life course, the social gradient, and health. In M. Marmot & R. Wilkinson (eds.) *Social Determinants of Health* (p. 54-77, chapter 4). Oxford: Oxford University Press. <http://www.oxfordscholarship.com/view/10.1093/acprof:oso/9780198565895.001.0001/acprof-9780198565895-chapter-04>
- Marmot, M. (2005). Social determinants of health inequalities. *The Lancet*, 365(9464), 1099-1104. <http://www.sciencedirect.com.proxy3.library.mcgill.ca/science/article/pii/S0140673605711466>

September 24: *The Epidemiological Transition*

- Omran, A.R. (2005). The epidemiologic transition: A theory of the epidemiology of population change. *Milbank Quarterly*, 83(4), 731-757. <http://onlinelibrary.wiley.com/doi/10.1111/j.1468-0009.2005.00398.x/abstract>
- Cutler, D., Deaton, A., & Lleras-Muney, A. (2006). The determinants of mortality. *Journal of Economic Perspectives*, 20(3), 97-120. http://www.jstor.org/stable/30033668?seq=1#page_scan_tab_contents
- ***McKeown, R. (2009). The epidemiologic transition: changing patterns of mortality and population dynamics. *American Journal of Lifestyle Medicine*, 3(1 Suppl), 19S–26S. <https://journals-sagepub-com.proxy3.library.mcgill.ca/doi/pdf/10.1177/1559827609335350>

September 26: *The Demographic Transitions*

- Kirk, D. (1996). Demographic transition theory. *Population Studies: A Journal of Demography*, 50(3), 361-387. <http://dx.doi.org/10.1080/0032472031000149536>
- ***Lee, R. (2003). The demographic transition: Three centuries of fundamental change. *Journal of Economic Perspectives*, 17(4), 167-190. <https://www.jstor.org/stable/pdf/3216936.pdf>
- ****Mason, K. O. (1997). Explaining fertility transitions. *Demography*, 34(4), 443-454. <http://www.jstor.org/stable/pdfplus/3038299.pdf>

PART 3: HOW HEALTH AND POPULATION DYNAMICS INFLUENCE SOCIO-ECONOMIC DEVELOPMENT

October 1: *Effects of Health on Poverty and Economic Development*

- Bloom, D. & Canning, D. (2000). The health and wealth of nations. *Science*, New Series, 287(5456): 1207+1209. https://www-jstor-org.proxy3.library.mcgill.ca/stable/3074691#metadata_info_tab_contents
- Thomas, D. & Frankenberg, E. (2002). Health, nutrition and economic prosperity: A micro-economic perspective. *Bulletin of the World Health Organization*, 80(2), 106-13. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2567722/>
- Sachs, J. (2001). Macro-economics and health: investing in health for economic development. report of the commission on macroeconomics and health. WHO, Geneva. Sections “Evidence on Health and Development” and “Channels of Influence from Disease to Economic Development”, p. 21-40. <http://www1.worldbank.org/publicsector/pe/PEAMMarch2005/CMHReport.pdf>

October 3: *How are Development Targets Defined and Measured Across Contexts? Child Marriage as Case Study (Guest Lecturer: Dr. Alissa Koski)*

- Explore the Tracker for Sustainable Development Goal 5, paying particular attention to Target 5.3: <https://sdg-tracker.org/gender-equality#targets>

- Koski A, Clark S, and Nandi A. (2017). Has Child Marriage Declined in sub-Saharan Africa? An Analysis of Trends in 31 Countries. *Population and Development Review* 43(1):7-29.
<https://onlinelibrary.wiley.com/doi/epdf/10.1111/padr.12035>

October 8: Population Growth and Development Debate

- Working Group on Population Growth and Economic Development (1986). “Introduction” (p. 1-10) and “Conclusion” (p. 85-93) in *Population Growth and Economic Development: Policy Question*, National Academy Press.
<http://site.ebrary.com/lib/mcgill/detail.action?docID=10054996>
- Lam, D. (2011). How the world survived the population bomb: Lessons from 50 years of extraordinary demographic history. *Demography*, 48(4), 1231-1262.
<http://link.springer.com/article/10.1007%2Fs13524-011-0070-z>
- Becker S. (2011). Has the world really survived the population bomb? (Commentary on “How the world survived the population bomb: lessons from 50 years of extraordinary demographic history”). *Demography*, 50(6), 2173-81.
<http://link.springer.com/article/10.1007%2Fs13524-013-0236-y>

October 10: Demographic Dividend or Demographic Disaster?

- Ross, J. (2004). Understanding the demographic dividend. *The Policy Project*. Washington, D.C.: Futures Group.
http://www.policyproject.com/pubs/generalreport/Demo_Div.pdf
- Gribble, J. & Bremner, J. (2012). The challenge of attaining the demographic dividend. Population Reference Bureau.
<http://www.prb.org/Publications/Reports/2012/demographic-dividend.aspx>
- UNDP (2001). On the socioeconomic impact of the HIV/AIDS epidemic. *Population and Development*, 27(3), 619-624.
<http://www.jstor.org/stable/pdfplus/2695149.pdf>
- ***Parkinson, D. (2011, May). Markets and the lure of a demographic dividend. *The Globe & Mail*. Retrieved from
<http://www.theglobeandmail.com/globe-investor/investment-ideas/markets-and-the-lure-of-a-demographic-dividend/article591334/>
- ***Podcast —It’s the Demography Stupid.
<http://www.bbc.co.uk/programmes/b086t0mb>

October 15: MIDTERM (40% OF COURSE GRADE)
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PART 4: CASE STUDIES LINKING HEALTH AND DEVELOPMENT

October 17: Maternal Mortality and Access to Medical Services

- Ziraba, A. K., N. Madise, S. Mills, C. Kyobutungi & A. Ezeh. (2009). Maternal mortality in the informal settlements of Nairobi city: What do we know? *Reproductive Health*, 6(6), 1-8. <http://reproductive-health-journal.biomedcentral.com/articles/10.1186/1742-4755-6-6>

- Thaddeus, S. & Maine, D. (1994). Too far to walk: Maternal mortality in context. *Social Science and Medicine*, 38(8), 1091-1110.
<http://www.sciencedirect.com/science/article/pii/0277953694902267>
- Fournier, P., Dumont, A., Tourigny, C., Dunkley, G., & Dramé, S. (2009). Improved access to comprehensive emergency obstetric care and its effect on institutional maternal mortality in rural Mali. *Bulletin of the World Health Organization*, 87:30–38.
<https://proxy.library.mcgill.ca/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=36089400&scope=site>

October 22: Women's Education and Children's Health

- Gakidou, E., Cowling, K., Lozano, R., Murray, C. (2010). Increased educational attainment and its effect on child mortality in 175 countries between 1970 and 2009: A systematic analysis. *The Lancet*, 376(9745), 959-974.
<http://www.sciencedirect.com/science/article/pii/S0140673610612573>
- Makate, M., Makate, C. (2016). The causal effect of increased primary schooling on child mortality in Malawi: Universal primary education as a natural experiment. *Social Science & Medicine*, 168, 72-83.
<https://www.sciencedirect.com/science/article/pii/S0277953616305020>
- Mensch, B., Chuang, E., Melnikas, A. & Psaki, S. (2019). Evidence for causal links between education and maternal and child health: Systematic review. *Tropical Medicine and International Health*, 24(5), 504–522.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6519047/>
- ***Mosley, W.H. & Chen, L. (1984). An analytic framework for the study of child survival in developing countries. *Population and Development Review*, Supplement to Vol. 10, 25-45.
http://www.jstor.org/stable/2807954?seq=1#page_scan_tab_contents

October 24: Family Structures, Fostering, and Child Survival

- Clark, S., & Hamplovà, D. (2013). Single motherhood and child mortality in Sub-Saharan Africa: A life course perspective. *Demography*, 50(5), 1521-1549.
<http://link.springer.com/article/10.1007%2Fs13524-013-0220-6>
- Gyimah, S. O. (2009). polygynous marital structure and child survivorship in sub-saharan africa: Some empirical evidence from Ghana. *Social Science and Medicine*, 68, 334-342.
<http://www.sciencedirect.com/science/article/pii/S0277953608005182>
- Schrijner, S. & Smits, J. (2018). Grandparents and children's stunting in sub-Saharan Africa. *Social Science & Medicine*, 205, 90-98.
<https://www.ncbi.nlm.nih.gov/pubmed/29677583>

October 29: Abstract/Executive Summary due (10% of mark)

October 29: Poverty and Tuberculosis

- Oxlade, O. & Murray, M. (2012). Tuberculosis and poverty: Why are the poor at greater risk in India? *PLOS ONE*, 7(11), 1-8.

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0047533>

- Singh, V. et al. (2002). TB control, poverty, and vulnerability in Delhi, India. *Tropical Medicine & International Health*, 7(8), 693-700.
<https://www.ncbi.nlm.nih.gov/pubmed/12167096>
- Siroka, A. et al. (2016). The effect of household poverty on tuberculosis. *International Journal of Tuberculosis and Lung Disease*, 20(12), 1603–1608.
<https://www.ncbi.nlm.nih.gov/pubmed/27931334>
- ***Janssens J.P. & Rieder H.L. (2008). An ecological analysis of incidence of tuberculosis and per capita gross domestic product. *European Respiratory Journal*, 32, 1415–1416. <https://erj.ersjournals.com/content/32/5/1415>

October 31: *The Impact of AIDS on Family Poverty and Orphans*

- Case, A. & Ardington, C. (2006). The impact of parental death on school outcomes: Longitudinal evidence from South Africa. *Demography*, 43(3), 401-420.
<http://link.springer.com/article/10.1353/dem.2006.0022#page-1>
- Zaba, B., et al. (2005). HIV and mortality of mothers and children: Evidence from cohort studies of Uganda, Tanzania, Malawi. *Epidemiology*, 16(3), 275-280. <http://www.jstor.org/stable/20486047?seq=1> - page scan tab contents

November 7: *Nutrition and Obesity*

- Black RE, Victora CG, Walker SP, Bhutta ZA, et al. (2013). Maternal and child under nutrition and overweight in low-income and middle-income countries. *The Lancet*, 382(9890): 427-451.
<https://www.thelancet.com/action/showPdf?pii=S0140-6736%2813%2960937-X>
- Ezzati M., & Riboli E. (2013). Behavioral and dietary risk factors for noncommunicable diseases. *New England Journal of Medicine*, 369, 954-64.
<https://www.nejm.org/doi/pdf/10.1056/NEJMra1203528?articleTools=true>
- Moodie, R., Stuckler, D., Monteiro, C., Sheron, N., Neal, B., & Thamarangsi, T. (2013). Profits and pandemics: Prevention of harmful effects of tobacco, alcohol, and ultra-processed food and drink industries. *The Lancet*, 381(9867), 670-9.
<https://www.thelancet.com/action/showPdf?pii=S0140-6736%2812%2962089-3>

November 12: <i>Annotated Bibliography (10% of mark)</i>

November 12: *Adolescent Sexual Health and Transactional Sex*

- Bearinger, L, Sieving, R., Ferguson, J., & Sharma, V. (2007). Global perspectives on the sexual and reproductive health of adolescents: Patterns, prevention, and potential. *Lancet*, 369, 1220-31.
<http://www.sciencedirect.com/science/article/pii/S0140673607603675>
- Stoebenau, K, Heise, L, Wamoyi, J. & Bobrova, N. (2016). Revisiting the understanding of “transactional sex” in sub-Saharan Africa: A review and synthesis of the literature. *Social Science & Medicine*, 168, 186-197.
<https://www.ncbi.nlm.nih.gov/pubmed/27665064>

- ***Swidler, A., & Watkins, S. (2007). Ties of dependence: AIDS and transactional sex in rural Malawi. *Studies in Family Planning*, 38(3), 147-162. <https://www.ncbi.nlm.nih.gov/pubmed/17933289>

November 14: *Mental Health and Poverty*

- Arvind, B. A., et al. (2019). Prevalence and socioeconomic impact of depressive disorders in India: Multisite population-based cross-sectional study. *BMJ open*, 9(6), e027250. <https://bmjopen.bmj.com/content/9/6/e027250>
- Lund, C., Breen, A., Flisher, A., Kakuma, R., Corrigall, J., Joska, J., Patel, V. (2010). Poverty and common mental disorders in low- and middle-income countries: A systematic review. *Social Science & Medicine*, 71(3), 517-528. <https://www.ncbi.nlm.nih.gov/pubmed/20621748>
- Faisal-Cury, A., Menezes, P., Araya, R. et al. (2009). Common mental health disorders during pregnancy. *Archives of Women's Mental Health*, 12, 335. <https://doi.org/10.1007/s00737-009-0081-6>
- *** Patel, V & Kleinman, A. (2003). Poverty and common mental disorders in developing countries. *Bulletin of the World Health Organization*, 81(8), 609-615. <https://www.ncbi.nlm.nih.gov/pubmed/14576893>

November 19: *Urbanization, the Environment, and Health*

- Harpham, T. (2001). Cities and health in the third world. Chapter 7 in D.R. Phillips & Y. Verhasselt (eds.) *Health and Development* (p. 111-121). New York: Routledge. <http://site.ebrary.com/lib/mcgill/reader.action?docID=10058408http://site.e>
- Ernst, K., Phillips, B., & Duncan, B. (2013). Slums are not places for children to live: Vulnerabilities, health outcomes, and possible interventions. *Advances in Pediatrics*, 60, 53-87. <http://www.sciencedirect.com/science/article/pii/S0065310113000066>
- Patil et al. (2014). The effect of India's total sanitation campaign on defecation behaviors and child health in rural Madhya Pradesh: A cluster randomized controlled trial. *PLOS Med* 11(8): e1001709, 1-8. <http://www.nap.edu/catalog/10693.html>

November 21: *Globalization, Trade, and Health*

- Dollar, D. (2001). Is globalization good for your health? *Bulletin of the World Health Organization*, 79(9), 827-833. <https://www.ncbi.nlm.nih.gov/pmc/?cmd=Search&term=0042-9686%5Bjour%5D+AND+79%5Bvolume%5D+AND+827%5Bpage%5D+AND+2001%5Bdat%5D>
- Blouin, C., Chopra, M., & van der Hoeven, R. (2009). Trade and social determinants of health. *The Lancet*, 373(9662), 502-507. <http://www.sciencedirect.com/science/article/pii/S0140673608617778>
- ***McMichael A.J. & Beaglehole R. (2000). The changing global context of public health. *Lancet*, 356, 495-99. <https://www.ncbi.nlm.nih.gov/pubmed/10981904>

November 26: *The Impact of Globalization on Health Care Providers and Access to Pharmaceuticals*

- Mackeya, T. & Lianga, L. (2012). Rebalancing brain drain: Exploring resource reallocation to address health worker migration and promote global health. *Health Policy*, 107, 66–73. <https://www.ncbi.nlm.nih.gov/pubmed/22572198>
- Mills, E., Schabas, W., Volmink, J., Walker, R., Ford, N., Katabira, E., & Montaner, J. (2008). Should active recruitment of health workers from sub-Saharan Africa be viewed as a crime? *The Lancet*, 371(9613), 685-688. <https://www.ncbi.nlm.nih.gov/pubmed/18295027>
- Kremer, M. (2002). Pharmaceuticals and the developing world. *Journal of Economic Perspectives*, 16(4), 67-90. <https://www.aeaweb.org/articles?id=10.1257/089533002320950984>
- Barton, J. (2004). TRIPS and the global pharmaceutical market. *Health Affairs*, 23(3), 146-54. <https://www.ncbi.nlm.nih.gov/pubmed/15160812>

November 28: Final research paper/report due (25% of mark)

November 28: *Climate Change and Global Health*

- Myers, S. & Patz, J. (2009). Emerging threats to human health from global environmental change. *Annual Review of Environment and Resources*, 34, 223-252. <http://www.annualreviews.org/doi/10.1146/annurev.enviro.033108.102650>
- McMichael, Woodruff, R.E., & Hales, S. (2006). Climate change and human health: Present and future risks. *Lancet*, 367, 859-69. <http://www.sciencedirect.com/science/article/pii/S0140673606680793>
- Barrett B., Charles J.W., & Temte J.L. (2015). Climate change, human health, and epidemiological transition. *Preventive Medicine*, 70, 69-75. <https://www.ncbi.nlm.nih.gov/pubmed/25434735>